This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

**STATEMENT OF ACCOUNT** for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

# SA3E Long Form

Return completed workbook by email to:

### coplicsoa@loc.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

Α	ACCOUNTING PERIOD COVERED BY	THIS STATEMENT:			
Accounting Period	2017/2				
<b>B</b> Owner	Instructions:         Give the full legal name of the owner of the ca         rate title of the subsidiary, not that of the parent co         List any other name or names under which the         If there were different owners during the accou         a single statement of account and royalty fee paym         Check here if this is the system's first filing.	rporation e owner conducts the business of the cable s <i>unting period, only the owner on the last day</i>	ystem of the accounting period should	·	63028
	LEGAL NAME OF OWNER/MAILING ADDRESS	OF CABLE SYSTEM			
	Wisconsin Bell, Inc.				
				6302	820172
				63028	2017/2
	1010 N. St. Mary's Street, Room San Antonio, TX 78215-2109				
С	<b>INSTRUCTIONS:</b> In line 1, give any business names already appear in space B. In line 2, gi				
System	1 IDENTIFICATION OF CABLE SYSTEM:				
	MAILING ADDRESS OF CABLE SYSTEM:				
	2 (Number, street, rural route, apartment, or suite number)				
	(City, town, state, zip code)				
D	Instructions: For complete space D instruction	ons, see page 1b. Identify only the frst co	mmunity served below and re	elist on page	e 1b
Area	with all communities.				
Served	CITY OR TOWN	STATE			
First Community	Madison City	WI			
	Below is a sample for reporting communities CITY OR TOWN (SAMPLE)	s if you report multiple channel line-ups ir STATE	CH LINE UP	SUB	GRP#
	Alda	MD	A	308	1
Sample	Alliance	MD	B		2
	Gering	MD	B		3
	· · · · · ·				
Privacy Act Notic	e: Section 111 of title 17 of the United States Code authorize	es the Copyright Offce to collect the personally ider	tifying information (PII) requested o	n th	
form in order to pro	cess your statement of account. PII is any personal informa	tion that can be used to identify or trace an individu	al, such as name, address and tele	phone	
• •	ding PII, you are agreeing to the routine use of it to establish pared for the public. The effect of not providing the PII reque				

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

2/28/2018

completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

FORM SA3E. PAGE 1b.								
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#					
Wisconsin Bell, Inc.			63028					
<b>Instructions:</b> List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.								
<b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile hor below the identified city or town.	ne parks should b	e reported in pare	ntheses					
If all communities receive the same complement of television broadcast stations (i.e., or all communities with the channel line-up "A" in the appropriate column below or leave th on a partially distant or partially permitted basis in the DSE Schedule, associate each re designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-commu channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns to	e column blank. levant communit nity basis, assoc a subscriber gro	If you report any st y with a subscriber iate each commun	ations <sup>.</sup> group, ity with a					
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	-				
		CITEINE OF	30B GRF#	- 				
Madison City Relat City	WI WI			First				
Beloit City Beloit Township	WI			Community				
Blooming Grove Township	WI							
Burke Township	WI							
De Forest Village	WI	•						
Dunkirk Township	WI	•		See instructions for				
Dunn Township	WI			additional information on alphabetization.				
Fitchburg	WI							
Harmony Township	WI							
Janesville City	WI							
Janesville Township	WI							
Madison Township	WI							
Maple Bluff Village	WI							
Middleton City	WI							
Middleton Township	WI							
Milton City	WI							
Monona City	WI							
Rock Township	WI							
Shorewood Hills Village	WI							
Stoughton City	WI							
Turtle Township Westport Township	WI							
Westport Township Windsor Township	WI WI							
	VI							
		••						
		•••••••••••••••••••••••••••••••••••••••						

 	1	 1
		 Add rows as necessary
		1

 	l	


••••••	 
•••••	
••••••	
••••••	
••••••	 
••••••	 
•••••••••••••••••••••••••••••••	 

L

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:									
Name	Wisconsin Bell, Inc.								6302	
E	SECONDARY TRANSMISSION	SERVICE: SU	JBSCR	IBERS AND F	RATES					
E	In General: The information in s									
Coordon	system, that is, the retransmission									
Secondary Transmission	about other services (including p last day of the accounting period						those exist	ing on the		
Service: Sub-							able system	, broken		
scribers and	down by categories of secondary transmission service. In general, you can compute the number of subscribers in									
Rates	each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service).									
	Rate: Give the standard rate c							ne and the		
	unit in which it is generally billed									
	category, but do not include disc									
	Block 1: In the left-hand block									
	systems most commonly provide									
	that applies to your system. <b>Not</b> categories, that person or entity									
	subscriber who pays extra for ca									
	first set" and would be counted o	once again und	ler "Ser	vice to additio	nal set(s)	)."				
	Block 2: If your cable system									
	printed in block 1 (for example, t with the number of subscribers a									
	sufficient.		e nym-i	Ianu Diock. A		mee-word descrip		Service is		
	BLC	DCK 1					BLOC			
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE		ATEGORY OF SE	RVICE	NO. OF SUBSCRIBERS	RATE	
	Residential:	CODOCIND	LIND		0,			OODOORIDERO	IVAL	
	Service to first set	1	1,324	\$ 19.00	HD Te	ch Fee		9,147	\$ 10.0	
	<ul> <li>Service to additional set(s)</li> </ul>					ор Вох		11,450	\$0-\$ <sup>-</sup>	
	• FM radio (if separate rate)				Broad	Icast TV Surchar	ge	11,324	\$4.99-\$5.9	
	Motel, hotel								1	
	Commercial		126	\$ 20.00						
	Commercial Converter		126	\$ 20.00						
			126	\$ 20.00						
	Converter		126	\$ 20.00						
	Converter • Residential • Non-residential									
	Converter • Residential • Non-residential SERVICES OTHER THAN SEC		NSMIS	SSIONS: RATI		o all your cable sy	stem's serv	rices that were		
F	Converter • Residential • Non-residential	te (not subscril	NSMIS	SSIONS: RATI	espect to					
•	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar	te (not subscril hose services re two exceptio	ANSMIS Der) info that are ons: you	SSIONS: RAT prmation with r e not offered in u do not need t	espect to combina o give ra	ation with any sec ate information cor	ondary tran	smission services		
Services	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services	te (not subscril hose services re two exceptio or facilities furr	ANSMIS Der) info that are ons: you nished t	SSIONS: RAT pormation with r e not offered in u do not need t to nonsubscrib	espect to combina o give ra ers. Rate	ation with any sec ate information cor e information shou	ondary tran ncerning (1) uld include l	smission services both the		
Services Other Than	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur	te (not subscril hose services re two exceptio or facilities furr hit in which it is	ANSMIS Der) info that are ons: you nished t	SSIONS: RAT pormation with r e not offered in u do not need t to nonsubscrib	espect to combina o give ra ers. Rate	ation with any sec ate information cor e information shou	ondary tran ncerning (1) uld include l	smission services both the		
Services	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services	te (not subscrif hose services re two exceptio or facilities furr hit in which it is rate column.	NSMIS oer) info that are ins: you nished t usually	SSIONS: RAT pormation with r e not offered in u do not need t to nonsubscrib y billed. If any	espect to combina o give ra ers. Rate rates are	ation with any sec ate information cor e information shou e charged on a var	ondary tran ncerning (1) uld include l iable per-pi	smission services both the		
Services Other Than Secondary	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that	te (not subscril hose services re two exceptio or facilities furr hit in which it is rate column. te charged by t t your cable sy	NSMIS ber) info that are ins: you hished t usually the cabl stem fu	SSIONS: RAT prmation with r e not offered in u do not need t to nonsubscrib / billed. If any le system for e rnished or offe	espect to combina o give ra ers. Rate rates are each of th ered durin	ation with any sec ate information cor e information shou charged on a var ne applicable serv ng the accounting	ondary tran ncerning (1) uld include l iable per-pr ices listed. period that	smission ) services both the rogram basis, were not		
Services Other Than Secondary ransmissions:	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a	te (not subscril hose services re two exceptio or facilities furr hit in which it is rate column. te charged by f t your cable sy separate charge	NSMIS ber) info that are ins: you hished t usually the cabl stem fu ge was	SSIONS: RAT pormation with r e not offered in a do not need t to nonsubscrib y billed. If any le system for e rnished or offer made or estab	espect to combina o give ra ers. Rate rates are each of th ered durin	ation with any sec ate information cor e information shou charged on a var ne applicable serv ng the accounting	ondary tran ncerning (1) uld include l iable per-pr ices listed. period that	smission ) services both the rogram basis, were not		
Services Other Than Secondary ransmissions:	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that	te (not subscril hose services re two exceptio or facilities furn hit in which it is rate column. te charged by t tyour cable sy separate charge btion and inclue	NSMIS ber) info that are ons: you hished t usually the cabl stem fu ge was de the r	SSIONS: RAT pormation with r e not offered in a do not need t to nonsubscrib y billed. If any le system for e rnished or offer made or estab	espect to combina o give ra ers. Rate rates are each of th ered durin	ation with any sec ate information cor e information shou charged on a var ne applicable serv ng the accounting	ondary tran ncerning (1) uld include l iable per-pr ices listed. period that	esmission ) services both the rogram basis, were not e form of a		
Services Other Than Secondary ransmissions:	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for rai not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip	te (not subscril hose services re two exceptio or facilities furn hit in which it is rate column. te charged by t tyour cable sy separate charge btion and inclus	ANSMIS oer) info that are ons: you hished t usually the cabl stem fu ge was de the r CK 1	SSIONS: RAT prmation with r e not offered in u do not need t to nonsubscrib / billed. If any le system for e rnished or offe made or estab ate for each.	espect to combina o give ra ers. Rate rates are each of th ered durin lished. L	ation with any sec ate information cor e information shou charged on a var ne applicable serv ng the accounting ist these other ser	ondary tran neerning (1) uld include I iable per-pi ices listed. period that rvices in the	services both the rogram basis, were not e form of a BLOCK 2	DATE	
Services Other Than Secondary ransmissions:	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE	te (not subscril hose services re two exceptio or facilities furn hit in which it is rate column. te charged by t tyour cable sy separate charge btion and inclue	NSMIS ber) info that are ins: you hished t usually the cabl stem fu ge was de the r CK 1 CATE	SSIONS: RAT pormation with r e not offered in u do not need t to nonsubscrib y billed. If any le system for e rnished or offe made or estab ate for each.	espect to combina o give ra ers. Rate rates are each of th red durin lished. L	ation with any sec ate information cor e information shou charged on a var ne applicable serv ng the accounting ist these other serv RATE	ondary tran neerning (1) uld include I iable per-pi ices listed. period that rvices in the	esmission ) services both the rogram basis, were not e form of a	RATE	
Services Other Than Secondary ransmissions:	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services:	te (not subscril hose services re two exceptio or facilities furn hit in which it is rate column. te charged by t tyour cable sy separate charge btion and inclus	NSMIS ber) info that are ins: you hished t usually the cabl stem fu ge was de the r CK 1 CATE0 Install	SSIONS: RAT pormation with r e not offered in a do not need t to nonsubscrib y billed. If any le system for e rnished or offe made or estab ate for each. GORY OF SE ation: Non-re	espect to combina o give ra ers. Rate rates are each of th red durin lished. L	ation with any sec ate information cor e information shou charged on a var ne applicable serv ng the accounting ist these other serv RATE	ondary tran neerning (1) uld include I iable per-pr ices listed. period that rvices in the CATEGC	services both the rogram basis, were not e form of a BLOCK 2		
Services Other Than Secondary ransmissions:	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	te (not subscril hose services re two exceptio or facilities furn hit in which it is rate column. te charged by t tyour cable sy separate charge btion and inclus	NSMIS ber) info that are ins: you hished t usually the cabl stem fu ge was b de the r CK 1 CATE( Install • Mo	SSIONS: RAT pormation with r e not offered in u do not need t to nonsubscrib y billed. If any le system for e rnished or offe made or estab ate for each.	espect to combina o give ra ers. Rate rates are each of th red durin lished. L	ation with any sec ate information cor e information shou charged on a var ne applicable serv ng the accounting ist these other serv RATE	ondary tran neerning (1) uld include I iable per-pr ices listed. period that rvices in the CATEGC Video or	smission o services both the rogram basis, were not e form of a <u>BLOCK 2</u> DRY OF SERVICE	\$0-\$10	
Services Other Than Secondary ransmissions:	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services:	te (not subscril hose services re two exceptio or facilities furn it in which it is rate column. te charged by ft your cable sy- separate chargo tion and includ BLO RATE	NSMIS ber) info that are ns: you nished t usually the cabl stem fu ge was de the r CK 1 CATEC Install • Mo • Co	SSIONS: RAT pormation with r e not offered in a do not need t to nonsubscrib y billed. If any le system for e rnished or offe made or estab ate for each. GORY OF SEI ation: Non-re otel, hotel	espect to combina o give ra ers. Rate rates are each of th red durin lished. L	ation with any sec ate information cor e information shou charged on a var ne applicable serv ng the accounting ist these other serv RATE	ondary tran neerning (1) uld include I iable per-pr ices listed. period that rvices in the CATEGC Video or Service.	smission o services both the rogram basis, were not e form of a <u>BLOCK 2</u> DRY OF SERVICE	RATE \$0-\$10 \$0-\$3 \$0-\$44	
Services Other Than Secondary ransmissions:	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	te (not subscril hose services re two exceptio or facilities furn it in which it is rate column. te charged by ft your cable sy- separate chargo tion and includ BLO RATE	NSMIS Der) info that are ns: you hished t usually the cabl stem fu ge was de the r CK 1 CATE( Install • Mo • Co • Pa	SSIONS: RAT pormation with r e not offered in a do not need t to nonsubscrib y billed. If any le system for e rnished or offe made or estab ate for each. GORY OF SEI lation: Non-re otel, hotel ommercial	espect to combina o give ra ers. Rate rates are rates are rated durin lished. L RVICE sidentia	ation with any sec ate information cor e information shou charged on a var ne applicable serv ng the accounting ist these other serv RATE	ondary tran neerning (1) Ild include I iable per-pr ices listed. period that rvices in the CATEGO Video or Service J Credit M	smission o services both the rogram basis, were not e form of a <u>BLOCK 2</u> DRY OF SERVICE DRY OF SERVICE	\$0-\$10 \$0-\$3	
Services Other Than Secondary ransmissions:	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for ration to covered in space E, that is, the service for a single fee. There are furnished at cost or (2) services amount of the charge and the urenter only the letters "PP" in the Block 1: Give the standard rate Block 2: List any services that listed in block 1 and for which a strift (two- or three-word) descript (two- or thr	te (not subscril hose services re two exceptio or facilities furn it in which it is rate column. te charged by ft your cable sy- separate chargo tion and includ BLO RATE	NSMIS per) info that are ns: you nished t usually the cabl stem fu ge was de the r CK 1 CATE( Install • Mo • Co • Pa • Pa	SSIONS: RAT pormation with r e not offered in a do not need t to nonsubscrib y billed. If any v le system for e made or estab rate for each. GORY OF SE ation: Non-re otel, hotel pormercial y cable	espect to combina o give ra ers. Rate rates are rates are rated durin lished. L RVICE sidentia	ation with any sec ate information cor e information shou charged on a var ne applicable serv ng the accounting ist these other serv RATE	ondary tran neerning (1) Ild include I iable per-pr ices listed. period that rvices in the CATEGO Video or Service Credit M Dispatch	services both the rogram basis, were not e form of a <u>BLOCK 2</u> DRY OF SERVICE DRY OF SERVICE Demand Activation Fee anagement Fee	\$0-\$1( \$0-\$3 \$0-\$44 \$14	
Services Other Than Secondary ransmissions:	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for ration to covered in space E, that is, the service for a single fee. There are furnished at cost or (2) services amount of the charge and the urenter only the letters "PP" in the Block 1: Give the standard rate Block 2: List any services that listed in block 1 and for which a strift (two- or three-word) descript (two- or three-word) descript (two- or three-word) descript (two- or three-word) descript (two- and the term of the term) of the continuing Services: • Pay cable • Pay cable - add'l channel • Fire protection • Burglar protection	te (not subscril hose services re two exceptio or facilities furn it in which it is rate column. te charged by ft your cable sy- separate chargo tion and includ BLO RATE	NSMIS ber) info that are ns: you hished t usually the cabl stem fu ge was de the r CK 1 CATEO Install • Mo • Pa • Pa • Fir	SSIONS: RATI permation with r e not offered in a do not need to to nonsubscrib y billed. If any f le system for e made or estab ate for each. GORY OF SEI ation: Non-re obtel, hotel permercial y cable y cable-add'l o	espect to combina o give ra ers. Rate rates are vach of th red durin lished. L RVICE sidentia	ation with any sec ate information cor e information shou charged on a var ne applicable serv ng the accounting ist these other serv RATE	ondary tran neerning (1) uld include I iable per-pi ices listed. period that rvices in the CATEGO Video or Service Credit M Dispatch Wireless	services both the rogram basis, were not e form of a <u>BLOCK 2</u> DRY OF SERVICE DEMAND Activation Fee anagement Fee on Demand	\$0-\$10 \$0-\$3 \$0-\$44 \$14 \$10-\$4	
Services Other Than Secondary ransmissions:	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for rain not covered in space E, that is, t service for a single fee. There are furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard rate Block 2: List any services that listed in block 1 and for which a service brief (two- or three-word) descript CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Fire protection • Burglar protection Installation: Residential	te (not subscril hose services re two exceptio or facilities furr hit in which it is rate column. te charged by t tyour cable sy separate charge otion and includ BLO RATE	NSMIS ber) info that are ns: you nished t usually the cabl stem fu ge was i de the r CK 1 CATEC Install • Mo • Pa • Pa • Fir • Bu	SSIONS: RAT primation with r e not offered in do not need t to nonsubscrib y billed. If any le system for e rnished or offe made or estab ate for each. GORY OF SEI ation: Non-re otel, hotel ommercial y cable y cable-add'l o e protection	espect to combina o give ra ers. Rate rates are vach of th red durin lished. L RVICE sidentia	ation with any sec ate information cor e information shou charged on a var ne applicable serv ng the accounting ist these other serv RATE	ondary tran neerning (1) uld include I iable per-pri ices listed. period that rvices in the CATEGO Video or Service Credit M Dispatch Wireless HD Prem	smission services both the rogram basis, were not e form of a <u>BLOCK 2</u> DRY OF SERVICE DRY OF SERVICE Demand Activation Fee anagement Fee n on Demand s Receiver	\$0-\$10 \$0-\$3 \$0-\$44 \$14 \$10-\$4 \$10-\$4	
Services Other Than Secondary ransmissions:	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for rain not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a single (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable • Fire protection • Burglar protection Installation: Residential • First set	te (not subscril hose services re two exceptio or facilities furr hit in which it is rate column. te charged by t tyour cable sy separate charge otion and includ BLO RATE	NSMIS ber) info that are ns: you hished t usually the cabl stem fu ge was b de the r CK 1 CATE0 Install • Mo • Pa • Pa • Fir • Bu Other	SSIONS: RATI prmation with r a not offered in a do not need t to nonsubscrib y billed. If any le system for e made or estable ate for each. GORY OF SEI ation: Non-re btel, hotel ommercial ny cable y cable-add'l of re protection rglar protectio	espect to combina o give ra ers. Rate rates are vach of th red durin lished. L RVICE sidentia	ation with any sec ate information cor e information shou charged on a var ne applicable serv ng the accounting ist these other serv RATE	ondary tran neerning (1) uld include I iable per-pri ices listed. period that rvices in the CATEGO Video or Service Credit M Dispatch Wireless HD Prem	smission services both the rogram basis, were not e form of a BLOCK 2 DRY OF SERVICE DEMANDA Activation Fee anagement Fee on Demand seceiver hium Tier	\$0-\$10 \$0-\$ \$0-\$44 \$14 \$10-\$4	
Services Other Than Secondary ransmissions:	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for ration to covered in space E, that is, the service for a single fee. There are furnished at cost or (2) services a mount of the charge and the urenter only the letters "PP" in the Block 1: Give the standard rate Block 2: List any services that listed in block 1 and for which a service for the or three-word) description of the charge and the urenter (two- or three-word) description (two- or th	te (not subscril hose services re two exceptio or facilities furr hit in which it is rate column. te charged by t tyour cable sy separate charge otion and includ BLO RATE	NSMIS ber) info that are ins: you hished t usually the cabl stem fu ge was de the r CK 1 CATEC Install • Mo • Co • Pa • Fir • Bu Other • Re	SIONS: RAT pormation with r e not offered in a do not need t to nonsubscrib y billed. If any le system for e rnished or offe made or estab ate for each. GORY OF SEI ation: Non-re otel, hotel ommercial y cable y cable-add'l o e protection rglar protectio services:	espect to combina o give ra ers. Rate rates are vach of th red durin lished. L RVICE sidentia	ation with any sec ate information cor e information shou charged on a var ne applicable serv ng the accounting ist these other serv RATE	ondary tran neerning (1) uld include I iable per-pri ices listed. period that rvices in the CATEGO Video or Service Credit M Dispatch Wireless HD Prem	smission services both the rogram basis, were not e form of a BLOCK 2 DRY OF SERVICE DEMANDA Activation Fee anagement Fee on Demand seceiver hium Tier	\$0-\$10 \$0-\$ \$0-\$44 \$14 \$10-\$4	
Services Other Than Secondary ransmissions:	Converter • Residential • Non-residential SERVICES OTHER THAN SEC In General: Space F calls for ratinot covered in space E, that is, t service for a single fee. There are furnished at cost or (2) services amount of the charge and the urenter only the letters "PP" in the Block 1: Give the standard rating Block 2: List any services that listed in block 1 and for which a service for the e-word) descript CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable • Fire protection Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	te (not subscril hose services re two exceptio or facilities furr hit in which it is rate column. te charged by t tyour cable sy separate charge otion and includ BLO RATE	NSMIS ber) info that are ns: you hished t usually the cable stem fu usually the cable stem fu usually the cable stem fu ge was de the r CK 1 CATEC Install • Mo • Co • Pa • Fir • Bu Other • Re • Dis	SIONS: RAT pormation with r e not offered in a do not need t to nonsubscrib y billed. If any f le system for e rnished or offe made or estab ate for each. GORY OF SEI ation: Non-re otel, hotel ommercial y cable y cable-add'l of e protection rrglar protectio services: econnect	espect to combina o give ra ers. Rate rates are vach of th red durin lished. L RVICE sidentia	ation with any sec ate information cor e information shou charged on a var ne applicable serv ng the accounting ist these other serv RATE	ondary tran neerning (1) uld include I iable per-pri ices listed. period that rvices in the CATEGO Video or Service Credit M Dispatch Wireless HD Prem	smission services both the rogram basis, were not e form of a BLOCK 2 DRY OF SERVICE DEMANDA Activation Fee anagement Fee on Demand seceiver hium Tier	\$0-\$1( \$0-\$3 \$0-\$44	

LEGAL NAME OF OWN	ER OF CABLE SY	/STEM:			SYSTEM ID#	
Wisconsin Bell	, Inc.				63028	Name
RIMARY TRANSMITTE	RS: TELEVISIO	ON				
arried by your cable s CC rules and regulation	ystem during t ons in effect or .61(e)(2) and (	he accounting n June 24, 19 4), or 76.63 (i	g period, except 81, permitting th referring to 76.6	: (1) stations carriented to the carriage of cert	and low power television stations) ed only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary Transmitters:
				s carried by your o	able system on a substitute program	Television
station was carried List the station here, a basis. For further in in the paper SA3 for	here in space only on a subs and also in spa formation conc rm.	G—but do lis titute basis. ace I, if the sta erning substit	t it in space I (th ation was carried tute basis station	d both on a substi ns, see page (v) c	ent and Program Log)—if the tute basis and also on some other f the general instructions located s such as HBO, ESPN, etc. Identify	
			•	•	tion. For example, report multi-	
ast stream as "WETA VETA-simulcast).	-2". Simulcast	streams must	t be reported in o	column 1 (list eac	h stream separately; for example	
Column 2: Give the					ion for broadcasting over-the-air in	
ts community of licens on which your cable sy	•		annel 4 in Wash	nington, D.C. This	may be different from the channel	
Column 3: Indicate	in each case v	whether the st			ependent station, or a noncommercial	
· •	0		<i>,,</i> , , , , , , , , , , , , , , , , , ,		ast), "I" (for independent), "I-M"	
For the meaning of the				•	ommercial educational multicast). ne paper SA3 form.	
Column 4: If the sta	ation is outside	the local serv	vice area, (i.e. "o	distant"), enter "Ye	es". If not, enter "No". For an ex-	
blanation of local service Column 5: If you ha					e paper SA3 form. stating the basis on which your	
					tering "LAC" if your cable system	
arried the distant stati	•					
				subject to a rovaity		
					v payment because it is the subject stem or an association representing	
of a written agreement	entered into o	n or before Ju	ine 30, 2009, be	etween a cable sy	stem or an association representing ry transmitter, enter the designa-	
of a written agreement he cable system and a ion "E" (exempt). For s	entered into o a primary trans simulcasts, also	n or before Ju mitter or an a o enter "E". If	ine 30, 2009, be ssociation repre you carried the	etween a cable sy esenting the prima channel on any o	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further	
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th	entered into o a primary trans simulcasts, also ree categories	n or before Ju mitter or an a o enter "E". If , see page (v)	ine 30, 2009, be ssociation repre you carried the ) of the general	etween a cable sy esenting the prima channel on any o instructions locate	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form.	
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the	entered into o a primary trans simulcasts, also ree categories e location of ea	n or before Ju mitter or an a o enter "E". If , see page (v) ch station. Fo	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations,	etween a cable sy esenting the prima channel on any o instructions locate list the community	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further	
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio	n or before Ju mitter or an a o enter "E". If , see page (v) ch station. Fo ns, if any, giv	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations, e the name of th	etween a cable sy esenting the prima channel on any o instructions locate list the community ne community with	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed.	
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio	n or before Ju mitter or an a p enter "E". If , see page (v ch station. Fo ns, if any, giv nnel line-ups,	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations, e the name of th	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed.	
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C <b>Note:</b> If you are utilizin	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio g multiple char	n or before Ju mitter or an a p enter "E". If , see page (v ch station. Fo ns, if any, giv nnel line-ups, CHANN	une 30, 2009, be ssociation repre you carried the of the general or U.S. stations, the the name of the use a separate EL LINE-UP	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. It to which the station is licensed by the which the station is identifed. channel line-up.	
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C <b>Note:</b> If you are utilizin	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio	n or before Ju mitter or an a p enter "E". If , see page (v ch station. Fo ns, if any, giv nnel line-ups,	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations, re the name of th use a separate	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed.	
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio g multiple char 2. B'CAST	n or before Ju mitter or an a p enter "E". If , see page (v ch station. Fo ns, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations, the the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No)	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. It to which the station is licensed by the which the station is identifed. channel line-up.	
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio g multiple char 2. B'CAST CHANNEL	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo ns, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE OF	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations, the the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No)	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. It to which the station is licensed by the which the station is identifed. channel line-up.	
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio g multiple chan 2. B'CAST CHANNEL NUMBER	n or before Ju mitter or an a o enter "E". If , see page (v) ch station. Fo ns, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE OF STATION	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations, e the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No)	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. It to which the station is licensed by the model which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI	
of a written agreement the cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN WHA/WHAHD WIFS/WIFSHD	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio g multiple chan 2. B'CAST CHANNEL NUMBER 21/1021 57/1057	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo ns, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE OF STATION <b>E</b> I	Ine 30, 2009, be ssociation repreyou carried the of the general for U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI Janesville, WI	See instructions for additional informatio
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN MHA/WHAHD MIFS/WIFSHD MISC/WISCHD	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 21/1021 57/1057 3/1003	n or before Ju mitter or an a o enter "E". If , see page (v) ch station. Fo ns, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE OF STATION	Ine 30, 2009, be ssociation repre you carried the of the general i or U.S. stations, e the name of the use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No) NO NO NO	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. (to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI Janesville, WI Madison, WI	
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN WHA/WHAHD WIFS/WIFSHD WISC/WISCHD WISCD2	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 21/1021 57/1057 3/1003 3	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo ns, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE OF STATION <b>E</b> I N	Ine 30, 2009, be ssociation repre you carried the of the general or U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI Madison, WI Madison, WI	additional informatio
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN NHA/WHAHD NIFS/WIFSHD NISC/WISCHD NISC/WISCHD NISCD2 NKOW/WKOWHD	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 21/1021 57/1057 3/1003 3 27/1027	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo ns, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE OF STATION <b>E</b> I	Ine 30, 2009, be ssociation repre you carried the of the general or U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. (to which the station is licensed by the multiple which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI Janesville, WI Madison, WI Madison, WI	additional informatio
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN WHA/WHAHD WIFS/WIFSHD WISC/WISCHD WISC/WISCHD WISCD2 WKOW/WKOWHD	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 21/1021 57/1057 3/1003 3	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo ns, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE OF STATION <b>E</b> I N	Ine 30, 2009, be ssociation repre you carried the of the general or U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further id in the paper SA3 form. It to which the station is licensed by the which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional informatio
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN NHA/WHAHD NIFS/WIFSHD NISC/WISCHD NISC/WISCHD NISCD2 WKOW/WKOWHD NMSN/WMSNHD	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 21/1021 57/1057 3/1003 3 27/1027	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo ns, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE OF STATION <b>E</b> I N	Ine 30, 2009, be ssociation repre you carried the of the general or U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. (to which the station is licensed by the multiple which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI Janesville, WI Madison, WI Madison, WI	additional informatio
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN NHA/WHAHD NIFS/WIFSHD NISC/WISCHD NISC/WISCHD NISCD2 NKOW/WKOWHD NMSN/WMSNHD MMTV/WMTVHD	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 21/1021 57/1057 3/1003 3 27/1027 47/1047	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo nns, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION E I N I I	ane 30, 2009, be ssociation repre you carried the ) of the general i or U.S. stations, the the name of the use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No) <b>NO</b> <b>NO</b> <b>NO</b> <b>NO</b> <b>NO</b> <b>NO</b> <b>NO</b> <b>NO</b>	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further id in the paper SA3 form. It to which the station is licensed by the which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional informatio
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN WHA/WHAHD WIFS/WIFSHD WISC/WISCHD WISC/WISCHD WISC/WISCHD WISCD2 WKOW/WKOWHD WMSN/WMSNHD	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 21/1021 57/1057 3/1003 3 27/1027 47/1047 15/1015	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo nns, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION E I N I N	Ine 30, 2009, be ssociation repre you carried the of the general for U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. / to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional informatio
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN WHA/WHAHD WIFS/WIFSHD WISC/WISCHD WISC/WISCHD WISC/WISCHD WISCD2 WKOW/WKOWHD WMSN/WMSNHD	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 21/1021 57/1057 3/1003 3 27/1027 47/1047 15/1015	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo nns, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION E I N I N	Ine 30, 2009, be ssociation repre you carried the of the general for U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. / to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional informatio
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN NHA/WHAHD NIFS/WIFSHD NISC/WISCHD NISC/WISCHD NISCD2 NKOW/WKOWHD NMSN/WMSNHD MMTV/WMTVHD	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 21/1021 57/1057 3/1003 3 27/1027 47/1047 15/1015	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo nns, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION E I N I N	Ine 30, 2009, be ssociation repre you carried the of the general for U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. / to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional informatio
of a written agreement the cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN WHA/WHAHD WIFS/WIFSHD WISC/WISCHD WISC/WISCHD WISC/WISCHD WISCD2 WKOW/WKOWHD WMSN/WMSNHD	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 21/1021 57/1057 3/1003 3 27/1027 47/1047 15/1015	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo nns, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION E I N I N	Ine 30, 2009, be ssociation repre you carried the of the general for U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. / to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional informatio
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN WHA/WHAHD WIFS/WIFSHD WISC/WISCHD WISC/WISCHD WISCD2 WKOW/WKOWHD WMSN/WMSNHD	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 21/1021 57/1057 3/1003 3 27/1027 47/1047 15/1015	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo nns, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION E I N I N	Ine 30, 2009, be ssociation repre you carried the of the general for U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. / to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional informatio
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN WHA/WHAHD WIFS/WIFSHD WISC/WISCHD WISC/WISCHD WISCD2 WKOW/WKOWHD WMSN/WMSNHD	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 21/1021 57/1057 3/1003 3 27/1027 47/1047 15/1015	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo nns, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION E I N I N	Ine 30, 2009, be ssociation repre you carried the of the general for U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. / to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional informatio
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN WHA/WHAHD WIFS/WIFSHD WISC/WISCHD WISC/WISCHD WISCD2 WKOW/WKOWHD WMSN/WMSNHD	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 21/1021 57/1057 3/1003 3 27/1027 47/1047 15/1015	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo nns, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION E I N I N	Ine 30, 2009, be ssociation repre you carried the of the general for U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. / to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional informatio
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C <b>Note:</b> If you are utilizin	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 21/1021 57/1057 3/1003 3 27/1027 47/1047 15/1015	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo nns, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION E I N I N	Ine 30, 2009, be ssociation repre you carried the of the general for U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. / to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional informatio
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN WHA/WHAHD WIFS/WIFSHD WISC/WISCHD WISC/WISCHD WISCD2 WKOW/WKOWHD WMSN/WMSNHD	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 21/1021 57/1057 3/1003 3 27/1027 47/1047 15/1015	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo nns, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION E I N I N	Ine 30, 2009, be ssociation repre you carried the of the general for U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. / to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional informatio
of a written agreement the cable system and a ion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN WHA/WHAHD WIFS/WIFSHD WISC/WISCHD WISC/WISCHD WISC/WISCHD WISCD2 WKOW/WKOWHD WMSN/WMSNHD	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 21/1021 57/1057 3/1003 3 27/1027 47/1047 15/1015	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo nns, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION E I N I N	Ine 30, 2009, be ssociation repre you carried the of the general for U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No	etween a cable sy esenting the prima channel on any o instructions locate list the community he community with space G for each AA 5. BASIS OF CARRIAGE	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. / to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional information

LEGAL NAME OF OW Wisconsin Be		STEM:			SYSTEM ID 6302	Nama
RIMARY TRANSMIT		N				
n General: In space arried by your cable CC rules and regula 6.59(d)(2) and (4), 7 ubstitute program ba Substitute Basis asis under specifc F Do not list the statio station was carried List the station here	G, identify every system during th ations in effect on 76.61(e)(2) and (4 asis, as explained <b>Stations:</b> With re FCC rules, regulat on here in space ( d only on a substi- , and also in space	television st e accounting June 24, 194 b), or 76.63 (r d in the next p espect to any tions, or auth G—but do list itute basis. ce I, if the sta	p period, except 81, permitting th referring to 76.6 paragraph. / distant stations lorizations: t it in space I (th ation was carried	(1) stations carrie le carriage of certa 1(e)(2) and (4))]; a s carried by your c le Special Stateme d both on a substit	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other f the general instructions located	G Primary Transmitters: Television
in the paper SA3 f Column 1: List ea ach multicast stream ast stream as "WET VETA-simulcast). Column 2: Give th s community of licer in which your cable s Column 3: Indicat	orm. ach station's call s n associated with A-2". Simulcast s ne channel numb nse. For example, system carried the te in each case w	sign. Do not r a station acc treams must er the FCC h , WRC is Cha e station. hether the st	report origination cording to its over the reported in or has assigned to annel 4 in Wash tation is a netwo	n program service: er-the-air designal column 1 (list each the television stati ington, D.C. This rk station, an inde	s such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel upendent station, or a noncommercial ast), "I" (for independent), "I-M"	
For the meaning of the <b>Column 4</b> : If the selanation of local served and the <b>Column 5</b> : If you sable system carried the distant states arried the distant states arrived the distant states arrived the distant states are states arrived the distant states are states	nese terms, see p station is outside t vice area, see pa have entered "Ye the distant station	age (v) of the the local serv ge (v) of the s" in column n during the a	e general instruct vice area, (i.e. "c general instruct 4, you must cor accounting perio ause of lack of a	ctions located in the distant"), enter "Ye ions located in the mplete column 5, s od. Indicate by ent ictivated channel of	s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system	
of a written agreemen he cable system and ion "E" (exempt). For	nt entered into on I a primary transn r simulcasts, also	or before Ju nitter or an as enter "E". If	ine 30, 2009, be ssociation repre you carried the	etween a cable system senting the primar channel on any ot	payment because it is the subject stem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form.	
of a written agreemen he cable system and ion "E" (exempt). For explanation of these Column 6: Give th FCC. For Mexican or	nt entered into on a primary transm r simulcasts, also three categories, ne location of eac Canadian statior	or before Ju nitter or an as enter "E". If see page (v) th station. Fo ns, if any, giv nel line-ups,	ine 30, 2009, be ssociation repre you carried the of the general i or U.S. stations, e the name of th use a separate	etween a cable systemating the primaric channel on any ot instructions locate list the community ne community with space G for each	tem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	_
of a written agreemer he cable system and ion "E" (exempt). For explanation of these <b>Column 6:</b> Give th FCC. For Mexican or <b>Note:</b> If you are utiliz	nt entered into on I a primary transn r simulcasts, also three categories, ne location of eac Canadian statior ing multiple chan	or before Ju nitter or an as enter "E". If see page (v) th station. Fo ns, if any, giv nel line-ups,	ine 30, 2009, be ssociation repre you carried the ) of the general i or U.S. stations, e the name of th	etween a cable systemating the primaric channel on any ot instructions locate list the community ne community with space G for each	tem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
of a written agreemer he cable system and ion "E" (exempt). For explanation of these <b>Column 6:</b> Give th FCC. For Mexican or <b>Note:</b> If you are utiliz	nt entered into on l a primary transm r simulcasts, also three categories, ne location of eac Canadian statior ing multiple chan 2. B'CAST CHANNEL	or before Ju nitter or an as enter "E". If see page (v) th station. Fo ns, if any, giv nel line-ups, <b>CHANN</b> 3. TYPE OF	Ine 30, 2009, be ssociation repre you carried the of the general is or U.S. stations, e the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT?	etween a cable systemating the primarichannel on any of instructions locate list the community with space G for each <b>AB</b> 5. BASIS OF CARRIAGE	stem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.	
of a written agreemer he cable system and ion "E" (exempt). For explanation of these <b>Column 6:</b> Give th FCC. For Mexican or <b>Note:</b> If you are utiliz	nt entered into on l a primary transm r simulcasts, also three categories, ne location of eac Canadian statior ing multiple chan 2. B'CAST CHANNEL	or before Ju nitter or an as enter "E". If see page (v) th station. Fo ns, if any, giv nel line-ups, <b>CHANN</b> 3. TYPE OF	Ine 30, 2009, be ssociation repre you carried the of the general is or U.S. stations, e the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT?	etween a cable systemating the primarichannel on any of instructions locate list the community with space G for each <b>AB</b> 5. BASIS OF CARRIAGE	stem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.	
of a written agreemer he cable system and ion "E" (exempt). For explanation of these <b>Column 6:</b> Give th FCC. For Mexican or <b>Note:</b> If you are utiliz	nt entered into on l a primary transm r simulcasts, also three categories, ne location of eac Canadian statior ing multiple chan 2. B'CAST CHANNEL	or before Ju nitter or an as enter "E". If see page (v) th station. Fo ns, if any, giv nel line-ups, <b>CHANN</b> 3. TYPE OF	Ine 30, 2009, be ssociation repre you carried the of the general is or U.S. stations, e the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT?	etween a cable systemating the primarichannel on any of instructions locate list the community with space G for each <b>AB</b> 5. BASIS OF CARRIAGE	stem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.	
of a written agreemer he cable system and ion "E" (exempt). For explanation of these <b>Column 6:</b> Give th FCC. For Mexican or <b>Note:</b> If you are utiliz	nt entered into on l a primary transm r simulcasts, also three categories, ne location of eac Canadian statior ing multiple chan 2. B'CAST CHANNEL	or before Ju nitter or an as enter "E". If see page (v) th station. Fo ns, if any, giv nel line-ups, <b>CHANN</b> 3. TYPE OF	Ine 30, 2009, be ssociation repre you carried the of the general is or U.S. stations, e the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT?	etween a cable systemating the primarichannel on any of instructions locate list the community with space G for each <b>AB</b> 5. BASIS OF CARRIAGE	stem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.	
of a written agreemer he cable system and ion "E" (exempt). For explanation of these <b>Column 6:</b> Give th FCC. For Mexican or <b>Note:</b> If you are utiliz	nt entered into on l a primary transm r simulcasts, also three categories, ne location of eac Canadian statior ing multiple chan 2. B'CAST CHANNEL	or before Ju nitter or an as enter "E". If see page (v) th station. Fo ns, if any, giv nel line-ups, <b>CHANN</b> 3. TYPE OF	Ine 30, 2009, be ssociation repre you carried the of the general is or U.S. stations, e the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT?	etween a cable systemating the primarichannel on any of instructions locate list the community with space G for each <b>AB</b> 5. BASIS OF CARRIAGE	stem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.	
of a written agreemer he cable system and ion "E" (exempt). For explanation of these <b>Column 6:</b> Give th FCC. For Mexican or <b>Note:</b> If you are utiliz	nt entered into on l a primary transm r simulcasts, also three categories, ne location of eac Canadian statior ing multiple chan 2. B'CAST CHANNEL	or before Ju nitter or an as enter "E". If see page (v) th station. Fo ns, if any, giv nel line-ups, <b>CHANN</b> 3. TYPE OF	Ine 30, 2009, be ssociation repre you carried the of the general is or U.S. stations, e the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT?	etween a cable systemating the primarichannel on any of instructions locate list the community with space G for each <b>AB</b> 5. BASIS OF CARRIAGE	stem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.	

Name	LEGAL NAME OF C		E SYSTEI	М:				SYSTEM ID# 63028
		•						
н		t every radio s	tation ca	rried on a separate and discre nerally receivable" by your cal				
Primary Transmitters:	receivable if (1)	it is carried by	the syst	-Band FM Carriage: Under C tem whenever it is received at	the system's hea	adend, and (2)	it can b	e expected,
Radio	For detailed info located in the p Column 1: lo Column 2: S	ormation about aper SA3 form dentify the call State whether t	t the the  sign of e he statio	ved at the headend, with the s Copyright Office regulations o each station carried. n is AM or FM.	n this point, see	page (vi) of the	e genera	al instructions
	signal, indicate Column 4: G	this by placing Give the station	a check i's locatio	nal was electronically processes mark in the "S/D" column. on (the community to which the the community with which the	e station is licens	ed by the FCC		
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
	CALL SIGN		3/D	LOCATION OF STATION	CALL SIGN		3/D	LOCATION OF STATION
			·					
			·					
					·			

LEGAL NAME OF OWNER OF CABLE SYS	TEM:				S	YSTEM ID#	Nig
Wisconsin Bell, Inc.						63028	Name
SUBSTITUTE CARRIAGE: SPECIA		NT AND PROGRAM LOG					
In General: In space I, identify every no substitute basis during the accounting perpenditude of the programming that mu	eriod, under spe	ecific present and former FC	C rules, regula	ations, or autho	prizations. F	For a further	Substitute
1. SPECIAL STATEMENT CONCER							Carriage:
<ul> <li>During the accounting period, did you broadcast by a distant station?</li> </ul>	Ir cable system	i carry, on a substitute basi	s, any nonne			ΧNο	Special Statement and Program Log
Note: If your answer is "No", leave the log in block 2.	rest of this page	ge blank. If your answer is "	Yes," you mu	ust complete th	ne program	1	1.09.0
In General: List each substitute progra clear. If you need more space, please Column 1: Give the title of every no period, was broadcast by a distant stat under certain FCC rules, regulations, o SA3 form for futher information. Do no titles, for example, "I Love Lucy" or "NE Column 2: If the program was broad Column 3: Give the call sign of the Column 4: Give the broadcast statist the case of Mexican or Canadian statist Column 5: Give the month and day first. Example: for May 7 give "5/7." Column 6: State the times when the to the nearest five minutes. Example: a stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the to delete under FCC rules and regulati gram was substituted for programming effect as 0.04568 10.1076	attach addition nnetwork telev- ion and that your or authorization of use general of A Basketball: dcast live, enter station broadca on's location (thous, if any, the when your syster a program carri- listed program ons in effect do	al pages. ision program (substitute program cable system substituted s. See page (vi) of the gene categories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "N asting the substitute program the community to which the community with which the stem carried the substitute p gram was carried by your c ed by a system from 6:01:1 was substituted for program uring the accounting period;	ogram) that, I for the prog eral instructio "basketball". o." n. station is lice station is ider rogram. Use able system. 5 p.m. to 6:2 mming that y enter the let	during the acc ramming of ar ns located in t List specific p nsed by the Fe titified). numerals, wit List the times 8:30 p.m. sho our system wa ter "P" if the list	counting nother stati the paper program CC or, in h the mont accurately uld be as required sted pro	¦h /	
effect on October 19, 1976.			WHE	EN SUBSTITU	JTE	7. REASON	
	TE PROGRAM			IAGE OCCUP		FOR	
1. TITLE OF PROGRAM 2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIN FROM —	TO	DELETION	

\_\_\_\_\_

\_\_\_\_\_

FORM SA3E. PAGE 5.

\_\_\_\_

ACCOUNTING PERIOD: 2017/2

FORM SA3E. PAGE 6.

	LEGAL NAME OF (	OWNER OF CABLE	SYSTEM:						SYS	TEM ID#			
Name	Wisconsin E	Bell, Inc.								63028			
	PART-TIME CA	ARRIAGE LOG											
J Part-Time Carriage Log	<ul> <li>In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages.</li> <li>Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G.</li> <li>Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period.</li> <li>Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10."</li> <li>State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.– 3:15 a.m. app."</li> <li>You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.– 12:00 p.m."</li> </ul>												
		DATES AND HOURS OF PART-TIME CARRIAGE											
		WHEN	CARRIAGE O	CCURRED			WHEN	I CARRIAGE O	CCURRE	-D			
	CALL SIGN		Н	OURS		CALL SIGN		Н	OURS				
		DATE	FROM	ТО			DATE	FROM		то			
									<u> </u>				
				_					_				
				_					_				
				_					_				
				_					_				
				_					_				
									. <u> </u>				
				<u> </u>									
				_									
				_					_				
				_					_				
				_					_				
									_				
									_				
									<u> </u>				
									<u> </u>				
				-									

LEGA	L NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	Nores
Wis	consin Bell, Inc.			63028	Name
Insti all ai (as i page	<b>DSS RECEIPTS</b> <b>ructions</b> : The figure you give in this space determines the form you fle and the amount mounts (gross receipts) paid to your cable system by subscribers for the system's second dentifed in space E) during the accounting period. For a further explanation of how to c (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)	ondary tran	nsmissic	on service	K Gross Receipts
	during the accounting period	<b>\$</b>		<b>3,283,370.24</b> pss receipts)	
<ul> <li>Com</li> <li>Com</li> <li>If you</li> <li>fee f</li> <li>If you</li> </ul>	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: plete block 1, showing your minimum fee. plete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the ar rom block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable pa impanying this form and attach the schedule to your statement of account.				L Copyright Royalty Fee
If pa	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b	e entered o	on line 1	1 of	
	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be	entered on	ı line 2 ir	n block	
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be ente	ered on	line	
1	<b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K		percent		
	Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here. This is your minimum fee.	\$		34,935.06	
	"Yes" in this block. • Did your cable system carry any distant television stations during the accounting peri Yes—Complete the DSE schedule. X No—Leave block 3 below blank and complete the DSE schedule.		e 1, bloc	sk 4.	
Block 3	Line 1. <b>BASE RATE FEE:</b> Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$			
-	Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero			0.00	
	Line 3. Add lines 1 and 2 and enter here	\$		-	
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$		34,935.06	Cable systems
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.	r		0.00	submitting additional deposits unde
	Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)			0.00	Section 111(d)( should contac the Licensing
	Line 4. FILING FEE	\$		725.00	additional fees Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.         Add Lines 1, 2 and 3 of block 4 and enter total here	\$		35,660.06	appropriate form for submitting the additional fees
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. ( general instructions located in the paper SA3 form for more information.)	See page	(i) of the	2	auuitional tees

FORM SA3E. PAGE 7.

ACCOUNTING PERIOD:	2017/2
--------------------	--------

ACCOUNTING PERI	00. 2017/2				FORM SA3E. PAGE 8.
Name	LEGAL NAME OF OWNER		SYSTEM:		SYSTEM ID#
	Wisconsin Bell, Ir	1C.			63028
	CHANNELS				
Μ	Instructions: You n	nust give	(1) the number of channels on which	the cable system carried television broadca	ast stations
<u>.</u>	to its subscribers an	nd (2) the	cable system's total number of activa	ted channels, during the accounting period.	
Channels	1 Entor the total nu	mbor of	channels on which the cable		
			roadcast stations		15
	.,				
	2. Enter the total nu	mber of a	activated channels		
		-	carried television broadcast stations		609
	and nonbroadcast	services			
Ν			CTED IF FURTHER INFORMATION	IS NEEDED: (Identify an individual	
Individual to	we can contact abo		atement of account.)		
Be Contacted					
for Further	Name <b>Diane</b>	Belling	er	Telephone	e <b>210-351-4805</b>
Information					
	Address 1010 N	. St. M	ary's Street, Room 13-59-B		
	(Number, s	treet, rural	route, apartment, or suite number)		
			TX 78215		
	(City, town,	state, zip)			
	Email	dg77	96@att.com	Fax (optional) 210-246	6-8199
		·····			
		ia atatam	cont of account must be contifed and a	inned in coordance with Convright Office a	agulationa
0	CERTIFICATION	is staten	ient of account must be certifed and s	igned in accordance with Copyright Office r	egulations.
O Certifcation	• I the undersigned	a araby ar	rtify that (Chack and but only one of th	no hovos )	
Certification		lereby ce	rtify that (Check one, but only one, of th	le boxes.)	
	(Owner other tha	in corpoi	ation or partnership) I am the owner o	f the cable system as identifed in line 1 of spa	ace B; or
	(Agent of owner	other tha	n corporation or partnership) I am the	e duly authorized agent of the owner of the ca	ble system as identified
	in line 1 of spa	ace B and	I that the owner is not a corporation or p	artnership; or	
	X (Officer or partn	er) I am a	an officer (if a corporation) or a partner (	f a partnership) of the legal entity identifed as	owner of the cable system
	in line 1 of spa	ace B.			
	I have examined the	e stateme	nt of account and hereby declare under	penalty of law that all statements of fact conta	ained herein
	are true, complete, a [18 U.S.C., Section 1			on, and belief, and are made in good faith.	
	[18 0.3.C., Section 1	001(1900	)]		
		Х	/s/ Mike McGuire		
	_				
				sing an "/s/" signature to certify this statement.	an in the base and seens the
			,	rward slash of the /s/ signature, place your curs ing the "F" button will avoid enabling Excel's Lo	•
			Niles MaQuine		
		Iyped	or printed name: Mike McGuire		
		Title:	Assistant Vice President -	Billing Operations	
			(Title of official position held in corporation of	r partnership)	
		Date:	February 23, 2018		
Privacy Act Notice	: Section 111 of title 17	of the Un	ted States Code authorizes the Copyright	Offce to collect the personally identifying inform	nation (PII) requested on th

form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephor numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in th completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of lav

FORM	SA3E	PAGE9.
	SAJL.	FAGLS.

LEGAL NAME OF OWNER OF CABLE SYSTEM: Wisconsin Bell, Inc.	SYSTEM ID# 63028	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system service of providing secondary transmissions of primary broadcast transmitters, the system sha scribers and amounts collected from subscribers receiving secondary transmissions pursuant to	n for the basic Ill not include sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general inst paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for seconda made by satellite carriers to satellite dish owners?		Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address		
INTEREST ASSESSMENTS You must complete this worksheet for those royalty payments submitted as a result of a late payment For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3		Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here		
Line 3 Multiply line 2 by the number of days late and enter the sum here	x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	-	
(i * To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf</i> . For further contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	nterest charge) assistance please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyri please list below the owner, address, first community served, accounting period, and ID number as giv filing.		
Owner Address		
First community servedAccounting period		
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifyi	ng information (PII) requested or	n th

form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

#### INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerica value given by the Copyright Act to each distant television station carriec by a cable system during an accounting period. Your system's total number of DSEs determines the royalty you owe. For the full definition, see page (v) of the General Instructions in the paper SA3 form.

#### FORMULAS FOR COMPUTING A STATION'S DSE

There are two different formulas for computing DSEs: (1) a basic formula for all distant stations listed in space G (page 3), and (2) a special formula for those stations carried on a substitute basis and listed in space I (page 5). (Note that if a particular station is listed in both space G and space I, a DSE must be computed twice for that station: once under the basic formula and again under the special formula. However, a station's total DSE is not to exceed its full type-value. If this happens, contact the Licensing Division.)

#### BASIC FORMULA: FOR ALL DISTANT STATIONS LISTEE IN SPACE G OF SA3E (LONG FORM)

**Step 1**: Determine the station's type-value. For purposes of computing DSEs, the Copyright Act gives different values to distant stations depending upon their type. If, as shown in space G of your statement of accoun (page 3), a distant station is:

Independent: its type-value is	1.00
• Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that local stations are not counted at all in computing DSEs.	

**Step 2:** Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space G of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station sover the air during the accounting period. The basis of carriage value is determined by the total number of hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

**Step 3:** Multiply the result of step 1 by the result of step 2. This gives you the particular station's DSE for the accounting period. (Note that for stations other than those carried on a part-time basis due to lack of activated channel capacity, actual multiplication is not necessary since the DSE will always be the same as the type value.)

# SPECIAL FORMULA FOR STATIONS LISTED IN SPACE I OF SA3E (LONG FORM)

Step 1: For each station, calculate the number of programs that, during the accounting period, were broadcast live by the station and were substituted for programs deleted at the option of the cable system.

(These are programs for which you have entered "Yes" in column 2 and "P" in column 7 of space I.)

Step 2: Divide the result of step 1 by the total number of days in the calendar year (365—or 366 in a leap year). This gives you the particula station's DSE for the accounting period.

#### TOTAL OF DSEs

In part 5 of this schedule you are asked to add up the DSEs for all of the distant television stations your cable system carried during the accounting period. This is the total sum of all DSEs computed by the basic formula and by the special formula.

#### THE ROYALTY FEE

The total royalty fee is determined by calculating the minimum fee anc the base rate fee. In addition, cable systems located within certain television market areas may be required to calculate the 3.75 fee and/or the Syndicated Exclusivity Surcharge. Note: Distant multicast streams are noi subject to the 3.75 fee or the Syndicated Exclusivity Surcharge. Distansimulcast streams are not subject to any royalty payment

The 3.75 Fee. If a cable system located in whole or in part within  $\varepsilon$  television market added stations after June 24, 1981, that would not have been permitted under FCC rules, regulations, and authorizations (hereafter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge

The Syndicated Exclusivity Surcharge. Cable systems located in whole or in part within a major television market, as defined by FCC rules and regulations, must calculate a Syndicated Exclusivity Surcharge for the carriage of any commercial VHF station that places a grade B contour, in whole or in part, over the cable system that would have been subject to the FCC's syndicated exclusivity rules in effect on June 24, 1981

The Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable sys-

tems fling SA3E (Long Form) must pay at least the minimum fee, which is 1.064 percent of gross receipts. The cable system pays either the minimum fee or the sum of the base rate fee and the 3.75 percent fee, whichever is larger, and a Syndicated Exclusivity Surcharge, as applicable

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following: 1) A station actually carried within any portion of a cable system prior

to June 25, 1981, pursuant to the former FCC rules. 2) A station first carried after June 24, 1981, which could have been

carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.

3) A station of the same type substituted for a carried network, noncommercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)] in effect on June 24, 1981.

4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.

5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

NOTE: If your cable system carried a station that you believe qualifies as a permitted station but does not fall into one of the above categories, please attach written documentation to the statement of account detailing the basis for its classification.

Substitution of Grandfathered Stations. Under section 76.65 of the former FCC rules, a cable system was not required to delete any statior that it was authorized to carry or was lawfully carrying prior to March 31 1972, even if the total number of distant stations carried exceeded the market quota imposed for the importation of distant stations. Carriage of these grandfathered stations is not subject to the 3.75 percent rate but is subject to the Base Rate, and where applicable, the Syndicatec Exclusivity Surcharge. The Copyright Royalty Tribunal has stated its view that, since section 76.65 of the former FCC rules would not have permitted substitution of a grandfathered station, the 3.75 percent Rate applies to a station substituted for a grandfathered station if carriage of the station exceeds the market quota imposed for the importation of distant stations.

# COMPUTING THE 3.75 PERCENT RATE—PART 6 OF THE DSE SCHEDULE

- Determine which distant stations were carried by the system pursuan to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/o part-time basis only and complete the log to determine the portion of the DSE exempt from the 3.75 percent rate.
- Subtract the number of DSEs resulting from this carriage from the number of DSEs reported in part 5 of the DSE Schedule. This is the total number of DSEs subject to the 3.75 percent rate. Multiply these DSEs by gross receipts by .0375. This is the 3.75 fee.

#### COMPUTING THE SYNDICATED EXCLUSIVITY SURCHARGE— PART 7 OF THE DSE SCHEDULE

- Determine if any portion of the cable system is located within a top 100 major television market as defined by the FCC rules and regulations in effect on June 24, 1981. If no portion of the cable system is located ir a major television market, part 7 does not have to be completed.
- Determine which station(s) reported in block B, part 6 are commercial VHF stations and place a grade B contour, in whole, or in part, over the cable system. If none of these stations are carried, part 7 does not have to be completed.
- Determine which of those stations reported in block b, part 7 of the DSE Schedule were carried before March 31,1972. These stations are exempt from the FCC's syndicated exclusivity rules in effect on June 24 1981. If you qualify to calculate the royalty fee based upon the carriage of partially-distant stations, and you elect to do so, you must compute the surcharge in part 9 of this schedule.
- Subtract the exempt DSEs from the number of DSEs determined in block B of part 7. This is the total number of DSEs subject to the Syndicated Exclusivity Surcharge.
- Compute the Syndicated Exclusivity Surcharge based upon these DSEs and the appropriate formula for the system's market position.

## DSE SCHEDULE. PAGE 11.

## COMPUTING THE BASE RATE FEE-PART 8 OF THE DSE SCHEDULE

Determine whether any of the stations you carried were partially distantthat is, whether you retransmitted the signal of one or more stations to subscribers located within the station's local service area and, at the same time, to other subscribers located outside that area.

· If none of the stations were partially distant, calculate your base rate fee according to the following rates—for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable. First DSF 1.064% of gross receipts

Each of the second, third, and fourth DSEs 0.701% of gross receipts The fifth and each additional DSE

## 0.330% of gross receipts PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

If any of the stations were partially distant:

1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.

2. Identify the communities/areas represented by each subscriber group. 3. For each subscriber group, calculate the total number of DSEs of

that group's complement of stations. If your system is located wholly outside all major and smaller television markets, give each station's DSEs as you gave them in parts 2, 3, and 4 of the schedule: or

If any portion of your system is located in a major or smaller television market, give each station's DSE as you gave it in block B, part 6 of this schedule.

4. Determine the portion of the total gross receipts you reported in space K (page 7) that is attributable to each subscriber group.

TOTAL DSEs

5. Calculate a separate base rate fee for each subscriber group, using (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.

6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.

7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

What to Do If You Need More Space on the DSE Schedule. There are no printed continuation sheets for the schedule. In most cases, the blanks provided should be large enough for the necessary information. If you need more space in a particular part, make a photocopy of the page in question (identifying it as a continuation sheet), enter the additional information on that copy, and attach it to the DSE schedule.

Rounding Off DSEs. In computing DSEs on the DSE schedule, you may round off to no less than the third decimal point. If you round off a DSE in any case, you must round off DSEs throughout the schedule as follows:

- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

The example below is intended to supplement the instructions for calculating only the base rate fee for partially distant stations. The cable system would also be subject to the Syndicated Exclusivity Surcharge for partially distant stations, if any portion is located within a major television market.

## EXAMPLE: COMPUTATION OF COPYRIGHT ROYALTY FEE FOR CABLE SYSTEM CARRYING PARTIALLY DISTANT STATIONS

CITY

Santa Rosa

Bodega Bay

Rapid City

Fairvale

DSE

1.0

1.0

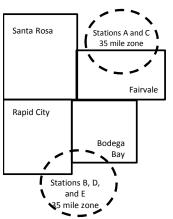
0.083

0.139

0.25

2 4 7 2

Distant Stations Carried STATION In most cases under current FCC rules, all of Fairvale would be within A (independent) B (independent) the local service area of both stations C (part-time) A and C and all of Rapid City and Bo-D (part-time) dega Bay would be within the local service areas of stations B, D, and E. E (network)



Minimum Fee Total Gross Receipts		\$600,000.00			
		x .01064			
		\$6,384.00			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

Identification of Subscriber Groups

OUTSIDE LOCAL

Stations A and C

Stations A and C

Stations B, D, and E

TOTAL GROSS RECEIPTS

SERVICE AREA OF

Stations A, B, C, D , E

In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

GROSS RECEIPTS

\$310,000.00

100,000.00

70,000.00

120,000.00

\$600.000.00

FROM SUBSCRIBERS

## DSE SCHEDULE. PAGE 11. (CONTINUED)

1	LEGAL NAME OF OWNER OF CABLE	E SYSTEM:			SI	STEM ID#					
	Wisconsin Bell, Inc.					63028					
	SUM OF DSEs OF CATEGORY "O" STATIONS:         • Add the DSEs of each station.         Enter the sum here and in line 1 of part 5 of this schedule.         0.00										
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3).										
Computation of DSEs for	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom- mercial educational station, give the DSE as ".25."										
Category "O"	tegory "O" CATEGORY "O" STATIONS: DSEs										
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
Add rows as											
necessary.											
Remember to copy											
all formula into new											
rows.											

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Wisconsin Bell, Inc.

<b>3</b> Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 2 be carried ou Column 2 give the type Column 0	<b>CAPACITY</b> ist the call sign of all distant <b>2</b> : For each station, give the correspond with the informa <b>3</b> : For each station, give the <b>4</b> : Divide the figure in colum t at least to the third decima <b>5</b> : For each independent sta -value as ".25." <b>6</b> : Multiply the figure in colur point. This is the station's D	number of hou ation given in sp total number of n 2 by the figur I point. This is tion, give the "figur nn 4 by the figur	urs your cable syste pace J. Calculate on of hours that the stat re in column 3, and the "basis of carriag type-value" as "1.0." ure in column 5, and	m carried the stat hly one DSE for ea ion broadcast ove give the result in o e value" for the st For each network I give the result in	on during the accounting ach station. er the air during the account decimals in column 4. Th ation. k or noncommercial educ	unting period. is figure must cational station, ess than the			
Capacity	CATEGORY LAC STATIONS: COMPUTATION OF DSES									
	1. CALL SIGN	2. NUMBER OF HOUR CARRIED SYSTEM	S BY	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	E VALUE	6. DS	E		
			÷ ÷			x x	=			
			÷		=	x				
			÷ 1		-	<u>x</u>	=			
			÷			x x				
						x				
			-			×	-			
	Add the DSEs	s OF CATEGORY LAC STA of each station. um here and in line 2 of part		dule,	Þ	0.00				
<b>4</b> Computation of DSEs for Substitute- Basis Stations	Was carried tions in effections in effections in effections in effections and cast of space 1). Column 2: at your option. Column 3: Column 4:	ve the call sign of each station d by your system in substitu- ect on October 19, 1976 (as one or more live, nonnetwork For each station give the nu This figure should correspon Enter the number of days in Divide the figure in column This is the station's DSE (F	tion for a progr shown by the programs durin umber of live, n ond with the inf the calendar y 2 by the figure	am that your systen letter "P" in column ng that optional carr connetwork program formation in space I. year: 365, except in in column 3, and gi	n was permitted to 7 of space I); and iage (as shown by the s carried in substication a leap year. we the result in co	o delete under FCC rules the word "Yes" in column 2 itution for programs that v lumn 4. Round to no less	of were deleted	m).		
		SUBS	STITUTE-BA	ASIS STATION	S: COMPUTA	TION OF DSEs				
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE		
		÷				÷ 		=		
				=		÷		=		
		÷		=		÷		=		
		÷		=		÷ ÷		=		
	Add the DSEs	s OF SUBSTITUTE-BASIS of each station. um here and in line 3 of part		dule,		0.00				
5		ER OF DSEs: Give the amound is applicable to your system.	nts from the bo	xes in parts 2, 3, and	4 of this schedule	and add them to provide	the tota			
Total Number	1. Number o	of DSEs from part 2●			•	·	0.00			
of DSEs	2. Number o	of DSEs from part 3●			•	·	0.00			
	3. Number o	of DSEs from part 4 ●			▶		0.00			
	TOTAL NUMBE	ER OF DSEs				<b>&gt;</b>		0.00		

SYSTEM ID#

63028

LEGAL NAME OF (	OWNER OF CABLE	SYSTEM:					S	YSTEM ID#			
Wisconsin Be	ll, Inc.							63028	Name		
Instructions: Blo In block A:	ck A must be com	pleted.							•		
<ul> <li>If your answer if schedule.</li> </ul>	"Yes," leave the re	emainder of p	part 6 and part	7 of the DSE sche	edule blank a	nd complete pa	art 8, (page 16) of	the	6		
If your answer if "No," complete blocks B and C below.											
BLOCK A: TELEVISION MARKETS											
Is the cable system located wholly outside of all major and smaller markets as defined under section 76.5 of FCC rules and regulations in effect on June 24, 1981? Yes—Complete part 8 of the schedule—DO NOT COMPLETE THE REMAINDER OF PART 6 AND 7											
X       No—Complete blocks B and C below.											
BLOCK B: CARRIAGE OF PERMITTED DSEs											
O alterna de											
Column 1: CALL SIGN	under FCC rules	and regulations of the second se	ons prior to Jui dule. (Note: Th	part 2, 3, and 4 of ne 25, 1981. For fu ne letter M below r Act of 2010.)	urther explana	ation of permit	ed stations, see t	he			
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carri 76.61(b)(c)] B Specialty stati	les and regu ed pursuant t on as defined	lations cited b o the FCC ma d in 76.5(kk) (7	sis on which you o elow pertain to tho rket quota rules [7 '6.59(d)(1), 76.61( 9(c), 76.61(d), 76.	ose in effect of 6.57, 76.59(b e)(1), 76.63(a	n June 24, 198 b), 76.61(b)(c), a) referring to 7	76.63(a) referring	y tc			
	D Grandfathered instructions for E Carried pursus *F A station pre	d station (76.6 or DSE sched ant to individu viously carrie JHF station w	65) (see parag ule). ual waiver of F ed on a part-tin ithin grade-B o	raph regarding su CC rules (76.7) ne or substitute ba contour, [76.59(d)(	bstitution of g	ine 25, 1981		(5)			
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on page	e 14 of			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE			
							+				
							<u> </u>				
							<b>-</b>				
								0.00			
		В	LOCK C: CO	MPUTATION OF	= 3.75 FEE						
Line 1: Enter the	e total number of	DSEs from	part 5 of this	schedule				-			
Line 2: Enter the	e sum of permitte	ed DSEs fror	n block B ab	ove				-			
Line 3: Subtract (If zero,	line 2 from line 1 leave lines 4–7 b					i rate.		0.00			
Line 4: Enter gro	oss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially		
Line 5: Multiply	line 4 by 0.0375	and enter su	ım here						permited/ partially		
Line 6: Enter tot	al number of DS	Es from line	3				x	-	nonpermitted carriage? If yes, see part		
									9 instructions.		
Line 7: Multiply	line 6 by line 5 a	nd enter her	e and on line	2, block 3, spac	e L (page 7)		<u> </u>	0.00			

DSE SCHEDULE. PAGE 13.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM: SYSTEM 63							63028	N a sea a	
		BLOCK		SION MARKET					
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation
									3.75 Fee
	••••								
	••••								
								••••••	
	•••								
	•••								
	•••								
					<b>.</b>				

								[	DSE SCHED	ULE. PAGE 14.
Norra	LEGAL NAME OF OWN	IER OF CABLE SYSTE	M:						SY	STEM ID#
Name	Wisconsin Bell	, Inc.								63028
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the of Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the Fo A—Part-time sp 76.59( B—Late-night pr 76.61( S—Substitute ca genera Column 5: Indicate Column 5: Indicate Column 6: Comparo in block	must complete this w or to June 25, 1981, u call sign for each dist the DSE for this stati the accounting perior the basis of carriage CC rules and regulati ecialty programming: (d)(1),76.61(e)(1), or rogramming: Carriage (a)(3)). arriage under certain al instructions in the p the station's DSE for e the DSE figures list B, column 3 of part 6 information you give nt on fle in the Licens	nder former ant station ic on for a sing d and year ii on which th ons cited be Carriage, o 76.63 (refer e under FCC FCC rules, i paper SA3 for the current de in column 5 for this station	FCC rules gov dentifed by the gle accounting p n which the car e station was c elow pertain to t n a part-time bar ring to 76.61(e) C rules, sections regulations, or a form. accounting per ns 2 and 5 and tion. 2, 3, and 4 mus	vernii lette perio riage arrie hose asis, (1)). s 76. autho iod a list t	ng part-time and sub- r "F" in column 2 of p bd, occurring betweer e and DSE occurred ( d by listing one of the e in effect on June 24 of specialty program .59(d)(3), 76.61(e)(3) orizations. For further as computed in parts the smaller of the two	stitute carri art 6 of the a January 1 (e.g., 1981, e following , 1981. ming unde , or 76.63 ( r explanatio 2, 3, and 4 figures he	age. DSE schedule 1978 and Jun (1) letters r FCC rules, se referring tc on, see page (v of this schedu re. This figure	ections (i) of the should be	1 entered
						ON A PART-TIME AN				
	1. CALL	2. PRIOR			ר ה	4. BASIS OF		RESENT	6 PFF	RMITTED
	SIGN	DSE				4. BASIS OF CARRIAGE		DSE		DSE
		201				0/11/11/02			-	
			T							
7 Computation of the Syndicated	Instructions: Block A must be completed. In block A: If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. BLOCK A: MAJOR TELEVISION MARKET									
Exclusivity			DLOOI		1		_ 1			
Surcharge	<ul> <li>Is any portion of the of</li> </ul>	cable system within a t	op 100 majo	or television mar	ket a	s defned by section 7	6.5 of FCC	rules in effect J	une 24, 19	81?
-	X Yes—Complete	-	. ,			No—Proceed to				
	BLOCK B: Ca	arriage of VHF/Grade	B Contour	Stations	BLOCK C: Computation of Exempt DSEs					
	Is any station listed in commercial VHF stati or in part, over the ca	Was any station listed in block B of part 7 carried in any commu- nity served by the cable system prior to March 31, 1972? (refe to former FCC rule 76.159)				(refe				
	X No—Enter zero a	tation below with its app and proceed to part 8.	propriate per			Yes—List each station below with its appropriate permitted DSE <ul> <li>No—Enter zero and proceed to part 8.</li> </ul>				
	CALL SIGN	DSE CA	LL SIGN	DSE		CALL SIGN	DSE	CALL SIG	N	DSE
	UALL DIGIN			DOL		UALL DIGIN	DOL	OALL OIC		DOL
		<mark></mark>								
		TO	TAL DSEs	0.00				TOTAL DS	Es	0.00
	1									

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: SY Wisconsin Bell, Inc.	STEM ID# 63028	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section	Enter the amount of gross receipts from space K (page 7)	83,370.24	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?     Yes—Complete part 9 of this schedule.     X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	Yes—Complete part 9 of this schedule.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)		
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

	-	DSE SCHE	DULE. PAGE 16.							
Name		ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#							
		Wisconsin Bell, Inc.	63028							
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.								
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)								
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1)								
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here								
		D. Enter 0.00089 of gross receipts (the amount in section 1)								
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here								
		F. Multiply line D by line E and enter here								
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge.								
8	You m 6 was • In blo	ctions: iust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of p checked "Yes," use the total number of DSEs from part 5. bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	part							
Computation of	-	ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B be	elow							
Base Rate Fee	blank									
	were lo	is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "lo e area," see page (v) of the general instructions.								
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS									
	DID your cable system retransmit the signals of any partially distant television stations during the accounting period?									
	Yes—Complete part 9 of this schedule.       X									
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE								
	Section 1	Enter the amount of gross receipts from space K (page 7)	.24							
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	0.00							
	о <i>г</i>									
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.								
		A. Enter 0.01064 of gross receipts (the amount in section 1)	<u>-</u>							
		B. Enter 0.00701 of gross receipts (the amount in section 1)▶ \$ 23,016.43								
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here								
		D. Multiply line B by line C and enter here								
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)								
		Base Rate Fee	<u></u> .							

#### DSE SCHEDULE. PAGE 17.

LEGAL N	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
Wisco	onsin Bell, Inc.	63028	Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4	A. Enter 0.01064 of gross receipts (the amount in section 1)►\$		8
	B. Enter 0.00701 of gross receipts (the amount in section 1) ▶		Computation of
	C. Multiply line B by 3.000 and enter here	_	Base Rate Fee
	D. Enter 0.00330 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here►		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee ►	0.00	
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcas be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel		9
In Gen receipt	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, s from subscribers located within the station's local service area, from your system's total gross receipts. To take ad on, you must:		Computation of Base Rate Fee
station DSEs a	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine th and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for e : Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	he number of	and Syndicated Exclusivity Surcharge for
also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in particular a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B belocable system is wholly located outside all major television markets, complete block A only.		Partially Distant Stations, and
Step 1	Identify a Subscriber Group for Partially Distant Stations For each community served, determine the local service area of each wholly distant and each partially distant static to that community.	אס you	for Partially Permitted Stations
outside	: For each wholly distant and each partially distant station you carried, determine which of your subscribers were loc the station's local service area. A subscriber located outside the local service area of a station is distant to that stat ne token, the station is distant to the subscriber.)		
subscri	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. E ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note tha will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Compu groups	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your syste	m's subscriber	
<ul><li>Identi</li><li>Give f</li></ul>	i section: fy the communities/areas represented by each subscriber group. the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all o bers in the group.	of the	
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in of this schedule; or,	parts 2, 3,	
2) any	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in blo 6 of this schedule.	ock B,	
• Add tl	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in a paper SA3 form.	structions	
page. DSEs f	bute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the p In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need calculations on the form.	t is, the total	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYS	STEM IC
	Wisconsin Bell, Inc.	6302
	Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals	
	Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and	
	partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant.	
	Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant	
	signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by	
	.0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported	
	for each part 9 used in steps 1 and 2 must equal the amount reported in space K. <b>Step 3:</b> Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant	
	signals from step 1 that is subject to this surcharge.	
	Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from	
	a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate	
	and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream.	
	You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement	
	entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary	
	transmitter or an association representing the primary transmitter.	

LEGAL NAME OF OWNE Wisconsin Bell, In		E SYSTEM:				SY	STEM ID# 63028	Name
Bl				TE FEES FOR EACH				
COMMUNITY/ AREA	FIRST	SUBSCRIBER GROU	р О	COMMUNITY/ AREA	SECOND	SUBSCRIBER GROUI	<u> </u>	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
				-		+		and
								Syndicated
								Exclusivity Surcharge
		-						for
								Partially
						+		Distant Stations
						+		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$ 3,283,	370.24	Gross Receipts Secon	id Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU			FOURTH	SUBSCRIBER GROUP	-	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
				-				
						+		
					<b>_</b>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th	e base rat	e fees for each subscr	iber group	as shown in the boxes a	bove.		]	
Enter here and in block			5 10		-	\$	0.00	

FORM SA3E. F	PAGE	19
--------------	------	----

LEGAL NAME OF OWN Wisconsin Bell, II		LE SYSTEM:				S	YSTEM ID# 63028	Name
В				TE FEES FOR EACH				
COMMUNITY/ AREA	FIFTH	SUBSCRIBER GRO	0UP 0	COMMUNITY/ AREA	SIXTH	SUBSCRIBER GROU	JP 0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
	•••					+		Syndicated
								Exclusivity
								Surcharge for
	···							Partially
								Distant
	<mark></mark>							Stations
	···							
	•••							
Total DSEs		····	0.00	Total DSEs	ļ	···	0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Secor	d Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Secor	d Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO			EIGHTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···					+		
					<b>.</b>			
	··· <mark>···</mark> ·····							
			<mark></mark>			+		
						<u>  </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add t	he <b>base ra</b>	te fees for each subs	scriber group	as shown in the boxes	above.			
Enter here and in bloc						\$		

LEGAL NAME OF OWN Wisconsin Bell, I		LE STOTEM.					63028	Name
E				TE FEES FOR EAG				
	FIRST	SUBSCRIBER GRO		SECOND SUBSCRIBER GROUP				9
COMMUNITY/ AREA 0			0	COMMUNITY/ ARE	A		0	Computatior
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
[	<mark>.</mark>							Syndicated Exclusivity
						•••		Surcharge
								for
								Partially
			<mark></mark>					Distant Stations
	···		<mark></mark>					Stations
			<mark></mark>					
	<mark>.</mark>				·····			
Total DSEs	_	11	0.00	Total DSEs			0.00	
	2	<u> </u>				<u></u>		
Gross Receipts First (	Fond	\$ 3,28	3,370.24	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	OUP		FOURTI	H SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		•	<mark></mark>		····			
	···		···					
	··· ····		<mark></mark>					
			<mark></mark>		····		····	
			<mark></mark>					
		+	<mark></mark>					
				]				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc	he <b>base ra</b> k 3, line 1,	te fees for each subs space L (page 7)	scriber group	as shown in the boxe	es above.	\$	0.00	

LEGAL NAME OF OWNE Wisconsin Bell, In		LE SYSTEM:				S	YSTEM ID# 63028	Name
BL	OCK A: (	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
FIFTH SUBSCRIBER GROUP				SIXTH SUBSCRIBER GROUP				•
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA 0			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	DOL	UALL DION	DOL		DOL		DOL	Base Rate Fee
						++		and
				•		•	····	Syndicated
				•	••••	•	····	Exclusivity
					····	++		Surcharge
					••••	+	····	for
					•••• <mark>••••</mark> ••••••	++	····	
					•••• <mark>•</mark> ••••••	+	····	Partially Distant
				•		+	····	
				•		++	····	Stations
				•		++	····	
							<mark></mark>	
							<mark></mark>	
							<mark></mark>	
							····•	
Total DSEs			0.00	Total DSEs			0.00	
Cross Descints First C		¢	0.00	Cross Dessints Sag	and Crown	¢	0.00	
Gross Receipts First G	oup	<u>\$</u>	0.00	Gross Receipts Second Group		<u>\$ 0.00</u>		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
9	SEVENTH	SUBSCRIBER GROU	JP		EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	\ 		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							<mark></mark>	
				-			<mark></mark>	
							····•	
							····	
							<mark></mark>	
							<mark></mark>	
							<mark></mark>	
							<mark></mark>	
Total DSEs 0.0		0.00	Total DSEs			0.00		
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group \$ 0.00			0.00	
Base Rate Fee Third Group		\$	0.00	Base Rate Fee Fourth Group		\$ 0.00		
				Ш				
Base Rate Fee: Add th			riber group	as shown in the boxes	above.			
Enter here and in block	3, line 1, s	space L (page 7)				\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Wisconsin Bell, Inc.	SYSTEM ID# 63028							
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP								
9	If your cable system is located within a top 100 television market and th Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981:	e station is not exempt in Part 7, you mustalso compute a							
Computation of	_	Second 50 major television market							
Base Rate Fee and	<b>INSTRUCTIONS:</b> <b>Step 1:</b> In line 1 give the total DSEs by subscriber group for commerce	ial VHE Grade B contour stations listed in block A part 9 of							
Syndicated Exclusivity Surcharge for	<ul> <li>Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> </ul>								
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.								
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP							
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs							
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs							
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation							
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group							
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP							
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs							
	Line 2: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 2: Eiller the Exempt DOES Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation							
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group							
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ea in the boxes above. Enter here and in block 4, line 2 of space L (page 7	ch subscriber group as shown )							

News	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#								
Name	Wisconsin Bell, Inc.	63028								
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP									
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:									
Computation of	First 50 major television market  Second 50 major television market									
Base Rate Fee	INSTRUCTIONS:									
and Syndicated Exclusivity	<ul> <li>Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as</li> </ul>									
Surcharge for	Exempt DSEs in block C, part 7 of this schedule. If none enter zero. <b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.									
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.									
	FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER	GROUP								
	Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs									
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computationLine 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation									
	SYNDICATED EXCLUSIVITY         SURCHARGE         First Group         \$	\$								
	SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER	EIGHTH SUBSCRIBER GROUP								
	Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs									
	Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs									
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computationLine 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	_								
	SYNDICATED EXCLUSIVITY SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE	\$								
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)									