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	2018/1				
B Owner	Instructions: Give the full legal name of the owner of the cable system rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner of If there were different owners during the accounting per a single statement of account and royalty fee payment cover Check here if this is the system's first filing. If not, er	conducts the business of the cable system rriod, only the owner on the last day of the ering the entire accounting period.	accounting period should s		374(
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CA	BLE SYSTEM			
	WAVE DIVISION HOLDINGS LLC				
				3740	620181
				3746	2018/1
	401 KIRKLAND PARKPLACE SUITE50 KIRKLAND WA 98033	0			
С	INSTRUCTIONS: In line 1, give any business or trad names already appear in space B. In line 2, give the	3			
System	IDENTIFICATION OF CABLE SYSTEM:			·	
	1 WAVE BROADBAND				
	AAILING ADDRESS OF CABLE SYSTEM: 401 KIRKLAND PARKPLACE SUITE 5((Number, street, rural route, apartment, or suite number) KIRKLAND WA 98033 (City, town, state, zip code)	20			
D	Instructions: For complete space D instructions, see	e page 1b. Identify only the frst comm	unity served below and	relist on pac	ue 1b
Area	with all communities.	, , , , , , , , , , , , , , , , , , ,	- ,		,
Served	CITY OR TOWN	STATE			-
First	PORT TOWNSEND	WA			
Community	Below is a sample for reporting communities if you	report multiple channel line-ups in Sp	bace G.		-
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB	GRP#
Sample	Alda	MD	A		1
	Alliance Gering	MD MD	B		2 3
	Gening	MD	D		3
•	e: Section 111 of title 17 of the United States Code authorizes the Co beess your statement of account. PII is any personal information that		•		
	ding PII, you are agreeing to the routine use of it to establish and mai				
	pared for the public. The effect of not providing the PII requested is the of statements of account, and it may affect the legal suffciency of the		•	tne	

FOR COPYRIGHT OFFICE USE ONLY

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AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

08/29/2018

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#					
WAVE DIVISION HOLDINGS LLC			3746					
Instructions: 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.								
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.								
If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).								
When reporting the carriage of television broadcast stations on a community-by-comm channel line-up designated by an alpha-letter(s) (based on your Space G reporting) ar (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns	d a subscriber gro							
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	1				
PORT TOWNSEND	WA	A		First				
JEFFERSON COUNTY PORT LUDLOW	WA	A A		Community				
	WA	A						
				See instructions for				
				additional information				
				on alphabetization.				
				Add rows as necessary.				

Name	LEGAL NAME OF OWNER OF CABL	E SYSTEM:						S	YSTEM ID		
Name	WAVE DIVISION HOLDI	NGS LLC							374		
-	SECONDARY TRANSMISSION	SERVICE: SU	JBSCRI	BERS AND R	ATES						
E	In General: The information in s			-		•					
	system, that is, the retransmission										
Secondary	about other services (including p						hose existi	ng on the			
Transmission Service: Sub-	last day of the accounting period						olo evetom	broken			
scribers and	Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in										
Rates	down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged										
	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	-	-	-			-				
	unit in which it is generally billed.				iny standa	rd rate variation	s within a p	articular rate			
	category, but do not include disc										
	Block 1: In the left-hand block			-							
	systems most commonly provide that applies to your system. Note										
	categories, that person or entity			-		-					
	subscriber who pays extra for ca						•				
	first set" and would be counted o	nce again und	er "Serv	vice to addition	al set(s)."						
	Block 2: If your cable system h	-		•							
	printed in block 1 (for example, ti										
	with the number of subscribers a	nd rates, in the	e right-h	and block. A ty	vo- or thre	e-word descript	on of the s	ervice is			
	sufficient. BLOCK 1						BLOC	K 2			
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	NO. OF			NO. OF SUBSCRIBERS	RATE		
	Residential:	SUBSCILLE	LKO	INAIL	U CAI			SOBSCRIBERS	IVAIL		
	Service to first set		3,922	\$ 25.95							
	Service to additional set(s)		0,022	¥ 20.00							
	• FM radio (if separate rate)										
	Motel, hotel		172	\$ 25.95							
	Commercial			¥ _0.00							
	Converter										
	Residential										
	Non-residential										
									1		
	SERVICES OTHER THAN SEC										
F	In General: Space F calls for rat	•	,		•						
•	not covered in space E, that is, the service for a single fee. There are										
Services	furnished at cost or (2) services of	•	•		-		,				
Other Than	amount of the charge and the un										
Secondary	enter only the letters "PP" in the		, ,	,		3		- 3 ,			
ransmissions:	Block 1: Give the standard rate										
Rates	Block 2: List any services that				-						
	listed in block 1 and for which a s brief (two- or three-word) descrip				shed. List	these other serv	lices in the	form of a			
	CATEGORY OF SERVICE	BLO RATE	-	GORY OF SER	VICE	RATE	CATEGO	BLOCK 2 RY OF SERVICE	RATE		
	Continuing Services:		-	ation: Non-res	-		0,11200				
	• Pay cable	\$ 17.00		tel, hotel							
	Pay cable—add'l channel			mmercial							
	Fire protection			y cable							
	•Burglar protection			y cable-add'l cl	nannel						
	Installation: Residential			e protection							
	• First set	\$ 29.99	• Bu	rglar protection							
	 Additional set(s) 	\$ 14.99	Other	services:							
	• FM radio (if separate rate)		•Re	connect		\$ 29.95					
	• Converter		• Dis	connect							
			• Ou	tlet relocation							
	1	1	1				·		1		
			• Mo	ve to new add	ress						

FORM SA3E. PAGE 3.	ER OF CABLE SY	STEM:			SYSTEM ID#		
WAVE DIVISION	N HOLDING	S LLC			3746	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	DN					
 In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 77.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4)]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis as explained in the next paragraph. Do not list the station here in space G—but do list in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. Is the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as: VETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational mutticast). "F" (for network), "N-M" (for network multicast),							
carried the distant static For the retransmissi of a written agreement the cable system and a tion "E" (exempt). For s explanation of these the Column 6: Give the FCC. For Mexican or C	on on a part-tir on of a distant entered into on primary trans- simulcasts, also ree categories location of ea canadian statio	me basis beca multicast stre n or before Ju mitter or an as o enter "E". If , see page (v) ch station. Fo ns, if any, give	eam that is not s ne 30, 2009, be ssociation repre you carried the of the general i r U.S. stations, e the name of th	ubject to a royalty tween a cable systemating the prima channel on any of nstructions locate list the community the community with	capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. y to which the station is licensed by the which the station is identifed.		
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LEGAL NAME OF OWNER OF CABLE SYSTEM:

carried by your cable sys FCC rules and regulatior 76.59(d)(2) and (4), 76.6 substitute program basis Substitute Basis Sta basis under specifc FCC • Do not list the station h	S: TELEVISIO	S LLC								
In General: In space G, carried by your cable sys FCC rules and regulation 76.59(d)(2) and (4), 76.6 substitute program basis Substitute Basis Sta basis under specifc FCC • Do not list the station h					3746	Name				
carried by your cable sys FCC rules and regulatior 76.59(d)(2) and (4), 76.6 substitute program basis Substitute Basis Sta basis under specifc FCC • Do not list the station h	identify over	N								
 76.59(d)(2) and (4), 76.6 substitute program basis Substitute Basis Stat basis under specifc FCC Do not list the station here 	stem during th	ne accounting	period, except	(1) stations carrie	and low power television stations) d only on a part-time basis under	G				
Substitute Basis Sta basis under specifc FCC • Do not list the station h	61(e)(2) and (4	4), or 76.63 (r	eferring to 76.6	•	and (2) certain stations carried on a	Primary Transmitters:				
basis under specifc FCC • Do not list the station h	substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program									
	basis under specifc FCC rules, regulations, or authorizations:									
	 Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. 									
basis. For further info	nd also in spa ormation conce	ce I, if the sta			ute basis and also on some other f the general instructions located					
in the paper SA3 form Column 1: List each		sign. Do not r	eport origination	program service	s such as HBO, ESPN, etc. Identify					
			•	•	tion. For example, report multi- n stream separately; for example					
WETA-simulcast).	. Simulcast s	streams must	be reported in c		r stream separately, for example					
			Ũ		on for broadcasting over-the-air in may be different from the channel					
on which your cable syst		,	anner 4 m vvasn	ngion, D.C. This	may be different from the channel					
					ependent station, or a noncommercial					
	•	•			ast), "I" (for independent), "I-M" mmercial educational multicast).					
For the meaning of these			-							
planation of local service			-		es". If not, enter "No". For an ex-					
•			•	-	stating the basis on which your					
cable system carried the carried the distant statior		•	• ·		tering "LAC" if your cable system capacity.					
					payment because it is the subject					
-				•	stem or an association representing ry transmitter, enter the designa-					
			•		her basis, enter "O." For a further					
explanation of these thre Column 6: Give the lo					to which the station is licensed by the					
FCC. For Mexican or Ca	inadian statioi	ns, if any, give	e the name of th	e community with	which the station is identifed.					
Note: If you are utilizing	multiple chan	nel line-ups,	use a separate s	space G for each	channel line-up.					
		CHANN	EL LINE-UP	AB						
-		3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION					
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)						
	20	N	No	(II Distant)						
DIDVV - IBIN	_0 22	N	No		SFATTLE WA	-				
KTBW - TBN			110		SEATTLE, WA					
KZJO - JOEtv	22.3	N	No		SEATTLE, WA	- - -				
KZJO - JOEtv KZJODT3 - Anten	22.3	N	No	0	SEATTLE, WA SEATTLE, WA					
KZJO - JOEtv KZJODT3 - Anten KBTC - PBS	27	E	Yes	0	SEATTLE, WA SEATTLE, WA TACOMA, WA	- - -				
KZJO - JOEtv KZJODT3 - Anten KBTC - PBS KWPX - ION	27 33	E N	Yes No	0	SEATTLE, WA SEATTLE, WA TACOMA, WA BELLEVUE, WA					
KZJO - JOEtv KZJODT3 - Anten KBTC - PBS KWPX - ION KFFV - MeTV	27 33 44	E N N	Yes No No	0	SEATTLE, WA SEATTLE, WA TACOMA, WA BELLEVUE, WA SEATTLE, WA	- - - - -				
KZJO - JOEtv KZJODT3 - Anten KBTC - PBS KWPX - ION	27 33	E N	Yes No	0	SEATTLE, WA SEATTLE, WA TACOMA, WA BELLEVUE, WA	- - - - - -				
KZJO - JOEtv KZJODT3 - Anten KBTC - PBS KWPX - ION KFFV - MeTV	27 33 44	E N N	Yes No No	0	SEATTLE, WA SEATTLE, WA TACOMA, WA BELLEVUE, WA SEATTLE, WA	· · · · · · · · · · · · · · · · · · ·				
KZJO - JOEtv KZJODT3 - Anten KBTC - PBS KWPX - ION KFFV - MeTV	27 33 44	E N N	Yes No No	0	SEATTLE, WA SEATTLE, WA TACOMA, WA BELLEVUE, WA SEATTLE, WA	· · · · · · · · · · · · · · · · · · ·				
KZJO - JOEtv KZJODT3 - Anten KBTC - PBS KWPX - ION KFFV - MeTV	27 33 44	E N N	Yes No No	0	SEATTLE, WA SEATTLE, WA TACOMA, WA BELLEVUE, WA SEATTLE, WA					
KZJO - JOEtv KZJODT3 - Anten KBTC - PBS KWPX - ION KFFV - MeTV	27 33 44	E N N	Yes No No	0	SEATTLE, WA SEATTLE, WA TACOMA, WA BELLEVUE, WA SEATTLE, WA					
KZJO - JOEtv KZJODT3 - Anten KBTC - PBS KWPX - ION KFFV - MeTV	27 33 44	E N N	Yes No No	0	SEATTLE, WA SEATTLE, WA TACOMA, WA BELLEVUE, WA SEATTLE, WA					
KZJO - JOEtv KZJODT3 - Anten KBTC - PBS KWPX - ION KFFV - MeTV	27 33 44	E N N	Yes No No	0	SEATTLE, WA SEATTLE, WA TACOMA, WA BELLEVUE, WA SEATTLE, WA					
KZJO - JOEtv KZJODT3 - Anten KBTC - PBS KWPX - ION KFFV - MeTV	27 33 44	E N N	Yes No No	0	SEATTLE, WA SEATTLE, WA TACOMA, WA BELLEVUE, WA SEATTLE, WA					
KZJO - JOEtv KZJODT3 - Anten KBTC - PBS KWPX - ION KFFV - MeTV	27 33 44	E N N	Yes No No	0	SEATTLE, WA SEATTLE, WA TACOMA, WA BELLEVUE, WA SEATTLE, WA					
KZJO - JOEtv KZJODT3 - Anten KBTC - PBS KWPX - ION KFFV - MeTV	27 33 44	E N N	Yes No No	0	SEATTLE, WA SEATTLE, WA TACOMA, WA BELLEVUE, WA SEATTLE, WA					
KZJO - JOEtv KZJODT3 - Anten KBTC - PBS KWPX - ION KFFV - MeTV	27 33 44	E N N	Yes No No	0	SEATTLE, WA SEATTLE, WA TACOMA, WA BELLEVUE, WA SEATTLE, WA					

Name	UEGAL NAME OF O							SYSTEM ID 374
H Primary	all-band basis v	t every radio s whose signals	station ca were "ge	arried on a separate and disc enerally receivable" by your c II-Band FM Carriage: Under	able system duri	ng the accou	nting pe	riod.
ransmitters: Radio	receivable if (1) on the basis of For detailed infi located in the p Column 1: lo Column 2: S Column 3: li) it is carried b monitoring, to ormation abou paper SA3 form dentify the call State whether f the radio stat	y the sys be rece ut the the n. I sign of the static tion's sig	stem whenever it is received a ived at the headend, with the copyright Office regulations each station carried. on is AM or FM. nal was electronically proces k mark in the "S/D" column.	at the system's h system's FM an on this point, se	eadend, and tenna, during e page (vi) of	(2) it can certain the gen	n be expected, stated intervals. eral instructions
				ion (the community to which t the community with which th			CC or, ii	n the case of
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
			·					

FORM SA3E. PAGE 5.			ACCOUNTING	PERIOD: 2018/1				
LEGAL NAME OF OWNER OF CABLE SYS WAVE DIVISION HOLDINGS LL			SYSTEM ID# 3746	Name				
substitute basis during the accounting p explanation of the programming that mu	nnetwork television program broadc eriod, under specific present and for	st by a distant station that your cable syster ner FCC rules, regulations, or authorizations	. For a further	Substitute				
explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 4: Give the broadcast station's location (the community to which the station is identified). Column 5: Give the call sign of the station broadcasting the substitute program. Use numerals, with the month first. Example: for May 7 give "57." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to								
0.11/50	E PROGRAM	WHEN SUBSTITUTE CARRIAGE OCCURRED 5. MONTH 6. TIMES	7. REASON FOR DELETION					
1. TITLE OF PROGRAM 2. LIVE? Yes or No	CALL SIGN 4. STATION'S LOCA	ION AND DAY FROM TO Image: And Day FROM Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Day Image: And Da						
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FORM	SA3E. PAGE 7.						
	L NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	Name		
WA	VE DIVISION HOLDINGS LLC			3746			
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.							
 Con Con If yo If yo accord 	ARIGHT ROYALTY FEE ctions : Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete 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 from 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 pro- pompanying this form and attach the schedule to your statement of account.	arts of the	DSE	Schedule	L Copyright Royalty Fee		
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b k 3 below.	e entered	on line	e 1 of			
	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low.	entered or	n line 2	2 in block			
lf pa	rrt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be en	tered o	on line			
Block 1	MINIMUM FEE: 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 Line 2. Multiply the amount in line 1 by 0.01064	\$	1	631,062.00			
	Enter the result here.	\$		6,714.50			
	This is your minimum fee.	φ		0,714.50			
Block 2 Block 3	 DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colum "Yes" in this block. Did your cable system carry any distant television stations during the accounting peri X Yes—Complete the DSE schedule. No—Leave block 3 below blank and c Line 1. BASE RATE FEE: 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 	nn 4, you od?	must c	lock 4. 7,569.88			
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE			0.00			
	schedule. If none, enter zero						
	Line 3. Add lines 1 and 2 and enter here	\$		7,569.88			
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	_\$;	7,569.88	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 zoro	r		0.00	submitting additional		
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)			0.00	deposits under Section 111(d)(7 should contact the Licensing		
	Line 4. FILING FEE	_\$;	725.00	additional fees Division for the appropriate		
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$		8,294.88	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 t	he			

ACCOUNTING PERIOD: 2018/1

ACCOUNTING PERI	DD: 2018/1	FORM SA3E. PAGE 8.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	WAVE DIVISION HOLDINGS LLC	3746
	CHANNELS	
Μ	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast s	tations
	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	
Channels		
	Enter the total number of channels on which the cable system carried television broadcast stations	25
	2. Enter the total number of activated channels	
	on which the cable system carried television broadcast stations	336
	and nonbroadcast services	000
Ν	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual	
Individual to	we can contact about this statement of account.)	
Be Contacted		
for Further	Name OXANA SOSKOVA Telephone	425-576-8200
Information		
	Address 401 KIRKLAND PARKPLACE SUITE 500	
	(Number, street, rural route, apartment, or suite number)	
	KIRKLAND WA 98033	
	(City, town, state, zip)	
	Email tax.dept@wavebroadband.com Fax (optional) 425-576-{	3221
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regul	ations)
0		
Certifcation	 I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) 	
oonthoution		
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space E	3; or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable s	system as identified
	in line 1 of space B and that the owner is not a corporation or partnership; or	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as own	er of the cable system
	in line 1 of space B.	
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained	1 herein
	are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	
	/s/ John Feehan	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in	the box and press the "F2"
	button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus comp	atibility settings.
	Typed or printed name: JOHN FEEHAN	
	Title: CFO	
	(Title of official position held in corporation or partnership)	
	Date: August 20, 2040	
	Date: August 28, 2018	
Deliver at 1 1 1 2		
	: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying informatio cess your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name	

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 telephoi 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 t completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of lay

FORM	SA3E.	PAGE9.

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	News
WAVE DIVISION HOLDINGS LLC	3746	Name
 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyrig lowing sentence:	e system for the basic stem shall not include sub- irsuant to section 119." neral instructions in the	P Special Statement Concerning Gross Receipts Exclusion
X NO		
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address		
You must complete this worksheet for those royalty payments submitted as a result of a late p For an explanation of interest assessment, see page (viii) of the general instructions in the pap		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	xdays	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,		
space L, (page 7)	(interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	further assistance please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late	9.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the please list below the owner, address, first community served, accounting period, and ID numb filing.		
Owner		
First community served		
Accounting period ID number		
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the person	ally identifying information (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 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 sufficiency of the filing, a determination that would be made by a court of law.

DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			S	STEM ID#
1	WAVE DIVISION HOLDI	NGS LLC				3746
	SUM OF DSEs OF CATEGOR	Y "O" STATIO	NS:			
	 Add the DSEs of each station 					
	Enter the sum here and in line	1 of part 5 of thi	is schedule.		1.25	
2	Instructions:					
	In the column headed "Call S	Sign": list the ca	all signs of all distant stations	identified by	the letter "O" in column 5	
Computation	of space G (page 3). In the column headed "DSE"	: for each indep	endent station, give the DSE	as "1.0": for	each network or noncom-	
of DSEs for	mercial educational station, giv			,,		
Category "O"			CATEGORY "O" STATION	S: DSEs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	CBUT - CBC	1.000				
	KBTC - PBS	0.250				
Add rows as						
necessary.						
Remember to copy all						
formula into new						
rows.						

DSE SCHEDULE. PAGE 12.

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM: SYSTEM ID					FEM ID#		
Name	WAVE DIVIS	ION HOLDINGS LLC						3746
3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 1: Lia Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form						
Capacity		0	ATEGORY	LAC STATIONS:	COMPUTATI	ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	JRS ED BY A	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	SE VALUE		
			÷ ÷		=	x x	=	
			÷		=	x	=	
			÷		=	x	=	
			÷		=	x x	=	
			÷		=	x	=	
			÷		=	x	=	
	Add the DSEs	OF CATEGORY LAC S of each station. Im here and in line 2 of p		nedule,		0.00]	
4 Computation of DSEs for Substitute- Basis Stations	Column 1: Giv • Was carried tions in effe • Broadcast c space I). Column 2: at your option. Column 3: Column 4:	 Instructions: Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station: Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulartions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I). Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I. Column 3: Enter the number of days in the calendar year: 365, except in a leap year. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form). 						
		SU	BSTITUTE-	BASIS STATION	S: COMPUTA	TION OF DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBE OF DAY IN YEAF	S	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER 4 OF DAYS IN YEAR	. DSE
				=		÷	=	
				=		•		
		÷		=		÷	=	
		+		=		÷	=	
	+ = + = SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS: Add the DSEs of each station. • • Add the DSEs of each station. • • • • Enter the sum here and in line 3 of part 5 of this schedule, • • • • •							
5		R OF DSEs: Give the am sapplicable to your system		poxes in parts 2, 3, and	4 of this schedule	e and add them to provide t	he total	
Total Number	1. Number o	f DSEs from part 2 ●				▶ <u></u>	1.25	
of DSEs		f DSEs from part 3 ●				•	0.00	
	3. Number o	f DSEs from part 4 ●				▶ <u></u>	0.00	
	TOTAL NUMBE	R OF DSEs						1.25

L

	WNER OF CABLE S						S	YSTEM ID#	
	ON HOLDINGS	LLC						3746	Name
Instructions: Bloc In block A: • If your answer if schedule.			art 6 and part 3	7 of the DSE sched	lule blank and	complete par	t 8, (page 16) of th	ie	6
If your answer if	"No," complete blo								Computation of
Is the cable system	n located wholly o			FELEVISION M		tion 76 5 of F	CC rules and requ	lations in	3.75 Fee
effect on June 24,	1981?			PLETE THE REMA					
X No—Comp	blete blocks B and	C below.							
		BLOC	CK B: CARR	RIAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN	under FCC rules	and regulation e DSE Scheor	ns prior to Jur Jule. (Note: Th	part 2, 3, and 4 of ne 25, 1981. For fun ne letter M below re Act of 2010.)	rther explanat	ion of permitte	d stations, see the	9	
Column 2: BASIS OF PERMITTED CARRIAGE	 (Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfathered instructions fo E Carried pursua *F A station previous 	les and regul ed pursuant to on as defined al educationa I station (76.6 r DSE sched ant to individu viously carrie IHF station w	ations cited be o the FCC ma I in 76.5(kk) (7 I station [76.55 5) (see parag ule). I al waiver of F d on a part-tim ithin grade-B o	ne or substitute bas contour, [76.59(d)(5	se in effect on 5.57, 76.59(b) e)(1), 76.63(a) 53(a) referring ostitution of gra sis prior to Jur	June 24, 198 , 76.61(b)(c), 7 referring to 76 to 76.61(d)] andfathered st	76.63(a) referring t 8.61(e)(1) ations in the		
Column 3:		e stations ider	ntified by the le	parts 2, 3, and 4 c etter "F" in column 2. PERMITTED			orksheet on page	r	
SIGN	BASIS		SIGN	BASIS		SIGN	BASIS		
CBUT - CB KBTC - PB		1.00 0.25							
								1.25	
		В	LOCK C: CC	MPUTATION OF	- 3.75 FEE				
Line 1: Enter the	total number of	DSEs from p	part 5 of this	schedule					
Line 2: Enter the									
				of DSEs subject 7 of this schedule		ate.			
Line 4: Enter gro	ss receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represent
Line 5: Multiply li	ine 4 by 0.0375 a	ind enter su	m here				x		partially permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	s from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 an	d enter here	and on line	2, block 3, space	L (page 7)			0.00	

DSE SCHEDULE. PAGE 13.

ACCOUNTING PERIOD: 2018/1

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#: WAVE DIVISION HOLDINGS LLC 3746								
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 gener Column 5: Indicate Column 6: Compare in block	 Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1), 76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. 							
		PERMITTED DSE	FOR STATIONS CARRI	ED ON A PART-TIME A	ND SUBSTITUTE BASIS				
	1. CALL SIGN	2. PRIOR DSE	3. ACCOUNTING PERIOD	4. BASIS OF CARRIAGE	5. PRESENT DSE	6. PERMITTED DSE			
	CIGIT	DOL	T EIGOD	O/ II (II/OE	DOL	DOL			
7 Computation of the	,	"Yes," complete block	s B and C, below. Ind C blank and complete	part 8 of the DSE sched	ule.				
Syndicated			BLOCK A: MAJOR	TELEVISION MARK	KET				
Exclusivity									
Surcharge		-	p 100 major television mar		6.5 of FCC rules in effect Ju	ine 24, 1981?			
	Yes—Complete	blocks B and C .		X No—Proceed t	o part 8				
	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 cal	block B of part 6 the p on that places a grade ble system? tation below with its appr	orimary stream of a B contour, in whole	Was any station liste nity served by the ca to former FCC rule 7 Yes—List each s	d in block B of part 7 carrie ble system prior to March 6.159) station below with its appropri	d in any commu- 31, 1972? (refer			
	X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8.								
	CALL SIGN	DSE CAL	L SIGN DSE	CALL SIGN	DSE CALL SI	GN DSE			
		 							
		тот	AL DSEs 0.00		TOTAL D	SEs 0.00			

DSE SCHEDULE. PAGE 14.

LEGAL NA	IME OF OWNER OF CABLE SYSTEM: WAVE DIVISION HOLDINGS LLC	SYSTEM ID# 3746	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	631,062.00	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	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.		
	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? X Yes—Complete part 9 of this schedule. 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.	E	
	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	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
τα	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		

ACCOUNTING PERIOD: 2018/1

Nome	LEGAL NAM	DSE SCHEDUI	LE. PAGE 16. (STEM ID#
Name	<u>'</u>	WAVE DIVISION HOLDINGS LLC	3746
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 Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)	L
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	<u></u>
	Instru	t ctions:	
8		sust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part	
		checked "Yes," use the total number of DSEs from part 5. pck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation		ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	
of Base Rate Fee	 If you blank 	ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below K.	
		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 "local e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	rour cable system retransmit the signals of any partially distant television stations during the accounting period?	
	L	Yes—Complete part 9 of this schedule. X No—Complete the following sections.	
	Section	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7)	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.). 1.25	5
	Section		
	3	If the figure in section 2 is 4.000 or less , 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)	
			-
		B. Enter 0.00701 of gross receipts (the amount in section 1)▶ \$ 4,423.74	
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here 0.25	
		D. Multiply line B by line C and enter here. 1,105.94	-
		E. Add lines A, and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7)	7,820.44
		Base Rate Fee	<u></u> . !

EGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	
WAV	E DIVISION HOLDINGS LLC 3746	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		8
	A. Enter 0.01064 of gross receipts (the amount in section 1) ►\$	-
	B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$	Computation of
		Base Rate Fee
	C. Multiply line B by 3.000 and enter here	
	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 broadcast signals	
	stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line- Space G.	9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of clusion, you must:	of
		Base Rate Fee and
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number o	Syndicated
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.	Exclusivity Surcharge
•	Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	for Partially
	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you so compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below.	Distant
Howev	er, if your cable system is wholly located outside all major television markets, complete block A only.	Stations, and for Partially
	Identify a Subscriber Group for Partially Distant Stations	Permitted
•	: For each community served, determine the local service area of each wholly distant and each partially distant station you to that community.	Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were located the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by 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. Each ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
	iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's ber groups.	
	section:	
Give	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 of the bers in the group.	
lf:		
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, of this schedule; or,	
	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, 6 of this schedule.	
•	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 instructions paper SA3 form.	
• Comp page. DSEs f	ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show tual calculations on the form.	

WAVE DIVISION								
		COMPUTATION O		TE FEES FOR EAC		BER GROUP		
COMMUNITY/ AREA		OWNSEND, JEF		COMMUNITY/ AREA				Ş
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Comp
(BTC - PBS	0.25	CALL SIGN	DSE	CBUT - CBC	1.00	CALL SIGN	DSE	Base R
CBUT - CBC	1.00							aı Synd Exclu
				· · · · · · · · · · · · · · · · · · ·		-		Surci fo
				• • • • • • • • • • • • • • • • • • •				Part Dis Stat
otal DSEs			1.25	Total DSEs			1.00	
Gross Receipts First C		s 48	8,094.00	Gross Receipts Seco	and Group	\$	142,968.00	
	JUUP	<u> </u>		Gloss Receipts Seco				
	·		6,048.70	Base Rate Fee Seco		\$	1,521.18	
ase Rate Fee First (Group		6,048.70	Base Rate Fee Seco	FOURTH		1,521.18	
Base Rate Fee First (Group	\$	6,048.70		FOURTH	\$	1,521.18	
ase Rate Fee First (Group	\$	6,048.70	Base Rate Fee Seco	FOURTH	\$	1,521.18	
COMMUNITY/ AREA	Group	SUBSCRIBER GROU	6,048.70	Base Rate Fee Seco	FOURTH	SUBSCRIBER GRC	1,521.18	
COMMUNITY/ AREA	Group	SUBSCRIBER GROU	6,048.70	Base Rate Fee Seco	FOURTH	SUBSCRIBER GRC	1,521.18	
Base Rate Fee First (Group	SUBSCRIBER GROU	6,048.70	Base Rate Fee Seco	FOURTH	SUBSCRIBER GRC	1,521.18	
Base Rate Fee First (Group	SUBSCRIBER GROU	6,048.70	Base Rate Fee Seco	FOURTH	SUBSCRIBER GRC	1,521.18	
Base Rate Fee First (Group	SUBSCRIBER GROU	6,048.70	Base Rate Fee Seco	FOURTH	SUBSCRIBER GRC	1,521.18	
Base Rate Fee First (Group	SUBSCRIBER GROU	6,048.70	Base Rate Fee Seco	FOURTH	SUBSCRIBER GRC	1,521.18	
Base Rate Fee First (Group	SUBSCRIBER GROU	6,048.70	Base Rate Fee Seco	FOURTH	SUBSCRIBER GRC	1,521.18	
Base Rate Fee First (Group	SUBSCRIBER GROU	6,048.70	Base Rate Fee Seco	FOURTH	SUBSCRIBER GRC	1,521.18	
Base Rate Fee First (Group	SUBSCRIBER GROU	6,048.70	Base Rate Fee Seco	FOURTH	SUBSCRIBER GRC	1,521.18	
Base Rate Fee First (Group	SUBSCRIBER GROU	6,048.70	Base Rate Fee Seco	FOURTH	SUBSCRIBER GRC	1,521.18	
Base Rate Fee First (Group	SUBSCRIBER GROU	6,048.70	Base Rate Fee Seco	FOURTH	SUBSCRIBER GRC	1,521.18	
Base Rate Fee First C COMMUNITY/ AREA CALL SIGN	Broup THIRD DSE	SUBSCRIBER GROU	6,048.70	Base Rate Fee Seco	POURTH	SUBSCRIBER GRC	1,521.18 DUP 0 DSE	

FORM SA3E. PAGE 19.

LEGAL NAME OF OWNE						S	YSTEM ID# 3746	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
		SUBSCRIBER GROU				SUBSCRIBER GROU	IP	9
COMMUNITY/ AREA	DMMUNITY/ AREA PORT		ERSON	COMMUNITY/ AREA	PORT L	UDLOW	J 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 G	roup	\$ 488	,094.00	Gross Receipts Second	d Group	<u>\$</u> 14	42,968.00	
Base Rate Fee First G	-	\$	0.00	Base Rate Fee Second		\$	0.00	
	THIRD	SUBSCRIBER GROU			FOURTH	SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		=						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
					2			
Base Rate Fee Third G	Foup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			iber group a	as shown in the boxes ab	oove.	\$	0.00	

ACCOUNTING PERIOD: 2018/1

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID						
Hume	WAVE DIVISION HOLDINGS LLC	374						
	BLOCK B: COMPUTATION OF SYNDICATED EXCL	USIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP						
9	If your cable system is located within a top 100 television market a Syndicated Exclusivity Surcharge. Indicate which major television by section 76.5 of FCC rules in effect on June 24, 1981:							
Computation								
of Base Rate Fee and	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							
Syndicated	ted this schedule.							
Exclusivity Surcharge	Step 2: In line 2, give the total number of DSEs by subscriber gro Exempt DSEs in block C, part 7 of this schedule. If none							
for	Step 3: In line 3, subtract line 2 from line 1. This is the total numb	per of DSEs used to compute the surcharge.						
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts your actual calculations on this form.	the formula outlined in block D, section 3 or 4 of part 7 of this s figures applicable to the particular group. You do not need to show						
	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	Line 3: Subtract line 2 from line 1						
	and enter here. This is the	and enter here. This is the						
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group						
	subject to the surcharge	subject to the surcharge						
	computation	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: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs						
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1						
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for						
	this subscriber group	this subscriber group						
	subject to the surcharge computation	subject to the surcharge						
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY						
	SURCHARGE	SURCHARGE						
	Third Group	Fourth Group						
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge f in the boxes above. Enter here and in block 4, line 2 of space L (page 1)							