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.

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

General instructions are located in the first tab of this workbook.

FOR COPYRIGHT OFFICE USE ONLY				
DATE RECEIVED	AMOUNT			
08/26/2019	\$ ALLOCATION NUMBER			

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	AC	COUNTING PERIOD COVERED BY THIS STATEMENT:							
Accounting Period		2019/1							
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the business of the cable system If there were different owners during the accounting period, only the owner on the last day of the accounting period should submi a single statement of account and royalty fee payment covering the entire accounting perioa Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.								
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM Volunteer Wireless, LLC								
					06241420191				
					062414 2019/1				
		P.O. Box 670 McMinnville, TN 37111							
С		STRUCTIONS: In line 1, give any business or trade names used to in the salready appear in space B. In line 2, give the mailing address of							
System	1	IDENTIFICATION OF CABLE SYSTEM:	Title System, if unit	erent from the address give	тт орасс В.				
		MAILING ADDRESS OF CABLE SYSTEM:							
	2	(Number, street, rural route, apartment, or suite number)							
		(City, town, state, zip code)							
D Area		tructions: For complete space D instructions, see page 1b. Identify	only the frst comr	nunity served below and rel	ist on page 1b				
Served	VVIC	CITY OR TOWN	STATE						
First		McMinnville	TN						
Community	В	elow is a sample for reporting communities if you report multiple cha	annel line-ups in S	pace G.					
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#				
Sample	Ald	a	MD	Α	1				
		ance	MD	В	2				
	Gei	ing	MD	В	3				

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally 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 suffciency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 062414 Volunteer Wireless, LLC Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D 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 Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served 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-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# McMinnville TN В First C **Altamont** ΤN 8 Community 5 **Beech Grove** TN В Beersheba Springs TΝ C 8 Bethany В 6 TΝ **Bon Air** В TΝ 4 See instructions for **Bone Cave** ΤN В additional information on alphabetization. Campaign TΝ В 1 Cassville TN В 4 Centertown В 1 ΤN C 2 Coalmont TΝ Add rows as necessary. Crossville Α 3 TΝ В Derossett TΝ 4 **Dibrell** ΤN В В **Doyle** ΤN 4 2 С TN Gruetli-Laager Hiawassee TN В Hillsboro ΤN В 5 Monteagle 9 TN Morrison ΤN В Quebeck ΤN В 4 C 2 Palmer TN C 8 Pelham TN 4 Ravenscroft TN В **Rock Island** TΝ В 1 В Smartt TΝ ΤN В 4 **Sparta Spencer** ΤN В **Tracy City** С 2 TN Viola TN В 6 Walling TN В 4

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

Volunteer Wireless, LLC

SYSTEM ID#

062414

Ε

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

Secondary Transmission Service: Subscribers and Rates **In General:** The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).

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 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 charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.

Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. **Note:** Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)."

Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BL	OCK 1	BLOCK 2				
	NO. OF			NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS		RATE
Residential:			Service to first set-Rate 2	2,097	\$	40.45
 Service to first set 	7,765	\$ 36.45	Service to first set-Rate 3	345	\$	38.45
 Service to additional set(s) 	3,214	\$ 4.95	Roku-1	184	\$	18.95
 FM radio (if separate rate) 			Roku-2	33	\$	23.95
Motel, hotel			HD & DVR Box	674	\$	4.95
Commercial			HD Box	1,179	\$	9.95
Converter			DVR/Whole Home DVR	1,009	\$	11.95
Residential			HD Box/Whole Home DVR	961	\$	14.95
Non-residential					Ī	
		 			•	

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.

Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.

Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.

BLOCK 1						
RATE	CATEGORY OF SERVICE	R	ATE	CATEGORY OF SERVICE	R	ATE
	Installation: Non-residential					
	Motel, hotel			Cinemax	\$	9.95
	Commercial			НВО	\$	17.95
	• Pay cable			HBO/Cinemax	\$	25.95
	Pay cable-add'l channel			HBO/Cinemax/Strz/Encr	\$	34.95
	Fire protection			Showtime/Cinemax/HBO	\$	37.95
	Burglar protection			Showtime/Flix/TMC	\$	13.95
	Other services:			Starz/Encore	\$	11.95
	Reconnect	\$	30.00	Starz/Encore/Showtime	\$	23.95
	Disconnect			HBO/Cmax/Showtime/		
	Outlet relocation	\$	70.00	Starz/Encore	\$	47.95
	Move to new address	\$	55.00	Variety Tier	\$	6.95
				Hispanic Tier	\$	4.95
		RATE CATEGORY OF SERVICE Installation: Non-residential • Motel, hotel • Commercial • Pay cable • Pay cable-add'l channel • Fire protection • Burglar protection Other services: • Reconnect • Disconnect • Outlet relocation	RATE CATEGORY OF SERVICE Installation: Non-residential • Motel, hotel • Commercial • Pay cable • Pay cable-add'l channel • Fire protection • Burglar protection Other services: • Reconnect • Disconnect • Outlet relocation	RATE CATEGORY OF SERVICE RATE Installation: Non-residential • Motel, hotel • Commercial • Pay cable • Pay cable-add'l channel • Fire protection • Burglar protection Other services: • Reconnect • Disconnect • Outlet relocation \$ 70.00	RATE CATEGORY OF SERVICE Installation: Non-residential • Motel, hotel • Commercial • Pay cable • Pay cable-add'l channel • Fire protection • Burglar protection Other services: • Reconnect • Disconnect • Outlet relocation • Move to new address RATE CATEGORY OF SERVICE RATE CATEGORY OF SERVICE Cinemax HBO/Cinemax/ HBO/Cinemax/Strz/Encr Showtime/Cinemax/HBO Starz/Encore Starz/Encore Starz/Encore Variety Tier	RATE CATEGORY OF SERVICE RATE CATEGORY OF SERVICE R Installation: Non-residential • Motel, hotel • Commercial • Pay cable • Pay cable-add'l channel • Fire protection • Burglar protection Other services: • Reconnect • Disconnect • Outlet relocation • Move to new address RATE CATEGORY OF SERVICE R Cinemax

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Volunteer Wireless, LLC 062414 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G 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), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television 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. List 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 "WETA-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 station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it 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, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP A-Crossville 1. CALL 2. B'CAST 3 TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF CARRIAGE (Yes or No) NUMBER STATION (If Distant) WATE-DT 26 N-M Knoxville, TN WATE-HD 26.1 Ν Knoxville, TN See instructions for additional information **WBIR-DT** 10 N-M Knoxville, TN on alphabetization. Ν **WBIR-HD** 10.1 Knoxville, TN **WBXX-DT** 20 I-M Crossville, TN **WBXX-HD** 20.1 Crossville, TN ı WCTE-DT 22 E-M Cookeville, TN WCTE-HD 22.1 Ε Cookeville, TN 17 WKOP-DT E-M Knoxville, TN **WKOP-HD** Ε 17.1 Knoxville, TN WTNZ-DT 34 I-M Knoxville, TN WTNZ-HD 34.1 Knoxville, TN ı WVLR-DT 48 ı Tazewell, TN **WVLT-DT** 30 N-M Knoxville, TN WVLT-HD 30.1 Ν Knoxville, TN WVLT-DT2 30.2 I-M Knoxville, TN

G

Primary

Transmitters:

Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Volunteer Wireless, LLC

SYSTEM ID#

Name

Name

PRIMARY TRANSMITTERS: TELEVISION

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), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on 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 specific 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
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe 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 "WETA-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 ir 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 noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast)
For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it 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, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP B-Coffee, Warren, White & VanBuren Counties							
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
WCTE-DT	22	E-M	Yes	0	Cookeville, TN		
WCTE-HD	22.1	Е	Yes	E	Cookeville, TN		
WKRN-DT	27	N-M			Nashville, TN		
WKRN-HD	27.1	N			Nashville, TN		
WNAB-DT	23	I-M			Nashville, TN		
WNAB-HD	23.1	I			Nashville, TN		
WNPT-DT	8	E-M	Yes	0	Nashville, TN		
WNPT-HD	8.1	Е	Yes	E	Nashville, TN		
WSMV-DT	10	N-M			Nashville, TN		
WSMV-HD	10.1	N			Nashville, TN		
WSMV-DT3	10.3	N-M			Nashville, TN		
WTVF-DT	5	N-M			Nashville, TN		
WTVF-HD	5.1	N			Nashville, TN		
WTVF-DT3	5.3	N-M			Nashville, TN		
WUXP-DT	21	I-M			Nashville, TN		
WUXP-HD	21.1	I			Nashville, TN		
WZTV-DT	15	I-M			Nashville, TN		
WZTV-HD	15.1	I			Nashville, TN		
WTVF-DT2	5.2	N-M			Nashville, TN		
WKRN-DT2	27.2	I-M			Nashville, TN		
WKRN-DT3	27.3	I-M			Nashville, TN		
WKRN-DT4	27.4	I-M			Nashville, TN		
WSMV-DT2	10.2	I-M			Nashville, TN		

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Volunteer Wireless, LLC 062414 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G 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), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television pasis 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. List 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 "WETA-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 station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it 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, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE UP C County & Marian Counties

		CHANN	EL LINE-UP	C-Grundy &	Marion Counties
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WCTE-DT**	22	E-M	Yes	0	Cookeville, TN
WCTE-HD**	22.1	E	Yes	E	Cookeville, TN
WNAB-DT***	23	I-M	Yes	0	Nashville, TN
WNAB-HD***	23.1	I	Yes	Е	Nashville, TN
WNPT-DT**	8	E-M	Yes	0	Nashville, TN
WNPT-HD**	8.1	Е	Yes	Е	Nashville, TN
WSMV-DT*	10	N-M	Yes	0	Nashville, TN
WSMV-HD*	10.1	N	Yes	Е	Nashville, TN
WSMV-DT3*	10.3	N-M	Yes	0	Nashville, TN
WTVF-DT*	5	N-M	Yes	0	Nashville, TN
WTVF-HD*	5.1	N	Yes	Е	Nashville, TN
WUXP-DT**	21	I-M	Yes	0	Nashville, TN
WUXP-HD**	21.1	I	Yes	E	Nashville, TN
WDEF-DT	12	N		······································	Chattanooga, TN
WDEF-HD	12.1	N			Chattanooga, TN
WDEF-DT2	12.2	N-M			Chattanooga, TN
WDEF-DT3	12.3	N-M			Chattanooga, TN
WDEF-DT4	12.4	I-M			Chattanooga, TN
WRCB	13	N			Chattanooga, TN
WRCB-HD	13.1	N			Chattanooga, TN
WTVC-DT	9	N			Chattanooga, TN
WTVC-HD	9.1	N-M			Chattanooga, TN
WTVC-DT2	9.2	I-M			Chattanooga, TN
WTVC-HD2	9.3	I-M			Chattanooga, TN
WTVF-DT3*	5.3	N-M	Yes	0	Nashville, TN
WTVF-DT2*	5.2	N-M	Yes	0	Nashville, TN

*DISTANT IN MARION COUNTY ONLY
*** DISTANT IN GRUNDY COUNTY ONLY

10.2

I-M

Yes

WSMV-DT2*

Nashville, TN

^{**} DISTANT IN GRUNDY & MARION COUNTIES

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 062414 Volunteer Wireless, LLC PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION WAKI ΑM McMinnville, TN

FORM SA3E. PAGE 5.							ACCOUNTING	PERIOD: 2019/
LEGAL NAME OF OWNER OF Volunteer Wireless, LI		EM:				(SYSTEM ID# 062414	Name
SUBSTITUTE CARRIAG	E: SPECIA							ı
In General: In space I, ident substitute basis during the a explanation of the programm	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regula	ations, or au	thorizations.	For a further	Substitute
1. SPECIAL STATEMEN				e general mau	uctions loca	ated in the pa	per OAS IOIIII.	Carriage: Special
During the accounting per broadcast by a distant sta		r cable system	carry, on a substitute bas	s, any nonne	twork televi		າ ⊠No	Statement and Program Log
Note: If your answer is "No log in block 2. 2. LOG OF SUBSTITUTE			ge blank. If your answer is	"Yes," you mu	ust complet	e the prograr	n	
period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love I Column 2: If the prograr Column 3: Give the call Column 4: Give the broatthe case of Mexican or Car Column 5: Give the mor first. Example: for May 7 gi Column 6: State the tim to the nearest five minutes. stated as "6:00–6:30 p.m."	ace, please a of every nor distant static gulations, o otion. Do no Lucy" or "NE m was broad sign of the sadcast static adian static and and day we "5/7." es when the Example: a er "R" if the and regulatic rogramming	attach addition nnetwork televion and that your authorization t use general of BA Basketball: deast live, ente station broadca by is location (the when your sys as substitute pro a program carri listed program ons in effect du	al pages. ision program (substitute pour cable system substitute so See page (vi) of the gencategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the tem carried the substitute gram was carried by your ed by a system from 6:01: was substituted for programing the accounting period	rogram) that, d for the progeral instructio "basketball". lo." m. station is lice station is idenorogram. Use cable system. 15 p.m. to 6:2 imming that yill; enter the let under FCC residence.	during the ramming of ins located List specifinsed by the stiffied). numerals, List the tim 8:30 p.m. sour system ter "P" if the ules and re	accounting f another stat in the paper ic program FCC or, in with the monnes accurated should be was required listed progulations in	tion hth ly	
5		E PROGRAM		CARR	N SUBST	URRED	7. REASON FOR	
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		TIMES — TO	DELETION	
						_		
						_		
						_		
						_		
	1			l L	L	_		

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 6.

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:
Volunteer Wireless, LLC
SYSTEM ID#
062414

J

Part-Time Carriage Log

PART-TIME CARRIAGE LOG

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.

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.

Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period.

- Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10"
- 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."
- 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."

		DATES	S AND HOURS (OF PART-TIME CAR	RIAGE			
CALL SIGN -	WHEN CARRIAGE OCCURRED			CALL SIGN -	WHEN	WHEN CARRIAGE OCCURRED		
	DATE	HOU FROM	RS TO		DATE	FROM	OURS	то
		_					_	
		_					_	
		_					_	
		_					_	
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LEGA	AL NAME OF OWNER OF CABLE SYSTEM:	SY	STEM ID#	Name					
Vol	unteer Wireless, LLC		062414	Name					
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. \$ 2,322,546.80									
IIVIP	ORTANT: You must complete a statement in space P concerning gross receipts.	(Amount of gross receip	ots)						
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.									
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be 8×10^{-2} below.	e entered on line 1 of							
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.	entered on line 2 in block							
▶ If pa	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be entered 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 fe system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K	e is 1.064 percent of the	,546.80						
	Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.								
	This is your minimum fee.	\$ 24,	711.90						
Block 2	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 colur "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period of Yes—Complete the DSE schedule. No—Leave block 3 below blank and columns.	nn 4, you must check od?							
Block 3	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	\$ 13,	149.22						
	Line 2. 3.75 Fee: 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	\$ 13,	149.22						
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,	\$ 24,	711.90	Cable avetems					
	whichever is larger 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, ente		0.00	Cable systems 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					
	Line 4. FILING FEE	\$	725.00	the Licensing 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		,436.90	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							

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Volunteer Wireless, LLC	SYSTEM ID# 062414					
	CHANNELS						
М	Instructions: You must give (1) the number of channels on which the cable system carried television bro	oadcast stations					
Channala	to its subscribers and (2) the cable system's total number of activated channels, during the accounting p	eriod.					
Channels	Enter the total number of channels on which the cable	47					
	system carried television broadcast stations						
	Enter the total number of activated channels						
	on which the cable system carried television broadcast stations	166					
	and nonbroadcast services						
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)						
Individual to Be Contacted							
for Further	Name Amelia Mooneyham Tele	phone 931-815-1536					
	Address P.O. Box 670 (Number, street, rural route, apartment, or suite number)						
	McMinnville, TN 37111						
	(City, town, state, zip)	***************************************					
	Email Fax (optional)						
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright O	ffice regulations					
0	CENTIFICATION (This statement of account must be certified and signed in accordance with copyright of	nice regulations.					
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)						
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1	of space B; or					
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner own	the cable 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 identifing in line 1 of space B.	ed as owner of the cable system					
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good fair [18 U.S.C., Section 1001(1986)]						
	X /s/ Lisa Cope						
	Enter an electronic signature on the line above using an "/s/" signature to certify this stater (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place you	ur 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 compatibility settings.						
	Typed or printed name: Lisa Cope						
	Title: President (Title of official position held in corporation or partnership)						
	Date: August 23, 2019						

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally 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 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 Offce'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 the 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

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Marra
Volunteer Wireless, LLC 062414	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 adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?	Special Statement Concerning Gross Receipts Exclusion
X NO YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Mailing Address Mailing Address	
INTEREST ASSESSMENTS	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	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	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
** 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 Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.	
Owner Address	
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 personally 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 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 carried 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 LISTED 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 the electric content of the test of the post-	

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 C 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 or 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 and 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 not subject to the 3.75 fee or the Syndicated Exclusivity Surcharge. Distant simulcast streams are not subject to any royalty payment

The 3.75 Fee. If a cable system located in whole or in part within ε 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, ir 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 systems 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, non-commercial 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.

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE SCHEDULE

Determine whether any of the stations you carried were partially distant—that 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 DSE 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.

- Calculate a separate base rate fee for each subscriber group, using
 the rates given above;
 the total number of DSEs for that group's complement of stations;
 and
 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

In most cases under current FCC rules, all of Fairvale would be within the local service area of both stations A and C and all of Rapid City and Bodega Bay would be within the local service areas of stations B, D, and E.



	Distant Stations Carried		Identification o	f Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
nin	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
s	B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
)-	C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
	D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
	E (network)	0.25	Fairvale	Stations B, D, and E	120,000.00
	TOTAL DSFs	2 472		TOTAL GROSS RECEIPTS	\$600,000,00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

		40,0000			
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

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94 In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

DSE SCHEDULE. PAGE 11. (CONTINUED) SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Volunteer Wireless, LLC 062414 **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. 6.25 2 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).

In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-Computation of DSEs for mercial educational station, give the DSE as ".25." CATEGORY "O" STATIONS: DSEs Category "O" **Stations** CALL SIGN DSE DSE **CALL SIGN CALL SIGN** DSE WCTE-DT 0.250 WNAB-DT 1.000 WNPT-DT 0.250 **WUXP-DT** 1.000 WSMV-DT 0.250 Add rows as WSMV-DT3 1.000 necessary. WTVF-DT 0.250 Remember to copy WTVF-DT3 1.000 all formula into new WTVF-DT2 0.250 rows. WSMV-DT2 1.000

Name	Volunteer W	ireless, LLC					S	062414
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	figure should of Column 3 Column 4 be carried out Column 5 give the type- Column 6	at the call sign of all dista For each station, give the correspond with the inform For each station, give the Divide the figure in colu- at least to the third decire For each independents	the number of hours ymation given in space total number of hours in 2 by the figure in all point. This is the station, give the "type lumn 4 by the figure	your cable systeme J. Calculate onlours that the station column 3, and g "basis of carriage-value" as "1.0."	n carried the stati y one DSE for each on broadcast over tive the result in de value" for the st For each network	on during the accounting ach station. If the air during the accolecimals in column 4. The ation. If or noncommercial eductions of the accolumn 6. Round to no lead to the account of the accounting the	unting period. is figure must cational station,	
Capacity	Cr to Torrin.	C	ATEGORY LAC	STATIONS: (COMPUTATION	ON OF DSFs		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	R 3. NU JRS OF ED BY ST	JMBER HOURS ATION NAIR	4. BASIS OF CARRIAGE VALUE	5. TYPE	6. DS	βE
			÷ ÷	=		x x	=	
			÷	=		x		
			÷ ÷	=		x x	=	
			÷	=		X		
			÷	=		x	=	
	Add the DSEs	OF CATEGORY LAC S of each station. m here and in line 2 of page		·,	▶	0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efference broadcast of space I). Column 2: at your option. Column 3: Column 4: I	e the call sign of each start by your system in substact on October 19, 1976 (one or more live, nonnetwown each station give the This figure should correst enter the number of days Divide the figure in column of this is the station's DSE	itution for a program as shown by the lette ork programs during to number of live, nonrespond with the inform in the calendar year in 2 by the figure in c	that your system or "P" in column 7 hat optional carriant optional carriant of the column 3 hat optional carriant	was permitted to of space I); and ige (as shown by to carried in substict leap year. the the result in col	delete under FCC rules he word "Yes" in column 2 tution for programs that umn 4. Round to no less	of of were deleted s than the third	rm).
		SU	BSTITUTE-BASI	S STATIONS	: 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	OF SUBSTITUTE-BASI of each station. m here and in line 3 of pa		,	▶	0.00		
5 Total Number of DSEs	number of DSEs 1. Number of 2. Number of	FR OF DSEs: Give the ames applicable to your system of DSEs from part 2 ● of DSEs from part 3 ● of DSEs from part 4 ●		in parts 2, 3, and	4 of this schedule	and add them to provide	6.25 0.00 0.00	
	TOTAL NUMBE	R OF DSEs						6.25

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2019/1

Volunteer Wire		SYSTEM:					S	YSTEM ID# 062414	Name
Instructions: Bloc In block A: • If your answer if schedule.		•	part 6 and part	7 of the DSE sche	edule blank an	d complete pa	art 8, (page 16) of	the •	6
If your answer if	"No," complete blo	ocks B and C	below.						
			BLOCK A: T	ELEVISION MA	ARKETS				Computation of 3.75 Fee
I <u>=</u>	1981?	schedule—[•	ller markets as de				gulations in	
		BI O	CK B: CARR	IAGE OF PERM	MITTED DS				
Column 1: CALL SIGN	under FCC rules	s of distant st and regulation ne DSE Sche	ations listed in ons prior to Jur dule. (Note: Th	part 2, 3, and 4 of ne 25, 1981. For fu ne letter M below r	f this schedule urther explana	that your sys	ed stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rd A Stations carri 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfatherec instructions fc E Carried pursu *F A station pre	ules and regued pursuant on as defined al education (76. or DSE schedant to individuation with the station with the station will be station wi	ulations cited be to the FCC ma d in 76.5(kk) (7 al station [76.5 65) (see parag dule). ual waiver of F ed on a part-tin vithin grade-B o	ne or substitute ba contour, [76.59(d)(ose in effect on (6.57, 76.59(b)) (e)(1), 76.63(a) (63(a) referring (bstitution of gr	June 24, 198 , 76.61(b)(c), referring to 7 to 76.61(d) andfathered s	76.63(a) referring 6.61(e)(1 stations in the		
Column 3:	*(Note: For those this schedule to	e stations ide determine the	entified by the le	parts 2, 3, and 4 etter "F" in column	ı 2, you must c	omplete the v	. °	T	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
WCTE-DT	С	0.25	WTVF-DT	Α	0.25				
WNAB-DT	Α	1.00	WTVF-DT2	M	0.25				
WNPT-DT	С	0.25	WTVF-DT3	M	1.00				
WUXP-DT	Α	1.00	WSMV-DT	М	1.00				
WSMV-DT	Α	0.25							
WSMV-DT2	M	1.00							
			1					6.25	
								0.20	
		В	LOCK C: CO	MPUTATION OF	F 3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule					
Line 2: Enter the	sum of permitte	ed DSEs fro	m block B abo	ove			7		
Line 3: Subtract (If zero, I				r of DSEs subject 7 of this schedu		rate.			
Line 4: Enter gro	ss receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ine 4 by 0.0375	and enter s	um here				×		permited/ partially nonpermitted carriage?
Line 6: Enter tota	al number of DS	Es from line	: 3				·-		If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 aı	nd enter her	e and on line	2, block 3, space	e L (page 7)			0.00	

	LEGAL NAME OF OWN	IER OF CABLE	SYSTEM:						S	YSTEM ID#	
Name	Volunteer Wire	less, LLC								062414	
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Instructions: You is stations carried pric Column 1: List the column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the Foxum 4: Indicate Column 5: Indicate Column 6: Compare in block	must complete or to June 25, call sign for eathe DSE for the accounting the basis of c CC rules and ecialty programming: (e)(3)). arriage under al instructions the station's Lethe DSE figure. B, column 3 conformation you	1981, under former ach distant station in his station for a sing g period and year i arriage on which the regulations cited be mming: Carriage, or 0(1), or 76.63 (refer Carriage under FCC certain FCC rules, in the paper SA3 fo DSE for the current ures listed in column of part 6 for this state ou give in columns is	r FCC rules gover dentifed by the gle accounting properties and the care station was cellow pertain to the properties of	vern lette peri rriag arri thos asis (1)) s 76 auth riod list	entifed by the letter "F" ining part-time and subster "F" in column 2 of priod, occurring betweer ge and DSE occurred (ied by listing one of the se in effect on June 24 s, of specialty program.). 6.59(d)(3), 76.61(e)(3) thorizations. For further it as computed in parts the smaller of the two e accurate and is subjection.	stitute carri lart 6 of the n January 1 (e.g., 1981/ e following l, 1981. ming unde , or 76.63 (r explanation 2, 3, and 4 figures her	age. DSE schedule, 1978 and Jur (1) letters r FCC rules, se referring to on, see page (v. of this schedure. This figure s	ections of the should be	e enterer	
	4.000				ΞD	ON A PART-TIME AN					
	1. CALL	2. PRIC		COUNTING		4. BASIS OF		RESENT	6. P	ERMITTED	
	SIGN	DSE	PI	ERIOD		CARRIAGE		DSE		DSE	
		•									
Computation of the Syndicated Exclusivity Surcharge	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 • Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981?										
	Yes—Complete	blocks B and	IC.			No—Proceed to	part 8				
	BLOCK B: Ca	arriage of VHI	F/Grade B Contour	Stations		BLOCK	C: Compu	itation of Exem	pt DSEs	:	
	Is any station listed in commercial VHF stati or in part, over the cal Yes—List each state of X No—Enter zero a	ion that places ble system? tation below wit	s a grade B contour	r, in whole	r	Was any station listed nity served by the cabl to former FCC rule 76. Yes—List each state X No—Enter zero ar	le system p .159) ation below v	orior to March 3	1, 1972	? (refe	
							,	p 			
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	N	DSE	
										-	
		<u> </u>									
		<u> </u>									
		ļ									
		<u> </u>	TOTAL DSEs	0.00			<u></u>	TOTAL DS	Es	0.00	

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Volunteer Wireless, LLC	SYSTEM ID# 062414	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	2,322,546.80	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 any	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? 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 D	SF	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	OL .	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	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		
0 "	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.		
	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 C 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)	SE	
	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		

Name			TEM ID# 062414
	'	Volunteer Wireless, LLC	702414
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 of the		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$	
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$	
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> .
8 Computation of Base Rate Fee	You m 6 was In blo If you If you blank What i	ctions: ust 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. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. 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 below is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers becated 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 v	rour 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 following sections.	
		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. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 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)	
		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	0.00

DSE SCH	HEDULE. PAGE 17.	COUNTING	PERIOD: 2019/1
LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYS	TEM ID#	Nama
Volur	nteer Wireless, LLC	062414	Name
Section 4	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
7	A. Enter 0.01064 of gross receipts (the amount in section 1) * **Tenter 0.01064 of gross receipts** * **Tenter 0.01064 of gr		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	
Space In Gen receipt	I be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ing. G. eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exist strom subscribers located within the station's local service area, from your system's total gross receipts. To take advantation, you must:	kclude	Gomputation of Base Rate Fee
exclusi		same	Base Rate Fee and Syndicated
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each and up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	group.	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 part 7, impute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. It cable system is wholly located outside all major television markets, complete block A only.		Partially Distant Stations, and
Step 1	Didentify a Subscriber Group for Partially Distant Stations: For each community served, determine the local service area of each wholly distant and each partially distant station yo to that community.	ou	for Partially Permitted 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 token, the station is distant to the subscriber.)	and, by	
subscr	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 call will have only one subscriber group when the distant stations it carried have local service areas that coincide.	able	
Comp ogroups	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's s	subscriber	
	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 ibers in the group.	;	
• lf:			
and 4	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 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		

- any 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, part 6 of this schedule.
- Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.
- Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions in the paper SA3 form.
- Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your actual calculations on the form.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 062414 **Volunteer Wireless, LLC** 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. Step 3: 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 Volunteer Wireles		LE SYSTEM:				\$	062414	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EA	CH SUBSCRI	BER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GRO)UP	•
COMMUNITY/ AREA		town, Morrison, I	Dibrell	COMMUNITY/ ARE	EA Coalmo i	nt, GruetliLaage	r, Palmer	9 Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
CALL GIGIT	DOL	CALL GIGIT	DOL	WUXP-DT	1.00	OALL GION	DOL	Base Rate I
				WNPT-DT	0.25			and
				WCTE-DT	0.25			Syndicate
								-
				WNAB-DT	1.00			Exclusivi
								Surcharg
								for
		-						Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			2.50	
Gross Receipts First G	roup	\$ 46	,657.00	Gross Receipts Se	cond Group	\$	150,278.65	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Se	cond Group	\$	3,179.14	
	THIRD	SUBSCRIBER GROU	IP		FOURTH	SUBSCRIBER GRO	NI IP	
			J1	COMMUNITY/ADD			701	
COMMUNITY/ AREA	Crossv	Tille		COMMUNITY/ ARE				
				Cassville, De	rossett, Quebeck	, Ravenscroft, Sparta,	vvalling	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				WNPT-DT	0.25			
		_						
						-		
		-						
			<u> </u>					
		-						
Tatal DCCa			0.00	Total DOS-			0.25	
Total DSEs			0.00	Total DSEs		-	0.25	
Gross Receipts Third C	Group	\$ 69	,011.15	Gross Receipts Fo	urth Group	\$	544,425.95	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee For	urth Group	\$	1,448.17	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	es above.	\$	13,149.22	

LEGAL NAME OF OWNE Volunteer Wireles		E SYSTEM:				S	062414	Name
В	LOCK A: C	COMPUTATION O	F BASE RA	TE FEES FOR EAG	CH SUBSCRI	BER GROUP		
	FIFTH	SUBSCRIBER GRO	UP		SIXTH	SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA	Hillsbo	ro, Beech Grove)	COMMUNITY/ ARE	A McMinn	ville, Viola, Betha	any	9 Computation
CALL SIGN DSE CALL SIGN			DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
WCTE-DT	0.25						-	Base Rate Fee
								and
								Syndicated
						-		Exclusivity
	<u> </u>							Surcharge
						-		for
						-		Partially
								Distant
								Stations
Total DSEs	-		0.25	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 123	3,534.25	Gross Receipts Sec	ond Group	\$ 8	86,792.05	
·					•			
Base Rate Fee First G	roup	\$	328.60	Base Rate Fee Sec	ond Group	\$	0.00	
!	SEVENTH	SUBSCRIBER GRO)UP		EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Spence	r, Bone Cave		COMMUNITY/ ARE	A Altamon	t, Beersheba, Pe	lham	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
WNPT-DT	0.25			WNPT-DT	0.25			
				WNAB-DT	1.00	-		
				WUXP-DT	1.00			
				WCTE-DT	0.25	-		
Total DSEs			0.25	Total DSEs			2.50	
Gross Receipts Third (Group	\$ 133	3,075.00	Gross Receipts Fou	ırth Group	\$ 3	66,181.50	
Base Rate Fee Third 0	Group	\$	353.98	Base Rate Fee Fou	irth Group	\$	7,746.57	
Base Rate Fee: Add the Enter here and in block			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNE Volunteer Wireles		E SYSTEM:				S	062414	Nam
В	LOCK A: (COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GRO	UP	_
COMMUNITY/ AREA	Montea	gle		COMMUNITY/ AREA	Α		0	9 Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
WCTE-DT	0.25						-	Base Rate
WNPT-DT	0.25							and
WSMV-DT							·······	
	0.25		<u></u>					Syndica
WSMV-DT2	1.00							Exclusiv
WTVF-DT	0.25							Surcha
WUXP-DT	1.00							for
WSMV-DT3	1.00							Partial
WTVF-DT2	0.25							Distan
NTVF-DT3	1.00							Station
otal DSEs			5.25	Total DSEs			0.00	
otal Bollo						\$	0.00	
	oss Receipts First Group \$ 2,591.25					.50		
	roup	\$	2,591.25	Gross Receipts Sec	ond Group	<u>*</u>	0.00	
Gross Receipts First G		\$	92.75	Gross Receipts Secondary Base Rate Fee Secondary		\$	0.00	
Gross Receipts First G	iroup	\$	92.75		ond Group	\$	0.00	
Gross Receipts First G Base Rate Fee First G	iroup		92.75	Base Rate Fee Seco	ond Group		0.00	
Gross Receipts First G Base Rate Fee First G	iroup	\$	92.75		ond Group	\$	0.00	
Gross Receipts First G Base Rate Fee First G	iroup	\$	92.75	Base Rate Fee Seco	ond Group	\$	0.00	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP	Base Rate Fee Second COMMUNITY/ AREA	TWELVTH	\$ I SUBSCRIBER GRO	0.00 UP	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP	Base Rate Fee Second COMMUNITY/ AREA	TWELVTH	\$ I SUBSCRIBER GRO	0.00 UP	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP	Base Rate Fee Second COMMUNITY/ AREA	TWELVTH	\$ I SUBSCRIBER GRO	0.00 UP	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP	Base Rate Fee Second COMMUNITY/ AREA	TWELVTH	\$ I SUBSCRIBER GRO	0.00 UP	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP	Base Rate Fee Second COMMUNITY/ AREA	TWELVTH	\$ I SUBSCRIBER GRO	0.00 UP	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP	Base Rate Fee Second COMMUNITY/ AREA	TWELVTH	\$ I SUBSCRIBER GRO	0.00 UP	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP	Base Rate Fee Second COMMUNITY/ AREA	TWELVTH	\$ I SUBSCRIBER GRO	0.00 UP	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP	Base Rate Fee Second COMMUNITY/ AREA	TWELVTH	\$ I SUBSCRIBER GRO	0.00 UP	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP	Base Rate Fee Second COMMUNITY/ AREA	TWELVTH	\$ I SUBSCRIBER GRO	0.00 UP	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP	Base Rate Fee Second COMMUNITY/ AREA	TWELVTH	\$ I SUBSCRIBER GRO	0.00 UP	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP	Base Rate Fee Second COMMUNITY/ AREA	TWELVTH	\$ I SUBSCRIBER GRO	0.00 UP	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP	Base Rate Fee Second COMMUNITY/ AREA	TWELVTH	\$ I SUBSCRIBER GRO	0.00 UP	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP	Base Rate Fee Second COMMUNITY/ AREA	TWELVTH	\$ I SUBSCRIBER GRO	0.00 UP	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP	Base Rate Fee Second COMMUNITY/ AREA	TWELVTH	\$ I SUBSCRIBER GRO	0.00 UP	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP	Base Rate Fee Second COMMUNITY/ AREA	TWELVTH	\$ I SUBSCRIBER GRO	0.00 UP	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP	Base Rate Fee Second COMMUNITY/ AREA	TWELVTH	\$ I SUBSCRIBER GRO	0.00 UP	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA CALL SIGN	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP	Base Rate Fee Second COMMUNITY/ AREA	TWELVTH	\$ I SUBSCRIBER GRO	0.00 UP	
Gross Receipts First G Base Rate Fee First G COMMUNITY/ AREA CALL SIGN Total DSEs	LEVENTH	SUBSCRIBER GRO	92.75 DUP 0 DSE 0.00	Base Rate Fee Second COMMUNITY/ ARE/	DSE	SUBSCRIBER GROUND CALL SIGN	0.00 UP	
Gross Receipts First G Base Rate Fee First G E COMMUNITY/ AREA	LEVENTH	\$ SUBSCRIBER GRO	92.75 DUP 0 DSE	Base Rate Fee Second COMMUNITY/ AREA	DSE	\$ I SUBSCRIBER GRO	0.00 UP DSE	

LEGAL NAME OF OWNE Volunteer Wireles		LL STSTEW.					062414	Name
BI				TE FEES FOR EACH				
	FIRST	SUBSCRIBER GRO	UP		SECOND	SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA	Center	town, Morrison, I	Dibrell	COMMUNITY/ AREA	Coalmo	nt, GruetliLaager	, Palmer	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicate
								Exclusivit
								Surcharge
								for
								Partially
								Distant
	<u>"</u>		<u>"</u>					Stations
								Otations
							·······	
								
					.			
					<u> </u>			
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 46	,657.00	Gross Receipts Secon	d Group	\$ 1	50,278.65	
								
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA				COMMUNITY/ AREA				
JOHN OTHER TO A LEAST				O SIMILOTATI TO TAKE ST				
	I boe	II OALL OLON			Loop	II oall olon		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
		H			 		·····	
								
					<u> </u>			
otal DSEs			0.00	Total DSEs			0.00	
							44 405 05	
ross Receipts Third Group \$ 69,011.15				Gross Receipts Fourth	Group	\$ 5	44,425.95	
Rase Rate Fee Third (Proup	•	0.00	Base Rate Fee Fourth	Group	•	0.00	
Base Rate Fee Third G	o oup	\$	0.00	Dase Nate Fee Fourth	Gioup	\$	0.00	
				••				
ase Rate Fee: Add th			criber group	as shown in the boxes a	above.			
		space L (page 7)				\$	0.00	

CALL SIGN 123,	0.00 534.25	COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Second Base Rate Fee Second	SIXTH A McMinn DSE ond Group	SUBSCRIBER GROUNVIlle, Viola, Betha		Q Computation of Base Rate In and Syndicate Exclusivit Surcharg for Partially Distant Stations			
CALL SIGN	0.00 534.25	Total DSEs Gross Receipts Seco	DSE ON ORDER	CALL SIGN	0.00 86,792.05	Computation of Base Rate Fand Syndicate Exclusivities Surcharg for Partially Distant			
CALL SIGN	0.00 534.25	Total DSEs Gross Receipts Seco	DSE	CALL SIGN	0.00 86,792.05	Computation of Base Rate Fand Syndicate Exclusivities Surcharg for Partially Distant			
123,	0.00 534.25	Total DSEs Gross Receipts Seco	ond Group		0.00	of Base Rate F and Syndicate Exclusivit Surcharg for Partially Distant			
	0.00	Gross Receipts Seco		\$ 8	86,792.05	and Syndicate Exclusivit Surcharg for Partially Distant			
	0.00	Gross Receipts Seco		\$ 8	86,792.05	Syndicate Exclusivit Surcharg for Partially Distant			
	0.00	Gross Receipts Seco		\$ 8	86,792.05	Exclusivit Surcharg for Partially Distant			
	0.00	Gross Receipts Seco		\$ 8	86,792.05	Surcharg for Partially Distant			
	0.00	Gross Receipts Seco		\$ 8	86,792.05	for Partially Distant			
	0.00	Gross Receipts Seco		\$ 8	86,792.05	Partially Distant			
	0.00	Gross Receipts Seco		\$ 8	86,792.05	Distant			
	0.00	Gross Receipts Seco		\$ 8	86,792.05				
	0.00	Gross Receipts Seco		\$ 8	86,792.05	Stations			
	0.00	Gross Receipts Seco		\$ 8	86,792.05				
	0.00	Gross Receipts Seco		\$ 8	86,792.05				
	0.00	Gross Receipts Seco		\$ 8	86,792.05				
	0.00	Gross Receipts Seco		s 8	86,792.05				
	0.00	Gross Receipts Seco		\$ 8	86,792.05				
	0.00	Gross Receipts Seco		s 8	86,792.05				
	0.00	Gross Receipts Seco		ş 8					
	'	Base Rate Fee Seco	ond Group						
	'	Base Rate Fee Seco	ond Group						
UBSCRIBER GROU		H							
	SEVENTH SUBSCRIBER GROUP				EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA Spencer, Bone Cave				COMMUNITY/ AREA Altamont, Beersheba, Pelham					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	0.00	Total DSEs	•		0.00				
Gross Receipts Third Group \$ 133,075.00		Gross Receipts Fourth Group \$ 366,181.50			66,181.50				
<u> </u>	0.00	Base Rate Fee Four	\$	0.00					
		0.00	0.00 Total DSEs 133,075.00 Gross Receipts Fou	0.00 Total DSEs 133,075.00 Gross Receipts Fourth Group	0.00 Total DSEs 133,075.00 Gross Receipts Fourth Group \$ 3	0.00 Total DSEs 0.00 Gross Receipts Fourth Group \$ 366,181.50			

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Volunteer Wireless, LLC SYSTEM ID# 062414											
BI	OCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP					
NINTH SUBSCRIBER GROUP					UP	0					
COMMUNITY/ AREA	Montea	igle		COMMUNITY/ AREA 0				9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of			
								Base Rate F			
								and			
								Syndicated Exclusivity			
								Surcharge			
		-						for			
								Partially			
								Distant			
								Stations			
Total DSEs	1	ļ ļ	0.00	Total DSEs	ļ	Į.	0.00				
		2,591.25	Gross Receipts Sec	0.00							
Base Rate Fee First Group \$ 0.00			Base Rate Fee Sec	0.00							
ELEVENTH SUBSCRIBER GROUP											
COMMUNITY/ AREA 0			COMMUNITY/ ARE								
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
		-									
Total DSEs			0.00	Total DSEs			0.00				
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fourth Group \$ 0.00			0.00					
											
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00				
Base Rate Fee: Add the Enter here and in block			scriber group	as shown in the boxe	es above.	\$					

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CARLE SYSTEM: SYSTEM ID# Name Volunteer Wireless, LLC 062414 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP 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 9 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 First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** 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 and Syndicated this schedule. 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 **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** 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 Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** 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 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 total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group 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 and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CARLE SYSTEM: SYSTEM ID# Name Volunteer Wireless, LLC 062414 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP 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 9 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 First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** 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 and Syndicated this schedule. 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 **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** 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 Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH 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 total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group SEVENTH SUBSCRIBER GROUP 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 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 total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CARLE SYSTEM: SYSTEM ID# Name Volunteer Wireless, LLC 062414 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP 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 9 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 First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** 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 and Syndicated this schedule. 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 **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** 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 Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. NINTH SUBSCRIBER GROUP TENTH 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 total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group **ELEVENTH SUBSCRIBER GROUP** TWELVTH 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 total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown