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

STATEMENT OF ACCOUNT for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

# SA3E Long Form

Return completed workbook by email to:

## coplicsoa@copyright.gov

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

Α	ACC	OUNTING PERIOD COVERED E	BY THIS STATEMENT:					
Accounting Period	2019/02							
B Owner	rate t	uctions: Give the full legal name of the owner of the itle of the subsidiary, not that of the parent .ist any other name or names under which if there were different owners during the ac- gle statement of account and royalty fee pa- Check here if this is the system's first fili	corporation. the owner conducts the busine counting period, only the owner ayment covering the entire acco	ss of the cable syster r on the last day of th punting period.	n. e accounting period should s		144	
	LEG	AL NAME OF OWNER/MAILING ADDRE	SS OF CABLE SYSTEM					
		TDS Broadband Service, LLC						
		Baja Broadband						
						144	620192	
						1446	2019/02	
		525 Junction Rd						
		Madison, WI 53717-2152						
С		<b>RUCTIONS:</b> In line 1, give any busine es already appear in space B. In line 2						
System	1	DENTIFICATION OF CABLE SYSTEM:						
	$\vdash$	MAILING ADDRESS OF CABLE SYSTEM:						
		MAILING ADDRESS OF CABLE STSTEM.						
	2	Number, street, rural route, apartment, or suite numbe	ir)					
	(	(City, town, state, zip code)						
D	Insti	ructions: For complete space D instru	ictions, see page 1b. Identify	y only the frst comr	nunity served below and	relist on pa	ge 1b	
Area	with	all communities.		•				
		CITY OR TOWN		STATE				
Served				СО				
First		Estes Park						
First		Estes Park low is a sample for reporting commun	ities if you report multiple ch	annel line-ups in S	pace G.			
First	Be		ities if you report multiple ch	STATE	CH LINE UP	SUE	3 GRP#	
	Be (	low is a sample for reporting commun CITY OR TOWN (SAMPLE)	ities if you report multiple ch	STATE MD	CH LINE UP A	SUE	1	
First Community	Be	low is a sample for reporting commun CITY OR TOWN (SAMPLE)	ities if you report multiple ch	STATE	CH LINE UP	SUE		

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\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

02/25/2020

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting Period	2019/02	(enter four digit year and /1 (for Jan-Jun period) or /2 (for Jul-Dec period) No spaces)			

		(City, town, state, zip code)							
	2	MAILING ADDRESS OF CABLE SYSTEM:							
	1		1						
System		IDENTIFICATION OF CABLE SYSTEM:	1						
с	name	s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.							
		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these							
			1						
		City, town, state, zip)	1						
		(Number, street, rural route, apartment, or suite number) Madison, WI 53717-2152							
		525 Junction Rd	4						
	3	MAILING ADDRESS OF OWNER OF CABLE SYSTEM:							
		Baja Broadband	4						
	2	BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT):	1						
		TDS Broadband Service, LLC							
	1	LEGAL NAME OF OWNER OF CABLE SYSTEM:	1						
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	Filing Perio						
		gle statement of account and royalty fee payment covering the entire accounting period.	BARCODE						
		re were different owners during the accounting period, only the owner on the last day of the accounting period should submit							
Owner	corporate title of the subsidiary, not that of the parent corporation. In line 2, list any other names under which the owner conducts the business of the cable system.								
в		the full legal name of the owner of the cable system in line 1. If the owner is a subsidiary of another corporation, give the full							
_	INSTR	RUCTIONS:							

	BLOG						
Е	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE				
Secondary	Residential:	SUBSCRIBERS	NATE				
Transmission	Service to first set	1,242	\$39.45/Mo.				
Service: Sub-	Service to additional set(s)	1,272	<i>\$33.43</i> /100				
scribers and							
	FM radio (if separate rate)						
Rates	Motel, hotel	402	\$7.40-\$10.96				
	Commercial						
	Converter						
	<ul> <li>Residential</li> </ul>	356	\$5.95/Mo.				
	<ul> <li>Non-residential</li> </ul>						
						_	
	CATEGORY OF SERVICE	RATE	BLOCK 1		RATE	-	
F		RATE	CATEGORY O		RATE	-	
г	Continuing Services:		Installation: No				
	Pay cable	7.40-19.99		Motel, hotel			
Services	<ul> <li>Pay cable—add'l channel</li> </ul>			Commercial	\$0-\$99.95		
Other Than	Fire protection			Pay cable			
Secondary	<ul> <li>Burglar protection</li> </ul>			<ul> <li>Pay cable-add'l channel</li> </ul>		]	
Fransmissions:	Installation: Residential			Fire protection		]	
Rates	First set	0-49.95		<ul> <li>Burglar protection</li> </ul>		]	
	<ul> <li>Additional set(s)</li> </ul>	0-49.95	Other services	:			
	FM radio (if separate rate)		1	Reconnect	0-25		
	Converter			Disconnect			
				<ul> <li>Outlet relocation</li> </ul>	19.98-39.96		
		1		<ul> <li>Move to new address</li> </ul>		1	
M Channels	Instructions: You must give (1) to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa	ble system's total nnels on which the	number of activ	rated channels, during the a		24	
	<ul> <li>to its subscribers and (2) the ca</li> <li>1. Enter the total number of cha system carried television broa</li> <li>2. Enter the total number of action which the cable system ca</li> </ul>	ble system's total nnels on which the dcast stations vated channels rried television bro	number of activ e cable 	rated channels, during the a			
	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of acti on which the cable system ca and nonbroadcast services . INDIVIDUAL TO BE CONTACT	ble system's total nnels on which th dcast stations vated channels rried television brc 	number of active	ated channels, during the a	accounting period.	24	]
Channels	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of acti on which the cable system ca and nonbroadcast services.	ble system's total nnels on which th dcast stations vated channels rried television brc 	number of active	ated channels, during the a	accounting period.	24	]
Channels	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of acti on which the cable system ca and nonbroadcast services . INDIVIDUAL TO BE CONTACT	ble system's total nnels on which th dcast stations vated channels rried television brc 	number of active	ated channels, during the a	accounting period.	24	]
Channels	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of acti on which the cable system ca and nonbroadcast services . INDIVIDUAL TO BE CONTACT	ble system's total nnels on which th dcast stations vated channels rried television brc 	number of active	ated channels, during the a	accounting period.	24	]
Channels Channels N Individual to Be Contacted for Further	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of acti on which the cable system ca and nonbroadcast services . INDIVIDUAL TO BE CONTACT	ble system's total nnels on which th dcast stations vated channels rried television brc 	number of active	ated channels, during the a	accounting period.	24	]
Channels N Individual to Be Contacted	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of acti on which the cable system ca and nonbroadcast services INDIVIDUAL TO BE CONTACT we can contact about this states	ble system's total nnels on which th dcast stations vated channels rried television brc <b>TED IF FURTHER</b> ment of account.) <b>Stephanie W</b> <b>525 Junctior</b>	number of active	vated channels, during the a	individual	24	]
Channels Channels N Individual to Be Contacted for Further	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of acti on which the cable system ca and nonbroadcast services INDIVIDUAL TO BE CONTACT we can contact about this stater Name	ble system's total nnels on which the dcast stations vated channels rried television brc <b>ED IF FURTHER</b> nent of account.) <b>Stephanie W</b> 525 Junctior (Num	number of activ a cable adcast stations INFORMATIO	ated channels, during the a	individual	24	
Channels Channels N Individual to Be Contacted for Further	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of acti on which the cable system ca and nonbroadcast services INDIVIDUAL TO BE CONTACT we can contact about this stater Name	ble system's total nnels on which th dcast stations vated channels rried television brc <b>ED IF FURTHER</b> ment of account.) <b>Stephanie W</b> <b>525 Junctior</b> (Num Madison, WI	number of activ a cable adcast stations INFORMATIO eber Rd 65, street, rural 53717	vated channels, during the a	individual Telephone	24	]
Channels Channels N Individual to Be Contacted for Further	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of acti on which the cable system ca and nonbroadcast services INDIVIDUAL TO BE CONTACT we can contact about this stater Name	ble system's total nnels on which th dcast stations vated channels rried television brc <b>ED IF FURTHER</b> ment of account.) <b>Stephanie W</b> <b>525 Junctior</b> (Num Madison, WI	number of activ a cable adcast stations INFORMATIO	vated channels, during the a	individual Telephone	24 288 (608) 664-4721	]
Channels Channels N Individual to Be Contacted for Further	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of acti on which the cable system ca and nonbroadcast services INDIVIDUAL TO BE CONTACT we can contact about this stater Name Address	ble system's total nnels on which th dcast stations vated channels rried television brc red IF FURTHER nent of account.) Stephanie W 525 Junctior (Num Madison, Wi	number of activ e cable adcast stations INFORMATIO eber Rd ber, street, rural 53717 town, state, zjp)	rated channels, during the a	individual Telephone	24 288 (608) 664-4721	
Channels Channels N Individual to Be Contacted for Further	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of acti on which the cable system ca and nonbroadcast services INDIVIDUAL TO BE CONTACT we can contact about this stater Name	ble system's total nnels on which th dcast stations vated channels rried television brc <b>ED IF FURTHER</b> ment of account.) <b>Stephanie W</b> <b>525 Junctior</b> (Num Madison, WI	number of activ e cable adcast stations INFORMATIO eber Rd ber, street, rural 53717 town, state, zjp)	rated channels, during the a	individual Telephone	24 288 (608) 664-4721	
Channels Channels N Individual to Be Contacted for Further	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of acti on which the cable system ca and nonbroadcast services INDIVIDUAL TO BE CONTACT we can contact about this stater Name Address	ble system's total nnels on which th dcast stations vated channels rried television brc red IF FURTHER nent of account.) Stephanie W 525 Junctior (Num Madison, Wi	number of activ e cable adcast stations INFORMATIO eber Rd ber, street, rural 53717 town, state, zjp)	vated channels, during the a	individual Telephone	24 288 (608) 664-4721	
Channels Channels N Individual to Be Contacted for Further	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of acti on which the cable system ca and nonbroadcast services INDIVIDUAL TO BE CONTACT we can contact about this stater Name Address	ble system's total nnels on which th dcast stations vated channels ried television brc <b>ED IF FURTHER</b> nent of account.) <b>Stephanie W</b> <b>525 Junction</b> (Num <b>Madison, WI</b> (City, <b>finance@tds</b> of account must I b e submitted wit	number of activ a cable adcast stations inFORMATIO leber Rd Ber, street, rural 33717 town, state, zip) telecom.coo	n IS NEEDED: (Identify an route, apartment, or suite nur signed in accordance with in "/s/" signature (e.g., /s/)	individual Telephone Telephone Fax (optional) Copyright Office rr o Smith). Do not	24 288 (608) 664-4721	
Channels Channels N Individual to Be Contacted Information	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of action on which the cable system ca and nonbroadcast services INDIVIDUAL TO BE CONTACT we can contact about this stater Name Address Email (optional) CERTIFICATION (This statement) Signature Space O – this form without the statement of the statement)	ble system's total nnels on which th dcast stations vated channels ried television brc <b>ED IF FURTHER</b> nent of account.) <b>Stephanie W</b> <b>525 Junction</b> (Num <b>Madison, WI</b> (City, <b>finance@tds</b> of account must I b e submitted wit	number of activ a cable adcast stations inFORMATIO leber Rd Ber, street, rural 33717 town, state, zip) telecom.coo	n IS NEEDED: (Identify an N IS NEEDED: (Identify an route, apartment, or suite nur signed in accordance with i "/s/" signature (e.g., /s/Joh k in Space O of tab "page 8	accounting period.	24 288 (608) 664-4721	
Channels Channels N Individual to Be Contacted for Further Information	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of action on which the cable system ca and nonbroadcast services INDIVIDUAL TO BE CONTACT we can contact about this stater Name Address Email (optional) CERTIFICATION (This statement) Signature Space O – this form without the statement of the statement)	ble system's total nnels on which th dcast stations vated channels ried television brc <b>ED IF FURTHER</b> nent of account.) <b>Stephanie W</b> <b>525 Junction</b> (Num <b>Madison, WI</b> (City, <b>finance@tds</b> of account must I b e submitted wit	number of activ a cable adcast stations adcast stations inFORMATIO beer stret, tural sarran town, state, zip) telecom.coo tele	n N IS NEEDED: (Identify an N IS NEEDED: (Identify an route, apartment, or suite nur signed in accordance with 1 '/s" signature (e.g., /s/Joh in Space O of tab "page 8 ited name: Sharon Assistant Treasurer	individual Telephone Derry Fax (optional) Copyright Office re n Smith). Do not , space M-O'.	24 288 (608) 664-4721 (gulations.) forget to enter an electronic	
Channels Channels N Individual to Be Contacted for Further Information	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of action on which the cable system ca and nonbroadcast services INDIVIDUAL TO BE CONTACT we can contact about this stater Name Address Email (optional) CERTIFICATION (This statement) Signature Space O – this form without the statement of the statement)	ble system's total nnels on which th dcast stations vated channels ried television brc <b>ED IF FURTHER</b> nent of account.) <b>Stephanie W</b> <b>525 Junction</b> (Num <b>Madison, WI</b> (City, <b>finance@tds</b> of account must I b e submitted wit	number of activ a cable adcast stations adcast stations inFORMATIO beer transformer sarran town, state, zip) telecom.coo telec	N IS NEEDED: (Identify an N IS NEEDED: (Identify an route, apartment, or suite nur signed in accordance with 1 "/s" signature (e.g., /s/Joh k in Space O of tab "page 8 ited name: Sharon	individual Telephone Derry Fax (optional) Copyright Office re n Smith). Do not , space M-O'.	24 288 (608) 664-4721 (gulations.) forget to enter an electronic	

Total Gross Receipts	\$ 593,166.07
	ОК
Subgroup Gross Receipts Total	\$ 593,166.07

Subgroup		Subgroup/Community Name	Gr	oss Receipts
FIRST	1	Estes Park, CO	\$	593,166.07
SECOND	2			
THIRD	3			
FOURTH	4			
FIFTH	5			
SIXTH	6			
SEVENTH	7			
EIGHTH	8			
NINTH	9			
TENTH	10			
ELEVENTH	11			
TWELVTH	12			
THIRTEENTH	13			
FOURTEENTH	14			
FIFTEENTH	15			
SIXTEENTH	16			
SEVENTEENTH	17			
EIGHTEENTH	18			
NINTEENTH	19			
TWENTIETH	20			
TWENTY-FIRST	21			
TWENTY-SECOND	22			
TWENTY-THIRD	23			
TWENTY-FOURTH	24			
TWENTY-FIFTH	25			
TWENTY-SIXTH	26			
TWENTY-SEVENTH	27			
TWENTY-EIGHTH	28			
TWENTY-NINTH	29			
THIRTIETH	30			
THIRTY-FIRST	31			
THIRTY-SECOND	32			
THIRTY-THIRD	33			
THIRTY-FOURTH	34			
THIRTY-FIFTH	35			
THIRTY-SIXTH	36			
THIRTY-SEVENTH	37			
THIRTY-EIGHTH	38			
THIRTY-NINTH	39			
FORTIETH	40			

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	6. Location of Station	DSE	Carriage
KMGH	7.1	Ν	Denver, CO	0.250	
KMGH-DT2	7.2	N-M	Denver, CO	0.250	
KMGH-DT3	7.3	N-M	Denver, CO	0.250	
KCNC	4.1	Ν	Denver, CO	0.250	
KCNC-DT2	4.2	N-M	Denver, CO	0.250	
KUSA	9.1	Ν	Denver, CO	0.250	
KUSA-DT2	9.2	N-M	Denver, CO	0.250	
KDVR	31.1	I	Denver, CO	1.000	
KDVR-DT2	31.2	I-M	Denver, CO	1.000	
KDVR-DT3	31.3	I-M	Denver, CO	1.000	
KRMA	6.1	E	Denver, CO	0.250	
KPXC	59.1	I	Aurora, CO	1.000	
KDEN	25.1	I	Centennial, CO	1.000	
KDEN-DT2	25.2	I-M	Denver, CO	1.000	
KWGN	2.1	I	Denver, CO	1.000	
KWGN-DT2	2.2	I-M	Denver, CO	1.000	
KWGN-DT3	2.3	I-M	Denver, CO	1.000	
KWGN-DT4	2.4	I-M	Denver, CO	1.000	
KTVD	20.1	I	Denver, CO	1.000	
KTVD-DT2	20.2	I-M	Denver, CO	1.000	
KPJR	38.1	I	Westminster, CO	1.000	
KPJR-DT2	38.2	I-M	Westminster, CO	1.000	
KPJR-DT3	38.3	I-M	Westminster, CO	1.000	
KQCK	39	I	Cheyenne, WY	1.000	
				#N/A	
				#N/A #N/A	
				#IN/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	6. Location of Station	DSE	Carriage
				#N/A	

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
TDS Broadband Service, LLC	20192

**Instructions:** Use this sheet to enter any notes or other information that you feel might assist the Copyright Examiner in the examination of your Statement of Account.



FORM SA3E. PAGE 1b.

FORM SA3E. PAGE ID.										
LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#										
TDS Broadband Service, LLC 1446										
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a										
channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns	d a subscriber gro									
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#							
Estes Park	СО	AA	1	First						
Larimer County	CO	AA	1	Community						
				See instructions for						
				additional information						
				on alphabetization.						
				Add rows as necessary.						
				,,						
				ļ						

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	J	1	1	/	1
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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:															
name	TDS Broadband Service	e, LLC							144							
Е	SECONDARY TRANSMISSION			-	-											
<b>L</b>	In General: The information in s system, that is, the retransmission			-		-										
Secondary	about other services (including p															
Transmission	last day of the accounting period	d (June 30 or E	Decemb	per 31, as the c	ase may b	e).		-								
Service: Sub-	<b>Number of Subscribers:</b> 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															
scribers and Rates	down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged															
	separately for the particular service at the rate indicated-not the number of sets receiving service).															
	<b>Rate:</b> 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															
						ard rate variatio	ns within a	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 residentia 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.															
	BLO	OCK 1 NO. OF					BLOC	K 2 NO. OF								
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATE	EGORY OF SEI	RVICE	SUBSCRIBERS	RATE							
	Residential:															
	Service to first set     1,242 \$39.45/Mo.															
	Service to additional set(s)															
	• FM radio (if separate rate) Motel, hotel	402 \$7.40-\$10.96														
	Commercial		702	<i>71.</i> <del>40</del> - <b>410</b> .50												
	Converter															
	Residential	356 \$5.95/Mo.														
	Non-residential															
	SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES															
_	In General: Space F calls for ra					all vour cable sv	/stem's se	rvices that were								
F	not covered in space E, that is,	•	'		•	• •										
<b>.</b> .	service for a single fee. There a															
Services Other Than	furnished at cost or (2) services															
Secondary	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.															
ransmissions:	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.															
							<b>Block 2:</b> 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									
Rates	Block 2: List any services tha	t your cable sy	stem fu	rnished or offe	red during	the accounting										
	Block 2: List any services tha	t your cable sy separate char	rstem fu ge was	rnished or offe made or estab	red during	the accounting										
	<b>Block 2:</b> List any services tha listed in block 1 and for which a	t your cable sy separate charg ption and inclu	stem fu ge was de the i	rnished or offe made or estab	red during	the accounting		he form of a								
	<b>Block 2:</b> List any services tha listed in block 1 and for which a	t your cable sy separate char	rstem fu ge was de the i CK 1	rnished or offe made or estab	red during lished. Lis	the accounting	rvices in t		RATE							
	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services:	t your cable sy separate charg ption and inclu BLO	rstem fu ge was de the i CK 1 CATE	urnished or offe made or estab rate for each.	ered during lished. Lis	the accounting t these other se	rvices in t	he form of a BLOCK 2	RATE							
	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	t your cable sy separate charg ption and inclu BLO	rstem fu ge was de the r CK 1 CATE Install • Mc	urnished or offe made or estab rate for each. GORY OF SEF ation: Non-res	ered during lished. Lis	the accounting t these other se	rvices in t	he form of a BLOCK 2	RATE							
	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel	t your cable sy separate char ption and inclu BLO RATE	stem fu ge was de the i CK 1 CATE Install • Mo • Co	urnished or offe made or estab rate for each. GORY OF SEF ation: Non-res otel, hotel mmercial	ered during lished. Lis	the accounting t these other se	rvices in t	he form of a BLOCK 2	RATE							
	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Fire protection	t your cable sy separate char ption and inclu BLO RATE	stem fu ge was de the f CK 1 CATE( Install • Mo • Co • Pa	urnished or offe made or estab rate for each. GORY OF SEF ation: Non-res otel, hotel mmercial y cable	ered during lished. Lis RVICE sidential	the accounting t these other se	rvices in t	he form of a BLOCK 2	RATE							
	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel	t your cable sy separate char ption and inclu BLO RATE	stem fu ge was de the r CK 1 CATE( Install • Mo • Co • Pa • Pa	urnished or offe made or estab rate for each. GORY OF SEF ation: Non-res otel, hotel mmercial y cable y cable-add'l c	ered during lished. Lis RVICE sidential	the accounting t these other se	rvices in t	he form of a BLOCK 2	RATE							
	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Fire protection • Burglar protection	t your cable sy separate char ption and inclu BLO RATE	stem fL ge was de the r CK 1 CATEC Install • Mc • Co • Pa • Pa • Fir	urnished or offe made or estab rate for each. GORY OF SEF ation: Non-res otel, hotel mmercial y cable	red during lished. Lis RVICE sidential	the accounting t these other se	rvices in t	he form of a BLOCK 2	RATE							
	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	t your cable sy separate char ption and inclu BLO RATE 7.40-19.99	stem fu ge was de the r CK 1 CATEC Install • Mc • Co • Pa • Pa • Fir • Bu	urnished or offe made or estab rate for each. GORY OF SEF ation: Non-res otel, hotel mmercial y cable y cable-add'l c e protection	red during lished. Lis RVICE sidential	the accounting t these other se	rvices in t	he form of a BLOCK 2	RATE							
	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	t your cable sy separate char ption and inclu BLO RATE 7.40-19.99 0-49.95	stem fu ge was de the i CK 1 CATEC Install • Mc • Co • Pa • Pa • Fir • Bu Other	urnished or offe made or estab rate for each. GORY OF SEF ation: Non-reso otel, hotel mmercial y cable y cable y cable-add'l cl e protection rglar protectior	red during lished. Lis RVICE sidential	the accounting t these other se	rvices in t	he form of a BLOCK 2	RATE							
	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	t your cable sy separate char ption and inclu BLO RATE 7.40-19.99 0-49.95	stem fu ge was de the i CK 1 CATE( Install • Mc • Co • Pa • Pa • Fir • Bu Other • Re • Dis	urnished or offe made or estab rate for each. GORY OF SEF ation: Non-reso otel, hotel mmercial y cable y cable-add'l cl e protection rglar protectior services: connect sconnect	red during lished. Lis RVICE sidential	the accounting t these other se RATE \$0-\$99.95	rvices in t	he form of a BLOCK 2	E RATE							
	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	t your cable sy separate char ption and inclu BLO RATE 7.40-19.99 0-49.95	stem fu ge was de the f CK 1 CATEC Install • Mc • Co • Pa • Pa • Fin • Bu Other • Re • Dis • Ou	arnished or offer made or estab rate for each. GORY OF SEF ation: Non-reso otel, hotel mmercial y cable y cable-add'I cl e protection rglar protectior services: connect	AVICE	RATE	rvices in t	he form of a BLOCK 2	E RATE							

# RIOD: 2019/02

FORM SA3E, PAGE 3.	ING PERIOD: 2019/0
LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID	#
TDS Broadband Service, LLC 1446	6 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	G
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 substitute program basis, as explained in the next paragraph.	Primary Transmitters:
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:	Television
• 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.	
<ul> <li>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.</li> </ul>	
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 multi- cast 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 ex-	
planation of local service area, see page (v) of the general instructions located in the paper SA3 form. <b>Column 5:</b> 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 designa-	
tion "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.	

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.

		CHANN	EL LINE-UP	AA		
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	
KMGH	7.1	N	No		Denver, CO	
KMGH-DT2	7.2	N-M	No		Denver, CO	See instructions f
KMGH-DT3	7.3	N-M	No		Denver, CO	additional inform on alphabetizatio
KCNC	4.1	N	No		Denver, CO	on alphabetizatio
KCNC-DT2	4.2	N-M	No		Denver, CO	
KUSA	9.1	N	No		Denver, CO	
KUSA-DT2	9.2	N-M	No		Denver, CO	
KDVR	31.1	I	No		Denver, CO	
KDVR-DT2	31.2	I-M	No		Denver, CO	
KDVR-DT3	31.3	I-M	No		Denver, CO	
KRMA	6.1	Е	No		Denver, CO	
КРХС	59.1	I	No		Aurora, CO	
KDEN	25.1	I	No		Centennial, CO	
KDEN-DT2	25.2	I-M	No		Denver, CO	
KWGN	2.1	I	No		Denver, CO	
KWGN-DT2	2.2	I-M	No		Denver, CO	
KWGN-DT3	2.3	I-M	No		Denver, CO	
KWGN-DT4	2.4	I-M	No		Denver, CO	
KTVD	20.1	 	No		Denver, CO	
KTVD-DT2 KPJR	20.2 38.1	I-M	No No		Denver, CO Westminster, CO	
KPJR-DT2	38.2	I-M	No		Westminster, CO	
KPJR-DT3	38.3	I-M	No		Westminster, CO	
KQCK	39	I	No		Cheyenne, WY	
	_					
	_					
	_					
	_					
	_					

## ACCOUNTING PERIOD: 2019/02

	d Service, L	STEM: LC			SYSTEM ID# 1446	Name
PRIMARY TRANSMITTE						
n General: In space ( carried by your cable s FCC rules and regulat	G, identify ever system during t ions in effect o	y television st he accounting n June 24, 19	g period, except 81, permitting th	<ol> <li>stations carrie</li> <li>carriage of cert</li> </ol>	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	<b>G</b> Primary
substitute program bas Substitute Basis S basis under specifc F0	Stations: With	respect to an	y distant station	s carried by your o	cable system on a substitute program	Transmitte Televisio
Do not list the station	here in space	G-but do lis		ne Special Statem	ent and Program Log)—if th€	
	and also in spa formation cond	ace I, if the sta			tute basis and also on some other f the general instructions located	
Column 1: List each multicast stream	ch station's call associated wit	h a station ac	cording to its ov	er-the-air designa	es such as HBO, ESPN, etc. Identify tion. For example, report multi- h stream separately; for example	
WETA-simulcast). Column 2: Give th	e channel num	ber the FCC I	nas assigned to	the television stat	ion for broadcasting over-the-air in may be different from the channe	
on which your cable sy	ystem carried th	he station.		-		
educational station, by	entering the le	etter "N" (for n	etwork), "N-M" (	for network multic	ependent station, or a noncommercia east), "I" (for independent), "I-M'	
for independent multi For the meaning of the					ommercial educational multicast) he paper SA3 form.	
Column 4: If the st	tation is outside	the local ser	vice area, (i.e. "	distant"), enter "Ye	es". If not, enter "No". For an ex-	
planation of local servi Column 5: If you h					e paper SA3 form. stating the basis on which you	
cable system carried t	he distant statio	on during the	accounting peri	od. Indicate by en	tering "LAC" if your cable system	
carried the distant stat For the retransmiss					capacity. / payment because it is the subject	
of a written agreemen	t entered into o	n or before Ju	une 30, 2009, be	etween a cable sy	stem or an association representing	
					ry transmitter, enter the designa- ther basis, enter "O." For a further	
explanation of these th	nree categories	, see page (v	) of the general	instructions locate	ed in the paper SA3 form.	
					y to which the station is licensed by the n which the station is identifed	
lote: If you are utilizir						
		CHANN	EL LINE-UP	AB		
	0 DIOAOT	1	_			
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
SIGN	NUMBER	STATION	(165 01 100)	(If Distant)		

	1							
Name	LEGAL NAME OF							SYSTEM ID#
	TDS Broadb	band Servio	e, LLC	;				1446
	PRIMARY TRA	ANSMITTERS	: RADIO					
н				arried on a separate and disc	rete basis and lis	t those FM st	ations c	arried on an
••		•		enerally receivable" by your c				
Primary				II-Band FM Carriage: Under				
Transmitters:	receivable if (1)	) it is carried b	y the sy	stem whenever it is received a	at the system's h	eadend, and	(2) it cai	n be expected,
Radio	on the basis of	monitoring, to	be rece	ived at the headend, with the	system's FM an	tenna, during	certain	stated intervals.
	For detailed inf	ormation abou	ut the the	e Copyright Office regulations	on this point, se	e page (vi) of	the gen	eral instructions
	located in the p	paper SA3 forr	n.					
	Column 1: l	dentify the cal	l sign of	each station carried.				
	Column 2: S	State whether	the station	on is AM or FM.				
	Column 3: I	f the radio sta	tion's sig	nal was electronically proces	sed by the cable	system as a	separate	e and discrete
	signal, indicate	this by placin	g a chec	k mark in the "S/D" column.				
				ion (the community to which t	he station is lice	nsed by the F	CC or. i	n the case of
				the community with which the			,	
	_		, <b>,</b>	, ,		,		
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
			2, 3				2,2	
	N/A							
		1						
		]						

FORM SA3E. PAGE 5.							ACCOUNTING I	PERIOD: 2019/0	
LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#TDS Broadband Service, LLC1446									
SUBSTITUTE CARRIAG				3					
In General: In space I, ident substitute basis during the a explanation of the programm form.	tify every not ccounting pe	nnetwork televi eriod, under spe	sion program broadcast by ecific present and former FC	a distant statio C rules, regu	lations, or auth	orizations.	For a further	Substitute	
								Carriage:	
<ol> <li>SPECIAL STATEMENT</li> <li>During the accounting per broadcast by a distant state</li> </ol>	riod, did you tion?	ır cable systen	n carry, on a substitute bas	·		Yes	XNo	Special Statement and Program Log	
<b>Note:</b> If your answer is "No log in block 2.	, leave the	rest of this pa	ge blank. If your answer is	res, you m	iust complete	the progra	IM		
2. LOG OF SUBSTITUTI									
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa- titles, for example, "I Love I <b>Column 2:</b> If the program <b>Column 3:</b> Give the call <b>Column 4:</b> Give the broa- the case of Mexican or Car <b>Column 5:</b> Give the mor first. Example: for May 7 gi <b>Column 6:</b> State the tim to the nearest five minutes. stated as "6:00–6:30 p.m."	ace, please of every no distant stat egulations, c tition. Do no Lucy" or "NE m was broad sign of the adcast statio hadian statio onth and day ve "5/7." es when the Example: a er "R" if the and regulati	attach addition nnetwork telev ion and that yo or authorization to use general a BA Basketball: dcast live, ente station broadca on's location (ti ons, if any, the when your sys e substitute pro a program carr listed program ons in effect do	hal pages. vision program (substitute pour cable system substitute to categories like "movies", or 76ers vs. Bulls." er "Yes." Otherwise enter "I asting the substitute progra- he community to which the community with which the stem carried the substitute ogram was carried by your ied by a system from 6:01: n was substituted for progra- uring the accounting period	brogram) that ad for the pro- neral instruction r "basketball" No." am. station is lice program. Us cable system 15 p.m. to 6: amming that d; enter the left	t, during the ac gramming of a ons located in '. List specific ensed by the f entified). e numerals, w h. List the time 28:30 p.m. sho your system w etter "P" if the l	CCOUNTING another stat the paper program FCC or, in ith the mo s accurate ould be vas require isted pro	nth		
effect on October 19, 1976		that your syst	em was permitted to delete	e under FCC	rules and regi	liations in			
					EN SUBSTITU		7. REASON		
S	1		1		IAGE OCCUF 6. TIM		FOR		
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	FROM —	TO	DELETION		
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					<u></u>				

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#													
Name	TDS Broadb	and Service	, LLC							1446				
	PART-TIME CA													
J Part-Time Carriage Log	time carriage du hours your syst Column 1 (C column 5 of spa Column 2 (C curred during th • Give the mont "4/10." • State the start television statio "app." Example	State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the elevision 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.– 2:00 p.m."												
		DATES AND HOURS OF PART-TIME CARRIAGE												
		WHEN	I CARRIAGE OCCUI	RRED			WHEN	I CARRIAGE OC	CURF	RED				
	CALL SIGN	DATE	HOUR			CALL SIGN	DATE	HO FROM	URS	то				
	N/A	DATE	FROM _	то			DATE	FROM	_	10				
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-	L NAME OF OWNER OF CABLE SYSTEM: S Broadband Service, LLC	SYSTEM ID# 1446	Name	
Inst all a (as pag	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount mounts (gross receipts) paid to your cable system by subscribers for the system's secon dentifed in space E) during the accounting period. For a further explanation of how to co e (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	ndary transmission service	K Gross Receipts	
<ul> <li>COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe:</li> <li>Complete block 1, showing your minimum fee.</li> <li>Complete block 2, showing whether your system carried any distant television stations.</li> <li>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.</li> <li>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.</li> <li>If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of block 3 below.</li> <li>If part 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 in block</li> </ul>				
3 be ▶ If pa	low. rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shou block 4 below. <b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here. This is your minimum fee. <b>DISTANT TELEVISION STATIONS CARRIED:</b> Your answer here must agree with the	Id be entered on line are required to pay at is 1.064 percent of the \$593,166.07 \$6,311.29		
2 Block 3	<ul> <li>space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colum "Yes" in this block.</li> <li>Did your cable system carry any distant television stations during the accounting perio Yes—Complete the DSE schedule. X No—Leave block 3 below blank and 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</li> <li>Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero</li> <li>Line 3. Add lines 1 and 2 and enter</li> </ul>	d?		
Block 4	<ul> <li>Line 3. Add lines 1 and 2 and chief here</li> <li>Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger</li> <li>Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.</li> <li>Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)</li></ul>	\$ - <u>\$ 6,311.29</u> 0.00 0.00 <u>\$ 725.00</u>	Cable systems submitting additional deposits under Section 111(d)(7) should contact the Licensing additional fees. Division for the appropriate	
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.         Add Lines 1, 2 and 3 of block 4 and enter total here         EFT Trace # or TRANSACTION ID #         Remit this amount via electronic payment payable to Register of Copyrights. (S general instructions located in the paper SA3 form and the Excel instructions tagged)		form for submitting the additional fees.	

FORM SA3E. PAGE 7.

ACCOUNTING PERI	IOD: 2019/02	FORM SA3E. PAGE 8					
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: TDS Broadband Service, LLC	SYSTEM ID# 1446					
N.4	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broad-						
Μ							
Channels	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.						
	1. Enter the total number of channels on which the cable	24					
	system carried television broadcast stations						
	2. Enter the total number of activated channels						
	on which the cable system carried television broadcast stations 288						
	and nonbroadcast services						
Ν	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)						
Individual to							
Be Contacted		(000) 004 4704					
for Further Information	Name Stephanie Weber Teleph	none <b>(608) 664-4721</b>					
	505 kmstien Del						
	Address 525 Junction Rd (Number, street, rural route, apartment, or suite number)						
	Madison, WI 53717						
	(City, town, state, zip)						
	Email finance@tdstelecom.com Fax (optional)						
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office	regulations )					
0		roguatorio.)					
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 of 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 identified as owner of the cable system						
	in line 1 of space B.						
	• I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein						
	are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]						
	/s/ Sharon V. Tisdale						
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement	t.					
	(e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cu button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus						
	Typed or printed name: Sharon V. Tisdale						
	Title: Assistant Treasurer						
	(Title of official position held in corporation or partnership)						
	Date: February 25, 2020						
Privacy Act Notice	e: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying infor	rmation (PII) requested on th					
form in order to pro	process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as ding PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the	name, address and telephor					
search reports prep	pared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of accound of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of the fling.	unt and its placement in t					
completed record 0	statements of account, and it may anost the legal sufficiency of the ming, a determination that would be made by a could (	21.100					

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nomo		
TDS Broadband Service, LLC	1446	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 A lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable s service of providing secondary transmissions of primary broadcast transmitters, the system scribers and amounts collected from subscribers receiving secondary transmissions pursu	ystem for the basic n shall not include sub-	P Special Statement		
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?				
YES. Enter the total here and list the satellite carrier(s) below				
Name     Name       Mailing Address     Mailing Address				
You must complete this worksheet for those royalty payments submitted as a result of a late payr For an explanation of interest assessment, see page (viii) of the general instructions in the paper		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	x			
Line 3 Multiply line 2 by the number of days late and enter the sum here	- x 0.00274			
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	 (interest charge)			
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For fur contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	ther assistance please			
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.				
NOTE: If you are filing this worksheet covering a statement of account already submitted to the C please list below the owner, address, first community served, accounting period, and ID number a 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	dentifying information (PII) requested on th			

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

# INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerical 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 account (page 3), a distant station is:

• Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25

Note that local stations are not counted at all in computing DSEs.

**Step 2:** Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space G of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station 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 particular 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 a television market added stations after June 24, 1981, that would not have been permitted under FCC rules, regulations, and authorizations (hereafter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge.

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

**The Minimum Fee/Base Rate Fee/3.75 Percent Fee**. All cable 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, noncommercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24, 1981.

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

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

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

Substitution of Grandfathered Stations. Under section 76.65 of the former FCC rules, a cable system was not required to delete any station 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 Syndicated 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 pursuant to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/or 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 in a major television market, part 7 does not have to be completed.
- Determine which station(s) reported in block B, part 6 are commercial VHF stations and place a grade B contour, in whole, or in part, over the cable system. If none of these stations are carried, part 7 does not have to be completed.
- Determine which of those stations reported in block b, part 7 of the DSE Schedule were carried before March 31,1972. These stations are exempt from the FCC's syndicated exclusivity rules in effect on June 24, 1981. If you qualify to calculate the royalty fee based upon the carriage of partially-distant stations, and you elect to do so, you must compute the surcharge in part 9 of this schedule.
- Subtract the exempt DSEs from the number of DSEs determined in block B of part 7. This is the total number of DSEs subject to the Syndicated Exclusivity Surcharge.
- Compute the Syndicated Exclusivity Surcharge based upon these DSEs and the appropriate formula for the system's market position.

# DSE SCHEDULE. PAGE 11.

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

Determine whether any of the stations you carried were partially 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 DSEs0.701% of gross receiptsThe fifth and each additional DSE0.330% 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.

 Identify the communities/areas represented by each subscriber group.
 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.

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

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

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

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

**Rounding Off DSEs.** In computing DSEs on the DSE schedule, you may round off to no less than the third decimal point. If you round off a DSE in any case, you must round off DSEs throughout the schedule as follows: • When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains

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

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

# EXAMPLE:

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

		Distant Stations Carried		Identification of	of Subscriber	Groups		
In most cases	under current FCC	STATION	DSE	CITY	OUTSIDE LC	•	GRO	SS RECEIPTS
	airvale would be within		1.0	0111	SERVICE AR			UBSCRIBERS
	e area of both stations	B (independent)	1.0	Santa Rosa	Stations A, B			\$310,000.00
	I of Rapid City and Bo-	C (part-time)	0.083	Rapid City	Stations A an			100,000.00
	ld be within the local	D (part-time)	0.139	Bodega Bay	Stations A an			70,000.00
• •	of stations B, D, and E.	E (network)	0.25	Fairvale	Stations B, D			120,000.00
		TOTAL DSEs	2.472		,	SS RECEIPTS		\$600,000.00
Santa Rosa	Stations A and C 35 mile zone	Minimum Fee Total Gross			\$600,000.00 x .01064 \$6,384.00			
		First Subscriber Group		Second Subsc	riber Group		Third Subscriber Group	
		(Santa Rosa)		(Rapid City and	Bodega Bay)		(Fairvale)	
	Fairvale	Gross receipts	\$310,000.00	Gross receipts		\$170,000.00	Gross receipts	\$120,000.00
Rapid City		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
	Dadaga	\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .010	64 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
4	Bodega Bay	\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .007	01 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
Station an 35 mil	dE	<b>Total Base Rate Fee:</b> \$6,4 In this example, the cable s				3, line 1 (page	7)	

# DSE SCHEDULE. PAGE 11. (CONTINUED)

1	LEGAL NAME OF OWNER OF CABLE	E SYSTEM:			S	STEM ID#	
I	TDS Broadband Service	, LLC				1446	
	SUM OF DSEs OF CATEGOR • Add the DSEs of each station Enter the sum here and in line	I.			0.00		
	Instructions: In the column headed "Call S	Sign": list the ca	Il signs of all distant stations	identified by	the letter "O" in column 5		
Computation of DSEs for Category "O"       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- mercial educational station, give the DSE as ".25."         Category "O"       CATEGORY "O" STATIONS: DSEs							
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Add rows as necessary. Remember to copy all formula into new rows.							

	L	lannan lan lan lan lan lan lan lan lan l	

							DSE SCHEDU	
Name		OWNER OF CABLE SYSTEM: Dand Service, LLC					S	SYSTEM ID# 1446
<b>3</b> Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 2 be carried ou Column 2 give the type Column 2	<ul> <li>ist the call sign of all dist.</li> <li>2: For each station, give correspond with the info</li> <li>3: For each station, give</li> <li>4: Divide the figure in coll t at least to the third decision</li> <li>5: For each independent</li> <li>-value as ".25."</li> <li>6: Multiply the figure in coll</li> </ul>	the number of h rmation given in the total numbe umn 2 by the fig imal point. This station, give the olumn 4 by the f	nours your cable syst in space J. Calculate in of hours that the st gure in column 3, and is the "basis of carria e "type-value" as "1.0 figure in column 5, and	tem carried the sta only one DSE for ation broadcast or d give the result in age value" for the D." For each netwo	ation during the accountir each station. ver the air during the acc n decimals in column 4. T	ounting period. his figure must licational station, less than the	
Capacity		(	CATEGORY	LAC STATIONS	COMPUTAT	ION OF DSEs		
	1. CALL SIGN	2. NUMBE OF HO CARRII SYSTE	URS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS O CARRIAG VALUE			E
			÷		=	x x	=	
			÷			x	=	
			÷		=	x x	=	
			÷		=	×	=	
			÷ ÷			x x	=	
	Add the DSEs	s OF CATEGORY LAC a of each station. um here and in line 2 of p		nedule,		0.00		
<b>4</b> Computation of DSEs for Substitute- Basis Stations	Was carried tions in effices of the space of the spa	ect on October 19, 1976 one or more live, nonnetv For each station give the This figure should corre Enter the number of day Divide the figure in colur	titution for a pro (as shown by the vork programs do spond with the sin the calenda mn 2 by the figu	gram that your systeme that eletter "P" in colum uring that optional ca , nonnetwork progra information in space ar year: 365, except i re in column 3, and g	em was permitted n 7 of space I); ar rriage (as shown b ms carried in sub- I. in a leap year. give the result in c	to delete under FCC rule	2 of were deleted	m).
		SI	JBSTITUTE-	BASIS STATIO	NS: COMPUT	ATION OF DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBE OF DAY IN YEAF	S	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
			÷	=			<mark>+</mark> +	=
			÷	=			÷	=
			÷	=			÷ •	-
			÷	=			÷	=
	Add the DSEs	s OF SUBSTITUTE-BAS of each station. um here and in line 3 of p			>	0.00		
5		ER OF DSEs: Give the an is applicable to your syste		boxes in parts 2, 3, ar	nd 4 of this schedu	le and add them to provide	the total	
Total Number	1. Number o	of DSEs from part 2 ●				►	0.00	
of DSEs		of DSEs from part 3 ●				•	0.00	
	3. Number o	of DSEs from part 4 ●				▶	0.00	
	TOTAL NUMBE	ER OF DSEs						0.00

DSE SCHEDULE. P	WNER OF CABLE S	SYSTEM					<u> </u>	YSTEM ID#	PERIOD: 2019/
	nd Service, LL						3	1446	Name
nstructions: Blog	ck A must be comp	leted							
n block A:									6
If your answer if chedule.	"Yes," leave the re	mainder of p	art 6 and part 1	of the DSE sched	lule blank and	complete part	t 8, (page 16) of th	e	0
lf your answer if	"No," complete blo	cks B and C			A DI/ETO				Computation
				FELEVISION M					Computation 3.75 Fee
s the cable syster ffect on June 24,	n located wholly o 1981?	utside of all n	najor and smal	ler markets as defi	ned under sec	tion 76.5 of F0	CC rules and regul	ations in	
Yes—Com	plete part 8 of the	schedule—D	O NOT COMF	LETE THE REMA	INDER OF PA	RT 6 AND 7.			
X No—Comp	olete blocks B and	C below.							
		BL O				Fs			
Column 1:	List the cell signs			part 2, 3, and 4 of			m was permitted t	0.000	
CALL SIGN	under FCC rules	and regulatio e DSE Scheo	ons prior to Jun dule. (Note: Th	e 25, 1981. For fur e letter M below re	rther explanati	on of permitte	d stations, see the		
Column 2:			-	sis on which you ca					
BASIS OF PERMITTED	•	•		low pertain to thos ket quota rules [76			,	)	
CARRIAGE	76.61(b)(c)]				)(4) 70 00(-)		()		
				6.59(d)(1), 76.61(e 9(c), 76.61(d), 76.6			.61(e)(1)		
	D Grandfathered instructions fo	•	, , , , ,	aph regarding sub	stitution of gra	ndfathered sta	ations in the		
	E Carried pursua		,	CC rules (76.7)					
				e or substitute bas ontour, [76.59(d)(5			rring to 76.61(e)(5)	1	
	M Retransmissio		-		<i>), 1</i> 0.01(e)(0),	10.00(a) 1616		1	
Column 3:				parts 2, 3, and 4 o etter "F" in column 2			orksheet on page 1	4 of	
	this schedule to d				z, you muot oc		inchest on page i		
			T		,		1		
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
			•			•			
								0.00	
		E	BLOCK C: CC	MPUTATION OF	F 3.75 FEE				
ine 1: Enter the	total number of	DSEs from	part 5 of this	schedule				-	
ine 2: Enter the	sum of permitte	d DSEs fron	n block B abc	ve				-	
	line 2 from line 1 eave lines 4–7 bl					ate.		0.00	
ine 4: Enter gro	oss receipts from	space K (pa	age 7)						Do any of th DSEs repres
							x 0.03	375	partially
ine 5: Multiply I	ine 4 by 0.0375 a	and enter su	m here						permited/ partially
1.7.	,,						x		nonpermitte
ine 6. Enter tot	al number of DSE	s from line	3					_	carriage? If yes, see pa
			0				··		9 instruction
					. ,				
ine 7: Multiply l	ine 6 by line 5 an	a enter here	e and on line	2, block 3, space	e ∟ (page 7)			0.00	

	nd Service, LL	SYSTEM: LC					5	YSTEM ID# 1446	Name
4.0411								0.005	6
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	0
									Computation of
									3.75 Fee
					I				
					<u> </u>				

						DSE SCHEDULE. PAGE 14.
Name			EM:			SYSTEM ID#
Name	TDS Broadban	d Service, LLC				1446
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the F A—Part-time sp 76.59 B—Late-night p 76.61 S—Substitute ca gener Column 5: Indicate Column 6: Compar in block	or to June 25, 1981, call sign for each dis the DSE for this stat the accounting perio the basis of carriage CC rules and regulat ecialty programming 0(d)(1),76.61(e)(1), or rogramming: Carriag (e)(3)). arriage under certain rail instructions in the the station's DSE fo e the DSE figures lis < B, column 3 of part	under former FCC rules g tant station identifed by the ion for a single accounting d and year in which the c on which the station was ions cited below pertain to Carriage, on a part-time 76.63 (referring to 76.61 e under FCC rules, section FCC rules, regulations, c paper SA3 form. the current accounting p ted in columns 2 and 5 ar 6 for this station. in columns 2, 3, and 4 m	as identifed by the letter "F overning part-time and su e letter "F" in column 2 of g period, occurring betwee arriage and DSE occurred carried by listing one of th o those in effect on June 2 basis, of specialty program (e)(1)). ns 76.59(d)(3), 76.61(e)(3) r authorizations. For furth eriod as computed in part d list the smaller of the two ust be accurate and is sub	bstitute carriage.) part 6 of the DSE schedu en January 1, 1978 and J I (e.g., 1981/1). ne following letters: (4, 1981.) mming under FCC rules, ( a), or 76.63 (referring to er explanation, see page (s 2, 3, and 4 of this sched to figures here. This figure	ule. une 30, 1981. sections (vi) of the tule. e should be entered
	4.0411			LIED ON A PART-TIME A		
	1. CALL SIGN	2. PRIOR DSE	3. ACCOUNTING PERIOD	4. BASIS OF CARRIAGE	5. PRESENT DSE	6. PERMITTED DSE
	SIGN	DSE	PERIOD	CARRIAGE	DSE	DSE
7 Computation of the		"Yes," complete blo	cks B and C, below.	te part 8 of the DSE sched	tule.	
Syndicated			BLOCK A: MAJO	R TELEVISION MAR	KET	
Exclusivity						
Surcharge	<ul> <li>Is any portion of the or</li> </ul>	cable system within a	top 100 major television m	arket as defned by section	76.5 of FCC rules in effect	June 24, 1981?
	Yes—Complete	e blocks B and C .		No—Proceed to	o part 8	
				 1		
	BLOCK B: C	arriage of VHF/Grad	e B Contour Stations	BLOC	K C: Computation of Exe	mpt DSEs
	Is any station listed in	•			d in block B of part 7 carr	•
		•	de B contour, in whole	,	ble system prior to March	
	or in part, over the ca		,	to former FCC rule 7		
	Yes—List each s	tation below with its ap	propriate permitted DSE	Yes—List each s	station below with its approp	riate permitted DSE
		and proceed to part 8.		No-Enter zero	and proceed to part 8.	
	CALL SIGN	DSE C	ALL SIGN DSE	CALL SIGN	DSE CALL S	IGN DSE
					Π	
		тс	TAL DSEs 0.0	)	TOTAL I	DSEs 0.00
		L		<u>→   </u>		

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: TDS Broadband Service, LLC	SYSTEM ID# 1446	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	593,166.07	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	<ul> <li>Did your cable system retransmit the signals of any partially distant television stations during the accounting period?</li> <li>X Yes—Complete part 9 of this schedule.</li> <li>No—Complete the applicable section below.</li> <li>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 is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.</li> </ul>	SE	
	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		
	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 D 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		

DSF	SCHEDULE.	PAGE	16
DOL	CONLEDGEL.	IAOL	

Name		ME OF OWNER OF CABLE SYSTEM: SY	1446
		TDS Broadband Service, LLC	1446
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.	
	Instru	ctions:	
8		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	
0		checked "Yes," use the total number of DSEs from part 5. pck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation		ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	
of	-	ar answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below	1
Base Rate Fee	blank What i	c. is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "local	
	service	e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
	C	Yes—Complete part 9 of this schedule. X 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	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	0
	Section		
	3	If the figure in section 2 is <b>4.000 or less,</b> compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts	
		(the amount in section 1)	_
		B. Enter 0.00701 of gross receipts	
		(the amount in section 1)▶ <b>\$</b> 4,158.09	
		C. Subtract 1.000 from total DSEs	
		(the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	-
		E. Add lines A, and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7)	
		Base Rate Fee	<u>.</u>

LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	
TDS	Broadband Service, LLC 1446	Name
Section	If the figure in section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.	
4	······································	8
	A. Enter 0.01064 of gross receipts	0
	(the amount in section 1) ▶ <b>\$</b>	
	B. Enter 0.00701 of gross receipts	Computation
	(the amount in section 1)► \$	of
		Base Rate Fee
	C. Multiply line B by 3.000 and enter here <b>S</b>	
	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 <b>\$</b>	
	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	
IMPOF	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals	
	stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-	9
•	Space G.	Ŭ
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of	Computation
this ex	clusion, you must:	of Base Rate Fee
First:	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	and
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of	Syndicated Exclusivity
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge
	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you	for Partially
	Iso compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below.	Distant
Howev	er, if your cable system is wholly located outside all major television markets, complete block A only.	Stations, and for Partially
	o Identify a Subscriber Group for Partially Distant Stations	Permitted
-	: For each community served, determine the local service area of each wholly distant and each partially distant station you to that community.	Stations
	: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located	
-	e the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by	
	ne token, the station is distant to the subscriber.)	
	: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each iber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable	
	will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
Comp	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's	
	iber groups.	
	n section:	
	fy the communities/areas represented by each subscriber group. the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the	
	ibers in the group.	
• lf:		
1) you	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3,	
	of this schedule; or,	
, .	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, 6 of this schedule.	
	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions	
	bute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding	
	In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show	
	ctual calculations on the form.	

	LEGAL NAME OF OWNER OF CABLE SYSTEM: S	YSTEM ID#
Name	TDS Broadband Service, LLC	1446
	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	t
	signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported	
	for each part 9 used in steps 1 and 2 must equal the amount reported in space K. <b>Step 3:</b> Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant	
	signals from step 1 that is subject to this surcharge.	
	Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from	I
	a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Ra and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream.	te
	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 TDS Broadband S							3YSTEM ID# 1446	Name
E				TE FEES FOR EAG				
COMMUNITY/ AREA		<sup>-</sup> SUBSCRIBER GRO Park, CO	UP	SECOND SUBSCRIBER GROUP				9
	LSICS			COMMUNITY/ AREA 0				Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate and
								Syndicat
								Exclusiv
								Surcharg for
		•						Partiall
								Distant
								Station
Fotal DSEs		11	0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 59	3,166.07	Gross Receipts Second Group \$ 0.00				
	. o up	<u>+</u>						
<b>3ase Rate Fee</b> First G	roup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO		FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
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	Gross Receipts Fourth Group <u>\$</u> 0.		0.00			
Base Rate Fee Third Group \$ 0.		0.00	Base Rate Fee Fourth Group \$ 0.			0.00		
				11				
Base Rate Fee: Add th			criber group a	as shown in the boxes	above.		0.00	
Enter here and in block	3, line 1, s	space L (page 7)				\$	0.00	

## FORM SA3E. PAGE 19.

LEGAL NAME OF OWNE						S	YSTEM ID# 1446	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	BER GROUP		
FIRST SUBSCRIBER GROUP				SECOND	SUBSCRIBER GROU	Р	0	
COMMUNITY/ AREA	Estes Park, CO			COMMUNITY/ AREA 0				<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-				-		Syndicated
						-		Exclusivity
								Surcharge
								for Dantially
		-				-		Partially Distant
		-				-		Stations
						-		Stations
		-				-		
		-				-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group		\$ 593,166.07		Gross Receipts Second Group		\$ 0.00		
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	IP	FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0			COMMUNITY/AREA 0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				-		
						-		
						-		
		-				-		
					1	-		
		-				-		
					1			
Total DSEs 0.00		Total DSEs 0.00						
Gross Receipts Third Group \$		\$ 0.00		Gross Receipts Fourth Group		<u>\$ 0.00</u>		
Base Rate Fee Third Group		\$	0.00	Base Rate Fee Fourth Group \$ 0.00		0.00		
Base Rate Fee: Add th	ne base rat	e fees for each subscr	iber group :	as shown in the boxes al	pove.			
Enter here and in block 3, line 1, space L (page 7)								

		FORM SA3E. PAGE 20.						
	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#						
Name	TDS Broadband Service, LLC	1446						
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP							
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined							
Computation	by section 76.5 of FCC rules in effect on June 24, 1981:	and any portion of your caple system is located in as defined						
of	☐ First 50 major television market ☐ Second 50 major television market							
Base Rate Fee and	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							
Syndicated	this schedule.							
Exclusivity	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							
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none enter zero.							
for Partially	<ul> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> <li>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</li> </ul>							
Distant Stations	schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.							
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP						
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs						
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs						
	Line 3: Subtract line 2 from line 1	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 subject to the surcharge	this subscriber group subject to the surcharge						
	computation	computation						
	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 and enter here. This is the	Line 3: Subtract line 2 from line 1 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 Third Group\$	SURCHARGE						
		Fourth Group						
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)							