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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT	OFFICE USE ONLY
DATE RECEIVED	AMOUNT
08/31/2020	\$ ALLOCATION NUMBER

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	AC	COUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting		2020/1				
Period						
B Owner	rate	tructions: Give the full legal name of the owner of the cable system. If the owner is a title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the busine if there were different owners during the accounting period, only the owneringle statement of account and royalty fee payment covering the entire accounts. Check here if this is the system's first filing. If not, enter the system's ID.	ess of the cable syst or on the last day of counting perioa	em the accounting period should s		61502
	LE	EGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM				
		Grande Communications Networks, LLC				
		,				
					6150	220201
					61502	2020/1
		401 Carlson Circle				
		San Marcos, TX 78666				
	INIS	STRUCTIONS: In line 1, give any business or trade names used to it	dentify the busines	es and operation of the eyet	em unless	these
С		mes already appear in space B. In line 2, give the mailing address of				
System		IDENTIFICATION OF CABLE SYSTEM:				
	1	Grande Communications - Dallas				
		MAILING ADDRESS OF CABLE SYSTEM:				
	2	401 Carlson Circle (Number, street, rural route, apartment, or suite number)				
	-	San Marcos, TX 78666				
		(City, town, state, zip code)				
D	Ins	structions: For complete space D instructions, see page 1b. Identify	only the frst comr	nunity served below and rel	ist on page	 e 1b
Area	wit	h all communities.	·	•		
Served	-	CITY OR TOWN	STATE			
First		Dallas	TX			
Community	F	Below is a sample for reporting communities if you report multiple cha	l annel line-ups in S	pace G		
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUE	3 GRP#
Sample	Ald	la	MD	Α		1
Sample	Alli	ance	MD	В		2
	Ge	ring	MD	В		3

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

FORM SA3E. PAGE 1b.			ACCOUNT	'ING PERIOD: 2020/
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	
Grande Communications Networks, LLC			61502	
Instructions: List each separate community served by the cable system. A "communit in FCC rules: "a separate and distinct community or municipal entity (including unincor areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frof system identification hereafter known as the "first community." Please use it as the first community.	oorated communiti st community that rst community on a	es within unincorp you list will serve ıll future filings.	oorated as a form	D Area Served
Note: Entities and properties such as hotels, apartments, condominiums, or mobile hot below the identified city or town.	me parks should b	e reported in pare	ntheses	
If all communities receive the same complement of television broadcast stations (i.e., call communities with the channel line-up "A" in the appropriate column below or leave to on a partially distant or partially permitted basis in the DSE Schedule, associate each redesignated by a number (based on your reporting from Part 9).	he column blank. I	f you report any st	tations	
When reporting the carriage of television broadcast stations on a community-by-common 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#	1
Dallas	TX			First
				Community
				Community
				See instructions for
				additional information
				on alphabetization.
				Add rows as necessar
				Add Tows as flecessary

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

Grande Communications Networks, LLC

SYSTEM ID#
61502

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service).

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

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

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

BLO	OCK 1			BLOC	K 2	
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE		CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE
Residential:	COBCONIBLIC	TVATE	Ħ	CATEGORY OF GERVIOL	COBCONIBENC	TVTL
Service to first set	4,515	\$ 28.49				
 Service to additional set(s) 						
 FM radio (if separate rate) 						
Motel, hotel	6,713	\$ 28.49				
Commercial	196	\$ 28.49				
Converter						
Residential						
Non-residential						

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

		BLO	CK 1			BLOCK 2		
CATEGORY OF SERVICE	F	RATE	CATEGORY OF SERVICE	F	RATE	CATEGORY OF SERVICE	F	RATE
Continuing Services:			Installation: Non-residential					
• Pay cable	\$	16.99	Motel, hotel			Expanded Basic	\$	46.00
 Pay cable—add'l channel 			Commercial			Digital Tier (Premier Pak)	\$	22.99
 Fire protection 			Pay cable			Variety Pak	\$	14.99
Burglar protection			Pay cable-add'l channel			HD Tier	\$	6.95
Installation: Residential			Fire protection			Latin Tier	\$	7.95
• First set	\$	54.99	Burglar protection			Sports Plus Pak	\$	14.99
Additional set(s)	\$	30.00	Other services:			Ultra Sports Tier	\$	4.99
 FM radio (if separate rate) 			Reconnect	\$	30.00	Movie Tier	\$	7.95
Converter			Disconnect					
			Outlet relocation	\$	30.00			
			Move to new address	\$	30.00			

Α	ACC	OUNTING PERIOD COVE	RED BY THIS STATEMENT:
Accounting		2020/1	(enter four digit year and /1 (for Jan-Jun period) or /2 (for Jul-Dec period) No spaces)
Period			

	INSTR	RUCTIONS:	
B Owner	Give corpo In line	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 orate title of the subsidiary, not that of the parent corporation. a 2, list any other names under which the owner conducts the business of the cable system. re were different owners during the accounting period, only the owner on the last day of the accounting period should submit gle statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. 6150: LEGAL NAME OF OWNER OF CABLE SYSTEM:	BARCODE DATA Filing Period 61!
	2	Grande Communications Networks, LLC	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT):	
	3	MAILING ADDRESS OF OWNER OF CABLE SYSTEM: 401 Carlson Circle	
		(Number, street, rural route, apartment, or sulte number)	
		San Marcos, TX 78666 (City, town, state, zip)	
		[Cig, sown, state, zp)	+
С		IUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.	
System	1	IDENTIFICATION OF CABLE SYSTEM: Grande Communications - Dallas	
	2	MAILING ADDRESS OF CABLE SYSTEM: 401 Carlson Circle Nominate where their trade trade, spelment, or sales reunibus) San Marcos, TX 78666	

Transmission Service: Sub- scribers and Rates	BLO CATEGORY OF SERVICE Residential: Service to first set Service to additional set(s) FM radio (if separate rate) Motel, hotel Commercial Converter Residential Non-residential	CK 1 NO. OF SUBSCRIBERS 4,515 6,713 196	RATE 28.49			
Secondary Transmission Service: Sub- scribers and Rates	CATEGORY OF SERVICE Residential: Service to first set Service to additional set(s) FM radio (if separate rate) Motel, hotel Commercial Converter Residential	NO. OF SUBSCRIBERS 4,515 6,713				
Secondary Transmission Service: Sub- scribers and Rates	CATEGORY OF SERVICE Residential: Service to first set Service to additional set(s) FM radio (if separate rate) Motel, hotel Commercial Converter Residential	NO. OF SUBSCRIBERS 4,515 6,713				
Transmission Service: Sub- scribers and Rates	Residential:	4,515 6,713				
Transmission Service: Sub- scribers and Rates	Service to first set Service to additional set(s) FM radio (if separate rate) Mote, hotel Commercial Converter Residential	6,713	28.49			
Service: Sub- scribers and Rates	Service to additional set(s) FM radio (if separate rate) Motel, hotel Commercial Converter Residential	6,713	28.49			
scribers and Rates	• FM radio (if separate rate) Motel, hotel Commercial Converter • Residential					
Rates	Motel, hotel Commercial Converter • Residential					
	Commercial Converter • Residential					
	Converter • Residential	-	28.49			
	Residential	-	28.49			
	Non-residential					
						ā
	CATEGORY OF SERVICE		BLOCK 1 CATEGORY OF	SERVICE	RATE	
	Continuing Services:		Installation: No		IVAIL	
-	• Pay cable	16.99		• Motel. hotel		
Services	Pay cable—add'l channel	20.55		· Commercial		
Other Than	• Fire protection			Pay cable		
Secondary	Burglar protection			Pay cable-add'l channel		
Transmissions:	Installation: Residential			Fire protection		
Rates	• First set	54.99		Burglar protection		
	 Additional set(s) 	30.00	Other services:			
	 FM radio (if separate rate) 			• Reconnect	30.00	
	Converter			Disconnect		
				· Outlet relocation	30.00	
				· Move to new address	30.00	
		_			-1	1
	CHANNELS					
M	Instructions: You must give (1) the number of cha	nnels on which	the cable system carried to	elevision broadcast	stations
	to its subscribers and (2) the ca	ble system's total n	umber of activa	ed channels, during the ac	counting period.	
Channels						
	1. Enter the total number of cha	nnels on which the	cable			44
	system carried television broa	dcast stations				
	2. Enter the total number of acti	vated channels				
	on which the cable system car	rried television broa	dcast stations			
	and nonbroadcast services					398
N	INDIVIDUAL TO BE CONTACT	TED IF FURTHER II	NFORMATION	IS NEEDED (Identify an ir	idividual	
	we can contact about this stater					
Individual to						
Be Contacted						
	Name	Chris Connol	ly		Telephone	609-681-2178
Be Contacted for Further Information	Name	Chris Connol			Telephone	609-681-2178
for Further	Name Address	650 College F	Road East, S			609-681-2178
for Further		650 College F	Road East, S per, street, rural re	uite 3100		609-681-2178
for Further		650 College F (Numb	Road East, S per, street, rural ru I 08540	uite 3100	ber)	
for Further		650 College F (Numb	Road East, S per, street, rural re	uite 3100 oute, apartment, or suite numl	ber)	
for Further	Address	650 College F (Numb Princeton, N. (City, I	Road East, S per, street, rural ru I 08540 lown, state, zip)	uite 3100 ute, apartment, or suite num	ber)	
for Further		650 College F (Numb	Road East, S per, street, rural ru I 08540 lown, state, zip)	uite 3100 oute, apartment, or suite numl	ber)	
for Further	Address	650 College F (Numb Princeton, N. (City, I	Road East, S per, street, rural ru I 08540 lown, state, zip)	uite 3100 ute, apartment, or suite num	ber)	
for Further Information	Address Email (optional) CERTIFICATION (This statement Signature Space O – this form will	650 College F (Numt Princeton, N. (City, 1) chris.connoll	Road East, S per, street, rural n 1 08540 own, state, zip) y@rcn.net e certifed and si an electronic "/-	uite 3100 uite, apartment, or suite numl gned in accordance with C si' signature (e.g., /s/John	Fax (optional) opyright Office regu Smith). Do not for	lations.)
for Further Information	Address Email (optional) CERTIFICATION (This statement	650 College F (Numt Princeton, N. (City, 1) chris.connoll	Road East, S per, street, rural n 1 08540 own, state, zip) y@rcn.net e certifed and si an electronic "/-	uite 3100 uite, apartment, or suite numl gned in accordance with C si' signature (e.g., /s/John	Fax (optional) opyright Office regu Smith). Do not for	lations.)
for Further Information	Address Email (optional) CERTIFICATION (This statement Signature Space O – this form will	650 College F (Numt Princeton, N. (City, I chris.connoll at of account must be Il be submitted with by your name in the	Road East, S per, street, rural re 1 08540 own, state, zip) y@rcn.net certifed and si an electronic "/- signature box	uite 3100 uite, apartment, or suite num gned in accordance with C si' signature (e.g., /s/John n Space O of tab "page 8,	Fax (optional) opyright Office regu Smith). Do not for space M-O*.	lations.)
for Further Information	Address Email (optional) CERTIFICATION (This statement Signature Space O – this form will	650 College F (Numt Princeton, N. (City, I chris.connoll at of account must be Il be submitted with by your name in the	Road East, S per, street, rural n 1 08540 own, state, zip) y@rcn.net e certifed and si an electronic "/-	uite 3100 uite, apartment, or suite num gned in accordance with C si' signature (e.g., /s/John n Space O of tab "page 8,	Fax (optional) opyright Office regu Smith). Do not for	lations.)
for Further Information	Address Email (optional) CERTIFICATION (This statement Signature Space O – this form will	650 College F (Num Princeton, N. (City, I chris.connoll t of account must be libe submitted with by your name in the	Road East, Sper, street, rural rights of the street, rural rights of the street, street, rural rights of the street, s	uite 3100 uute, apartment, or suite numi gned in accordance with C str signature (e.g., /s/John n Space O of tab "page 8, ted name: Parisa Senior Vice Presider	Fax (optional) opyright Office regu Smith). Do not for space M-O'. Salehani nt - Controller	lations.)
for Further Information	Address Email (optional) CERTIFICATION (This statement Signature Space O – this form will	650 College F (Num Princeton, N. (City, I chris.connoll t of account must be libe submitted with by your name in the	Road East, Sper, street, rural rights of the street, rural rights of the street, street, rural rights of the street, s	uite 3100 uute, apartment, or suite num gned in accordance with C si' signature (e.g., /s/John n Space O of tab "page 8, ted name: Parisa	Fax (optional) opyright Office regu Smith). Do not for space M-O'. Salehani nt - Controller	lations.) get to enter an electronic

U.S. Copyright Office

\$

ОК

Subgroup Gross Receipts Total

\$ 2,284,102.25

Subgroup		Subgroup/Community Name	Gross Receipts
FIRST	1	Dallas	\$ 2,284,102.25
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
KDAF	9	N	Dallas, TX	0.250	
KDFI	7	l N	Dallas, TX	1.000	
KDFW	4	N I	Dallas, TX	0.250	
KDTX KERA	19 13	E	Irving, TX Dallas, TX	1.000 0.250	
KFWD	13 17	I	Dallas, TX	1.000	
KLDT	299	i	Dallas, TX	1.000	
KMPX	22	i	Colleyville, TX	1.000	
KPXD	14	i	Arlington, TX	1.000	
KSTR	20	i	Dallas, TX	1.000	
KTVT	11	N	Dallas, TX	0.250	
KTXA	3	1	Ft Worth, TX	1.000	
KUVN	16	1	Dallas, TX	1.000	
KXAS	5	N	Ft Worth, TX	0.250	
KXTX	10	1	Dallas, TX	1.000	
WFAA	8	N	Dallas, TX	0.250	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	

	2. B'cast					Space G
	Channel	3. Type of				Basis of
1. Call Sign	Number	Station	6. Location of Station	n	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	

ACCOUNTING PERIOD: 2020/1

FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 20201 **Grande Communications Networks, LLC** 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.

	•

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **Grande Communications Networks, LLC** 61502 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF CARRIAGE (Yes or No) NUMBER **STATION** (If Distant) **KDAF** 9 Ν No Dallas, TX **KDFI** 7 ı No Dallas, TX See instructions for additional information **KDFW** Ν 4 No Dallas, TX on alphabetization. **KDTX** No 19 ı Irving, TX **KERA** 13 Ε No Dallas, TX **KFWD** 17 ı No Dallas, TX **KLDT** 299 No Dallas, TX ı **KMPX** 22 ı No Colleyville, TX **KPXD** 14 I No Arlington, TX **KSTR** 20 ı No Dallas, TX **KTVT** 11 Ν No Dallas, TX **KTXA** 3 No Ft Worth, TX ı **KUVN** 16 ı No Dallas, TX **KXAS** 5 Ν No Ft Worth, TX **KXTX** 10 ı No Dallas, TX **WFAA** 8 Ν No Dallas, TX

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
Grande Commi	unications N	letworks, l	LLC		61502		
PRIMARY TRANSMITTE	ERS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial							
				•			
		CHANN	EL LINE-UP	AB			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	o. 200/MeN of Change		
	NUMBER	STATION		(If Distant)			

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	'STEM:			SYSTEM ID#	Name	
Grande Comm	unications N	letworks, l	LLC		61502		
PRIMARY TRANSMITTE	ERS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as swETA-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), "" (for independent), "I-M" (for independent), "I-M" (for independent), "I-M" (for independent), "I-M" (for noncommercial educational), or "E-M							
				•			
, , , , , , , , , , , , , , , , , , , ,	.9		EL LINE-UP	·			
4.001	o DIOAGT	I			C LOCATION OF STATION		
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		
	NUMBER	STATION	,	(If Distant)			

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Grande Commi	unications I	Networks, I	LLC		61502		
PRIMARY TRANSMITTE	RS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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), "LM" (for independent multicast), "E" (for noncommercial educational) or "E-M" (for noncommercial educational multicast)							
Note: If you are utilizing	g multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.		
		CHANN	EL LINE-UP	AD			
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		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYSTEM	Namo
Grande Comm	unications N	Networks, I	LLC		61	502 Name
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space of carried by your cable of FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base Substitute Pasis of Substitute Pasis of Substitute Basis of Substitute Pasis of Substitute Pasis of For further in the paper SA3 of Column 1: List ead each multicast stream cast stream as "WETA-simulcast, Column 2: Give the its community of licens on which your cable of Column 3: Indicate educational station, by	G, identify every system during the ions in effect or 6.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a substand also in spatiormation concurr. The station's call associated with a case of the	y television standard programmer accounting and June 24, 194 4), or 76.63 (rd din the next prespect to any ations, or auth G—but do list titute basis. In the standard programmer acceptance of the station acceptance and the station acceptance and the station. Whether the station whether the station acceptance and the station.	period, except 81, permitting the ferring to 76.6 paragraph. It is in space I (the tition was carried ute basis station cording to its own be reported in coas assigned to sannel 4 in Wash attion is a network), "N-M" (I educational), of the ferring to the ferrin	(1) stations carried carriage of certariage of column 1 (list each the television stationage of certariage of cert	and low power television stations) donly on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other of the general instructions located as such as HBO, ESPN, etc. Identify the stream separately; for example on for broadcasting over-the-air in may be different from the channel expendent station, or a noncommercial ast), "I" (for independent), "I-M" commercial educational multicast).	G Primary Transmitters: Television
planation of local servi Column 5: If you h cable system carried to carried the distant state For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the	ice area, see pa ave entered "Yo he distant static ion on a part-tir sion of a distant t entered into on a primary trans simulcasts, also aree categories e location of ea	age (v) of the ges" in column on during the ame basis becamulticast streen or before Jumitter or an aspect of enter "E". If generation, see page (v) ch station.	general instruct 4, you must cor accounting perior ause of lack of a am that is not s ane 30, 2009, be association repre you carried the of the general if r U.S. stations,	ions located in the implete column 5, sod. Indicate by entactivated channel of subject to a royalty etween a cable system and the primal channel on any of instructions locate list the community	tating the basis on which your tering "LAC" if your cable system	
Note: If you are utilizing		. ,		•		
		CHANN	EL LINE-UP	AE		
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	

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
Grande Commi	unications N	letworks, l	LLC		61502		
PRIMARY TRANSMITTE	ERS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational) or "E-M" (for noncommercial educational) multicast							
				•			
Note: if you are utilizing	ng multiple char			·	cnannei line-up.		
	1	CHANN	EL LINE-UP	AF			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)			
	HOMBER	- CITATION		(ii Biotaint)			

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
Grande Comm	unications N	letworks, l	LLC		61502		
PRIMARY TRANSMITTE	ERS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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), "" (for independent), "1-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational) multicas							
FCC. For Mexican or 0	Canadian statio	ns, if any, give	e the name of th	ne community with	which the station is identifed.		
Note: If you are utilizing	ng multiple char			·	channel line-up.		
	1	CHANN	EL LINE-UP	AG			
1. CALL		3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)			
	NOMBLIX	OTATION		(II Distant)			

FORM SA3E. PAGE 3.						Τ
LEGAL NAME OF OWN					SYSTEM ID#	Name
Grande Comm	unications I	Networks, I	LLC		61502	
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base Substitute program base Substitute Pasis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you h cable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the	G, identify eventy system during the ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)	y television standard by television standard by television standard by television standard by televisions, or auth G—but do list titute basis. In the standard by the standard	period, except 81, permitting the seferring to 76.6 paragraph. It distant stations orizations: to the seferring to 10 paragraph. It is in space I (the stion was carried ute basis station eport origination cording to its own be reported in compared to the sefer and as assigned to the sefer and in the sefer and i	(1) stations carried to carriage of certail (e)(2) and (4))]; as carried by your context of both on a substitute, see page (v) on program services the television statifington, D.C. This will be the television statifington, but the television statification of the television of the televis	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your dering "LAC" if your cable system	Primary Transmitters: Television
FCC. For Mexican or 0	Canadian statio	ns, if any, giv	e the name of th	ne community with	which the station is identifed.	
Note: If you are utilizir	ng multiple char		·		channel line-up.	
	1	CHANN	EL LINE-UP	AH		
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	

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
Grande Commi	unications N	letworks, l	LLC		61502		
PRIMARY TRANSMITTE	ERS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational) or "E-M" (for noncommercial educational) multicast							
				•			
, , , , , , , , , , , , , , , , , , , ,			EL LINE-UP	•			
4 641	2 P'CAST		4. DISTANT?		6 LOCATION OF STATION		
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		
	NUMBER	STATION	,	(If Distant)			

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Grande Comm	unications N	Networks, I	LLC		61502	Nume	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "F" (for independent), "I-M" (for ind							
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	to which the station is licensed by the		
Note: If you are utilizing				•			
		CHANN	EL LINE-UP	AJ			
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		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
Grande Comm	unications N	Networks, I	LLC		61502		
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial							
				•			
		CHANN	EL LINE-UP	AK			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			

FORM SA3E. PAGE 3.						1
LEGAL NAME OF OWN					SYSTEM ID#	Name
Grande Comm	unications N	Networks, I	LLC		61502	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pa	G, identify even the system during the control of t	y television standard by television standard by television standard by television standard by televisions, or auth G—but do list titute basis. In the standard by the standard	g period, except 81, permitting the 181, permitting the 181, permitting the 181, permitting the 181, permitting to 76.6 paragraph. If distant stations orizations: It it in space I (the 181 tinns as a sation to 182 tinns as assigned to 182 tinns as assigned to 182 tinns as assigned to 184 tinns assigned to 184 tinns as as as as a second tinns as as as as as as a second tinns as	(1) stations carried to carriage of certa- 1(e)(2) and (4))]; as carried by your of the Special Statement of both on a substiffus, see page (v) on program service the er-the-air designation of the television statistication, D.C. This work station, an indefor network multicon "E-M" (for noncontrolled in the finite of the television statistication of the television statistication, proceeding the television statistication, an indefor network multicon "E-M" (for noncontrolled in the finite or "Yes ions located in the inplete column 5, and Indicate by entity the total of the primal channel on any of instructions located in the primal channel on any of instructions	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing		. ,		•	n which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	ΔL		
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	
				,		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
Grande Commi	unications N	letworks, l	LLC		61502	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
In General: In space (carried by your cable self-CC rules and regulated 76.59(d)(2) and (4), 76 substitute program becomes and respective program becomes and respective points and respective passis. For further in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA-Simulcast). Column 2: Give the	G, identify every eystem during the consistence of 6.61(e)(2) and (6.61(e)(2)	y television strate accounting and June 24, 1994, or 76.63 (rd in the next prespect to any titions, or auth G—but do listitute basis. Ince I, if the state arning substitute sign. Do not read a station accept the FCC hear, WRC is Charton accept the FCC hear, WRC is Charton accounting the strate and the strate arms must per the FCC hear.	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: tit in space I (the attion was carried ute basis station eport origination coording to its ov- be reported in our	(1) stations carrie the carriage of certain (e)(2) and (4))]; as carried by your content of Special Statement of both on a substitution, see page (v) of a program services the ser-the-air designation of the television statistics.	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify cion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel	Primary Transmitters: Television
educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h. cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	entering the lecast), "E" (for no ese terms, see leation is outside ce area, see paure entered "Yone distant station of a distant tentered into on a partire entered into on a primary transsimulcasts, also ree categories e location of ea Canadian statio	tter "N" (for no concommercial coage (v) of the the local servage (v) of the es" in column on during the a me basis beca multicast stream or before Ju mitter or an act color enter "E". If a see page (v) ch station. Fo ons, if any, give	etwork), "N-M" (I educational), of a general instruct vice area, (i.e. "congeneral instruct 4, you must confuse of lack of a geam that is not some 30, 2009, be association repression of the general in U.S. stations, and the soft mame of the same	for network multica or "E-M" (for nonco- ctions located in the distant"), enter "Ye- ions located in the mplete column 5, so- od. Indicate by ent ictivated channel of stubject to a royalty steween a cable sys- senting the primar channel on any of instructions locate- list the community me community with	paper SA3 form. stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
		CHANN	EL LINE-UP	AM		
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	

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	NER OF CABLE SY	STEM:				EM ID#	Name
Grande Comm	unications N	Networks, I	LLC			61502	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON					
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis is basis under specific FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fc Column 1: List each multicast stream cast stream as "WETA weta-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multi-For the meaning of the Column 4: If the st planation of local servi-	G, identify every system during the ions in effect or 6.61(e)(2) and (sis, as explaine Stations: With Inc CC rules, regular here in space only on a substand also in spanformation concorm. The station's call associated with a sec. For example system carried the in each case we are terms, see eation is outside ice area, see particulars.	y television standard page (v) of the standard	period, except 81, permitting the referring to 76.6 paragraph. or distant stations orizations: to the station was carried ute basis station eport origination cording to its own be reported in coas assigned to annel 4 in Wash ation is a netwoetwork), "N-M" (I educational), or egeneral instructivice area, (i.e. "or general instructivice area, instructivice area, (i.e. "or general instructivice area, instructivi	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your constant of the Special Statement of the Special Special Special Special Statement of the Special Statement of Special Special Special Statement of Special S	s". If not, enter "No". For an ex- paper SA3 form.		G Primary Transmitters: Television
•			•	•	stating the basis on which your ering "LAC" if your cable system		
carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these th Column 6: Give the	tion on a part-tir sion of a distant t entered into or a primary trans simulcasts, also nree categories e location of ea Canadian statio	me basis becamulticast stren or before Jumitter or an aspect of enter "E". If the seepage (v) ch station. Fons, if any, givens,	ause of lack of a earn that is not s one 30, 2009, be association repre you carried the of the general if r U.S. stations, e the name of the	activated channel of subject to a royalty etween a cable sys- senting the primal channel on any of instructions locate list the community ne community with	capacity. I payment because it is the subject stem or an association representing by transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form. I to which the station is licensed by the which the station is identifed.	ne	
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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		
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FORM SA3E. PAGE 3.					2)/2==11.15	
LEGAL NAME OF OWN					SYSTEM ID#	Namo
Grande Comm	unications I	Networks, I	LLC		61502	
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 for Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the	system during to ions in effect or 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and also in spatformation concurrent. The station's call associated with a channel number of the station of the station of the station of the station's call associated with a channel number of the station of th	he accounting In June 24, 1964), or 76.63 (rd in the next prespect to any attions, or auth G—but do list titute basis. In the state of	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: tit in space I (the tition was carried ute basis station eport origination coording to its own be reported in on as assigned to 1	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of both on a substitution, see page (v) on program services ter-the-air designal column 1 (list each the television statistics.	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other f the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television
educational station, by (for independent multice For the meaning of the Column 4: If the step planation of local service Column 5: If you heable system carried the carried the distant state. For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	e in each case we rentering the lecast), "E" (for no ese terms, see ation is outside ce area, see properties on a part-tipion of a distant static ion on a part-tipion of a distant is entered into on a primary trans is imulcasts, also ree categories e location of ea Canadian statio	whether the stater "N" (for no commercial page (v) of the the local servage (v) of the es" in column on during the ame basis becamulticast streen or before Jumitter or an act of enter "E". If a see page (v) ch station. Fons, if any, given	etwork), "N-M" (' I educational), o e general instruct vice area, (i.e. "c general instruct 4, you must cor accounting peric ause of lack of a eam that is not s ene 30, 2009, be essociation repre you carried the of the general i r U.S. stations, e the name of the	for network multic. or "E-M" (for nonco- ctions located in the distant"), enter "Ye ions located in the mplete column 5, s od. Indicate by ent ictivated channel c multiple to a royalty stween a cable sys senting the primar channel on any ot instructions locate list the community me community with	is". If not, enter "No". For an expaper SA3 form. Istating the basis on which your ering "LAC" if your cable system capacity. It payment because it is the subject stem or an association representing ry transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form. It to which the station is licensed by the which the station is identifed.	
		CHANN	EL LINE-UP	AO		1
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	
						"
						"
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						"
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
Grande Commi	unications N	letworks, l	LLC		61502		
PRIMARY TRANSMITTE	ERS: TELEVISIO	N					
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.63 (referring to 76.61(e)(2) and (4)); and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for							
Note: If you are utilizing				•	which the station is identifed. channel line-up.		
		CHANN	EL LINE-UP	AP			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN					SYSTEM ID#	Name
Grande Comm	unications N	Networks,	LLC		61502	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)/2) and (4), 76.61(e)/2) and (4), or 76.63 (referring to 76.61(e)/2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast),						
explanation of these the Column 6: Give the FCC. For Mexican or 0	nree categories e location of ea Canadian statio	, see page (v) ch station. Fo ns, if any, giv	of the general in U.S. stations, let the name of the	instructions locate list the community ne community with	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing	ig multiple char	•	EL LINE-UP		cnannei iine-up.	
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	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN					SYSTEM ID#	Name
Grande Comm	unications N	letworks, l	LLC		61502	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis s basis under specifc FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give th its community of licens on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you cable system carried t carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these th Column 6: Give th	G, identify even system during the ions in effect or 6.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a substand also in spanformation concorn. ch station's call associated with A-2". Simulcast e channel numbers are carried the in each case we rentered "Ye entering the lecast), "E" (for neese terms, see pation is outside ice area, see pation on a part-ting sion of a distant the entered into on a primary trans simulcasts, also ree categories e location of ea	y television state he accounting in June 24, 194, or 76.63 (red in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the state erning substitions in a station account of the state of the station. Whether the state of the station. Whether the state of the local server in column on during the same basis becard multicast stream or before Jumitter or an associated of the station. For the station.	g period, except 81, permitting the 181, permitting the 181, permitting the 181, permitting the 181, permitting to 76.6 paragraph. If distant stations orizations: It it in space I (the 181 tinn was carried the 181 tinn was carried to 181 tinn was carried to 181 tinn was station to 181 tinn was assigned to 181 tinn was	(1) stations carried to carriage of certa- 1(e)(2) and (4))]; as a carried by your of the Special Statement of both on a substitution, see page (v) on a program service the television statistication, D.C. This work station, an indefor network multicution "E-M" (for noncontrolled in the finite of the television statistication, part of the television statistication, an indefor network multicution located in the finite or "E-M" (for noncontrolled in the television shocated in the multiplet to a royalty state of the primal channel on any of instructions located list the community instructions located list the community in the primal channel on any of instructions located list the community in the primal channel on any of instructions located list the community.	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing		. ,		•		
		CHANN	EL LINE-UP	AR		
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	
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name	
Grande Comm	unications N	Networks, I	LLC		61502		
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76,59(d)(2) and (4), 76,61(e)(2) and (4), or 76.63 (referring to 76,61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated 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							
FCC. For Mexican or 0	Canadian statio	ns, if any, giv	e the name of th	ne community with	which the station is identifed.		
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.		
		CHANN	EL LINE-UP	AS			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			
				1			
		!		 			

LEGAL NAME OF OWN					SYSTEM ID#	Name
Grande Comm	unications N	Networks,	LLC		61502	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base Substitute program base Substitute Pasis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 for Column 1: List ead each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multi-For the meaning of the Column 5: If you cable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify even the system during it ions in effect or 6.61(e)(2) and (6.51(e)(2) and (6.51(e	y television standard y television y television standard y television y television y television y television y television y televisi	g period, except 81, permitting the 181, permitting the 181, permitting the 181, permitting the 181, permitting to 76.6 paragraph. If distant stations orizations: It it in space I (the 181 tinn was carried the 181 tinn was carried to 181 tinn was carried to 181 tinn was station to 181 tinn was assigned to 181 tinn was	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your of the Special Statement of both on a substitution, see page (v) on program service the television statistington, D.C. This the television statistington, D.C. This the station, an indefor network multion "E-M" (for noncontrolled in the station of the st	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further d in the paper SA3 form. y to which the station is licensed by the	G Primary Transmitters: Television
Note: If you are utilizing				•	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AT		
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	
				,		
				•		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
Grande Commi	unications N	Networks, I	LLC		61502	
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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 "I" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent), "I-M" (for independent), "I-M" (for independent), "I-M" (for						
Note: If you are utilizing	g multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AU		
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	

FORM SA3E. PAGE 3.						1
LEGAL NAME OF OWN					SYSTEM ID#	Name
Grande Comm	unications N	Networks, I	LLC		61502	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pa	G, identify even the system during the ions in effect or 6.61(e)(2) and (6.51(e)(2) and (6.51(y television standard programment of the station accounting of the station accounting of the station account of the station o	g period, except 81, permitting the 181, permitting the 181, permitting the 181, permitting the 181, permitting to 76.6 paragraph. If distant stations orizations: It it in space I (the 181 tinn was carried the 181 tinn was carried to 181 tinn was carried to 181 tinn was station to 181 tinn was assigned to 181 tinn was	(1) stations carried to carriage of certa- 1(e)(2) and (4))]; as carried by your of the Special Statement of both on a substiffus, see page (v) on program service the er-the-air designation of the television statistication, D.C. This work station, an indefor network multicor "E-M" (for noncontrol located in the distant"), enter "Yesions located in the implete column 5, and Indicate by entitle to a royalty statement of the primal channel on any of instructions located in the included in the	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing		. ,		•	n which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AV		
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	
				,		
						-

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
Grande Comm	unications N	letworks, l	LLC		61502		
PRIMARY TRANSMITTE	ERS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: **Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. **List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for							
FCC. For Mexican or (Note: If you are utilizing				•			
, , , , , , , , , , , , , , , , , , , ,	.g		EL LINE-UP	·			
4.001	o Bloage				C LOCATION OF STATION		
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		
	NUMBER	STATION	,	(If Distant)			
					,		

ACCOUNTING PERIOD: 2020/1 FORM SA3E. PAGE 4.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 61502 **Grande Communications Networks, LLC** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.							ACCOUNTING	PERIOD: 2020/1	
LEGAL NAME OF OWNER OF							SYSTEM ID#	Name	
Grande Communication	ns Netwo	rks, LLC					61502	Name	
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEN	NT AND PROGRAM LOG					ı	
In General: In space I, ident substitute basis during the acceptantion of the programm	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regula	ations, or a	uthorizations	s. For a further	Substitute	
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE									
During the accounting per broadcast by a distant state		r cable system	carry, on a substitute basi	s, any nonne	twork telev		ım X No	Special Statement and Program Log	
Note: If your answer is "No log in block 2.	", leave the	rest of this pag	ge blank. If your answer is "	'Yes," you mu	ust comple	te the progra	am		
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the progran Column 3: Give the call Column 4: Give the broat the case of Mexican or Can	titute progra ace, please a of every nor distant stati gulations, o tion. Do no Lucy" or "NB in was broad sign of the s adcast station	m on a separa attach additionanetwork televion and that your authorization tuse general of A Basketball: deast live, entestation broadcaph's location (thems, if any, the	al pages. ision program (substitute pour cable system substituted s. See page (vi) of the generategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the	rogram) that, d for the progeral instructio "basketball". o." m. station is lice	during the gramming cons located List speci	e accounting of another st I in the pape ific program he FCC or, in	ation r		
to the nearest five minutes. stated as "6:00–6:30 p.m."	es when the Example: a er "R" if the and regulation ogramming	program carri listed program	was substituted for progra	5 p.m. to 6:2 mming that yes enter the let under FCC r	e8:30 p.m. Four systen Eter "P" if the Fules and re	should be n was requir ne listed pro egulations in	ed		
S	SUBSTITUT	E PROGRAM	1		EN SUBST		7. REASON		
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN		5. MONTH AND DAY	_	TIMES TO	FOR DELETION		
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ACCOUNTING PERIOD: 2020/1 FORM SA3E, PAGE 6. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Grande Communications Networks, LLC 61502 **PART-TIME CARRIAGE LOG** J In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.– 3:15 a.m. app." • You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.– 12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS HOURS** DATE **FROM** TO DATE **FROM** TO

Form SA3E Long Form (Rev. 05-17) U.S. Copyright Office

	L NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	N			
Gra	nde Communications Networks, LLC		61502	Name			
all a (as i	COSS 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 secundentifed in space E) during the accounting period. For a further explanation of how to ce (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.	ondary transmission compute this amount	service , see 284,102.25	K Gross Receipts			
InstruConConIf you feetIf you accommoded	COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.						
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b k 3 below.	e entered on line 1 c	of				
▶ If pa	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low.	entered on line 2 in l	olock				
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoblock 4 below.	uld be entered on lir	ne				
	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or mor least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K	e is 1.064 percent of					
	Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.						
	This is your minimum fee.	\$	24,302.85				
	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block. • Did your cable system carry any distant television stations during the accounting perion Yes—Complete the DSE schedule. X No—Leave block 3 below blank and column Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or	nn 4, you must chec	k				
Block 3	4, or part 9, block A of the DSE schedule. If none, enter zero	\$	-				
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		0.00				
	Line 3. Add lines 1 and 2 and enter here	\$	-				
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE : Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$	24,302.85	Cable systems			
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter						
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)						
	Line 4. FILING FEE	\$	725.00	additional fees. Division for the			
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	25,027.85	appropriate form for submitting the additional fees.			
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See page (i) of the		additional 1663.			

Nama	LEGAL NAME OF OWNER OF CAR	SYSTEM:			SYSTEM ID#				
Name	Grande Communication	Networks, LLC			61502				
	CHANNELS								
M	Instructions: You must g	e (1) the number of channels	on which the cable syster	n carried television broadcas	t stations				
	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.								
Channels				ĺ					
		channels on which the cable roadcast stations			44				
	system carried televisio	Toducast stations							
	2. Enter the total number	activated channels							
	on which the cable syste	carried television broadcast	tations		398				
	and nonbroadcast servi	8							
N	we can contact about this	ACTED IF FURTHER INFOR atement of account.)	MATION IS NEEDED: (Id	lentify an individual					
Individual to		,							
Be Contacted									
for Further	Name Chris Coni	lly		Telephone	609-681-2178				
Information									
		Road East, Suite 3100 route, apartment, or suite number)							
	Princeton,								
	(City, town, state,								
	E " obs	aannally@ran nat		5 (C D					
	Email Chi	.connolly@rcn.net		Fax (optional)					
•	CERTIFICATION (This sta	nent of account must be certif	ed and signed in accorda	ance with Copyright Office re	gulations.				
O	. I the condensioned bench	andiffe the at Colorade area. The stands							
Certifcation	• I, the undersigned, hereby	ertify that (Check one, but only	one, of the boxes.)						
	(Owner other than cor	ration or partnership) I am the	owner of the cable system	m as identifed in line 1 of spac	e B; or				
		an corporation or partnership		agent of the owner of the cabl	e system as identified				
	in line 1 of space B	d that the owner is not a corpor	ation or partnership; or						
		an officer (if a corporation) or a	partner (if a partnership) o	of the legal entity identifed as o	wner of the cable system				
	in line 1 of space B.								
		ent of account and hereby decla			ned herein				
	[18 U.S.C., Section 1001(1	ct to the best of my knowledge, 6)]	information, and belief, an	id are made in good faith.					
		-							
]					
		/s/ Parisa Salehani							
	Ente	in electronic signature on the line	ahove using an "/s/" signa	ture to certify this statement					
	(e.g	s/ John Smith). Before entering	he first forward slash of the	e /s/ signature, place your curso					
	F2	itton, then type /s/ and your nam	e. Pressing the F button	will avoid enabling Excels Lotu	s compatibility settings.				
	Тур	or printed name: Parisa \$	Salehani						
	Title	Senior Vice Preside	nt - Controller						
		(Title of official position held in co							
	Dat	August 28, 2020							

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephor numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nama
Grande Communications Networks, LLC	61502	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system service of providing secondary transmissions of primary broadcast transmitters, the system shall scribers and amounts collected from subscribers receiving secondary transmissions pursuant to For more information on when to exclude these amounts, see the note on page (vii) of the general instrupance SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary made by satellite carriers to satellite dish owners? X NO	for the basic not include sub- section 119."	Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment of For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 for		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	- days	
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)	terest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further as contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	ssistance 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 Copyrig please list below the owner, address, first community served, accounting period, and ID number as give filing.		
Owner Address		
First community served Accounting period ID number		

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2020/1

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following:

- 1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
- 2) A station first carried after June 24, 1981, which could have beer carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.
- 3) A station of the same type substituted for a carried network, non-commercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)] in effect on June 24, 1981.
- 4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.
- 5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

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

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

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

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

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

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

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

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

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

Each of the second, third, and fourth DSEs 0.701% of gross receipts The fifth and each additional DSE 0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

- · If any of the stations were partially distant:
- 1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.
 - 2. Identify the communities/areas represented by each subscriber group.
- 3. For each subscriber group, calculate the total number of DSEs of that group's complement of stations.

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

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

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

- 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:

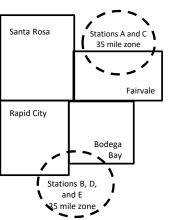
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

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



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

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

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

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

ACCOUNTING PERIOD: 2020/1

DSE SCHEDULE. PAG	E 11. (CONTINUED)										
4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#										
ı	Grande Communication	s Networks,	LLC			61502					
	SUM OF DSEs OF CATEGOR	RY "O" STATIO	NS:								
	Add the DSEs of each station. Enter the sum here and in line 1 of part 5 of this schedule. 0.00										
	Instructions:										
2		istructions: If the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5									
	of space G (page 3).										
Computation	In the column headed "DSE"			as "1.0"; for	each network or noncom-						
of DSEs for	mercial educational station, given	e the DSE as "									
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.											

Name		WNER OF CABLE SYSTEM:	rks IIC				S	YSTEM ID# 61502		
	Grande Com	Grando Communicação Notivo No. 225								
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.									
Capacity		C	ATEGORY LAC	STATIONS: 0	COMPUTAT	ION OF DSEs				
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	JRS OF ED BY ST M OF	JMBER F HOURS FATION N AIR	4. BASIS OF CARRIAG VALUE	GE VALUE		E		
			÷ ÷			X	=			
			÷			x x	·····			
			÷	=		x	=			
			÷	=		x	=			
			÷ ÷			x				
			······			x x	<u>-</u>			
	Add the DSEs of	OF CATEGORY LAC S of each station. m here and in line 2 of p) ,	▶	0.00				
Computation of DSEs for Substitute-Basis Stations	Was carried tions in effer Broadcast or space I). Column 2: Fat your option. Tolumn 3: E Column 4: E	ct on October 19, 1976 (ne or more live, nonnetwon For each station give the This figure should correse Enter the number of days Divide the figure in colum	itution for a program as shown by the lette ork programs during to number of live, nonrespond with the informs in the calendar years 2 by the figure in a	that your system er "P" in column 7 that optional carrie network programs nation in space I. r: 365, except in a column 3, and giv	was permitted of space (); an age (as shown by a carried in substance the result in control of the control of t	to delete under FCC rules	2 of were deleted s than the third	m).		
			BSTITUTE-BAS	IS STATIONS		ATION OF DSEs	1			
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE		
			············	=		÷		=		
			• • • • • • • • • • • • • • • • • • • •			÷		=		
				=				=		
		÷		=		÷		=		
		÷	-	=		÷		=		
	Add the DSEs of	OF SUBSTITUTE-BAS of each station. m here and in line 3 of p		e,	▶	0.00				
5		R OF DSEs: Give the am applicable to your system		in parts 2, 3, and	4 of this schedul	e and add them to provide	the tota			
Total Number	1. Number of	DSEs from part 2●				-	0.00			
of DSEs	2. Number of	DSEs from part 3 ●				<u> </u>	0.00			
	3. Number of	DSEs from part 4 ●				>	0.00			
	TOTAL NUMBER	R OF DSEs				>		0.00		

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2020/1

	OWNER OF CABLE						S	YSTEM ID#	Name
Grande Comn	nunications Ne	etworks, L	LC					61502	1144110
In block A: • If your answer if schedule.	"Yes," leave the re	emainder of լ	•	7 of the DSE scho	edule blank aı	nd complete pa	art 8, (page 16) of	the	6
If your answer if "No," complete blocks B and C below. BLOCK A: TELEVISION MARKETS								Computation of	
effect on June 24	m located wholly c , 1981? nplete part 8 of the plete blocks B and	schedule—[C below.	OO NOT COM		AINDER OF F	PART 6 AND 7		gulations in	3.75 Fee
Column 1:	l ist the call signs			part 2, 3, and 4 o			tem was nermitte	d to carry	
CALL SIGN	under FCC rules	and regulatione DSE Sche	ons prior to Ju dule. (Note: Tl	ne 25, 1981. For fine letter M below i	urther explana	ation of permitt	ed stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station BASIS OF (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. PERMITTED A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to								
Column 3:		e stations ide	entified by the I	n parts 2, 3, and 4 etter "F" in columr			vorksheet on pag	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
					<u></u>				
								0.00	
		В	LOCK C: CO	MPUTATION O	F 3.75 FEE				
Line 1: Enter the	e total number of	DSEs from	part 5 of this	schedule					
Line 2: Enter the	e sum of permitte	ed DSEs fro	m block B ab	ove				-	
	line 2 from line 1 leave lines 4–7 b			•		rate.	u-	0.00	
Line 4: Enter gro	oss receipts from	ı space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply	line 4 by 0.0375	and enter s	um here				x		permited/ partially nonpermitted
Line 6: Enter tot	al number of DS	Es from line	3					<u>-</u>	carriage? If yes, see part 9 instructions.
Line 7: Multiply	line 6 by line 5 ar	nd enter her	e and on line	2, block 3, spac	ce L (page 7)			0.00	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Grande Communications Networks, LLC 61502									
6	3. DSE	2. PERMITTED	1. CALL	3. DSE	2. PERMITTED	1. CALL	BLOCK 3. DSE	2. PERMITTED	1. CALL	
Computatio		BASIS	SIGN		BASIS	SIGN		BASIS	SIGN	
3.75 Fee										

LEGAL NAME OF OWNER OF CABLE SYSTEM:												
Grande Commi	unications	networks, LLC							61502			
stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage. Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division.												
	PERMITT	ED DSE FOR STA	TIONS CARRIE	ΞD	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS			_		
1. CALL					4. BASIS OF			6. P	ERMITTED	_		
SIGN	DSE	P	ERIOD		CARRIAGE	[OSE		DSE			
Instructions: Block A must be completed. In block A: If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule.												
		BLOCI	(A: MAJOR	TE	LEVISION MARK	ET				_		
Is any portion of the or	cable system v	vithin a top 100 maio	or television mark	ket	as defned by section 7	6.5 of ECC	rules in effect J	une 24	1981?			
l , ``	•				_			u,				
Too complete	blooke B and				THE PROCESS IS	parto						
BLOCK B: Ca	arriage of VHI	F/Grade B Contour	Stations		BLOCK	C: Compu	tation of Exem	pt DSEs	;			
commercial VHF stati	on that places				nity served by the cab	le system p						
 			mitted DSE		<u> </u>			ate permi	tted DSE			
CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	iN	DSE			
		-										
		TOTAL DSEs	0.00				TOTAL DS	Es	0.00			
	Instructions: You stations carried pric Column 1: List the c Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the FG A—Part-time sprof.55) B—Late-night prof.6.61(S—Substitute car general Column 5: Indicate Column 6: Compared in block IMPORTANT: The statement of accounts accounts accounts and the statement of the stat	Instructions: You must complete stations carried prior to June 25, Column 1: List the call sign for each Column 2: Indicate the DSE for the Column 3: Indicate the basis of Column 4: Indicate the basis of Column 6: Eate-night programming: 0.76.59(d)(1),76.61(e) B—Late-night programming: 0.76.61(e)(3)). S—Substitute carriage under general instructions Column 5: Indicate the station's Incolumn 6: Compare the DSE figure in block B, column 3: Column 6: Compare the DSE figure in block B, column 3: IMPORTANT: The information you statement of account on fle in the statement of account on fle in the Indicate the station in the Indicate the station of the column 3: If your answer is "Yes," complete Indicate the station of the column 3: If your answer is "Yes," complete Indicate the station that place in part, over the cable system? Is any station listed in block B of pacommercial VHF station that places or in part, over the cable system? Yes—Complete blocks B and the part of the cable system? Yes—List each station below with the places or in part, over the cable system? Yes—List each station below with the places or in part, over the cable system?	Instructions: You must complete this worksheet for stations carried prior to June 25, 1981, under forme Column 1: List the call sign for each distant station in Column 2: Indicate the DSE for this station for a sin Column 3: Indicate the accounting period and year in Column 4: Indicate the basis of carriage on which the (Note that the FCC rules and regulations cited by A—Part-time specialty programming: Carriage, compared in the column of the carriage under FCC rules and regulations cited by A—Part-time specialty programming: Carriage, compared in the column of the carriage under FCC rules, general instructions in the paper SA3 foolumn 5: Indicate the station's DSE for the current Column 6: Compare the DSE figures listed in column in block B, column 3 of part 6 for this statement of account on fle in the Licensing Division statement of account on fle in the Licensing Division PERMITTED DSE FOR STA 1. CALL 2. PRIOR 3. ACC SIGN DSE PI SI SIGN DSE PI SIGN	Instructions: You must complete this worksheet for those stations stations carried prior to June 25, 1981, under former FCC rules go Column 1: List the call sign for each distant station identified by the Column 2: Indicate the DSE for this station for a single accounting period and year in which the car Column 3: Indicate the basis of carriage on which the station was conclumn 4: Indicate the basis of carriage on which the station was conclumn 4: Indicate the basis of carriage on which the station was conclumn 4: Indicate the paccounting period and year in which the car Column 4: Indicate the station stations: Carriage, on a part-time be 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e) B—Late-night programming: Carriage under FCC rules, section 76.51(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or general instructions in the paper SA3 form. Column 5: Indicate the station in SDE for the current accounting per Column 5: Compare the DSE figures listed in columns 2 and 5 and in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRII 1. CALL 2. PRIOR 3. ACCOUNTING SIGN DSE PERIOD Instructions: Block A must be completed. In block A: If your answer is "Yes," complete blocks B and C, below. If your answer is "Yes," complete blocks B and C blank and complete BLOCK A: MAJOR *Is any portion of the cable system within a top 100 major television mar Yes—Complete blocks B of part 6 the primary stream of a commercial VHF station that places a grade B contour, in whole or in part, over the cable system? Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	Instructions: You must complete this worksheet for those stations ide stations carried prior to June 25, 1981, under former FCC rules goven Column 1: List the call sign for each distant station identifed by the let Column 2: Indicate the DSE for this station for a single accounting per Column 3: Indicate the accounting period and year in which the carriac Column 4: Indicate the basis of carriage on which the station was carria (Note that the FCC rules and regulations cited below perfain to tho A—Part-time specialty programming: Carriage, on a part-time basis 76.59(d)(1),76.61(e)(1), 76.63 (e)(1),	Instructions: You must complete this worksheet for those stations identifed by the letter 'F' stations carried prior to June 25, 1981, under former FCC rules governing part-time and sub Column 1: List the call sign for each distant station identified by the letter 'F' in column 2 of Column 3: Indicate the BSE for this station for a single accounting period, occurring between Column 3: Indicate the accounting period and year in which the carriage and DSE occurred Column 3: Indicate the basis of carriage on which the station was carried by Isilary one of the (Note that the FCC rules and regulations cited below pertain to those in effect on June 24. A—Part-time specialty programming: Carriage under FCC rules, sections 76.59(g)(3), 76.61(e)(3). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further general instructions in the paper SA3 form. Column 5: Indicate the stations 5 DSE for the current accounting period as computed in parts Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subj statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AN 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF PERIOD CARRIAGE In block A: If your answer is "Yes," complete blocks B and C, below. If your answer is "Yes," complete blocks B and C blank and complete part 8 of the DSE sched BLOCK A: MAJOR TELEVISION MARK Is any portion of the cable system within a top 100 major television market as defined by section 7 yes—Complete blocks B and C. BLOCK B: Carriage of VHF/Grade B Contour Stations Is any station listed in block B of part 6 the primary stream of a commercial VHF station that places a grade B contour, in whole or in part, over the cable system? Yes—List each station below with its appropriate permitted DSE No—Enter zero and proceed to part 6. CALL SIGN DSE	Instructions: You must complete this worksheet for those stations identified by the letter "F" in column: stations carried prior to June 25, 1981, under former FCC rules governing part-line and substitute carried. The column 2: Indicate the DSE for this station identified by the letter "F" in column 2 of part 6 of the Column 2: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981) Column 3: Indicate the abasis of carriage on which the station was carried by listing one of the following: (Note that the FCC rules and regulations: citied below pertain to those in effect on June 24, 1981) Column 4: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981) A-Part-lime specialty programming: Carriage, on a part-lime basis, of specialty programming under 76.564(1)/16.61(e)(3), or 76.61(e)(3), or	Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, stations carried prior to June 25, 1981, under former FCC rules governing part time and substitute carriage. Column 1: Instructions: Post for this station for a single accounting period, occurring to prior of the DSE schedule. Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 20, 1978. The station was carried by felipting one of the folia of the prior of the column 21, 1978. The station was carried by felipting one of the folia of the prior of the column 21, 1979. The station was carried by felipting one of the folia of the prior of the column 21, 1979. The station was carried by felipting one of the folia of the column 21, 1979. The station was carried by felipting one of the folia of the column 22, 1981. A -Partitime specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59((3), 76.61(e)(3)). B-Lates inglit programming: Carriage, under FCC rules, sections 76.59((3), 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (victorial programming) and the station of the column 21, 1979. S-Substitute carriage under FCC rules, sections 76.59(e)(3), 76.61(e)(3), or 76.63 (referring to 76.51(e)(1)). S-Substitute carriage under FCC rules, regulations, or authorizations. For further explanation, see page (victorial programming) and the station of the column 21, 20, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3,	Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e. stations carried prior to June 25, 1881, under former PCC rules governing part-time and substitute carriage. Socious 2, 1881, under former PCC rules governing part-time and substitute carriages. Column 2, but here by EE for socious address for substitute for sub	Instructions: Vourmack complete this workshore for those stations identified by the letter "Fin column 2 of block B, part 8 (i.e., those stations control prior to June 98; 1911 under former 5CC alles governing and have not assistant control prior to June 98; 1911 under former 5CC alles governing and have not stations and the control prior to June 98; 1911 under former 5CC alles governing park have and substitute carriage. Column 1: Liet the call sign for each distant station is derived by the letter "Fin column 2 of part 6 of the DSE exhectule Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/11) (Column 4: Indicate the base) or a rainge on which the station was carried by listing one of the following letters: A—Part-time specially programming control (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. A—Part-time specially programming Corriage, on a part-time basis of period programming under FCC rules, sections 73-56(1/2), 76.01(9/3), or 76.63 (referring to 76.01(9/3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper 83.3 from the pager 83.4 from 5 (referring to 76.01(9/3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper 83.5 may and 6 and lat the amalier of the two figures here. This figure should be entered in block 8, column 3 of part 6 for this station. IMPORTANT: The information up well no columns 2, 3, and 4 must be accurate and is subject to verification from the designates statement of account on 6 in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SEE PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS BLOCK C: Computation of Exempt DSEs BLOCK B		

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Grande Communications Networks, LLC	SYSTEM ID# 61502	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE	01002	
Section		2 224 422 25	7
1	Enter the amount of gross receipts from space K (page 7)	2,284,102.25	1
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 defned by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here	_	
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge.		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 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		

Name	_		YSTEM ID#
	(Grande Communications Networks, LLC	61502
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	
		ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part	
8		checked "Yes," use the total number of DSEs from part 5.	
Computation		ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation of	,	ır answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ır answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belov	v
Base Rate Fee	blank		
		is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.	
	Sel vice	e alea, See page (v) of the general instituctions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	rour cable system retransmit the signals of any partially distant television stations during the accounting period?	
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ \$	
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	<u> </u>
	2	(If block A of part 6 was checked "Yes,"	
		use the total number of DSEs from part 5.)	_
	Section		
	3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts	
		(the amount in section 1)	
		B. Enter 0.00701 of gross receipts	
		(the amount in section 1)	
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here ▶ \$	_
		E. Add lines A, and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7)	0.00
		Base Rate Fee	

DSE SCH	HEDULE. PAGE 17. ACCOUNTING	6 PERIOD: 2020/1
	AME OF OWNER OF CABLE SYSTEM: de Communications Networks, LLC 61502	Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.	_
4	A. Enter 0.01064 of gross receipts (the amount in section 1) **State	8
	B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$	Computation of
	C. Multiply line B by 3.000 and enter here \$	Base Rate Fee
	D. Enter 0.00330 of gross receipts (the amount in section 1) \$	
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here ▶	
	F. Multiply line D by line E and enter here	
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$ 0.00	
	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in G.	9
receipt	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 this on, you must:	Computation of Base Rate Fee
station DSEs a	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. 2. Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	and Syndicated Exclusivity Surcharge for
also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must impute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, cable system is wholly located outside all major television markets, complete block A only.	Partially Distant Stations, and
How to	o Identify a Subscriber Group for Partially Distant Stations	for Partially

Step 1: For each community served, determine the local service area of each wholly distant and each partially distant station you carried to that community.

Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by the same token, the station is distant to the subscriber.)

Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable system will have only one subscriber group when the distant stations it carried have local service areas that coincide.

Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber groups.

In each section:

- Identify the communities/areas represented by each subscriber group.
- Give 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 subscribers in the group.
- 1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, and 4 of this schedule; or,
- 2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, part 6 of this schedule.
- · Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.
- Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions in the paper SA3 form.
- · Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your actual calculations on the form.

Permitted Stations

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 61502 **Grande Communications Networks, LLC** Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

		E SYSTEM:				S	SYSTEM ID#	Name
Grande Communi	cations N	letworks, LLC					61502	Hallie
В	LOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA	Dallas			COMMUNITY/ ARE	A		0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
		=						and
		=						Syndicated
		=						Exclusivity
		-						Surcharge
								for
		-						Partially
		-						Distant
								Stations
		-						
		-						
			-					
			<u> </u>					
5-4-LD05-	1		0.00	T-4-1 DOE-		!!	0.00	
Total DSEs			0.00	Total DSEs			0.00	
Bross Receipts First G	roup	\$ 2,284	,102.25	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	T	0.110.0001050.0001			5011DT1	I SUBSCRIBER GRO		
	THIRD	SUBSCRIBER GROU						
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	
					······			
		-						
Fotal DSEs			0.00	Total DSEs			0.00	
	Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	
Total DSEs Gross Receipts Third G	Group	\$			rth Group	\$		
Gross Receipts Third G			0.00	Gross Receipts Fou			0.00	
		\$				\$		
Gross Receipts Third G			0.00	Gross Receipts Fou			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group		0.00	

Grande Communication	ABLE SYSTEM: S Networks, LLC				S	YSTEM ID# 61502	
	: COMPUTATION C		TE FEES FOR EAC				
	H SUBSCRIBER GRO		<u> </u>		SUBSCRIBER GROU		
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs		0.00	Total DSEs	<u> </u>		0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
se Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	H SUBSCRIBER GRO				SUBSCRIBER GROU		
OMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs		0.00	Total DSEs			0.00	
	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	
Total DSEs Gross Receipts Third Group Base Rate Fee Third Group	\$			·	\$		

	LEGAL NAME OF OWNER OF CABLE SYSTEM: Grande Communications Networks, LLC 61502										
			TE FEES FOR EACH								
	SUBSCRIBER GROU		TENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0								
OMMUNITY/ AREA		0	COMMUNITY/ AREA			U					
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
<u></u>											
					<u> </u>						
otal DSEs		0.00	Total DSEs			0.00					
ross Receipts First Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00					
Г											
	ase Rate Fee First Group \$ 0.00										
		· · · · · · · · · · · · · · · · · · ·	Base Rate Fee Secon		\$	0.00					
ELEVENTH S	\$ SUBSCRIBER GROU	JP		TWELVTH	SUBSCRIBER GROU	UP					
		· · · · · · · · · · · · · · · · · · ·	Base Rate Fee Secon COMMUNITY/ AREA	TWELVTH							
ELEVENTH S		JP		TWELVTH		UP					
ELEVENTH S	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0					
ELEVENTH S	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0					
ELEVENTH S	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0					
ELEVENTH S	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0					
ELEVENTH S	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0					
ELEVENTH S	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0					
ELEVENTH S	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0					
ELEVENTH S	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0					
ELEVENTH S	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0					
ELEVENTH S	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0					
ELEVENTH S	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0					
ELEVENTH S	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0					
ELEVENTH S	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0					
ELEVENTH S OMMUNITY/ AREA CALL SIGN DSE btal DSEs	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GRO	DSE					
ELEVENTH S OMMUNITY/ AREA CALL SIGN DSE Discrete of the second of the	CALL SIGN	JP O DSE O O O O O O O O O O O O O	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	DSE O.000					

LEGAL NAME OF OWN						S	61502	Name
		·	E RASE DA	TE FEES FOR EAC		IRER CROUD	0.1002	
		SUBSCRIBER GRO				SUBSCRIBER GRO	UP	_
COMMUNITY/ AREA	١		0	COMMUNITY/ ARE	A		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
						- 		for
								Partially
								Distant
								Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		SUBSCRIBER GRO	0.00	
COMMUNITY/ AREA		SUBSCRIBER GRO	<u>UP</u> 0	COMMUNITY/ ARE				
COMMUNITY AREA			U	COMMUNITY ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
						- 		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	I Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				•				
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxe	s above.	\$		
Lines nere allu III DIO	on o, iiiie 1,	Space L (page 1,				4		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Grande Communications Networks, LLC 61502										
E	BLOCK A: (COMPUTATION OF		TE FEES FOR EAC						
COMMUNITY/ AREA		SUBSCRIBER GRO	0	COMMUNITY/ ARE		SUBSCRIBER GRO	0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
								Base Rate Fee		
						 -		and		
								Syndicated Exclusivity		
								Surcharge		
								for		
								Partially		
								Distant		
								Stations		
						-				
Total DSFa			0.00	Total DSEs		Ц	0.00			
Total DSEs	2	•								
Gross Receipts First (-roup	\$	0.00	Gross Receipts Sec	ona Group	\$	0.00			
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00			
N	INTEENTH	SUBSCRIBER GRO	UP		TWENTIETH	SUBSCRIBER GRO	UP			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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 Fou	rth Group	\$	0.00			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth Group \$ 0.00			0.00			
Base Rate Fee: Add t			criber group	as shown in the boxe	s above.	\$				

Grande Communications	LEGAL NAME OF OWNER OF CABLE SYSTEM: Grande Communications Networks, LLC 61502										
			TE FEES FOR EAC								
	SUBSCRIBER GROU		TWENTY-SECOND SUBSCRIBER GROUP								
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0					
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
	-										
	-										
otal DSEs		0.00	Total DSEs			0.00					
ross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00					
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00					
TWENTY-THIRD	SUBSCRIBER GROU	JP	TWENT	TY-FOURTH	SUBSCRIBER GROU	JP					
OMMUNITY/ AREA		0	COMMUNITY/ AREA 0								
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
	-										
	-										
otal DSEs		0.00	Total DSEs			0.00					
			Gross Receipts Four	th Group	\$	0.00					
ross Receipts Third Group	\$	0.00		O.oup	*	0.00					
ross Receipts Third Group	\$	0.00									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Grande Communications Networks, LLC 61502										
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCR	RIBER GROUP				
	ry-FIFTH	SUBSCRIBER GRO		TWE	NTY-SIXTH	SUBSCRIBER GROU	JP	۵		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Commutation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
		31.122.21.01.						Base Rate Fee		
								and		
		-						Syndicated		
								Exclusivity Surcharge		
								for		
		-						Partially		
								Distant		
		-						Stations		
		-								
Total DSEs			0.00	Total DSEs		-	0.00			
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00			
TWENTY-S	EVENTH	SUBSCRIBER GRO	JP	TWEN						
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
		-								
		-								
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth Group \$ 0.00			0.00			
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e fees for each subso	criber group	as shown in the boxes	above.	\$				

LEGAL NAME OF OWNE Grande Communic						S	YSTEM ID# 61502	Name
				TE FEES FOR EACH				
	Y-NINTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
		-						
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
	ΓY-FIRST	SUBSCRIBER GROU		ii e		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e fees for each subsc space L (page 7)	criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW Grande Commu						S	61502	Name		
			BASE RA	ATE FEES FOR EAC	H SUBSCE	RIBER GROUP				
		SUBSCRIBER GROU				SUBSCRIBER GRO	UP	•		
COMMUNITY/ AREA	4	0		0 COMMUNITY/ AREA			COMMUNITY/ AREA 0			9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
								Base Rate Fe		
								and		
								Syndicated Exclusivity		
								Surcharge		
								for		
								Partially		
								Distant Stations		
								Stations		
Γotal DSEs	<u> </u>		0.00	Total DSEs		<u> </u>	0.00			
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00			
oroga recoupts i list	Огоир	<u>*</u>	0.00	Cross receipts occi	ла Огоар	*	0.00			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00			
TH	IRTY-FIFTH	SUBSCRIBER GROU	JP	TH	IIRTY-SIXTH	I SUBSCRIBER GRO	UP			
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA	A		0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
Γotal DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00			
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	s above.	\$				

LEGAL NAME OF OWNE Grande Communic						S	YSTEM ID# 61502	Name
				TE FEES FOR EAC				
THIRTY-S	EVENTH	SUBSCRIBER GROU		THIR	RTY-EIGHTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-						Syndicated
								Exclusivity Surcharge
		-						for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
THIRT	Y-NINTH	SUBSCRIBER GRO	JP		FORTIETH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	١		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		_						
		-						
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e fees for each subso	criber group	as shown in the boxes	s above.	\$		

Name	(STEM ID# 61502	Sì						LEGAL NAME OF OWNE Grande Communic
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION O	LOCK A: (BL
9	IP	SUBSCRIBER GROU	-SECOND	FORTY		SUBSCRIBER GRO	TY-FIRST	FOR
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated								
Exclusivity								
Surcharge								
for Partially								
Distant								
Stations								
	0.00		<u> </u>	T	0.00			
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	3ase Rate Fee First G
	IP	SUBSCRIBER GROU	-FOURTH	FORT	JP	SUBSCRIBER GRO	TY-THIRD	FOR1
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		 						
		•						
						•••••••••••		
	0.00_			Total DSEs	0.00			otal DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Fotal DSEs Gross Receipts Third G

LEGAL NAME OF OWN Grande Commun						S	YSTEM ID# 61502	Name
			F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP	31002	
		SUBSCRIBER GRO				SUBSCRIBER GRO	UP	Ω
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						 		and
		_						Syndicated
								Exclusivity Surcharge
								for
		-						Partially
						-		Distant
								Stations
						•		
Total DSEs		<u> </u>	0.00	Total DSEs		!!	0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
•	•			·				
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FORTY	-SEVENTH	SUBSCRIBER GRO	UP	FOR	RTY-EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		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 Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add t			criber group	as shown in the boxe	s above.	\$		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP FORTY-NINTH SUBSCRIBER GROUP COMMUNITY! AREA 0 SE CALL SIGN DSE CALL SIGN	LEGAL NAME OF OWNI						S	YSTEM ID# 61502	Name
FORTY-NINTH SUBSCRIBER GROUP			·		TE EEEO EOO E : :		UDED ODGUE	01302	
CALL SIGN DSE CALL SIGN					TE FEES FOR EAC			UP	
CALL SIGN DSE CALL SIGN	COMMUNITY/ AREA			0					_
Base Rate Fee and Syndicated Sundicated Sundicate	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Syndicated Exclusivity Surcharge for Partially Stations Total DSEs Spass Receipts First Group Spass Rate Fee Ferst Group Spass Rate Fee Ferst Group Spass Rate Fee First Group Spass Rate Fee Fee Second Group Spass Rate Fee Ferst Group Spass Rate Fee Second Gr									Base Rate Fee
Exclusivity Surcharge for partially Distant Stations Total DSEs Gross Receipts First Group FIFTY-FIRST SUBSCRIBER GROUP CALL SIGN DSE CALL									
Surcharge for Partially Distant Stations Fotal DSEs									
for Partially Distant Stations Figure 1									
Partially Distant Stations									
Stations Statio									
Total DSEs Total									Distant
Sross Receipts First Group Some Rate Fee First Group FIFTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE									Stations
Sross Receipts First Group Some Rate Fee First Group FIFTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE									
Sross Receipts First Group Some Rate Fee First Group FIFTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE									
Sross Receipts First Group Some Rate Fee First Group FIFTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE									
Sross Receipts First Group Some Rate Fee First Group FIFTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE									
Sross Receipts First Group Some Rate Fee First Group FIFTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE									
Base Rate Fee First Group FIFTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA C	Total DSEs		_	0.00	Total DSEs			0.00	
FIFTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA O CO	Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
FIFTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA 0 CO									
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIG									
CALL SIGN DSE CA		TY-FIRST	SUBSCRIBER GRO		li		SUBSCRIBER GRO	_	
Total DSEs	COMMUNITY/ AREA			0	COMMUNITY/ ARE/	Α		0	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	Total DSEs			0.00	Total DSEs			0.00	
I	Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
		_							
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	Base Rate Fee Third (Group	[\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7) \$				criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE Grande Communic						S	YSTEM ID# 61502	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
FIFT	Y-THIRD	SUBSCRIBER GRO		FIF.	TY-FOURTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		31.122.21.01.						Base Rate Fee
								and
		-						Syndicated
								Exclusivity Surcharge
								for
		-						Partially
		-						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	ΓY-FIFTH	SUBSCRIBER GRO	JP	TT .		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e fees for each subsc space L (page 7)	criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE						SY	STEM ID# 61502	Name
				ATE FEES FOR EACH				
COMMUNITY/ AREA	EVENTH	SUBSCRIBER GROU)P 0	COMMUNITY/ AREA		SUBSCRIBER GROUP	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
37122 31314	202	O, LEE OIOIV	DOL	STILL STORY	502	O, LEE GIGIN	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
		-				-		
							-	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	Y-NINTH	SUBSCRIBER GROU	JP		SIXTIETH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				-		
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Grande Communic						S	YSTEM ID# 61502	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
SIXT	TY-FIRST	SUBSCRIBER GRO		SIXT	TY-SECONE	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA	IUNITY/ AREA O COMMUNITY/ AREA COMMUNITY/ AREA				0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
		31.122.21.01.						Base Rate Fee
								and
		-						Syndicated
								Exclusivity Surcharge
								for
		-						Partially
		-						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	Y-THIRD	SUBSCRIBER GRO	JP	TT .		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		=						
Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
							<u> </u>	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e fees for each subso	criber group	as shown in the boxes	above.	\$		

STEM ID# Name Name	SY						LEGAL NAME OF OWNE Grande Communic	
	IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL	
9	SUBSCRIBER GROU	TY-SIXTH	SIX		SUBSCRIBER GRO	TY-FIFTH	SIX	
_			COMMUNITY/ AREA	0		COMMUNITY/ AREA		
DSE Of	CALL SIGN DSE CALL SIGN			DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate F					51.122.51.51		<u> </u>	
and								
Syndicate								
Exclusivit								
Surcharge	_							
for								
Partially								
Distant Stations								
Stations	_							
						···		
						-		
0.00			Total DSEs	0.00			otal DSEs	
0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Bross Receipts First G	
0.00	\$	l Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First G	
	SUBSCRIBER GROU	V EIGHTH	TVIS	ID	SUBSCRIBER GRO	SEVENTH	SIVTV	
0		I-LIOITIII	COMMUNITY/ AREA	0		JEVEIVIII	COMMUNITY/ AREA	
DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
						-		
	_							
						<u> </u>		
					-			
					-	-		
					-			
0.00			Total DSEs	0.00			otal DSEs	
0.00	•	Crous			•	`roup		
0.00	Ψ	σιουρ	Gross Receipts Fourth	0.00	\$	лоир	Gross Receipts Third G	
					i contract of the contract of			

Grande Communication	ABLE SYSTEM: s Networks, LLC					4937EM ID# 61502
	A: COMPUTATION C					
	H SUBSCRIBER GRO		ii e		H SUBSCRIBER GRO	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	······					
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
SEVENTY-FIRS	ST SUBSCRIBER GRO	OUP	SEVEN	ITY-SECONE	D SUBSCRIBER GRO	UP
DMMUNITY/ AREA		0	COMMUNITY/ AREA 0			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
	•	0.00		rth Group	•	0.00
Fross Receipts Third Group	\$	0.00	Gross Receipts Fou	rui Gioup	\$	0.00

LEGAL NAME OF OWN Grande Commun						S	YSTEM ID# 61502	Name
E	BLOCK A: (COMPUTATION OF		TE FEES FOR EAC				
SEVEN COMMUNITY/ AREA		SUBSCRIBER GRO	<u>0</u>	COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
						_		and
								Syndicated
								Exclusivity Surcharge
								for
						-		Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Page Pate Fee First (Croup		0.00	Page Pate Fee See	and Craun		0.00	
Base Rate Fee First (SUBSCRIBER GRO		Base Rate Fee Second		SUBSCRIBER GRO		
COMMUNITY/ AREA		JOBSCKIBLIK GIVO	0	COMMUNITY/ AREA		SOBSCINDEN GIVE	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 Fou	rth Group	\$	0.00	
, .	•			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	F			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add to Enter here and in bloom			criber group	as snown in the boxe	s above.	\$		

LEGAL NAME OF OWNER OF CAE Grande Communications					S	61502	Na
BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
SEVENTY-SEVENTH	SUBSCRIBER GRO				H SUBSCRIBER GRO		,
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	Comp
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Comp
							Base I
							a
							Synd Excl
							Surc
							f
							Par
							Dis
							Stat
	Ц						
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
OF VENITY MINIT	CURCOURER CRO	LID.		FIGURET		LID.	
COMMUNITY/ AREA	SUBSCRIBER GRO	<u> </u>	COMMUNITY/ ARE		H SUBSCRIBER GRO	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 Fou	rth Group	\$	0.00	
	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Total DSEs Gross Receipts Third Group		0.00	Gross Receipts Fou	·		0.00	

Name	EGAL NAME OF OWNER OF CABLE SYSTEM: Strande Communications Networks, LLC 61502								
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION O	LOCK A: (BI	
0	IP	SUBSCRIBER GROU	'-SECOND	EIGHT	JP	SUBSCRIBER GRO	ITY-FIRST	EIGH	
9 Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate F									
and Syndicated									
Exclusivity									
Surcharge						_			
for						-			
Partially									
Distant									
Stations									
	0.00	-	•	Total DSEs	0.00			otal DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	Group	Gross Receipts First G	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	iroup	Base Rate Fee First G	
	IP	SUBSCRIBER GROU	/-FOURTH	EIGHT	JP	SUBSCRIBER GRO	TY-THIRD	EIGH	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
						-			
		-				-			
		-				_			
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							T T		
	0.00			Total DSEs	0.00_			Total DSEs	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Fotal DSEs	

LEGAL NAME OF OWNE						S	YSTEM ID# 61502	Name
			BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP	0.002	
		SUBSCRIBER GROU				SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
						-		and
						<u> </u>		Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
						 -		Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GROU		li		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		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 Four	th Group	\$	0.00	
	- ·/F			Section Out	P			
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				11				
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWI						S	YSTEM ID# 61502	Name
		·	DACE DA	TE EEES EOD FAO	LU GI IDOOD	IRED COOLID	01002	
		SUBSCRIBER GRO		TE FEES FOR EAC		SUBSCRIBER GRO	UP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
			···					Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs		<u> </u>	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	and Group	\$	0.00	
Oloss Neccipis i list	Оюцр	<u> </u>	0.00	Cross receipts occi	ond Group	•	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO		li		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	I Group	\$	0.00	Gross Receipts Foul	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWI						S	61502	Name
			F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP	3.002	
		SUBSCRIBER GRO				SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
		_						and
								Syndicated
						<u> </u>		Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
		-						
T			0.00				0.00	
Total DSEs	0		0.00	Total DSEs	d O		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NIN	IETY-FIFTH	SUBSCRIBER GRO	UP	N	INETY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
						<u> </u>		
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	I Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				Ш				
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxe	es above.	\$		
Enter here and in bio	on o, iiiie 1,	opace L (page 1,				4		

CRIBER GROUP TH SUBSCRIBER GROUP O Computation of Base Rate Fe and Syndicated Exclusivity Surcharge for		TE FEES FOR EACH NINET COMMUNITY/ AREA		COMPUTATION OF SUBSCRIBER GRO		В
CALL SIGN DSE of Base Rate Fe and Syndicated Exclusivity Surcharge	/-EIGHTH		JP	SUBSCRIBER GRO	a = 1 /= 1 . 	
Computation CALL SIGN DSE of Base Rate Fe and Syndicated Exclusivity Surcharge		COMMUNITY/ADEA	0	COBCOLUBELL CITO	SEVENTH	NINETY-
CALL SIGN DSE of Base Rate Fe and Syndicated Exclusivity Surcharge						COMMUNITY/ AREA
and Syndicated Exclusivity Surcharge	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Syndicated Exclusivity Surcharge						
Exclusivity Surcharge						
Surcharge						
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for						
Partially						
Distant						
Stations						
	ļ					
0.00		Total DSEs	0.00	-		Total DSEs
\$ 0.00	l Group	Gross Receipts Secon	0.00	\$	iroup	Gross Receipts First G
					·	·
\$ 0.00	Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
TH SUBSCRIBER GROUP	IDREDTH	ONE HU	JP	SUBSCRIBER GRO	TY-NINTH	NINE
0		COMMUNITY/ AREA	0			COMMUNITY/ AREA
CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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<mark></mark>						
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0.00		Total DSEs	0.00	1		Total DSEs
	Crou-			•	`ro!!=	
\$ 0.00	Group	Gross Receipts Fourth	0.00	\$	oroup	Gross Receipts Third (
\$ 0.00	Group	Base Rate Fee Fourth	0.00	\$	Group	Base Rate Fee Third 0

				TE FEES FOR EACH				
9		SUBSCRIBER GROUP	SECOND			SUBSCRIBER GROU	DFIRST	
Computat	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate	BOL	O/ALL GIGIT	BOL	CALL CICIA	DOL	O/ IEE GIGIT	DOL	O/LE GIGIT
and						=		
Syndicat						-		
Exclusiv								
Surchar								
for								
Partiall								
Distan								
Station								
	0.00		<u> </u>	Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	oup	ross Receipts First Gr
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	ase Rate Fee First Gr
				01151111110050				0115 111 1155
		SUBSCRIBER GROUP	FOURTH			SUBSCRIBER GROU	D THIRD	
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		=				-		
						_		
	0,00			Total DSFs	0.00			otal DSFs
	0.00			Total DSEs	0.00			
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	roup	
		\$	Group			\$	roup	otal DSEs fross Receipts Third G
		\$	·			\$	·	

Grande Communication	s Networks, LLC				5	4STEM ID# 61502
			TE FEES FOR EAC			
ONE HUNDRED FIFT	H SUBSCRIBER GRO		ONE HUNG		1 SUBSCRIBER GROU	
COMMUNITY/ AREA		0				0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
ONE HUNDRED SEVENT	H SUBSCRIBER GRO		Ħ		SUBSCRIBER GROU	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	١		
			COMMONT IT THE	4		0
ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
ALL SIGN DSE	CALL SIGN				CALL SIGN	
ALL SIGN DSE	CALL SIGN				CALL SIGN	
ALL SIGN DSE	CALL SIGN				CALL SIGN	
CALL SIGN DSE	CALL SIGN				CALL SIGN	
CALL SIGN DSE	CALL SIGN				CALL SIGN	
CALL SIGN DSE	CALL SIGN				CALL SIGN	
CALL SIGN DSE	CALL SIGN				CALL SIGN	
CALL SIGN DSE	CALL SIGN				CALL SIGN	
CALL SIGN DSE	CALL SIGN				CALL SIGN	
CALL SIGN DSE	CALL SIGN				CALL SIGN	
CALL SIGN DSE	CALL SIGN				CALL SIGN	
CALL SIGN DSE	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
otal DSEs	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE CALL SIGN DSE Total DSEs Gross Receipts Third Group Base Rate Fee Third Group		DSE	Total DSEs	DSE		DSE

LEGAL NAME OF OWN Grande Commur						S	61502	Name
		COMPUTATION OF		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
		_				 		Surcharge
								for
								Partially
								Distant Stations
								Stations
Total DSEs			0.00	Total DSEs		Щ	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
	·				•	·		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		Ħ		SUBSCRIBER GRO	_	
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 Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo	the base ra t	te fees for each subs	criber group	as shown in the boxe	s above.	\$		
	-,	· (1-55·)						

LEGAL NAME OF OWN Grande Commun						S	YSTEM ID# 61502	Name
		COMPUTATION OF SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	4		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
		_						Surcharge
								for
								Partially
								Distant Stations
								Stations
Total DSEs			0.00	Total DSEs		Ц	0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO		Ħ		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	Α		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 Four	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OW Grande Commu						S	YSTEM ID# 61502	Name
	BLOCK A: (ATE FEES FOR EAC		RIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA		0		9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00	
		SUBSCRIBER GROU		ii —		SUBSCRIBER GRO	_	
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
	1.0			Total DSEs	W- O	•	_	
Gross Receipts Third	a Group	<u>\$</u>	0.00	Gross Receipts Fourt	in Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

Name	4STEM ID# 61502	S						LEGAL NAME OF OWNE Grande Communic
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (BL
9		SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED TWENT		SUBSCRIBER GRO	NTY-FIRST	ONE HUNDRED TWEN
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate F		_				=		
and								
Syndicate								
Exclusivity Surcharge								
for								
Partially								
Distant								
Stations								
	0.00			Total DSEs	0.00	•	•	otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
		SUBSCRIBER GROUP	Y-FOURTH	ONE HUNDRED TWENT		SUBSCRIBER GROUP	NTY-THIRD	ONE HUNDRED TWEN
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						_		
						-		
	***************************************					-		
		I [1					
						•		
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Fotal DSEs Gross Receipts Third G

LEGAL NAME OF OW Grande Commu						S	61502	Name
ONE HUNDRED TW	/ENTY-FIFTH	COMPUTATION O SUBSCRIBER GROU	Р	ii —	WENTY-SIXTH	IBER GROUP SUBSCRIBER GROU		9
COMMUNITY/ AREA	Α		0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
						-		for
								Partially Distant
								Stations
Total DSEs	•		0.00	Total DSEs	•	! !	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NE HUNDRED TWEN		SUBSCRIBER GROU		ii —		SUBSCRIBER GROUI	_	
COMMUNITY/ AREA	A		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		_						
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo	I the base rat ock 3, line 1,	te fees for each subs	criber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNE Grande Communic						S	YSTEM ID# 61502	Name
			DACEDA	TE FEES FOR EAC	NU CLIBCOD	IRER CROUR	0.002	
ONE HUNDRED TWEN				П		SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		- CODOCIADEIX CIRCOI	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O/ILL GIGIT	DOL	O/ LEE OF OF T	BOL	ONEE GIGIT	DOL	O'NEE GIGIT	DOL	Base Rate Fee
						•		and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED THIF	RTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED THI	RTY-SECOND	SUBSCRIBER GROUP	•	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	•		0.00	Total DSEs	-		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
				••				
Base Rate Fee: Add th Enter here and in block	e base rat 3, line 1, s	te fees for each subsc space L (page 7)	riber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OW Grande Commu						S	YSTEM ID# 61502	Name
	BLOCK A: 0			ATE FEES FOR EAC		RIBER GROUP		
COMMUNITY/ ARE			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-						Syndicated
								Exclusivity Surcharge
		-						for
								Partially
		-						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GROUP		ii e		H SUBSCRIBER GROUP	_	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		•						
Total DSEs			0.00	Total DSEs			0.00	
	d Craws	•			th Crave	•	_	
Gross Receipts Third	и	<u>\$</u>	0.00	Gross Receipts Four	ui Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OW Grande Commu						S	61502	Name
ONE HUNDRED THIR				TE FEES FOR EAC		RIBER GROUP	5	0
COMMUNITY/ AREA	Α		0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	DSE CALL SIGN		of
								Base Rate Fee
								and Syndicated
								Exclusivity
						 		Surcharge
								for Partially
		_						Distant
								Stations
						•		
			0.00			1	2.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TI	HIRTY-NINTH	SUBSCRIBER GROU	Р	ONE HUNDRE	D FORTIETH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	4		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo	I the base ra tock 3, line 1,	te fees for each subs	scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OW						S	61502	Name
		COMPUTATION OF		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GROUF		
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
						-		for
								Partially
								Distant
								Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED F	ORTY-THIRD	SUBSCRIBER GROUP	D	ONE HUNDRED FO	RTY-FOURTH	SUBSCRIBER GROUI	P	
COMMUNITY/ AREA	4		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo	the base ra tock 3, line 1,	te fees for each subs	criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWI						S	61502	Name
		COMPUTATION OF SUBSCRIBER GROUP		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GROUF	5	Ω.
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
						 -		Surcharge
								for Partially
						-		Distant
								Stations
T / 1505			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FORT	Y-SEVENTH	SUBSCRIBER GROUI)	ONE HUNDRED FO	ORTY-EIGHTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		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 Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo	the base ra tck 3, line 1,	te fees for each subs space L (page 7)	criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN Grande Commur						S	YSTEM ID# 61502	Name
E ONE HUNDRED FOR				TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	CALL SIGN DSE	
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs		_	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Second	ond Group	\$	0.00	
ONE HUNDRED FI	FTY-FIRST	SUBSCRIBER GRO	UP	ONE HUNDRED FIF	TY-SECOND	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		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 Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN Grande Commur						S	61502	Name
		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO		
COMMUNITY/ AREA		- CODOCINDEN CINC	0	COMMUNITY/ AREA		- CODOCINDEN GIVE	0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
		_						Exclusivity Surcharge
		-						for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED F	IFTY-FIFTH	SUBSCRIBER GRO	UP	ONE HUNDRED	FIFTY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_				. –		
			<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxe	s above.	\$		

	61502	S						LEGAL NAME OF OWNE Grande Communi
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	_OCK_A: (BI
		SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FIF	1	SUBSCRIBER GROUP	-SEVENTH	ONE HUNDRED FIFTY
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and Syndicate								
Exclusivity								
Surcharge								
for								
Partially								
Distant								
Stations								
"								
"								
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	3ase Rate Fee First G
1		SUBSCRIBER GROUP	D SIXTIETH	ONE HUNDRE	1	SUBSCRIBER GROUP	TY-NINTH	ONE HUNDRED FIF
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
"								
"								
"								
<u>"</u>								
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G

LEGAL NAME OF OWNE Grande Communi						S	61502	Naı
В	LOCK A: (COMPUTATION C	F BASE RA	TE FEES FOR EAG	CH SUBSCE	RIBER GROUP		
	FIRST	SUBSCRIBER GRO	OUP		SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Dallas			COMMUNITY/ ARE	Α		0	Comp
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Comp
								Base R
								ar
								Syndi
								Exclu
								Surc fo
								Part
	<u> </u>							Dist
								Stat
		-						
Total DSEs	<u> </u>	!	0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$ 2,28	4,102.25	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	OUP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
5.055 Receipts Time Group								
Base Rate Fee Third Group \$ 0.00			Base Rate Fee Fou	rth Group	\$	0.00		
Base Rate Fee: Add th			scriber group	as shown in the boxe	es above.			
Enter here and in block						\$	0.00	

Name	YSTEM ID# 61502					Networks, LLC		LEGAL NAME OF OWNE Grande Communi
				TE FEES FOR EACH				Bl
9		SUBSCRIBER GROU	SIXTH			SUBSCRIBER GROU	FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicate								
Exclusivit Surcharg								
for		·					-	
Partially								
Distant						-		
Stations								
		-						
						-		
	0.00			Total DSEs	0.00			Total DSEs
		•		Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	5	d Group					2. 000 000.p.oo. 0
	0.00	\$	d Group	Gross Receipts Secon				
	0.00	\$		Base Rate Fee Secon	0.00	\$	roup	3ase Rate Fee First G
	0.00		d Group					
	0.00	\$	d Group			\$		
	0.00	\$	d Group	Base Rate Fee Secon	JP	\$		
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
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	YSTEM ID# 61502	S'				Networks, LLC		LEGAL NAME OF OWNE Grande Communi
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				TE FEES FOR EACH				
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Name	YSTEM ID# 61502	S'				Networks, LLC		LEGAL NAME OF OWNE Grande Communic
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Name	YSTEM ID# 61502	S						LEGAL NAME OF OWNE Grande Communi
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	Y-SIXTH			SUBSCRIBER GROU	TY-FIFTH	
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Name	YSTEM ID# 61502	S				Networks, LLC		LEGAL NAME OF OWNE Grande Communic
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Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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Name	YSTEM ID# 61502					Networks, LLC		LEGAL NAME OF OWNE Grande Communic
				TE FEES FOR EACH				
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Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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Name	YSTEM ID# 61502	S'						LEGAL NAME OF OWNE Grande Communi
				TE FEES FOR EACH				
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	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FII COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First G FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FII COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First G FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FII COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First G FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FII COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First G FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FII COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First G FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FII COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First G FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FII COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First G FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FII COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First G FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FII COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First G FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FII COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First G FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FII COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First G FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FII COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First G FIF COMMUNITY/ AREA
	JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FII COMMUNITY/ AREA CALL SIGN	JP 0	\$ SUBSCRIBER GROU	TY-FIFTH DSE	FIF COMMUNITY/ AREA CALL SIGN

Name	YSTEM ID# 61502							LEGAL NAME OF OWNE Grande Communic
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GROU	SEVENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicate								
Exclusivity Surcharge								
for								
Partially						-	-	
Distant								
Stations								
						-		
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	-		•				
	0.00	\$		Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	0.00		d Group					
	0.00	\$ SUBSCRIBER GROU	d Group			SUBSCRIBER GROU		FIFT
	0.00		d Group	Base Rate Fee Secon	JP			FIFT
	0.00 JP	SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TY-NINTH	FIFT
	0.00 JP	SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TY-NINTH	FIFT
	0.00 JP	SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TY-NINTH	FIFT
	0.00 JP	SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TY-NINTH	FIFT
	0.00 JP	SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TY-NINTH	FIFT
	0.00 JP	SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TY-NINTH	FIFT
	0.00 JP	SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TY-NINTH	FIFT
	0.00 JP	SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TY-NINTH	FIFT
	0.00 JP	SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TY-NINTH	FIFT
	0.00 JP	SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TY-NINTH	FIFT
	0.00 JP	SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TY-NINTH	FIFT
	0.00 JP	SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TY-NINTH	COMMUNITY/ AREA
	0.00 JP	SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TY-NINTH	FIFT
	0.00 JP	SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TY-NINTH	FIFT COMMUNITY/ AREA
	0.00 JP Ose	SUBSCRIBER GROU	d Group SIXTIETH DSE	Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	FIFT
	O.00 JP OSE O.00 O.00	SUBSCRIBER GROU	d Group SIXTIETH DSE	CALL SIGN CALL SIGN Total DSEs	JP O DSE O O O O O O O O O O O O O	SUBSCRIBER GROU	DSE	CALL SIGN CALL SIGN Total DSEs

LEGAL NAME OF OWN Grande Commun					_	S	61502	Name
				TE FEES FOR EACH				
	(TY-FIRST	SUBSCRIBER GRO		ii		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
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								Syndicated
		-						Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
SIX	TY-THIRD	SUBSCRIBER GRO	UP	SIXT	Y-FOURTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
	····							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
		·		l san	-	·		
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee Third (he base ra			Base Rate Fee Fourth	·	\$	0.00	

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		SUBSCRIBER GRO				SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
								Computa
CALL SIGN I	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and Syndicat
			<u> </u>					Exclusivi
								Surcharg
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otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First Grou	Jp.	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
ase Rate Fee First Grou	מנ	s	0.00	Base Rate Fee Secon	d Group	s	0.00	
ase Rate Fee First Grou	ıp	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
		\$ SUBSCRIBER GROI	-			\$ SUBSCRIBER GROU	•	
SIXTY-SE\			-				•	
SIXTY-SE\ OMMUNITY/ AREA			UP	SIXT			UP	
SIXTY-SE\ OMMUNITY/ AREA	VENTH	SUBSCRIBER GROI	UP 0	SIXT COMMUNITY/ AREA	Y-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SE\ OMMUNITY/ AREA	VENTH	SUBSCRIBER GROI	UP 0	SIXT COMMUNITY/ AREA	Y-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SE\ OMMUNITY/ AREA	VENTH	SUBSCRIBER GROI	UP 0	SIXT COMMUNITY/ AREA	Y-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SE\ OMMUNITY/ AREA	VENTH	SUBSCRIBER GROI	UP 0	SIXT COMMUNITY/ AREA	Y-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SE\ OMMUNITY/ AREA	VENTH	SUBSCRIBER GROI	UP 0	SIXT COMMUNITY/ AREA	Y-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SE\ OMMUNITY/ AREA	VENTH	SUBSCRIBER GROI	UP 0	SIXT COMMUNITY/ AREA	Y-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SE\ OMMUNITY/ AREA	VENTH	SUBSCRIBER GROI	UP 0	SIXT COMMUNITY/ AREA	Y-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SE\ OMMUNITY/ AREA	VENTH	SUBSCRIBER GROI	UP 0	SIXT COMMUNITY/ AREA	Y-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SE\ OMMUNITY/ AREA	VENTH	SUBSCRIBER GROI	UP 0	SIXT COMMUNITY/ AREA	Y-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SE\	VENTH	SUBSCRIBER GROI	UP 0	SIXT COMMUNITY/ AREA	Y-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SE\	VENTH	SUBSCRIBER GROI	UP 0	SIXT COMMUNITY/ AREA	Y-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SE\	VENTH	SUBSCRIBER GROI	UP 0	SIXT COMMUNITY/ AREA	Y-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SE\ OMMUNITY/ AREA	VENTH	SUBSCRIBER GROI	UP 0	SIXT COMMUNITY/ AREA	Y-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SE\ OMMUNITY/ AREA	VENTH	SUBSCRIBER GROI	UP 0	SIXT COMMUNITY/ AREA	Y-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SEN OMMUNITY/ AREA CALL SIGN I	VENTH	SUBSCRIBER GROI	DSE	SIXT COMMUNITY/ AREA CALL SIGN	Y-EIGHTH	SUBSCRIBER GRO	DSE	
SIXTY-SEN OMMUNITY/ AREA CALL SIGN I	DSE	CALL SIGN	DSE DSE	SIXT COMMUNITY/ AREA CALL SIGN Total DSEs	Y-EIGHTH DSE	SUBSCRIBER GROU	DSE O.00	
SIXTY-SEN OMMUNITY/ AREA CALL SIGN I	DSE	SUBSCRIBER GROI	DSE	SIXT COMMUNITY/ AREA CALL SIGN	Y-EIGHTH DSE	SUBSCRIBER GRO	DSE	
COMMUNITY/ AREA	DSE	CALL SIGN	DSE DSE	SIXT COMMUNITY/ AREA CALL SIGN Total DSEs	Y-EIGHTH DSE	SUBSCRIBER GROU	DSE O.00	
SIXTY-SEN OMMUNITY/ AREA CALL SIGN I	DSE	CALL SIGN	DSE DSE	SIXT COMMUNITY/ AREA CALL SIGN Total DSEs	Y-EIGHTH DSE	SUBSCRIBER GROU	DSE O.00	

	YSTEM ID# 61502	S'						LEGAL NAME OF OWNE Grande Communic
				TE FEES FOR EACH				
9	JP	SUBSCRIBER GROU	VENTIETH	SE		SUBSCRIBER GROL	ΓY-NINTH	SIX
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and		-						
Syndicate Exclusivit								
Surcharg								
for							-	
Partially								
Distant								
Stations								
	<u> </u>		!	Total DSEs	0.00		1	Total DSEs
	0.00				0.00	¢	roup	Gross Receipts First G
-	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	loup	oloss Receipts Filst G
		\$		Gross Receipts Secon	0.00	\$		
	0.00		d Group	Base Rate Fee Secon	0.00		roup	Base Rate Fee First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	0.00 0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	roup TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	roup TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	roup TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	roup TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	roup TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	roup TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	roup TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	roup TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	roup TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	roup TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	roup TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	roup TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	roup TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	roup TY-FIRST	SEVEN COMMUNITY/ AREA CALL SIGN
	0.00 0.00 JP DSE	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA CALL SIGN	0.00	\$ SUBSCRIBER GROU	TY-FIRST DSE	Base Rate Fee First G SEVEN COMMUNITY/ AREA

Name	YSTEM ID# 61502	S'						LEGAL NAME OF OWNE Grande Communic
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GROU	ry-third	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F						-		
and							-	
Syndicated								
Exclusivity Surcharge								
for		-						
Partially		-				-	-	
Distant								
Stations								
						-		
		•				•		
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	0.00			Total DSEs	0.00			Total DSEs
				Gross Receipts Secor	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Gross recorpts ecoor				
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	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVE COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	SEVEN COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVE COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	SEVEN COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVE COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	SEVEN COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVE COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	SEVEN
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVE COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	SEVEN COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVE COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	SEVEN COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVE COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	SEVEN COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVE COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	SEVEN COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVE COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	SEVEN COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVE COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	SEVEN COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVE COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	SEVEN COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVE COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVE COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	SEVEN COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVE COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	SEVEN COMMUNITY/ AREA
	O.00 JP Ose O.00 O.00	\$ SUBSCRIBER GROU	d Group	SEVEI COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE O.000	SUBSCRIBER GROU	DSE	SEVEN COMMUNITY/ AREA CALL SIGN Total DSEs
	DSE	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVE COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	SEVEN COMMUNITY/ AREA CALL SIGN

Name	YSTEM ID# 61502					Networks, LLC	cations N	Grande Communic
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GROU	SEVENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicated								
Exclusivity Surcharge		-						
for								
Partially		<u>-</u>					-	
Distant								
Stations								
						•		
	0.00	11		Total DSEs	0.00		<u> </u>	Total DSEs
			4.0	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	a Group					
	0.00	\$	a Group	Gross Receipts Secon			·	•
	0.00	\$		Base Rate Fee Secon	0.00	\$		
	0.00		d Group	Base Rate Fee Secon	_		-oup	3ase Rate Fee First Gr
	0.00	\$	d Group	Base Rate Fee Secon	_	\$	-oup	Base Rate Fee First Gr
	0.00	\$	d Group	Base Rate Fee Secon	JP	\$	-oup	Base Rate Fee First Gr
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	roup TY-NINTH	Base Rate Fee First Gr SEVENT COMMUNITY/ AREA
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	roup TY-NINTH	Base Rate Fee First Gr SEVENT COMMUNITY/ AREA
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	roup TY-NINTH	Base Rate Fee First Gr SEVENT COMMUNITY/ AREA
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	roup TY-NINTH	Base Rate Fee First Gr SEVENT COMMUNITY/ AREA
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	roup TY-NINTH	Base Rate Fee First Gr SEVENT COMMUNITY/ AREA
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	roup TY-NINTH	Base Rate Fee First Gr SEVENT COMMUNITY/ AREA
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	roup TY-NINTH	Base Rate Fee First Gr SEVENT COMMUNITY/ AREA
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	roup TY-NINTH	Base Rate Fee First Gr SEVENT COMMUNITY/ AREA
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	roup TY-NINTH	Base Rate Fee First Gr SEVENT COMMUNITY/ AREA
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	roup TY-NINTH	Base Rate Fee First Gr SEVENT COMMUNITY/ AREA
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	roup TY-NINTH	Base Rate Fee First Gr SEVENT COMMUNITY/ AREA
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	roup TY-NINTH	Base Rate Fee First Gr SEVENT COMMUNITY/ AREA
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GROU	roup TY-NINTH	Base Rate Fee First Gr SEVENT COMMUNITY/ AREA
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ase Rate Fee First Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
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NINETY-FIFT OMMUNITY/ AREA CALL SIGN DSE	H SUBSCRIBER GRO	DUP DSE	NIN COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GRO	DSE	
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LEGAL NAME OF OWN Grande Commun						S	YSTEM ID# 61502	Name
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NINE	ETY-NINTH	SUBSCRIBER GRO	UP	ONE H	UNDREDTH	SUBSCRIBER GRO	UP	
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Doop Beta Fra This I	Croun		0.00	Book Bata Fac Fa	th Craws		0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	ui Group	\$	0.00	
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LEGAL NAME OF OWNE Grande Communic						S	61502	Name
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	e base ra			as shown in the boxes a		\$	0.00	

Name	YSTEM ID# 61502	S'				Networks, LLC		LEGAL NAME OF OWNE Grande Communic
				TE FEES FOR EACH				
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LEGAL NAME OF OWNE Grande Communic			•			S	YSTEM ID# 61502	Name
				TE FEES FOR EACH				
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Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
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ONE HUNDRED EL	EVENTH	SUBSCRIBER GROU	IP	ONE HUNDRED	TWELVTH	SUBSCRIBER GRO	UP	
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Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
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		te fees for each subsc space L (page 7)	riber group	as shown in the boxes a	above.	\$		

Name	YSTEM ID# 61502	S'						LEGAL NAME OF OWNE Grande Communic
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Name	YSTEM ID# 61502	S'						LEGAL NAME OF OWNE Grande Communic
				TE FEES FOR EACH	BASE RA			
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Grande Communicatio	CABLE SYSTEM: ns Networks, LLC				S	61502	Name
BLOCK	A: COMPUTATION	OF BASE RA	ATE FEES FOR EAG	CH SUBSCF	RIBER GROUP		
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COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	9 Computati
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otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWENTY-TH	IRD SUBSCRIBER GRO	UP	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP)	
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Name	61502							Grande Communi
				TE FEES FOR EACH	BASE RA			
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Name	YSTEM ID# 61502	S						LEGAL NAME OF OWNE Grande Communio
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Name	YSTEM ID# 61502	S`				Networks, LLC		LEGAL NAME OF OWNE Grande Communic
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9		SUBSCRIBER GROUP	Y-FOURTH		_	SUBSCRIBER GROUP	TY-THIRD	
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otal DSEs		0.00	Total DSEs			0.00	
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						1	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
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COMMUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
CALL SIGN DS	E CALL SIGI	N DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		0.00	Total DSEs			0.00	
	-	0.00		irth Group	\$	0.00	
Total DSEs Gross Receipts Third Group	\$		Total DSEs Gross Receipts Fou	irth Group	\$		

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