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

**STATEMENT OF ACCOUNT** for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

## SA3E Long Form

Return completed workbook by email to:

# coplicsoa@loc.gov

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

Α	AC	COUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting Period		2020/2				
<b>B</b> Owner	rate	tructions: Give the full legal name of the owner of the cable system. If the owner is a e title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busine <i>If there were different owners during the accounting period, only the owner</i> <i>ingle statement of account and royalty fee payment covering the entire accound</i> Check here if this is the system's first filing. If not, enter the system's ID	ess of the cable system or on the last day of the counting period.	n. e accounting period should sub		6474
	LE	EGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM				
		WAVE DIVISION HOLDINGS LLC				
					647	420201
					6474	2020/2
		3700 MONTE VILLA PARKWAY BOTHELL WA 98021				
С		<b>STRUCTIONS:</b> In line 1, give any business or trade names used to nes already appear in space B. In line 2, give the mailing address o				
System	1	IDENTIFICATION OF CABLE SYSTEM:				
		WAVE BROADBAND				
		MAILING ADDRESS OF CABLE SYSTEM: 3700 MONTE VILLA PARKWAY				
	2	(Number, street, rural route, apartment, or suite number)				
		BOTHELL WA 98021 (City, town, state, zip code)				
D		tructions: For complete space D instructions, see page 1b. Identify	y only the fist comm	unity served below and rel	ist on page	d i d
Area Served	Witi	h all communities. CITY OR TOWN	STATE			
First		PORT ORCHARD	WA			
Community	В	elow is a sample for reporting communities if you report multiple ch	l annel line-ups in Si	bace G.		
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUE	3 GRP#
Sample	Ald	a	MD	Α		1
•		ance	MD	В		2
	Gei	ring	MD	В		3
form in order to pro numbers. By provid search reports prep	cess y ling Pl pared f	tion 111 of title 17 of the United States Code authorizes the Copyright Offce to collect your statement of account. PII is any personal information that can be used to identify or I, you are agreeing to the routine use of it to establish and maintain a public record, wh for the public. The effect of not providing the PII requested is that it may delay process ments of account. and it may affect the legal sufficiency of the fling. a determination the	or trace an individual, su hich includes appearing i ing of your statement of	ch as name, address and telephon n the Offce's public indexes and in account and its placement in the	e	

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

2/24/2021

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	
WAVE DIVISION HOLDINGS LLC			6474	
<b>Instructions:</b> List each separate community served by the cable system. A "community" in FCC rules: "a separate and distinct community or municipal entity (including unincorpo areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst of system identification hereafter known as the "first community." Please use it as the first	rated communitie community that y	s within unincorpo ou list will serve as	rated	D Area Served
<b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile home below the identified city or town.	e parks should be	reported in parent	heses	
If all communities receive the same complement of television broadcast stations (i.e., one all communities with the channel line-up "A" in the appropriate column below or leave the on a partially distant or partially permitted basis in the DSE Schedule, associate each releadesignated by a number (based on your reporting from Part 9).	column blank. If evant community	you report any stat with a subscriber g	ions roup,	
When reporting the carriage of television broadcast stations on a community-by-commun channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns be	a subscriber grou			
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	
PORT ORCHARD	WA	A		First
BELFAIR	WA	Α		Community
ALLYN	WA	A		
BANGOR NAVAL BASE	WA	A		
	WA			
		A		
KEYPORT NAVAL BASE	WA	A		See instructions for
NORTHSHORE	WA	A		additional information on alphabetization.
HOOD CANAL	WA	Α		
SEABECK	WA	Α		
PUGET SOUND NAVAL BASE	WA	A		
JACKSON PARK NAVAL BASE	WA	A		
				Add rows as necessary.

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	LEGAL NAME OF OWNER OF CABL	E SYSTEM:										5	YST	
Name	WAVE DIVISION HOLDI	NGS LLC												647
Е	SECONDARY TRANSMISSION													
E	In General: The information in s				-			-						
Secondary	system, that is, the retransmission about other services (including p													
Transmission	last day of the accounting period								indet be		0 0/101			
Service: Sub-		h blocks in space E call for the number of subscribers to the cable system, broken												
scribers and	down by categories of secondary transmission service. In general, you can compute the number of subscribers in													
Rates	each category by counting the n separately for the particular serv											charged		
	<b>Rate:</b> Give the standard rate of											e and the		
	unit in which it is generally billed	-	-	-							-			
	category, but do not include disc	ounts allowed	for adva	ance p	ayment.									
	Block 1: In the left-hand block	•			-			-						
	systems most commonly provide that applies to your system. <b>Not</b>													
	categories, that person or entity							-						
	subscriber who pays extra for ca													
	first set" and would be counted o													
	Block 2: If your cable system	-			-									
	printed in block 1 (for example, t with the number of subscribers a													
	sufficient.		e nym-i		IUCK. A I	.000		e-word	uescrip					
	BL	OCK 1 NO. OF	-								BLOC		1	
	CATEGORY OF SERVICE	SUBSCRIB		R	ATE		CAT	EGOR	Y OF SE	RVI	CE	NO. OF SUBSCRIBERS	F	RATE
	Residential:										-			
	Service to first set	1	5,765	\$	29.95									
	Service to additional set(s)													
	• FM radio (if separate rate)						•••••							
	Motel, hotel		243	\$	2.44									
	Commercial		874	\$	11.20									
	Converter													
	Residential													
	Non-residential													
	I SEDVICES OTHER THAN SEC		NSIMIS	NONG	DATE	~								
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Services Other Than Secondary ransmissions:	In General: Space F calls for rainot covered in space E, that is, the service for a single fee. There are furnished at cost or (2) services amount of the charge and the urenter only the letters "PP" in the Block 1: Give the standard rate Block 2: List any services that listed in block 1 and for which a start brief (two- or three-word) descriptions (two- are the three-word) descriptions (two- or three-word) descriptions (two- or three-word) descriptions (two- are the three-word) descriptions (two- are the three-word) descriptions (two- are	te (not subscril hose services re two exceptic or facilities furn hit in which it is rate column. te charged by t t your cable sy separate charge btion and includ BLO RATE \$ 17.00 \$ 80.00	ber) info that are ons: you nished t usually the cabl stem fur ge was r de the ra CK 1 CATEC Installa • Mo • Co • Pay • Fire • Bu	rmatic not o do no o nons billed e syste nished nade o ate for <u>SORY</u> ation: tel, ho mmero y cable y cable e prote	on with re ifered in t need to subscrib If any r em for e d or offe or establ each. OF SEF Non-res tel sial e-add'I c ection rotectior	esp co o gi ers ate ach red lish <u>RVII</u> <b>sid</b>	mbination ive rate . Rate in s are ch of the during ed. List CE ential	on with informan narged applica the ac	any seo ation co tion sho on a va able serv counting other se	conda ncerr uld ir riable rices perior rvice C/ Di Di Di Di HI	ATEGO ATEGO	smission services both the ogram basis, were not form of a BLOCK 2 RY OF SERVICE d Content avorites ariety ports able Pack	\$ \$ \$ \$ \$ \$ \$	77 13 8 12 32 19 14
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Services Other Than Secondary ransmissions:	In General: Space F calls for rainot covered in space E, that is, the service for a single fee. There all furnished at cost or (2) services amount of the charge and the urenter only the letters "PP" in the Block 1: Give the standard rate Block 2: List any services that listed in block 1 and for which a strift (two- or three-word) descript (two- or three-word) desc	te (not subscril hose services re two exceptic or facilities furn hit in which it is rate column. te charged by t t your cable sy separate charge btion and includ BLO RATE \$ 17.00 \$ 80.00	ber) info that are ons: you nished t usually the cabl stem fur ge was r de the ra CK 1 CATEC Installa • Mo • Col • Pay • Fire • Bur Other • Re	rmatic not o do no o nons billed e syste nished nade o ate for <u>SORY</u> ation: tel, ho mmero y cable y cable prote rglar p servic conne	on with ru ifered in t need to subscrib If any r em for e d or offe or estable each. OF SEF Non-res tel sial e- a-add'I c ection rotectior es: ct	esp co o gi ers ate ach red lish <u>RVII</u> <b>sid</b>	mbination ive rate . Rate in s are ch of the during ed. List CE ential	on with informan narged applica the ac	any seo ation co tion sho on a va able serv counting other se	condation ncerr uld ir riable rices perior rvice C/ Di Di Di Di Hi Hi Sr Ci	ATEGO (pande gital Si gital Ca gital Ca	smission services both the ogram basis, were not form of a <u>BLOCK 2</u> <u>RY OF SERVICE</u> d Content avorites ariety poorts able Pack	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	77 13 8 12 32 19 14 19 18
Services Other Than Secondary ransmissions:	In General: Space F calls for rainot covered in space E, that is, the service for a single fee. There are furnished at cost or (2) services amount of the charge and the urenter only the letters "PP" in the Block 1: Give the standard rate Block 2: List any services that listed in block 1 and for which a sibrief (two- or three-word) descriptions	te (not subscril hose services re two exceptic or facilities furn hit in which it is rate column. te charged by t t your cable sy separate charge btion and includ BLO RATE \$ 17.00 \$ 80.00	ber) info that are ons: you hished t usually the cabl stem fur ge was r de the ra CK 1 CATEC Installa • Mo • Col • Pay • Fire • Bui Other • Dis	rmatic not o do no o nons billed e syste nished nade o ate for <u>ation:</u> tel, ho mmero y cable e prote rglar p servic conne	on with re- ifered in t need to subscrib If any r em for e d or offe or estable each. OF SEF Non-re- tel sial e- add'I c ection rotectior <b>es:</b> ct ct	esp co o gi ers ate ach red lish <u>RVII</u> <b>sid</b>	mbination ive rate . Rate in s are ch of the during ed. List CE ential	on with informan narged application the action these	any sec ation co tion sho on a va able serv counting other se	condation ncerr uld ir riable rices perior rvice C/ Di Di Di Di Di Hit Hit Si	ATEGO (pande gital Fa gital Ca gital Ca gital Ca gital Ca gital Ca gital Ca gital Ca gital Ca ao mowtim nemax arz	smission services both the ogram basis, were not form of a BLOCK 2 RY OF SERVICE d Content avorites ariety poorts able Pack	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	77 13 8 12 32 19 14 19 18 17
Services Other Than Secondary ransmissions:	In General: Space F calls for rainot covered in space E, that is, the service for a single fee. There all furnished at cost or (2) services amount of the charge and the urenter only the letters "PP" in the Block 1: Give the standard rate Block 2: List any services that listed in block 1 and for which a strift (two- or three-word) descript (two- or three-word) desc	te (not subscril hose services re two exceptic or facilities furn hit in which it is rate column. te charged by t t your cable sy separate charge btion and includ BLO RATE \$ 17.00 \$ 80.00	ber) info that are ns: you nished t usually the cabl stem fur ye was r de the ra CK 1 CATEC Installa • Mo • Col • Pay • Fira • Bur • Bur • Bur • Dis • Ou	rmatic not o do no o nons billed e syste made o ate for ation: tel, ho y cable y cable y cable prote rglar p servic conne tlet rel	on with ru ifered in t need to subscrib If any r em for e d or offe or estable each. OF SEF Non-res tel sial e- a-add'I c ection rotectior es: ct	esp co o gi ers ate ach red lish RVII <b>sid</b>	mbination ive rate . Rate in s are ch o of the during ed. List CE ential	on with informan narged application the action these	any sec ation co tion sho on a va able serv counting other se	conda ncerr uld ir riable vices periu rvice C/ Di Di Di Di Di St Ci St	ATEGO part trans per-pro- listed. od that s in the ATEGO pande gital Va gital Si gital Ca 30 30 Maz nowtim nemax arz pvieple	smission services both the ogram basis, were not form of a BLOCK 2 RY OF SERVICE d Content avorites ariety poorts able Pack	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	77 13 8 12 32 19 14 19 18

FORM SA3E. PAGE 3.		
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
WAVE DIVISION HOLDINGS LLC	6474	Name

WAVE DIVISION	HOLDING				04/4	·	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
In General: In space G	, identify every	television sta	tion (including tr	anslator stations a	nd low power television stations)	0	
		•	• • • •	,	only on a part-time basis under	G	
					n network programs [sections d (2) certain stations carried on a	Primary	
substitute program bas				o/2/ and (4/)], an		Transmitters:	
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:							
				Special Statemen	t and Program Log)—if the		
station was carried	•		it in opuoo i (uio	opoolal olatomor			
					e basis and also on some other		
in the paper SA3 for		erning substitu	ite basis stations	s, see page (v) of t	he general instructions located		
		sign. Do not re	port origination	program services	such as HBO, ESPN, etc. Identify		
			•	•	on. For example, report multi-		
WETA-simulcast).	-2". Simulcast s	streams must	be reported in co	olumn 1 (list each s	stream separately; for example		
	channel numb	er the FCC ha	is assigned to th	e television statior	n for broadcasting over-the-air in		
			nnel 4 in Washir	ngton, D.C. This m	ay be different from the channel		
on which your cable sys Column 3: Indicate			ition is a network	station. an indepe	endent station, or a noncommercial		
					st), "I" (for independent), "I-M"		
					mercial educational multicast).		
For the meaning of these Column 4: If the sta					naper SA3 form. ". If not, enter "No". For an ex-		
planation of local service	ce area, see pa	ge (v) of the g	eneral instructio	ns located in the p	paper SA3 form.		
					ating the basis on which your ring "LAC" if your cable system		
carried the distant stati		0	01		<b>o</b> , ,		
For the retransmissi	on of a distant	multicast strea	am that is not su	bject to a royalty p	ayment because it is the subject		
					em or an association representing		
					transmitter, enter the designa- er basis, enter "O." For a further		
explanation of these the	ree categories,	see page (v)	of the general in	structions located	in the paper SA3 form.		
				-	o which the station is licensed by the		
Note: If you are utilizing					vhich the station is identifed. nannel line-up.		
	g manipio onan					-	
		CHANN	EL LINE-UP	AA	1	_	
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	N.	(If Distant)		-	
KBTC - PBS	27	E	No				
KCPQ - FOX	13	N	No		TACOMA, WA	See instructions for	
KCTS - PBS	9	E	No		SEATTLE, WA	additional information on alphabetization.	
KCTSDT2 - PBS K	9.2	E	No		SEATTLE, WA		
KCTSDT3 - Create	9.3	E	No		SEATTLE, WA		
KFFV - MeTV	44.1	N	No		SEATTLE, WA		
KFFVDT 2- Movies		N	No		SEATTLE, WA		
					_		
KING - NBC	5	N	No		SEATTLE, WA		
KINGDT2 - Justice	5.2	N	No		SEATTLE, WA		
KINGDT3 - Quest	5.3	N	No		SEATTLE, WA		
KIRO - CBS	7	N	No		SEATTLE, WA		
KIRODT2 - getTV	7.2	N	No		SEATTLE, WA		
KIRODT3 - Laff	7.3	N	No		SEATTLE, WA		
KOMO - ABC	4	N	No		SEATTLE, WA		
•••••							
KOMODT2 - Come		N	No		SEATTLE, WA		
KOMODT3 - Charg	4.3	N	No		SEATTLE, WA		
KONG - Independe	16	I	No		EVERETT, WA		
KSTW - CW	11	N	No		TACOMA, WA		
KSTWDT2 - Decad	11.2	N	No		TACOMA, WA		
KTBW - TBN	20	N	No		SEATTLE, WA		
KVOS - Heroes &	12.1	N					
			No		BELLINGHAM, WA		
KVOS DT4- Decad		N	No		BELLINGHAM, WA		
KWDK - Daystar	56	N	No		TACOMA, WA		
KWPX - ION	33	N	No		BELLEVUE, WA		
KZJO - JOEtv	22	N	No		SEATTLE, WA		
KZJODT3 - Anten		N	No		SEATTLE, WA		
Anten				l		1	

ACCOUNTING PER	100. 2020/2							FORM SA3E. PAGE 4.
Nama	LEGAL NAME OF (	OWNER OF CABL	E SYSTE	И:				SYSTEM ID#
Name	WAVE DIVIS	ION HOLD	NGS L	LC				6474
	+							
н		t every radio s	tation ca	rried on a separate and discre nerally receivable" by your cal				
Primary	Special Instruc	ctions Concer	nina All	-Band FM Carriage: Under C	opvright Office re	equiations, an	FM sian	al is generally
Transmitters:				tem whenever it is received at				
Radio				ved at the headend, with the s				
				Copyright Office regulations of				
	located in the p Column 1: lo Column 2: S Column 3: lf	aper SA3 form dentify the call state whether t the radio stati	n. sign of e he statio on's sigr	each station carried. n is AM or FM. nal was electronically processes mark in the "S/D" column.				
	-			on (the community to which the	e station is licens	ed by the FCC	C or. in t	he case of
				the community with which the			,	
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
						ļ		

ACCOUNTING PERIOD: 2020/2	2
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LEGAL NAME OF OWNER OF	CABLE SYST	EM:				SYSTEM ID#	
WAVE DIVISION HOLD	INGS LLC	2				6474	Name
SUBSTITUTE CARRIAGE							
In General: In space I, identi							
substitute basis during the ac explanation of the programm							Substitute
1. SPECIAL STATEMENT				general meas			Carriage:
During the accounting per		r cable system	carry, on a substitute basis	s, any nonnet	work television progra		Special Statement and
broadcast by a distant stat					<mark>─</mark> Yes	XNo	Program Log
<b>Note:</b> If your answer is "No" log in block 2.	', leave the	rest of this pag	e blank. If your answer is "	Yes," you mu	st complete the progra	am	
2. LOG OF SUBSTITUTE		MS					
In General: List each subst				wherever pos	sible, if their meaning	is	
clear. If you need more spa Column 1: Give the title			ai pages. ision program (substitute p	rogram) that,	during the accounting		
period, was broadcast by a	distant stati	on and that yo	ur cable system substituted	for the prog	ramming of another st		
under certain FCC rules, re SA3 form for futher informa						I	
titles, for example, "I Love L			76ers vs. Bulls." r "Yes." Otherwise enter "N	o."			
Column 3: Give the call	sign of the s	station broadca	isting the substitute program	o. m.			
<b>Column 4:</b> Give the broat the case of Mexican or Can			e community to which the				
			tem carried the substitute p			onth	
first. Example: for May 7 giv		aubatituta pro	gram was carried by your c	able eveter	List the times accurat	alv	
to the nearest five minutes.						ery	
stated as "6:00–6:30 p.m."	or "P" if the	listed program	was substituted for progra	mming that w	our system was requir	od	
to delete under FCC rules a						eu	
gram was substituted for pre-		that your syste	em was permitted to delete	under FCC ru	ules and regulations ir		
	IIBSTITIIT	E PROGRAM	1		EN SUBSTITUTE	7. REASON	
1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIMES	- FOR DELETION	
	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM – TO		
					_		
					_		
					_		
					_		
					_		
					_		
					———		

FORM SA3E. PAGE 5.

FORM	SA3E. PAGE 7.	-
LEGA	L NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID	# Name
WA	VE DIVISION HOLDINGS LLC 647	4
Inst all a (as i page	DSS RECEIPTS         ructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of mounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service dentified in space E) during the accounting period. For a further explanation of how to compute this amount, see         e (vii) of the general instructions.         Gross receipts from subscribers for secondary transmission service(s)         during the accounting period.         ORTANT: You must complete a statement in space P concerning gross receipts.	K Gross Receipts
Instru • Com • Com • If you fee f • If you acco	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: uplete block 1, showing your minimum fee. uplete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum from block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule pompanying 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 be entered on line 1 of	L Copyright Royalty Fee
	k 3 below.	
If pa 3 be	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 in block low.	
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be entered on line block 4 below.	
	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are required to pay at least the minimum fee, regardless of whether they carried any distant stations. This fee is 1.064 percent of the system's gross receipts for the accounting period.	
	Line 1. Enter the amount of gross receipts from space K \$5,170,761.72 Line 2. Multiply the amount in line 1 by 0.01064	
	Enter the result here.	
	This is your minimum fee.         \$         55,016.90	
Block 2 Block	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the information you gave in space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column 4, you must check "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period?	_
3		
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE 0.00 schedule. If none, enter zero	
	Line 3. Add lines 1 and 2 and enter here \$-	
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, \$55,016.90 whichever is larger	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 2ero.	submitting additional deposits under
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	Section 111(d)(7) should contact
	Line 4. FILING FEE \$ 725.00	the Licensing additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.Add Lines 1, 2 and 3 of block 4 and enter total here\$ 55,741.90	appropriate form for submitting the additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See page (i) of the general instructions located in the paper SA3 form for more information.)	

ACCOUNTING PERIC	IOD: 2020/2	RM SA3E. PAGE 8.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: WAVE DIVISION HOLDINGS LLC	SYSTEM ID# 6474
M Channels	CHANNELS         Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.         1. Enter the total number of channels on which the cable system carried television broadcast stations         26         2. Enter the total number of activated channels on which the cable system carried television broadcast stations         332	
N Individual to	<b>INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED</b> : (Identify an individual we can contact about this statement of account.)	
Be Contacted for Further Information	Name Chris Connolly Telephone 609-681-2178	
	Address 650 College Road East, Suite 3100 (Number, street, rural route, apartment, or suite number)	
	Princeton, NJ 08540 (City, town, state, zip)	
	Email chris.connolly@rcn.net Fax (optional)	
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)	
Certifcation	• I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable syst in line 1 of space B.	em
	<ul> <li>I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.</li> <li>[18 U.S.C., Section 1001(1986)]</li> </ul>	
	X /s/ Parisa Salehani	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	he "F2"
	Typed or printed name: Parisa Salehani	
	Title: Senior Vice President, Controller (Title of official position held in corporation or partnership)	
	Date: February 24, 2021  E: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on the section of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on the section of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on the section of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on the section of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on the section of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on the section of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on the section of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on the section of the United States Code authorizes the Copyright Office to collect the personal to the section of the United States Code authorizes the Copyright Office to collect the personal to the section of the United States Code authorizes the Copyright Office to collect the personal to the section of the United States Code authorizes the Copyright Office to collect the personal to the section of the Copyright Office to collect the personal to the section of the Copyright Office to collect the personal to the section of the copyright Office to collect the personal to the section of the copyright Office to collect the personal to the section of the copyright Office to collect the personal to the section of the copyright Office to collect the personal to the copyright Office to collect the personal to the copyright Office to collect the personal to the copyright Office to copyrigh	

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 this 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.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID	#
WAVE DIVISION HOLDINGS LLC 647	4 Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: <ul> <li>"In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? NO</li></ul>	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below.       \$         Name       Name         Mailing Address       Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2       Multiply line 1 by the interest rate* and enter the sum here	
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 this

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 Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of law.

## DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#										
1	WAVE DIVISION HOLDIN	IGS LLC				6474					
	<ul> <li>Add the DSEs of each station.</li> </ul>	Enter the sum here and in line 1 of part 5 of this schedule.									
2		n the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5									
Computation of DSEs for	of space G (page 3). <b>n the column headed "DSE":</b> for each independent station, give the DSE as "1.0"; for each network or noncom- nercial educational station, give the DSE as ".25."										
Category "O"											
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
Add rows as											
necessary.											
Remember to copy all											
formula into new											
rows.											
				[							

Name	-	OWNER OF CABLE SYSTEM:						DSE SCHEDU S	SYSTEM ID# 6474
<b>3</b> Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	Column 2 figure should o Column 3 Column 4 be carried out Column 5 give the type-v Column 6	st the call sign of all distan E For each station, give th correspond with the inform For each station, give th Divide the figure in colur at least to the third decim For each independent st value as ".25." Multiply the figure in colu- point. This is the station's	e number of hours lation given in spa e total number of nn 2 by the figure al point. This is the ation, give the "typ umn 4 by the figure DSE. (For more in	s your cable system ce J. Calculate onl hours that the stati in column 3, and g e "basis of carriage pe-value" as "1.0." e in column 5, and formation on round	n carried the station y one DSE for each on broadcast over ive the result in dec value" for the stati For each network o give the result in co	n during the ac h station. the air during t cimals in colur ion. or noncommer olumn 6. Roun of the genera	the accounting nn 4. This figur cial educationa d to no less th l instructions ir	period. re must al station, an the	
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	R 3. IRS D BY	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE		5. TYPE VALUE	6. DS	È
			÷		=	x		=	
			÷		=	x		=	
			÷			x		=	
			÷		-	x		=	
			÷			x x			
			÷		=	x		=	
			÷		=	x		=	
<b>4</b> Computation of DSEs for Substitute- Basis Stations	Was carried tions in effer Broadcast o space I). Column 2: at your option. Column 3: Column 4:	e the call sign of each star I by your system in substit oct on October 19, 1976 (a one or more live, nonnetwor For each station give the r This figure should corresp Enter the number of days Divide the figure in columr This is the station's DSE (I	ution for a program s shown by the lef rk programs during number of live, nor bond with the infor in the calendar ye n 2 by the figure in	n that your system tter "P" in column 7 that optional carrie network programs mation in space I. ar: 365, except in a column 3, and give	was permitted to d of space I); and ge (as shown by the carried in substitut a leap year. e the result in colur	elete under FC e word "Yes" in tion for progra nn 4. Round to	CC rules and re column 2 of ms that were d	leleted the third	
		SI	JBSTITUTE-B	ASIS STATION	NS: COMPUTA	TION OF D	SEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUME OF PROC	BER BRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		+		=			÷		=
		4		=			÷		=
		+		=			÷		=
		÷		=			÷		=
				=			÷		=
	SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS:         Add the DSEs of each station.         Enter the sum here and in line 3 of part 5 of this schedule,								
5		<b>R OF DSEs:</b> Give the among sapplicable to your system		es in parts 2, 3, and	4 of this schedule	and add them t	o provide the to	otal	
Total Number	1. Number	of DSEs from part 2●						0.00	
of DSEs		of DSEs from part 3 •				·		0.00	
0.2020		of DSEs from part 4 •				·		0.00	
		. Doconom part 4 ♥							
	TOTAL NUMBE	R OF DSEs					►		0.00

LEGAL NAME OF O	WNER OF CABLE S	SYSTEM:					S	YSTEM ID#		
WAVE DIVISIO	N HOLDINGS	LLC						6474	Name	
Instructions: Block A must be completed. In block A: • If your answer if "Yes," leave the remainder of part 6 and part 7 of the DSE schedule blank and complete part 8, (page 16) of the schedule. • If your answer if "No," complete blocks B and C below.										
, , , , , , , , , , , , , , , , , , ,	· ·			<b>FELEVISION M</b>	ARKETS				Computation o	
effect on June 24,	1981?	schedule—D		er markets as defin LETE THE REMAII			C rules and regula	tions in	3.75 Fee	
		BLO	CK B: CARF		<b>MITTED DS</b>	Es				
Column 1: CALL SIGN	FCC rules and re	gulations pric e DSE Schec	or to June 25, 1 Jule. (Note: Th	part 2, 3, and 4 of tl 981. For further ex e letter M below ref Act of 2010.)	planation of p	ermitted statio	ns, see the	-		
<ul> <li>Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station.</li> <li>BASIS OF (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)</li> <li>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 76.61(b)(c)]</li> <li>B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1)</li> <li>C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)]</li> <li>D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule).</li> <li>E Carried pursuant to individual waiver of FCC rules (76.7)</li> <li>*F A station previously carried on a part-time or substitute basis prior to June 25, 1981</li> <li>G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)]</li> </ul>										
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			rksheet on page 14	4 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		
								0.00		
		E	BLOCK C: CC	MPUTATION OF	- 3.75 FEE					
Line 1: Enter the	total number of	DSEs from p	part 5 of this s	schedule				-		
_ine 2: Enter the	sum of permittee	d DSEs from	n block B abo	ve				-		
				of DSEs subject 7 of this schedule		ate.		0.00		
Line 4: Enter gro	ess receipts from	space K (pa	ige 7)					375	Do any of the DSEs represen	
Line 5: Multiply li	ine 4 by 0.0375 a	nd enter su	m here				x		partially permited/ partially nonpermitted	
Line 6: Enter tota	al number of DSE	s from line	3						carriage? If yes, see part 9 instructions.	
Line 7: Multiply li	ine 6 by line 5 an	d enter here	e and on line :	2, block 3, space	L (page 7)			0.00		

DSE SCHEDULE. PAGE 13.

Name	LEGAL NAME OF OWNE							DSE	SYSTEM ID# 6474	
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	<ul> <li>Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.)</li> <li>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.</li> <li>Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981.</li> <li>Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1).</li> <li>Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters:</li> <li>(Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)</li> <li>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)).</li> <li>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)).</li> <li>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.</li> <li>Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule.</li> <li>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.</li> </ul>									
		PERMITTED D	SE FOR STA	TIONS CARRIE	D C	ON A PART-TIME ANI	D SUBSTIT	UTE BASIS		
	1. CALL SIGN	2. PRIOR DSE		COUNTING ERIOD		4. BASIS OF CARRIAGE	-	RESENT DSE	6. PERMITTED DSE	
7 Computation of the		Yes," complete bloc	ks B and C, I and C blank	and complete pa		of the DSE schedule				
Syndicated Exclusivity			BLOC	K A: MAJOR	ΤE	LEVISION MARKE	ET			
Surcharge	• Is any portion of the ca	able system within a	top 100 major	television marke	t as	defned by section 76.	5 of FCC rul	es in effect June 24	l, 1981?	
	Yes—Complete	blocks B and C .			No—Proceed to part 8					
	BLOCK B: Ca	arriage of VHF/Grad	e B Contour	Stations		BLOCH	K C: Compu	utation of Exempt D	OSEs	
	Is any station listed in I commercial VHF static or in part, over the cab	on that places a grac		Was any station listed in block B of part 7 carried in any commu- nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159)						
		ation below with its app nd proceed to part 8.	ropriate permi	tted DSE	Yes—List each station below with its appropriate permitted DSE No—Enter zero and proceed to part 8.				rmitted DSE	
	CALL SIGN	DSE (	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIGN	DSE	
			OTAL DSEs	0.00				TOTAL DSEs	0.00	
				5.00					0.00	

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: SYSTEM ID# WAVE DIVISION HOLDINGS LLC 6474	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE	
Section 1	Enter the amount of gross receipts from space K (page 7) \$ 5,170,761.72	7
Section 2	A. Enter the total DSEs from block B of part 7	
	B. Enter the total number of exempt DSEs from block C of part 7	of the Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	Surcharge
• Is any	y portion of the cable system within a top 50 television market as defined by the FCC?           Yes—Complete section 3 below.         X No—Complete section 4 below.	
	SECTION 3: TOP 50 TELEVISION MARKET	-
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?     X Yes—Complete part 9 of this schedule.     No—Complete the applicable section below.	-
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	
	A. Enter 0.00599 of gross receipts (the amount in section1)	
	B. Enter 0.00377 of gross receipts (the amount in section 1) • • \$	
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here	
	D. Multiply line B by line C and enter here	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge	
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.	-
	A. Enter 0.00599 of gross receipts (the amount in section 1)	
	B. Enter 0.00377 of gross receipts (the amount in section 1)	
	C. Multiply line B by 3.000 and enter here	
	D. Enter 0.00178 of gross receipts (the amount in section 1)	
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here	
	F. Multiply line D by line E and enter here	
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge	
	SECTION 4: SECOND 50 TELEVISION MARKET	-
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?	-
Section 4a	X       Yes—Complete part 9 of this schedule.	
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$	
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here	
	D. Multiply line B by line C and enter here	-
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge	

DSE	SCHEDUL	E. PAGE	16

Name	LEGAL NAM	DSE SCHEDULE. PAGE 16. ME OF OWNER OF CABLE SYSTEM: SYSTEM ID: SYSTEM ID:
	· · · ·	WAVE DIVISION HOLDINGS LLC 6474
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)
of the Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)
Surcharge		C. Multiply line B by 3.000 and enter here
		D. Enter 0.00089 of gross receipts (the amount in section 1)
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here
		F. Multiply line D by line E and enter here
		G. Add lines A, C, and F. This is your surcharge.
		Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge.
	Instru	ctions:
8		ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part
		checked "Yes," use the total number of DSEs from part 5. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.
Computation	• If you	r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.
of Base Rate Fee	<ul> <li>If you blank</li> </ul>	r answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below
		is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?
	C	Yes—Complete part 9 of this schedule. X No—Complete the following sections.
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE
	Section 1	Enter the amount of gross receipts from space K (page 7)
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)
	Section	
	3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.
		NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.
		A. Enter 0.01064 of gross receipts (the amount in section 1)
		B. Enter 0.00701 of gross receipts
		(the amount in section 1)▶ <u>\$ 36,247.04</u>
		C. Subtract 1.000 from total DSEs
		(the figure in section 2) and enter here
		D. Multiply line B by line C and enter here
		E. Add lines A, and D. This is your base rate fee. Enter here
		and in block 3, line 1, space L (page 7)
		Base Rate Fee
	1	

#### DSE SCHEDULE. PAGE 17.

LEGAL NAME OF OWNER OF CABLE SYSTEM: WAVE DIVISION HOLDINGS LLC	SYSTEM ID# 6474	Name
Section If the figure in section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.		0
<ul> <li>A. Enter 0.01064 of gross receipts</li> <li>(the amount in section 1)&lt;</li> </ul>		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	
<b>IMPORTANT:</b> It is no longer necessary to report television signals on a system-wide basis. Carriage of television broad instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple chan Space G.	•	9
In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate freceipts from subscribers located within the station's local service area, from your system's total gross receipts. To take		Computation
exclusion, you must:	advantage of this	of Base Rate Fee
<b>First:</b> Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determin DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fees for each subscriber group. That total is the base rate fee for your system.	ne the number of	and Syndicated Exclusivity Surcharge for
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt i also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B if your cable system is wholly located outside all major television markets, complete block A only.		Partially Distant Stations, and
How to Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
Step 1: For each community served, determine the local service area of each wholly distant and each partially distant s carried to that community.	tation you	Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were outside the station's local service area. A subscriber located outside the local service area of a station is distant to that s the same token, the station is distant to the subscriber.)		
<b>Step 3:</b> Divide your subscribers into subscriber groups according to the complement of stations to which they are distart subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note system will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
<b>Computing the base rate fee for each subscriber group:</b> Block A contains separate sections, one for each of your sy groups.	/stem's subscriber	
<ul> <li>In each section:</li> <li>Identify the communities/areas represented by each subscriber group.</li> <li>Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to subscribers in the group.</li> </ul>	all of the	
• lf:		
1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave i 4 of this schedule; or,	t in parts 2, 3, and	
<ol> <li>any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in part 6 of this schedule.</li> </ol>	ו block B,	
• Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
<ul> <li>Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in the paper SA3 form.</li> </ul>	I instructions	
<ul> <li>Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not n actual calculations on the form.</li> </ul>	that is, the total	

FORM SA3E. P/	AGE 19	Э.
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LEGAL NAME OF OWNE						S	SYSTEM ID# 6474	Name
		COMPUTATION C		TE FEES FOR EAG		BER GROUP		
	FIRST	SUBSCRIBER GRO	UP		SECONE	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA	PORT	ORCHARD, BELF	AIR, ALL	COMMUNITY/ ARE	<b>9</b> Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 5,17	0,761.72	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
		SUBSCRIBER GRO						
COMMUNITY/ AREA	111110		0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fou	urth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	urth Group	\$	0.00	
				11				
Base Rate Fee: Add the Enter here and in block			riber group as	s shown in the boxes	above.	\$	0.00	

# Nonpermitted 3.75 Stations

OSE       CALL SIGN       DSE       CALL SIGN       DSE         Image: Second Group       Image: Second Group <td< th=""><th>SECOND S</th><th>COMMUNITY/ AREA CALL SIGN</th><th>Р</th><th>ST SUBSCRIBER GROU T ORCHARD, BELFA</th><th>FIRST</th><th>E COMMUNITY/ AREA CALL SIGN</th></td<>	SECOND S	COMMUNITY/ AREA CALL SIGN	Р	ST SUBSCRIBER GROU T ORCHARD, BELFA	FIRST	E COMMUNITY/ AREA CALL SIGN	
ALL       COMMUNITY/ AREA       0       9         DSE       CALL SIGN       DSE       CALL SIGN       DSE         O       CALL SIGN       DSE       CALL SIGN       DSE         O       Comput       of       Base Rat       and         O       Comput       Syndic       Exclusi       Surcha         O       Image: Sign of the second for the se	DSE	CALL SIGN	DSE	T ORCHARD, BELFA	PORT O		
Comput         OSE       CALL SIGN       DSE       CALL SIGN       DSE         0       CALL SIGN       DSE       CALL SIGN       DSE         0       Comput       Comput       Syndic         0       Comput       Comput       Syndic         0       Total DSEs       0.00       Statio         00       Total DSEs       0.00       Statio         00       Total DSEs       0.00       Statio         00       FOURTH SUBSCRIBER GROUP       Statio	nd Group	CALL SIGN	DSE				
DSE     CALL SIGN     DSE     CALL SIGN     DSE       Image: Second Group       Image: Second Group     Image: Second Group     Image: Second Group     Image: Second Group     Image: Second Group       Image: Second Group     Image: Second Group     Image: Second Group     Image: Second Group     Image: Second Group       Image: Second Group     Image: Second Group     Image: Second Group     Image: Second Group     Image: Second Group       Image: Second Group     Image: Second Group     Image: Second Group     Image: Second Group     Image: Second Group       Image: Second Group     Image: Second Group     Image: Second Group     Image: Second Group     Image: Second Group       Image: Second Group     Image: Second Group     Image: Second Group     Image: Second Group     Image: Second Group       Image: Second Group     Image: Second Group     Image: Second Group     Image: Second Group     Image: Second Group	nd Group	Total DSEs Gross Receipts Seco	0.00	CALL SIGN	DSE	CALL SIGN	
and   Syndica   Exclusi   Surcha   for   Partia   Dista   Dista   Statio     O0   Total DSEs   Gross Receipts Second Group   \$   00   Base Rate Fee Second Group   \$   O00   FOURTH SUBSCRIBER GROUP		Gross Receipts Seco					
Syndica   Syndica   Exclusi   Surcha   for   Partial   Distar   Station     O0   Total DSEs   Gross Receipts Second Group   Station     O0   Total DSEs   Gross Receipts Second Group   Station     Surcha   O0   Total DSEs   Gross Receipts Second Group   Surcha   Station		Gross Receipts Seco					
Image: Second Group Image: Second Group		Gross Receipts Seco					
		Gross Receipts Seco					
Image: state of the second Group \$ 0.00   100 Total DSEs 0.00   72 Gross Receipts Second Group \$   00 Base Rate Fee Second Group \$   00 FOURTH SUBSCRIBER GROUP		Gross Receipts Seco					
Distart   Distart   Station     Distart     Distart     Distart     Station     Distart     Distart     Station     Distart     Distart     Distart     Station     Distart     Distart   <		Gross Receipts Seco					
.00       Total DSEs       0.00         .72       Gross Receipts Second Group       \$         .00       Base Rate Fee Second Group       \$         .00       FOURTH SUBSCRIBER GROUP		Gross Receipts Seco					
.00       Total DSEs       0.00         .72       Gross Receipts Second Group       \$       0.00         .00       Base Rate Fee Second Group       \$       0.00         .00       FOURTH SUBSCRIBER GROUP		Gross Receipts Seco					
.72       Gross Receipts Second Group       \$       0.00         .00       Base Rate Fee Second Group       \$       0.00         FOURTH SUBSCRIBER GROUP		Gross Receipts Seco					
.72       Gross Receipts Second Group       \$       0.00         .00       Base Rate Fee Second Group       \$       0.00         FOURTH SUBSCRIBER GROUP		Gross Receipts Seco					
.72       Gross Receipts Second Group       \$       0.00         .00       Base Rate Fee Second Group       \$       0.00         FOURTH SUBSCRIBER GROUP		Gross Receipts Seco					
.72       Gross Receipts Second Group       \$       0.00         .00       Base Rate Fee Second Group       \$       0.00         FOURTH SUBSCRIBER GROUP		Gross Receipts Seco					
.72       Gross Receipts Second Group       \$       0.00         .00       Base Rate Fee Second Group       \$       0.00         FOURTH SUBSCRIBER GROUP		Gross Receipts Seco					
.72       Gross Receipts Second Group       \$       0.00         .00       Base Rate Fee Second Group       \$       0.00         FOURTH SUBSCRIBER GROUP		Gross Receipts Seco					
.00 Base Rate Fee Second Group \$ 0.00 FOURTH SUBSCRIBER GROUP			761.72			otal DSEs	
FOURTH SUBSCRIBER GROUP				\$ 5,170,	oup	Gross Receipts First Gr	
		Base Rate Fee Seco	0.00	\$	oup	<b>Base Rate Fee</b> First Gr	
	FOURTH SUBSCRIBER GROUP			THIRD SUBSCRIBER GROUP			
	COMMUNITY/ AREA 0			COMMUNITY/ AREA 0			
DSE CALL SIGN DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
	···						
	···						
.00 Total DSEs 0.00	-	Total DSEs	0.00			otal DSEs	
.00 Gross Receipts Fourth Group \$ 0.00	n Group	Gross Receipts Fourt	0.00	Gross Receipts Third Group \$ 0.00			
.00 Base Rate Fee Fourth Group \$ 0.00	n Group	Base Rate Fee Fourt	0.00	\$	roup	<b>3ase Rate Fee</b> Third G	

F	ORM	SA3	BE.	PA	GE	20

LECAL NAME OF OWNED OF CARLE SYSTEM.	FORM SA3E. PAGE 20					
WAVE DIVISION HOLDINGS LLC	SYSTEM ID# 6474					
BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP					
If your cable system is located within a top 100 television market and t Syndicated Exclusivity Surcharge. Indicate which major television mark by section 76.5 of FCC rules in effect on June 24, 1981:						
L Eirst 50 major television market	Second 50 major television market					
Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of						
<ul> <li>this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group f Exempt DSEs in block C, part 7 of this schedule. If none enters Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the f schedule. In making this computation, use gross receipts figure your actual calculations on this form.</li> </ul>	er zero. of DSEs used to compute the surcharge.					
FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP					
	Line 1: Enter the VHF DSEs					
Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs					
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation					
SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group					
THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP					
Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs					
Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs					
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge					
SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE					
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation					
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS         If your cable system is located within a top 100 television market and 1         Syndicated Exclusivity Surcharge. Indicate which major television mar by section 76.5 of FCC rules in effect on June 24, 1981:					