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								
8/3/23	\$							
	ALLOCATION NUMBER							

Return completed workbook by email to:

coplicsoa@copyright.gov

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

Α	ACC	OUNTING PERIOD COVERED BY THIS STATEMENT:			
Accounting Period	2	2023/1			
B Owner	rate ti	Cive the full legal name of the owner of the cable system. If the owner is a tle of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines of there were different owners during the accounting period, only the owner called statement of account and royalty fee payment covering the entire accounting the list is the system's first filing. If not, enter the system's ID is	s of the cable system on the last day of the unting period.	m. e accounting period should su	
		AL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM			
		NideOpenWest, Inc. Nide Open West Mid-Michigan LLC			
					01483220231
					014832 2023/1
		7887 E. Belleview Ave., Ste. 1000 Englewood, CO 80111-6007			
С		RUCTIONS: In line 1, give any business or trade names used to i			
System	1 "	DENTIFICATION OF CABLE SYSTEM:	<u> </u>		<u> </u>
	N	MAILING ADDRESS OF CABLE SYSTEM:			-
	2	Number, street, rural route, apartment, or suite number)			
	(C	City, town, state, zip code)			
D		uctions: For complete space D instructions, see page 1b. Identify	only the frst com	munity served below and re	list on page 1b
Area Served		all communities. CITY OR TOWN	STATE		
First	[Dimondale	MI		
Community	Bel	low is a sample for reporting communities if you report multiple cha	annel line-ups in S	Space G.	
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#
Sample	Allian		MD	A B	1 2
	Alliar Gerin		MD MD	В	3
	Confi	3	1110		

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

FORM SA3E. PAGE 1b LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 014832 WideOpenWest, Inc. Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas," 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form **Area** of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN **STATE** CH LINE UP SUB GRP# **Dimondale** ΜI AA First **Alaiedon Twp** MI AA Community **Albion** ΜI AB ΜI AB **Albion Twp Athens** MI AB **Athens Twp** MI AB See instructions for **Aurelius Twp** ΜI AA additional information on alphabetization. **Bath Twp** MI AA **Bellevue** MI AA **Bellevue Twp** MI AA **Benton Twp** MI AA Add rows as necessary. **Berlin Twp** MI AB **Boston Twp** ΜI AB **Burlington Twp** MI AB **Campbell Twp** MI AB **Carlton Twp** ΜI **AB Carmel Twp** MI AA Charlotte ΜI AA Clarksville MI AB Concord ΜI AA AA **Concord Twp** MI **Convis Twp** MI AA **Danby Twp** AB ΜI **Dansville** MI AA **Delhi Twp** ΜI AA Eagle MI AD **Eagle Twp** MI AD **Eaton Rapids Twp** ΜI AA ΜI AA **Eaton Twp Eckford Twp** MI AB **Fowlerville** ΜI AE Fredonia Twp MI AB **Freeport** ΜI AB **Grass Lake** ΜI AA **Grass Lake Twp** MI ΔΔ **Green Oak Twp** MI ΑE **Handy Twp** ΜI ΑE Hanover MI AA **Hanover Twp** MI AA **Hastings** ΜI AB **Hastings Twp** ΜI AB

Henrietta Twp	MI	AA	
Homer	МІ	AB	
Homer Twp	MI	AB	
Hubbardston	MI	AB	
Ingham Twp	MI	AA	
Laingsburg	MI	AC	
Lake Odessa		AD	
	MI		
Lebanon Twp	MI	AB	
Leroy Twp	MI	AA	
Leslie	MI	AA	
Leslie Twp	MI	AA	
Liberty Twp	MI	AA	
Lyons Twp	MI	AB	
Marengo Twp	MI	AB	
Marshall	MI	AB	
Marshall Twp	MI	AB	
Mason	МІ	AA	
Morrice	МІ	AC	
Mulliken	MI	AD	
Odessa Twp	MI	AD	
Olivet	MI	AA	
Oneida Twp	MI	AA	
	MI	AA	
Onondaga Twp Parma		AA AA	
	MI		
Parma Twp	MI	AA	
Perry	MI	AC	
Perry Twp	MI	AC	
Pewamo	MI	AB	
Portland	MI	AB	
Portland Twp	MI	AB	
Potterville	MI	AA	
Pulaski Twp	MI	AA	
Roxand Twp	MI	AD	
Sandstone Twp	MI	AA	
Saranac	МІ	AB	
Sciota Twp	MI	AC	
Sheridan Twp	MI	AB	
Sherwood Twp	MI	AB	
South Lyon	MI	AE	
(Brookdale Apts)	MI	AE	
Spring Arbor Twp	MI	AA	
Stockbridge	MI	AA	
Stockbridge Twp	MI	AA	
Sunfield	MI	AD	
Sunfield Twp	MI	AD	
Union City	MI	AB	
Union Twp	MI	AB	
Vevay Twp	MI	AA	
Victor Twp	MI	AC	
Walton Twp	МІ	AA	
Watertown Twp	МІ	AD	
Webberville	МІ	AA	
Westphalia	MI	AD	
Westphalia Twp	MI	AD	
Wheatfield Twp	MI	AA	
Williamston	MI	AA	
	MI	AA	
Williamston Twp		·····	
Windsor Twp	MI	AA AC	
Woodhull Twp	MI	AC	
Woodland Twp	MI	AD	

		1
		1
		1
†		1
		1
		1
T		1
		1
		1
T		1
		1
		1
		1
I		1

Name

Legal Name of Owner of Cable System:

WideOpenWest, Inc.

SYSTEM ID#

014832

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1		BLOC	K 2	
	NO. OF			NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:					
 Service to first set 	6,809	30.00-57.75			
 Service to additional set(s) 					
 FM radio (if separate rate) 					
Motel, hotel					
Commercial	74	30.00-57.75			
Converter					
Residential	9,235	2.00-30.00			
Non-residential					
ſ	*	†····		***************************************	†

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 1					
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	F	RATE	CATEGORY OF SERVICE	E RATE
Continuing Services:		Installation: Non-residential				
Pay cable	10.99-18.00	Motel, hotel				
 Pay cable—add'l channel 		Commercial			Expanded Basic	60.00-104.45
Fire protection		Pay cable			Digital	10.00-25.00
 Burglar protection 		Pay cable-add'l channel				
Installation: Residential		Fire protection				
• First set	\$ 50.00	Burglar protection				
 Additional set(s) 		Other services:				
 FM radio (if separate rate) 		Reconnect	\$	40.00		
Converter		Disconnect	\$	50.00		
		Outlet relocation	\$	20.00		
		 Move to new address 	\$	40.00		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	_	STEM:			SYSTEM ID#	Name
WideOpenWest	, Inc.				014832	
PRIMARY TRANSMITTE						
•			, ,		and low power television stations) d only on a part-time basis under	G
1		-		•	in network programs [sections	
	. , . ,	, ,	-	(e)(2) and (4))]; ar	nd (2) certain stations carried on a	Primary
substitute program bas Substitute Basis S	•	•	• .	carried by your ca	able system on a substitute program	Transmitters: Television
basis under specifc FC	C rules, regula	itions, or auth	orizations:			
 Do not list the station station was carried 	•		it in space I (the	Special Stateme	ent and Program Log)—if the	
	,		tion was carried	both on a substitu	ute basis and also on some other	
basis. For further in in the paper SA3 for		erning substit	ute basis station	s, see page (v) of	f the general instructions located	
· ·		sign. Do not r	eport origination	program services	s such as HBO, ESPN, etc. Identify	
			•	•	ion. For example, report multi-	
WETA-simulcast).	-2 . Simulcast	streams must	be reported in c	olumn i (list each	stream separately; for example	
			-		on for broadcasting over-the-air in	
its community of licens on which your cable sy	•		ınneı 4 ın Washi	ngton, D.C. This i	may be different from the channel	
Column 3: Indicate	in each case v	vhether the sta			pendent station, or a noncommercial	
	U	`	,,		ast), "I" (for independent), "I-M" mmercial educational multicast).	
For the meaning of the						
			•	,	s". If not, enter "No". For an ex-	
planation of local service Column 5: If you ha		• , ,	•		paper SA3 form. tating the basis on which your	
•		•	٠.	•	ering "LAC" if your cable system	
carried the distant stati	•				apacity. payment because it is the subject	
of a written agreement	entered into or	n or before Ju	ne 30, 2009, bet	ween a cable sys	tem or an association representing	
•			•	• .	y transmitter, enter the designa- ner basis, enter "O." For a further	
explanation of these th	ree categories,	see page (v)	of the general ir	structions located	d in the paper SA3 form.	
					to which the station is licensed by the	
Note: If you are utilizing					which the station is identifed. channel line-up.	
	-	CHANN	EL LINE-UP	AA		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION	
	NUMBER	STATION	,	(If Distant)		
WILX	10	N	No		Onondaga, MI	
WILX-2	10	N-M	No		Onondaga, MI	See instructions for
WILX-3	10	N-M	No		Onondaga, MI	additional information
WILX-5	10	N-M	No		Onondaga, MI	on alphabetization.
WILX-simulcast	10	N	No		Onondaga, MI	
WKAR	23	Е	No		East Lansing, MI	
WKAR-2	23	E-M	No		East Lansing, MI	
WKAR-3	23	Е-М	No		East Lansing, MI	
WKAR-simulcast	23	Е	No		East Lansing, MI	
WLAJ	14	N	No		Lansing, MI	
WLAJ-2	14	N	No		Lansing, MI	
WLAJ-simulcast	14	N	No		Lansing, MI	
WLNS	6	N	No		Lansing, MI	
				<u></u>		
WLNS-simulcast	6	N	No		Lansing, MI	
WSYM	47	N	No		Lansing, MI	
WSYM-2	47	N-M	No		Lansing, MI	
WSYM-4	47	N-M	No		Lansing, MI	
WSYM-simulcast	47	N	No		Lansing, MI	

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-lime basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 75.59(0)(2) and (4), 76.61(e)(2) and	FC	TRIVI SAJE. PAGE 3.						-1
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-lime basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs (sections 75.59(q)(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 Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific PCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space 1 (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 chitten 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 associated with a station according to its over-the-air designation. For example, report multicast series are well-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 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of licenses. For example, with a station is a network station, an independent station, or a noncommercial education, and indicate in each case whether the station is an etwork station, an independent station, or a noncomm				STEM:			SYSTEM ID# 014832	Namo
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 75.59(d)(2) and (4), 76.51(e)(2) and (4), or 76.63 (referring to 76.51(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 a pasce — 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, be enteringed the station. 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, apertuge via the substitutions for a substitute the	PF	RIMARY TRANSMITTE	RS: TELEVISIO	N				
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), "I" (for independent multicast), "E" (for noncommercial educational), "I" (for independent multicast), "F" (for noncommercial educational), "I" (for independent multicast), "I" (for independent), "I" (f	In ca FC 76 su ba • E • L	General: In space of the control of	G, identify every ystem during the ons in effect or .61(e)(2) and (eist, as explained itations: With rectations with rectation and also in spaformation concern. h station's call associated with -2". Simulcast	r television stane accounting in June 24, 19, 4), or 76.63 (rd in the next titions, or auth G—but do listitute basis. ace I, if the staterning substitisign. Do not in a station acstreams must	period, except (81, permitting the eferring to 76.61 paragraph. distant stations orizations: t it in space I (the ation was carried tute basis station cording to its over the period of the effect of	(1) stations carried a carriage of certar (e)(2) and (4))]; a carried by your carried by your carried both on a substitus, see page (v) on program service arthe-air designation of the column 1 (list each	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 of the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multinatream separately; for example	Primary Transmitters:
1. CALL SIGN 2. B'CAST CHANNEL NUMBER STATION WZPX 4. DISTANT? (Yes or No) CARRIAGE (If Distant) NO Battle Creek, MI WZPX-simulcast 43 N NO Battle Creek, MI See instructions for additional information	on ed (for For plants) on the tion ex	community of licenses which your cable sy Column 3: Indicate lucational station, by or independent multion the meaning of the Column 4: If the stanation of local service Column 5: If you had been system carried the distant static For the retransmisses a written agreement the cable system and a captain "E" (exempt). For standard of the set the Column 6: Give the CC. For Mexican or Column 6: Give the CC.	te. For example stem carried the in each case we entering the lessast), "E" (for no see terms, see parties in soutside ce area, see parties entered "to no no a part-tirion of a distant entered into or a primary transport in the same categories elocation of each canadian statio	e, WRC is Chane station. whether the station. whether the station. whether the station and the station are station and the station are station are station are page (v) of the station are station are station are station. For station are station are page (v) ch station.	annel 4 in Washi ation is a networ etwork), "N-M" (fel educational), or e general instructivice area, (i.e. "d general instructive area, vi.e. "d general instructive accounting perio ause of lack of accounting perio ause of lack of accounting perio general in that is not si one 30, 2009, bet association repres you carried the color fithe general in or U.S. stations, I e the name of the	rk station, an inde- or network multica r "E-M" (for nonco- tions located in the istant"), enter "Ye- ons located in the plete column 5, s id. Indicate by ent ctivated channel of ubject to a royalty tween a cable sys- senting the primar channel on any of instructions locate ist the community	may be different from the channel pendent station, or a noncommercial ast), "I" (for independent), "I-M" mmercial educational multicast). the paper SA3 form. s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. The paper says the subject term or an association representing the transmitter, enter the designation that the paper SA3 form. To which the station is licensed by the which the station is identifed.	
SIGN CHANNEL OF (Yes or No) CARRIAGE (If Distant) WZPX 43 N No Battle Creek, MI WZPX-simulcast 43 N No Battle Creek, MI See instructions for additional information	_		T	CHANN	IEL LINE-UP	AA		
WZPX-simulcast 43 N No Battle Creek, MI See instructions for additional information	1.		CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION	
additional information	W	ZPX	43	N	No		Battle Creek, MI	_
<u></u>	W	/ZPX-simulcast	43	N	No		Battle Creek, MI	additional information

LEGAL NAME OF OWNER OF CABLE SYSTEM:

WideOpenWest, Inc.

SYSTEM ID#

Name

Name

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on 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 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 identified. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AB	
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
WGVU	11	Е	No		Grand Rapids, MI
WKAR	23	E	No		East Lansing, MI
WKAR-2	23	E-M	No		East Lansing, MI
WKAR-3	23	E-M	No		East Lansing, MI
WKAR-simulcast	23	E	No		East Lansing, MI
WLLA	64	I	No		Kalamazoo, MI
WOOD	8	N	No		Grand Rapids, MI
WOOD-2	8	N-M	No		Grand Rapids, MI
WOOD-3	8	N-M	No		Grand Rapids, MI
WOOD-simulcast	8	N	No		Grand Rapids, MI
WOTV	41	N	No		Battle Creek, MI
WOTV-2	41	N-M	No		Battle Creek, MI
WOTV-3	41	N-M	No		Battle Creek, MI
WOTV-simulcast	41	N	No		Battle Creek, MI
WWMT	3	N	No		Kalamazoo, MI
WWMT-2	3	N	No		Kalamazoo, MI
WWMT-3	3	N-M	No		Kalamazoo, MI
WWMT-simulcast	3	N	No		Kalamazoo, MI

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

WideOpenWest, Inc.

SYSTEM ID#

Name

Name

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on 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 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 identified. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

,	•		•	•	
		CHANN	EL LINE-UP	AB	
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
WXMI	17	N	No		Grand Rapids, MI
WXMI-2	17	N-M	No		Grand Rapids, MI
WXMI-3	17	N-M	No		Grand Rapids, MI
WXMI-simulcast	17	N	No		Grand Rapids, MI
WXSP	15	N	No		Grand Rapids, MI
WXSP-2	15	N-M	No		Grand Rapids, MI
WXSP-3	15	N-M	No		Grand Rapids, MI
WXSP-simulcast	15	N	No		Grand Rapids, MI
WZPX	43	N	No		Battle Creek, MI
WZPX-simulcast	43	N	No		Battle Creek, MI
WZZM	13	N	No		Grand Rapids, MI
WZZM-2	13	N-M	No		Grand Rapids, MI
WZZM-3	13	N-M	No		Grand Rapids, MI
WZZM-simulcast	13	N	No		Grand Rapids, MI

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

WideOpenWest, Inc.

SYSTEM ID#
Name

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on 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 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 identified. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AC	
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
WAQP	36	I	No		Saginaw, MI
WILX	10	N	No		Onondaga, MI
WILX-2	10	N-M	No		Onondaga, MI
WILX-3	10	N-M	No		Onondaga, MI
WILX-5	10	N-M	No		Onondaga, MI
WILX-simulcast	10	N	No		Onondaga, MI
WKAR	23	E	No		East Lansing, MI
WKAR-2	23	E-M	No		East Lansing, MI
WKAR-3	23	E-M	No		East Lansing, MI
WKAR-simulcast	23	E	No		East Lansing, MI
WLAJ	14	N	No		Lansing, MI
WLAJ-2	14	N	No		Lansing, MI
WLAJ-simulcast	14	N	No		Lansing, MI
WLNS	6	N	No		Lansing, MI
WLNS-simulcast	6	N	No		Lansing, MI
WSMH	16	N	No		Flint, MI
WSMH-3	16	N-M	No		Flint, MI
WSMH-4	16	N-M	No		Flint, MI

G

Primary Transmitters: Television

FORM SA3E. PAGE 3. LEGAL NAME OF OWNE	ER OF CABLE SY	STEM:			SYSTE	VID#	
WideOpenWest		o				4832	Name
PRIMARY TRANSMITTE		N					
			ition (including t	ranelator etatione	and low power television stations)		
•			` .		l only on a part-time basis under		G
•				•	in network programs [sections		
76.59(d)(2) and (4), 76. substitute program bas	. , , , , ,	,	•	(e)(2) and (4))]; ar	nd (2) certain stations carried on a	-	Primary ransmitters
			0 .	carried by your ca	able system on a substitute program		Television
basis under specifc FC				- Connaint Chatama	nt and Drawana Law if the		
station was carried	•		it in space i (the	e Special Stateme	nt and Program Log)—if the		
	•				ute basis and also on some other		
basis. For further inf in the paper SA3 for		erning substit	ute basis statior	is, see page (v) of	the general instructions located		
· ·		sign. Do not r	eport origination	program services	s such as HBO, ESPN, etc. Identify		
			-	-	ion. For example, report multi-		
cast stream as "WETA WETA-simulcast).	-2". Simulcast s	streams must	be reported in c	olumn 1 (list each	stream separately; for example		
,	channel numb	er the FCC ha	as assigned to t	he television station	on for broadcasting over-the-air in		
,	•	,	nnel 4 in Wash	ington, D.C. This i	may be different from the channel		
on which your cable sys Column 3: Indicate			ation is a networ	k station, an inde	pendent station, or a noncommercial		
					st), "I" (for independent), "I-M"		
(for independent multic For the meaning of the	,, (,,	`	mmercial educational multicast).		
-	-		-		s". If not, enter "No". For an ex-		
planation of local service							
•			•	-	tating the basis on which your ering "LAC" if your cable system		
carried the distant stati	on on a part-tin	ne basis beca	use of lack of a	ctivated channel c	apacity.		
					payment because it is the subject tem or an association representing		
				•	y transmitter, enter the designa-		
` '		•		•	ner basis, enter "O." For a further		
					I in the paper SA3 form. to which the station is licensed by the		
				•	which the station is identifed.		
Note: If you are utilizing	g multiple chan	nel line-ups, ເ	use a separate s	space G for each o	channel line-up.		
		CHANN	EL LINE-UP	AC			
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)			
WSMH-simulcast	16	N	No		Flint, MI		
WZPX	43	N	No		Battle Creek, MI		
WZPX-simulcast	43	N	No		Battle Creek, MI		

LEGAL NAME OF OWNER OF CABLE SYSTEM:

WideOpenWest, Inc.

SYSTEM ID#
Name

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on 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 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 identified.

Note: If you are utilizing multiple channel 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
WGVU	11	E	No		Grand Rapids, MI
WILX	10	N	No		Onondaga, MI
WILX-2	10	N-M	No		Onondaga, MI
WILX-3	10	N-M	No		Onondaga, MI
WILX-5	10	N-M	No		Onondaga, MI
WILX-simulcast	10	N	No		Onondaga, MI
WKAR	23	E	No		East Lansing, MI
WKAR-2	23	E-M	No		East Lansing, MI
WKAR-3	23	E-M	No		East Lansing, MI
WKAR-simulcast	23	E	No		East Lansing, MI
WLAJ	14	N	No		Lansing, MI
WLAJ-2	14	N	No		Lansing, MI
WLAJ-simulcast	14	N	No		Lansing, MI
WLLA	64	I	No		Kalamazoo, MI
WLNS	6	N	No		Lansing, MI
WLNS-simulcast	6	N	No		Lansing, MI
WSYM	47	N	No		Lansing, MI
WSYM-2	47	N-M	No		Lansing, MI

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	N
WideOpenWest, Inc.	014832	Name

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on 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 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 identified. **Note:** If you are utilizing multiple channel 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
WSYM-4	47	N-M	No		Lansing, MI
WSYM-simulcast	47	N	No		Lansing, MI
WZPX	43	N	No		Battle Creek, MI
WZPX-simulcast	43	N	No		Battle Creek, MI

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

WideOpenWest, Inc.

SYSTEM ID#
Name

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on 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 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 identified. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		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
CBET	9	I	No		Windsor, CAN
WADL	38	I	No		Mount Clemens, MI
WADL-simulcast	38	I	No		Mount Clemens, MI
WDIV	4	N	No		Detroit, MI
WDIV-2	4	N-M	No		Detroit, MI
WDIV-3	4	N-M	No		Detroit, MI
WDIV-4	4	N-M	No		Detroit, MI
WDIV-simulcast	4	N	No		Detroit, MI
WJBK	7	N	No		Detroit, MI
WJBK-2	7	N-M	No		Detroit, MI
WJBK-3	7	N-M	No		Detroit, MI
WJBK-4	7	N-M	No		Detroit, MI
WJBK-simulcast	7	N	No		Detroit, MI
WKBD	34	N	No		Detroit, MI
WKBD-2	34	N-M	No		Detroit, MI
WKBD-3	34	N-M	No		Detroit, MI
WKBD-simulcast	34	N	No		Detroit, MI
WMYD	20	N	No		Detroit, MI

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

WideOpenWest, Inc.

SYSTEM ID#

Name

Name

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on 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 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 identified. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

,	•		•	•	•
		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
WMYD-2	20	N-M	No		Detroit, MI
WMYD-simulcast	20	N	No		Detroit, MI
WPXD	24	N	No		Ann Arbor, MI
WPXD-simulcast	24	N	No		Ann Arbor, MI
WTVS	20	E	No		Detroit, MI
WTVS-2	20	E-M	No		Detroit, MI
WTVS-3	20	E-M	No		Detroit, MI
WTVS-simulcast	20	E	No		Detroit, MI
WWJ	62	N	No		Detroit, MI
WWJ-2	62	N-M	No		Detroit, MI
WWJ-3	62	N-M	No		Detroit, MI
WWJ-simulcast	62	N	No		Detroit, MI
WXYZ	7	N	No		Detroit, MI
WXYZ-2	7	N-M	No		Detroit, MI
WXYZ-simulcast	7	N	No		Detroit, MI

G

Primary Transmitters: Television

ACCOUNTING PERIOD: 2023/1 FORM SA3E, PAGE 4.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

WideOpenWest, Inc.

SYSTEM ID#

014832



PRIMARY TRANSMITTERS: RADIO

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 Transmitters: Radio

Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form.

Column 1: Identify the call sign of each station carried.

Column 2: State whether the station is AM or FM.

Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column.

Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).

CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATIC
							ļ

FORM SA3E. PAGE 5.						ACCOUNTING	PERIOD: 2023/1	
LEGAL NAME OF OWNER OF	CABLE SYST	EM:			•	SYSTEM ID#	Name	
WideOpenWest, Inc.						014832	Name	
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEI	NT AND PROGRAM LOG	i			I	
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.								
1. SPECIAL STATEMENT	CONCER	NING SUBST	TITUTE CARRIAGE				Carriage: Special	
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?								
Note: If your answer is "No	", leave the	rest of this pag	ge blank. If your answer is '	'Yes," you mι	ıst complete the prograi	n		
log in block 2. 2. LOG OF SUBSTITUTE	PROGRA	MS						
In General: List each subst	titute progra	ım on a separa		wherever pos	sible, if their meaning is	5		
clear. If you need more spa Column 1: Give the title period, was broadcast by a under certain FCC rules, re	of every no distant stat	nnetwork telev ion and that yo	ision program (substitute pour cable system substitute	d for the prog	ramming of another sta			
	.ucy" or "NE n was broad	BA Basketball: dcast live, ente	76ers vs. Bulls." r "Yes." Otherwise enter "N	o."	List specific program			
			asting the substitute progra ne community to which the		nsed by the FCC or, in			
the case of Mexican or Car Column 5: Give the mon			community with which the tem carried the substitute p			ıth		
first. Example: for May 7 giv	/e "5/7."			_				
to the nearest five minutes.			gram was carried by your o ied by a system from 6:01:			У		
stated as "6:00–6:30 p.m." Column 7: Fnter the letter	er "R" if the	listed program	ı was substituted for progra	mming that v	our system was require	d		
to delete under FCC rules a	and regulati	ons in effect d	uring the accounting period	; enter the le	tter "P" if the listed pro	-		
gram was substituted for preffect on October 19, 1976.		that your syste	em was permitted to delete	under FCC r	ules and regulations in			
				WHE	EN SUBSTITUTE			
S	UBSTITUT	E PROGRAM	1		IAGE OCCURRED	7. REASON FOR		
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY				
					_			
					_			
					_			
					_			
					_	ļ		

ACCOUNTING PERIOD: 2023/1 FORM SA3E. PAGE 6.

	-									
Name	LEGAL NAME OF C		SYSTEM:						S	YSTEM ID# 014832
J Part-Time Carriage Log	age Column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-									
			DATES	AND HOURS	OF F	PART-TIME CAR	RIAGE			
	CALL SIGN	WHEN	N CARRIAGE OCCU			CALL SIGN	WHE	N CARRIAGE OC	CUR	
		DATE	FROM	то			DATE	FROM		ТО
			_						=-	
			_						_	
			<u> </u>							
									=-	
			_						_	
			_						_	
			_							
			_							
									_	
			_						=-	
									=-	
			_						_	
			_							
			_							
									=	
			_						_	
			r		1			T		

LEGA	AL NAME OF OWNER OF CABLE SYSTEM: deOpenWest, Inc.	SYSTEM ID# 014832	Name
Inst all a (as	OSS RECEIPTS rructions: The figure you give in this space determines the form you fle and the amount you mounts (gross receipts) paid to your cable system by subscribers for the system's second identifed in space E) during the accounting period. For a further explanation of how to cone (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)	dary transmission service	K Gross Receipts
IMP	during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	\$ 1,925,700.68 (Amount of gross receipts)	
• Con • Con • If you fee: • If you accompany	(RIGHT ROYALTY FEE Inctions: Use the blocks in this space L to determine the royalty fee you owe: Inplete block 1, showing your minimum fee. Inplete block 2, showing whether your system carried any distant television stations. But system did not carry any distant television stations, leave block 3 blank. Enter the amount of the system	s of the DSE Schedule	L Copyright Royalty Fee
bloc	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be e k 3 below.		
-	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be ent clow.	tered on line 2 in block	
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should block 4 below.	d be entered on line	
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more a least the minimum fee, regardless of whether they carried any distant stations. This fee is system's gross receipts for the accounting period.	· · · · · · · · · · · · · · · · · · ·	
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.	\$ 1,925,700.68	
	This is your minimum fee.	\$ 20,489.46	
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the in space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule.	4, you must check ?	
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$ -	
_	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	\$ 20,489.46	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.	0.00	submitting additional deposits under
	Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	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	\$ 21,214.46	appropriate form for submitting the
	EFT Trace # or TRANSACTION ID #		additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (Se general instructions located in the paper SA3 form and the Excel instructions tab	, ,	

ACCOUNTING PERIOD: 2023/1
FORM SA3E_PAGE 8

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTE	
Numo	WideOpenWest, Inc. 01	4832
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.	
Guamois	Enter the total number of channels on which the cable system carried television broadcast stations	
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services 288	
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
Be Contacted for Further Information	Name Jim Waechter Telephone 720-219-8271	
	Address 7887 E. Belleview Ave., Suite 1000 (Number, street, rural route, apartment, or suite number)	
	Englewood, CO 80111 (City, town, state, zip)	
	Email Jim.Waechter@wowinc.com 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, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of the cable system in line 1 of space B.	
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	
	X /s/ Teresa Elder	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	
	Typed or printed name: Teresa Elder	
	Title: Chief Executive Officer (Title of official position held in corporation or partnership)	
	Date: August 3, 2023	ļ

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 suffciency of the fling, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
WideOpenWest, Inc.	014832	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 lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable service of providing secondary transmissions of primary broadcast transmitters, the system scribers and amounts collected from subscribers receiving secondary transmissions pursuants. For more information on when to exclude these amounts, see the note on page (vii) of the generopaper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for seemade by satellite carriers to satellite dish owners?	system for the basic m shall not include sub- uant to 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		
INTERFOR AGGEOMENTS		
INTEREST ASSESSMENTS You must complete this worksheet for those royalty payments submitted as a result of a late pay For an explanation of interest assessment, see page (viii) of the general instructions in the paper		Q
Line 1 Enter the amount of late payment or underpayment	x	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	x 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)	(interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	rther assistance please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the oplease list below the owner, address, first community served, accounting period, and ID number 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 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 suffciency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2023/1

DSE SCHEDULE, PAGE 10.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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.)

basis of carriage value for all other stations listed in space G is 1.0.

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

- 1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
- 2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.
- 3) A station of the same type substituted for a carried network, 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 station that it was authorized to carry or was lawfully carrying prior to March 31, 1972, even if the total number of distant stations carried exceeded the market quota imposed for the importation of distant stations. Carriage of these grandfathered stations is not subject to the 3.75 percent rate, but is subject to the Base Rate, and where applicable, the Syndicated Exclusivity Surcharge. The Copyright Royalty Tribunal has stated its view that, since section 76.65 of the former FCC rules would not have permitted substitution of a grandfathered station, the 3.75 percent Rate applies to a station substituted for a grandfathered station if carriage of the station exceeds the market quota imposed for the importation of distant stations

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

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

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

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

U.S. Copyright Office

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.

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

0.330% of gross receipts

· If any of the stations were partially distant:

The fifth and each additional DSE

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

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

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

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

- Calculate a separate base rate fee for each subscriber group, using
 the rates given above; (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:

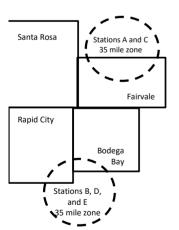
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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 Carrie	ed	Identification	of Subscriber Groups	
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
E (network)	0.25	Fairvale	Stations B, D, and E	120,000.00
TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x .01064
 \$6,384.00

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: 2023/1

1	LEGAL NAME OF OWNER OF CABLE SYSTEM: WideOpenWest, Inc. 014											
	SUM OF DSEs OF CATEGORY "O" STATIONS:											
	• Add the DSEs of each station.											
	Enter the sum here and in line 1 of part 5 of this schedule.											
]						
	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3).											
Computation of DSEs for	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."											
Category "O"	0.111.0101		CATEGORY "O" STATION		II out olou	I 505						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
Add rows as						 						
necessary.												
Remember to copy all						ļ						
formula into new												
rows.												
				••••••		<u> </u>						

Name	WideOpenW	est, Inc.						S	YSTEM ID# 014832
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	CAPACITY st the call sign of all dista to reach station, give to correspond with the info to For each station, give to correspond with the info to For each station, give to color at least to the third deci to For each independent value as ".25." to Multiply the figure in corpoint. This is the station's	the number of I rmation given i the total number umn 2 by the firmal point. This station, give the blumn 4 by the s DSE. (For mo	nours your cable syst in space J. Calculate or of hours that the st gure in column 3, and is the "basis of carria e "type-value" as "1.0 figure in column 5, ar	em carried the sta only one DSE for eation broadcast ov d give the result in age value" for the sol." For each netwo and give the result in unding, see page (tion during the ac each station. er the air during decimals in colu- station. rk or noncomment or column 6. Rour viii) of the genera	the accounti mn 4. This fi rcial educati nd to no less al instruction	ing period. igure must onal station, s than the	
	1. CALL SIGN	2. NUMBI OF HO CARRI	ER URS	3. NUMBER OF HOURS STATION	4. BASIS C CARRIA VALUE)F	5. TYPE VALUE	6. DS	E
		SYSTE		ON AIR	VALUE				
			÷		=	х		=	
			÷		=	x		=	
			÷		=	x x		=	
			÷		=	x		=	
			÷		=	х		=	
			÷		=	x x		=	
Add the DSEs of each station. Enter the sum here and in line 2 of part 5 of this schedule, Instructions: Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station: • Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and tions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and • Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I). Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were at your option. This figure should correspond with the information in space I. Column 3: Enter the number of days in the calendar year: 365, except in a leap year. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less that decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the						re deleted an the third).		
	1. CALL	2. NUMBER	3. NUMB	E-BASIS STATIC ER 4. DSE	1. CALL	2. NUMB		3. NUMBER	4. DSE
	SIGN	OF PROGRAMS	OF DA'	YS	SIGN	OF PROG		OF DAYS IN YEAR	4. DOL
			÷	=			÷		=
			÷ ÷	=			÷		=
			÷	=			÷		=
			÷	=			÷		=
	Add the DSEs	s OF SUBSTITUTE-BAS of each station. Im here and in line 3 of p					0.00		=
5		ER OF DSEs: Give the an		boxes in parts 2, 3, ar	nd 4 of this schedule	e and add them to	provide the	total	
Total Number	1. Number	of DSEs from part 2 ●				>		0.00	
of DSEs		of DSEs from part 3 ●				<u> </u>		0.00	
	3. Number	of DSEs from part 4 ●				-		0.00	
	TOTAL NUMBE	R OF DSEs							0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2023/1

LEGAL NAME OF O		SYSTEM:					S	YSTEM ID# 014832	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.										
effect on June 24, Yes—Com	BLOCK A: TELEVISION MARKETS s the cable system located wholly outside of all major and smaller markets as defined under section 76.5 of FCC rules and regulations in effect on June 24, 1981? Yes—Complete part 8 of the schedule—DO NOT COMPLETE THE REMAINDER OF PART 6 AND 7. No—Complete blocks B and C below.									
		BLO	CK B: CARR	IAGE OF PERM	MITTED DS	Es				
Column 1: CALL SIGN Column 2: BASIS OF PERMITTED CARRIAGE	Column 1: CALL SIGN List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.) Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station. (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									
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) C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)] D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule). E Carried pursuant to individual waiver of FCC rules (76.7) *F A station previously carried on a part-time or substitute basis prior to June 25, 1981 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)] M Retransmission of a distant multicast stream.										
Column 3:		e stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet 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		
	1				l	11		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						
Line 2: Enter the	sum of permitte	d DSEs from	n block B abo	ve						
Line 3: Subtract line 2 from line 1. This is the total number of DSEs subject to the 3.75 rate. (If zero, leave lines 4–7 blank and proceed to part 7 of this schedule) 0.00										
Line 4: Enter gro	ess receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represent partially	
Line 5: Multiply li	ine 4 by 0.0375 a	and enter su	m here				x		permited/ partially nonpermitted	
Line 6: Enter tota	al number of DSI	Es from line	3					<u>-</u>	carriage? If yes, see part 9 instructions.	
Line 7: Multiply li	ine 6 by line 5 an	nd enter here	e and on line 2	2, block 3, space	L (page 7)			0.00		

ACCOUNTING PERIOD: 2023/1

Name	LEGAL NAME OF OWN WideOpenWest		SYSTEM:							S	*YSTEM ID# 014832
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	tatting DSE 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										
			g								
	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 SIGN DSE PERIOD CARRIAGE DSE DSE									ERMITTED DSE	
7 Computation of the		"Yes," comple	pleted. te blocks B and C, ocks B and C blank		art	: 8 of	the DSE schedule.				
Syndicated	,	·	BLOC	K A: MAJOR	TI	FLF	VISION MARKE	-T			
Exclusivity			2200	1171.1111110011				- •			
Surcharge	Is any portion of the contractions	able system w	ithin a top 100 majo	r television marke	et a	as de	efned by section 76.	5 of FCC rul	es in effect June	e 24, 198	31?
	X Yes—Complete	blocks B and	C .				No—Proceed to	part 8			
	BLOCK B: C	arriage of VHI	F/Grade B Contour	Stations			BLOC	Κ C: Compι	itation of Exemp	ot DSEs	
	Is any station listed in commercial VHF station or in part, over the cal	on that places	, ,			nity	s any station listed served by the cabl ormer FCC rule 76.	e system pr			
	Yes—List each st X No—Enter zero a		n its appropriate perm art 8.	itted DSE		X	Yes—List each sta			e permitte	ed DSE
	CALL SIGN	DSE	CALL SIGN	DSE			CALL SIGN	DSE	CALL SIG	_N I	DSE
	CALL SIGN	DOE	CALL SIGN	DOE			CALL SIGN	DOE	CALL SIG	14	DOE
		·									
				_							
TOTAL DSEs 0.00 TOTAL DSEs								Es	0.00		

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: WideOpenWest, Inc. \$YSTEM II 01483	Namo
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE	
Section 1	Enter the amount of gross receipts from space K (page 7)	7
Section 2	A. Enter the total DSEs from block B of part 7	00 Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	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 an	y portion of the cable system within a top 50 television market as defined by the FCC? X Yes—Complete section 3 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? \(\text{Y} \) 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)	
	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	Yes—Complete part 9 of this schedule. X 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 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	

Name		me of owner of cable system: WideOpenWest, Inc.	SYSTEM ID# 014832					
_								
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 p checked "Yes," use the total number of DSEs from part 5.	art					
		ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.						
Computation	-	ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	daw					
of Base Rate Fee	• if you blank	ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B be	IOW					
	What i	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 "loc e area," see page (v) of the general instructions.	cal					
	Service	s area, See page (v) on 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?						
		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) ▶ _\$ 1,925,700	.68_					
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.						
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)▶	0.00					
	0 "	use the total number of DSLS from part 3.).	<u> </u>					
	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)	<u>-</u>					
		B. Enter 0.00701 of gross receipts (the amount in section 1)▶ \$ 13,499.16						
		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 ▶ \$	<u>-</u>					
		E. Add lines A, and D. This is your base rate fee. Enter here						
		and in block 3, line 1, space L (page 7) Base Rate Fee	-					
		<u> </u>	<u></u> .					

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2023/1

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTE	EM ID#
WideOpenWest, Inc. 01	14832 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 Finter 0.04064 of groce receipts	8
A. Enter 0.01064 of gross receipts (the amount in section 1) ▶\$	
B. Enter 0.00701 of gross receipts (the amount in section 1) * \$	Computation
	Base Rate Fee
C. Multiply line B by 3.000 and enter here	
D. Enter 0.00330 of gross receipts (the amount in section 1) **Description** **Descripti	
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	0.00
Base Rate Fee > \$	7.00
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals	shall
instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups	
Space G.	
In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage	of this Computation
exclusion, you must:	of Base Rate Fee
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the sam	ne and
station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the numb	
DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each gro Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you	for Partially
also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. How	vever, if Distant
your cable system is wholly located outside all major television markets, complete block A only.	Stations, and for Partially
How to Identify a Subscriber Group for Partially Distant Stations	Permitted
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.	Stations
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 same token, the station is distant to the subscriber.)	, by the
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 will have only one subscriber group when the distant stations it carried have local service areas that coincide.	system
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's sub groups.	oscriber
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. 	
• If:	
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, 4 of this schedule; or,	3, and
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 instruction in the paper SA3 form.	ıs
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	g
page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the t DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show actual calculations on the form.	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	STEM ID#
Name	WideOpenWest, Inc.	014832
	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	9
	and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement	
	entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary	
	transmitter or an association representing the primary transmitter.	

LEGAL NAME OF OWNER WideOpenWest, Inc		SYSTEM:				SY	014832	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRIE	BER GROUP		
		SUBSCRIBER GROUP				SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0	9 Computation		
CALL SIGN	CALL SIGN DSE CALL SIGN DSE				DSE	CALL SIGN	DSE	of
OALL SIGIV	DOL	OALL GIGIN	DOL	CALL SIGN	DOL	OALL GION	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
					<u> </u>			
					<u> </u>			
					<u> </u>			
			0.00		ļ		2.22	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROUP)		FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						_		
						_		
								
								
	ļ			-	ļ			
				-				
								
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
							$\overline{}$	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Page Pate Face Add 4	hace	food for each subsection	or grave	a about in the barrer	w.c			
Enter here and in block 3	B, line 1, sp	pace L (page 7)	ei gioup a	s shown in the boxes abo	,v €.	\$	0.00	

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: WideOpenWest, Inc. SYSTEM ID# 014832								Name
[TE FEES FOR EAC				
FIRST SUBSCRIBER GROUP				SECOND SUBSCRIBER GROUP				9
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0			Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						H		and Syndicated
		-				H		Exclusivity
								Surcharge
						-		for Partially
								Distant
								Stations
						H		
			0.00	Total DSEs 0.00				
			0.00	Gross Receipts Second Group \$		\$	0.00	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THIRD SUBSCRIBER GROUP				FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						H		
						-		
						-		
						 		
						1		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$		0.00	Gross Receipts Fourth Group \$ 0.0		0.00			
Base Rate Fee Third Group \$		0.00	Base Rate Fee Fourth Group		\$	0.00		
				II				
Base Rate Fee: Add th Enter here and in block			criber group a	s shown in the boxes	above.	\$	0.00	