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

Return completed workbook by email to:

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					
2/27/222/	\$ ALLOCATION NUMBER					
2/27/2024						

coplicsoa@loc.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	2023/2									
B Owner	G rate tit Li	ctions: ive the full legal name of the owner of the cable system. If the owner is a le of the subsidiary, not that of the parent corporation. st any other name or names under which the owner conducts the busines there were different owners during the accounting period, only the owner le statement of account and royalty fee payment covering the entire accounting the interest of this is the system's first filing. If not, enter the system's ID I	s of the cable systel on the last day of th unting period.	m. e accounting period should sub							
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM										
	С	Cumberland Cellular LLC									
	D	OUO Broadband									
					02728520232						
					027285 2023/2						
	P	P.O. Box 80									
	J	amestown, KY 42629									
С	INST	RUCTIONS: In line 1, give any business or trade names used to i	dentify the busine	ss and operation of the sys	tem unless these						
C	name	s already appear in space B. In line 2, give the mailing address of	f the system, if dif	ferent from the address giv	en in space B.						
System	1 1	ENTIFICATION OF CABLE SYSTEM:									
	M	AILING ADDRESS OF CABLE SYSTEM:									
	2 (1)	umber, street, rural route, apartment, or suite number)									
	(C	ity, town, state, zip code)									
D	Instru	uctions: For complete space D instructions, see page 1b. Identify	only the frst com	munity served below and re	list on page 1b						
Area		Il communities.	,	,							
Served		ITY OR TOWN	STATE								
First	R	Russell Springs	KY								
Community	Belo	ow is a sample for reporting communities if you report multiple cha	annel line-ups in S	Space G.							
		ITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#						
Sample	Alda		MD	Α	1						
Campic	Alliand	ce	MD	В	2						
	Gering	9	MD	В	3						

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#					
Cumberland Cellular LLC			027285					
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses								
below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., or all communities with the channel line-up "A" in the appropriate column below or leave th on a partially distant or partially permitted basis in the DSE Schedule, associate each redesignated by a number (based on your reporting from Part 9).	e column blank. li	you report any sta	ations					
When reporting the carriage of television broadcast stations on a community-by-commu channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns by	a subscriber groupelow.	ip designated by a	number					
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	=				
Russell Springs	KY	Α	1	First				
Adair County	KY	В	2	Community				
Columbia	KY	В	2					
Cumberland County	KY	С	3					
Jamestown	KY	Α	1					
Russell County	KY	A	1	See instructions for additional information on alphabetization.				
				Add rows as necessary.				

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Cumberland Cellular LLC

SYSTEM ID# 027285

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1		BLOCK 2					
	NO. OF					NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS		RATE	CATEGORY OF SERVICE	SUB	SCRIBERS		RATE
Residential:								
 Service to first set 	1,493	\$	27.95	Standard Cable		1,126	\$	104.95
 Service to additional set(s) 				Digital		562	\$	18.95
 FM radio (if separate rate) 				HDTV Premuim		11	\$	3.95
Motel, hotel								
Commercial	161	\$	103.41					
Converter								
 Residential 		ļ						
 Non-residential 		ļ						
		·····				••••••		

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							BLOCK 2		
CATEGORY OF SERVICE		RATE	CATEGORY OF SERVICE	F	RATE	CA	ATEGORY OF SERVICE	F	RATE
Continuing Services:			Installation: Non-residential						
Pay cable	\$	27.95	Motel, hotel			HE	3O Unlimited	\$	22.95
 Pay cable—add'l channel 			Commercial			Cir	nemax Package	\$	19.95
Fire protection			Pay cable			Sh	owtime Unlimited	\$	19.95
•Burglar protection			Pay cable-add'l channel			Sta	arz Super Package	\$	19.95
Installation: Residential			Fire protection			HB	3O & Cinemax	\$	32.95
• First set	\$	45.00	Burglar protection			Cir	nemax & Showtime	\$	29.95
Additional set(s)	\$	15.00	Other services:			HB	3O & Showtime	\$	32.95
 FM radio (if separate rate) 			Reconnect	\$	25.00	HB	3O/Cinemax/Showtime	\$	42.95
Converter			Disconnect			All	4 Super Pack	\$	52.95
			Outlet relocation	\$	25.00				
			Move to new address	\$	20.00				

FORM SA3E. PAGE 3 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 027285 Cumberland Cellular LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations; Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately: for example WETA-simulcast) Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. **Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP A Russell 2. B'CAST 3 TYPE 4 DISTANT? 5 BASIS OF 6 LOCATION OF STATION 1 CALL SIGN CHANNEL CARRIAGE OF (Yes or No) NUMBER STATION (If Distant) WBKO-DT 13 N Bowling Green, KY WBKO-HD 13.1 N-M Bowling Green, KY ee instructions for additional information WDKY-DT Danville, KY 31 n alphabetization WDKY-HD 31.1 I-M Danville, KY WDKY-Comet 31.2 I-M Danville, KY WDKY-Charge 31.3 I-M Danville, KY WKSO-DT 53 Ε Bowling Green, KY WKSO-KY 53.1 E-M Bowling Green, KY WKSO-HD 53.2 E-M Bowling Green, KY WKSO2 53.3 E-M Bowling Green, KY WKYT-DT 36 Ν Lexington, KY WKYT-HD 36.1 N-M Lexington, KY WKYT-CW 36.2 I-M Lexington, KY WKYT-CW HD 36.3 I-M Lexington, KY WKYT-Circle 36.5 I-M Lexington, KY WKYU-DT Ε Yes 0 Bowling Green, KY 18 WLEX-DT 39 Ν Lexington, KY WLEX-HD 39.1 N-M Lexington, KY WLEX-2 39.2 I-M Lexington, KY WLEX-2HD 39.3 I-M Lexington, KY WLKY-DT Yes 0 Louisville, KY 26 N WLKY-HD 26.1 N-M Yes Ε Louisville, KY WTVQ-DT 40 Ν Lexington, KY WTVQ-HD 40.1 N-M Lexington, KY WTVQ-Mv 40.2 I-M Lexington, KY WTVQ-MvHD 40.5 I-M Lexington, KY WTVQ-QuestTV 40.3 I-M Lexington, KY WTVQ-TrueCrime 40.6 I-M Lexington, KY WLJC-DT 65 I-M Beattyville, KY WLJC-HD 65.1 Beattyville, KY

G

Primary

Transmitters:

Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Cumberland Cellular LLC

SYSTEM ID#

027285

PRIMARY TRANSMITTERS: TELEVISION

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

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast)

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "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	B Adair	
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
WAVE-DT	47	N			Louisville, KY
WAVE-HD	47.1	N-M			Louisville, KY
WAVE-Circle	47.2	N-M			Louisville, KY
WAVE-Grit	47.3	N-M			Louisville, KY
WBKO-DT	13	N			Bowling Green, KY
WBKO-HD	13.1	N-M			Bowling Green, KY
WDRB-DT	49	I			Louisville, KY
WDRB-HD	49.1	I-M			Louisville, KY
WDRB-ANT	49.2	I-M			Louisville, KY
WHAS-DT	11	N			Louisville, KY
WHAS-HD	11.1	N-M			Lexington, KY
WKSO-DT	53	Е			Bowling Green, KY
WKSO-KY	53.1	Е-М			Bowling Green, KY
WKSO-HD	53.2	E-M			Bowling Green, KY
WKSO2	53.3	E-M			Bowling Green, KY
WKYT-DT	36	N			Lexington, KY
WKYT-HD	36.1	N-M			Lexington, KY
WKYU-DT	18	E			Bowling Green, KY
WLKY-DT	26	N N			Louisville, KY
WLKY-HD	26.1	N-M			Louisville, KY
WLKY-32	26.2	I-M			Louisville, KY
WMYO-CW	51	ı			Salem, IN
WMYO-MyNet	51.4	I-M			Salem, IN

Transmitters:

Television

FORM SA3E. PAGE 3.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Cumberland Cellular LLC

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 Primary

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

 Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.

substitute program basis, as explained in the next paragraph.

 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	C Cumberlar	<mark>nd</mark>
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
WBKO-DT	13	N			Bowling Green, KY
WBKO-HD	13.1	N-M			Bowling Green, KY
WHAS-DT	11	N	Yes	0	Louisville, KY
WHAS-HD	11.1	N-M	Yes	Е	Lexington, KY
WKSO-DT	53	Е			Bowling Green, KY
WKSO-KY	53.1	E-M			Bowling Green, KY
WKSO2	53.3	E-M			Bowling Green, KY
WKSO-HD	53.2	E-M			Bowling Green, KY
WKYT-DT	36	N	Yes	0	Lexington, KY
WKYT-HD	36.1	N-M	Yes	E	Lexington, KY
WKYU-DT	18	E	Yes	0	Bowling Green, KY
WLEX-DT	39	N			Lexington, KY
WLEX-HD	39.1	N-M			Lexington, KY
WLKY-DT	26	N	Yes	0	Louisville, KY
WLKY-HD	26.1	N-M	Yes	E	Louisville, KY
WLKY-32	26.2	I-M	Yes	0	Louisville, KY
WMYO-MyNet	51.1	I-M	Yes	0	Salem, IN
WMYO-CW	51.1	1-ivi	Yes	0	Salem, IN
WZTV-DT	15		162	-	Nashvile, TN
WZTV-HD	15.1	I-M			Nashvile, TN
WZTV-3	15.3	I-M			Nashvile, TN
WZTV-4	15.4	I-M			Nashvile, TN

ACCOUNTING PERIOD: 2023/2 FORM SA3E. PAGE 4.

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

Cumberland Cellular LLC

SYSTEM ID#

027285



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: 2023/2			
LEGAL NAME OF OWNER OF Cumberland Cellular L		EM:			\$	027285	Name			
SUBSTITUTE CARRIAGI	: SPECIA	I STATEMEN	NT AND PROGRAM I OG	.						
In General: In space I, ident substitute basis during the a explanation of the programm 1. SPECIAL STATEMENT	ify every non ecounting pe ing that mus	nnetwork televiseriod, under spe st be included in	sion program broadcast by a ecific present and former FC n this log, see page (v) of th	a distant static	ations, or authorizations.	For a further	Substitute Carriage: Special			
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Yes XNo Note: If your answer is "Yes," you must complete the program										
period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love I Column 2: If the prograr Column 3: Give the call Column 4: Give the broathe case of Mexican or Car Column 5: Give the morfirst. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	itute prograce, please a of every nor distant stat gulations, of tion. Do no ucy" or "NE n was broad sign of the saddcast static th and day ye "5/7." es when the Example: a er "R" if the and regulatiogramming	am on a separa attach addition nnetwork televion and that your authorization of use general of BA Basketball: dcast live, ente station broadca on's location (thous, if any, the when your system of a program carrillisted program carrillisted program ons in effect du	al pages. ision program (substitute pour cable system substitute so See page (vi) of the gencategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the tem carried the substitute pour gram was carried by your ged by a system from 6:01: was substituted for programing the accounting period	rogram) that, d for the programleral instruction. "basketball". Io." m. station is lice station is ider program. Use cable system. 15 p.m. to 6:2 mming that y l; enter the le	during the accounting pramming of another state one located in the paper. List specific program unsed by the FCC or, in ntified). In the times accurated the second period by the times accurated the second period period to the second period	tion th				
	LIDETITLIT	E PROGRAM	1		EN SUBSTITUTE IAGE OCCURRED	7. REASON				
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	FOR DELETION				

ACCOUNTING PERIOD: 2023/2 FORM SA3E. PAGE 6.

Name	LEGAL NAME OF C								S	YSTEM ID# 027285	
J Part-Time Carriage Log	In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.— 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.— 12:00 p.m."										
			DATES	S AND HOURS	OF F	PART-TIME CAR	RIAGE				
	CALL SIGN		CARRIAGE OCCL	RS		CALL SIGN			CCUF DUR	3	
		DATE	FROM	ТО			DATE	FROM		ТО	
									-=		
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LEGA	L NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#					
Cui	nberland Cellular LLC		027285	Name				
Inst all a (as pag	OSS RECEIPTS ructions: 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 dentifed in space E) during the accounting period. For a further explanation of how to condect (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period.	dary transmission sompute this amount, s	584,395.57	K Gross Receipts				
IMP	ORTANT: You must complete a statement in space P concerning gross receipts.	(Amount of gros	s receipts)					
InstruConIf your feeIf you accompany	COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.							
bloc	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be on a below. It 6 of the DSE schedule was completed, the amount from line 7 of block C should be en		nck					
3 be		NOTE OF THE Z III DIC	,on					
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoul 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 i 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	\$	584,395.57					
	Enter the result here.							
	This is your minimum fee.	\$	6,217.97					
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. No—Leave block 3 below blank and column to the part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	4, you must check						
Block 3		Ψ						
	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	\$	2,352.26					
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	<u></u> \$	6,217.97	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. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	Section 111(d)(7) should contact the Licensing				
	Line 4. FILING FEE	<u>\$</u>	725.00	additional fees. Division for the appropriate				
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	6,942.97	form for submitting the additional fees.				
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (So general instructions located in the paper SA3 form for more information.)	ee page (i) of the		additional lees.				

ACCOUNTING PERIOD: 2023/2

Name		SYSTEM ID#								
Nume	Cumberland Cellular LLC	027285								
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.									
	1. Enter the total number of channels on which the cable system carried television broadcast stations									
	Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services									
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 Daryl Hammond Telephone 270-343-1111									
	Address P.O. Box 80 (Number, street, rural route, apartment, or suite number)									
	Jamestown, KY 42629 (City, town, state, zip)									
	Email 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)]									
	/s/ Daryl Hammond									
	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 "F button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	·2"								
	Typed or printed name: Daryl Hammond									
	Title: Secretary/Treasurer (Title of official position held in corporation or partnership)									
	Date: February 26, 2024									

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: Cumberland Cellular LLC 027285	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below	P Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address Mailing Address	
INTEREST ASSESSMENTS	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing. Owner Address	
First community served Accounting period ID number	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on 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: 2023/2

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

- 1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
- 2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.
- 3) A station of the same type substituted for a carried network, 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

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

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

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

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

- Calculate a separate base rate fee for each subscriber group, using
 the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

Rounding Off DSEs. In computing DSEs on the DSE schedule, you may round off to no less than the third decimal point. If you round off a DSE in any case, you must round off DSEs throughout the schedule as follows:

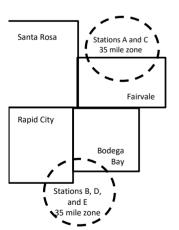
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

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



Distant Stations Carried	t	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

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

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

ACCOUNTING PERIOD: 2023/2

DSE SCHEDULE. PAGE	TT. (CONTINUED)											
4	LEGAL NAME OF OWNER OF CABLE	E SYSTEM:			S	YSTEM ID#						
1	Cumberland Cellular LL	С				027285						
	SUM OF DSEs OF CATEGOR		C.			<u> </u>						
	Add the DSEs of each station		J.									
	Enter the sum here and in line	4.00										
	Enter the carriners and in line	r or part o or time	conocaro.			j						
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5											
	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5											
Computation	space G (page 3). the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-											
of DSEs for	mercial educational station, giv			45 1.0 , 101 0	don notwork of noncom							
Category "O"	CATEGORY "O" STATIONS: DSEs											
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
	WMYO-MyNet	1.000										
	WHAS-DT	0.250										
	WKYT-DT	0.250										
	WLKY-DT	0.250										
Add rows as	WMYO-CW	1.000										
necessary.	WKYU-DT	0.250										
Remember to copy all	WLKY-32	1.000										
formula into new												
rows.												
				†		ļ						
						 						
						 						
												
						l						
						 						
						<u> </u>						
						ļ 						

Name	Cumberland	Cellular LLC						8YSTEM ID# 027285
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2: figure should of Column 3: Column 4: be carried out Column 5: give the type-v Column 6:	at the call sign of all distants: For each station, give the correspond with the inform. For each station, give the Divide the figure in colurat least to the third decine. For each independent servalue as ".25." Multiply the figure in colurations.	ne number of Imation given in the total number mn 2 by the final point. This station, give the num 4 by the	hours your cable syster n space J. Calculate or er of hours that the stati gure in column 3, and g is the "basis of carriag e "type-value" as "1.0."	n carried the stati only one DSE for eact on broadcast ove give the result in d e value" for the st For each network	on during the accounting ach station. In the air during the accoulecimals in column 4. This	inting period. In figure must ational station,	
Capacity		(CATEGOR	Y LAC STATIONS:	COMPUTATI	ION OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	JRS ED BY M	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE		E	SE
			÷		=	x x	=	
			÷		=	x	=	
			÷		=	x	=	
			÷		=	x x	=	
			÷		=	x	=	
			÷		=	x	=	
	Add the DSEs of	OF CATEGORY LAC Soft each station. In here and in line 2 of page 2.		hedule,	▶	0.00)	
Computation of DSEs for Substitute-Basis Stations	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 regulartions 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 deleted 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 than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form).							
		Sl	JBSTITUTE	E-BASIS STATION		ATION OF DSEs	1	T
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMB OF DA IN YEA	YS	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
			-	=			+	=
			÷	=		-	÷ ÷	=
		-	+	=		-	÷	=
		4	+	=		4	÷	=
	Add the DSEs of	OF SUBSTITUTE-BASIS of each station. m here and in line 3 of pa			▶	0.00)	-
5		R OF DSEs: Give the amo		boxes in parts 2, 3, and	4 of this schedule	and add them to provide t	he total	
Total Number	1. Number	of DSEs from part 2 ●				-	4.00	
of DSEs	2. Number	of DSEs from part 3 ●				<u> </u>	0.00	
	3. Number	of DSEs from part 4 ●				-	0.00	
	TOTAL NUMBER	R OF DSEs						4.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2023/2

LEGAL NAME OF O		SYSTEM:					S	YSTEM ID# 027285	Name
Instructions: Block A must be completed. In block A: 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. BLOCK A: TELEVISION MARKETS								6 Computation of	
ls the cable system	a located wholly ou	utside of all m				on 76 5 of EC(rules and regulat	tions in	3.75 Fee
Is 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	under FCC rules	of distant sta and regulation e DSE Scheo	ations listed in pons prior to June dule. (Note: The	part 2, 3, and 4 of the 25, 1981. For further letter M below ref	his schedule tl	nat your syster on of permitted	stations, see the	,	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)]	les and regul ed pursuant t	ations cited bel o the FCC mark	is on which you cal ow pertain to those cet quota rules [76. .59(d)(1), 76.61(e)	e in effect on J .57, 76.59(b),	une 24, 1981.) 76.61(b)(c), 76	6.63(a) referring to		
	C Noncommerica D Grandfathered instructions fo E Carried pursua *F A station prev	al educationa I station (76.6 r DSE sched ant to individu viously carrie HF station w	Il station [76.59] 55) (see paragraule). Il waiver of FC d on a part-time ithin grade-B co	(c), 76.61(d), 76.63 aph regarding subs C rules (76.7) e or substitute basi ontour, [76.59(d)(5)	B(a) referring to stitution of gran	o 76.61(d)] ndfathered states e 25, 1981	ions in the		
Column 3:		stations ide	ntified by the let	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	
WMYO-CW		1.00	WMYO-Mv		1.00	SIGN	BASIS		
WHAS-DT	D	0.25	, , , , , , , , , , , , , , , , , , , ,						
WKYT-DT	D	0.25					• • • • • • • • • • • • • • • • • • • •		
WKYU-DT	С	0.25							
WLKY-DT	D	0.25							
WLKY-32	M	1.00							
								4.00	
			BLOCK C: CO	MPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of I	DSEs from	part 5 of this s	chedule				_	
Line 2: Enter the	sum of permitted	d DSEs fron	n block B abov	/e					
Line 3: Subtract (If zero, le				of DSEs subject of this schedule		ate.			
Line 4: Enter gro	ss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375 a	nd enter su	m here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	Es from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 an	d enter here	e and on line 2	2, block 3, space	L (page 7)			0.00	

ACCOUNTING PERIOD: 2023/2

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Cumberland Cellular LLC 027285										
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections										
		DEDMIT		TIONS CARRIE	D ON A	DADT TIME AND	D CLIDCTIT	LITE DACIC			
	1. CALL SIGN	2. PRIC		COUNTING ERIOD	4. E	BASIS OF ARRIAGE	5. PF	RESENT DSE	6. PE	RMITTED DSE	
7 Computation of the	T	"Yes," complet	oleted. se blocks B and C, b ocks B and C blank		ırt 8 of the	e DSE schedule					
Syndicated			BLOC	K A: MAJOR	TELEVI	SION MARKE	ΞT				
Exclusivity Surcharge	• Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? Yes—Complete blocks B and C. No—Proceed to part 8										
	BLOCK B: C	arriage of VHF	-/Grade B Contour	Stations		BI OCI	K C: Compu	tation of Exemp	t DSFs		
	Is any station listed in commercial VHF static or in part, over the cab	block B of par on that places	t 6 the primary strea	am of a	nity se	ny station listed rved by the cabl ner FCC rule 76.	in block B c e system pr	of part 7 carried	in any co		
	Yes—List each st X No—Enter zero a		n its appropriate permi art 8.	itted DSE		Yes—List each sta No—Enter zero ar			permitte	d DSE	
	CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN							DSE			
	2. 22 0.0.1		222 5.5.1					37.22.3101			
							 				
			TOTAL DSEs	0.00				TOTAL DSE	s	0.00	

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Cumberland Cellular LLC	SYSTEM ID# 027285	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	584,395.57	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defned by the FCC? 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? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below. If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS	E	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below. A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1.) \$ C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. 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 DS 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)	E	
	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	LEGAL NAME OF OWNER OF CABLE SYSTEM:										
	Cumberland Cellular LLC										
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		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$									
Exclusivity Surcharge											
	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	art								
		checked "Yes," use the total number of DSEs from part 5. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.									
Computation		ır answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.									
of	_	ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B be	low								
Base Rate Fee	blank What i	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	cal								
	service	e area," see page (v) of the general instructions.									
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS									
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?									
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.									
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE									
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶\$									
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.									
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)									
	Section										
	3										
		A. Enter 0.01064 of gross receipts (the amount in section 1)									
		B. Enter 0.00701 of gross receipts (the amount in section 1)									
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here									
		D. Multiply line B by line C and enter here									
		E. Add lines A, and D. This is your base rate fee. Enter here									
		and in block 3, line 1, space L (page 7)	0.00								
		Base Rate Fee	<u></u>].								

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2023/2

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nome
Cumberland Cellular LLC	027285	Name
Section If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.		•
A. Enter 0.01064 of gross receipts		8
(the amount in section 1)		
B. Enter 0.00701 of gross receipts		0
(the amount in section 1) \$		Computation of
		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) \$		
E. Subtract 4.000 from total DSEs		
(the figure in section 2) and enter here		
F. Multiply line D by line E and enter here		
G. Add lines A, C, and F. This is your base rate fee.		
Enter here and in block 3, line 1, space L (page 7) Base Rate Fee	0.00	
Base Rate Fee	0.00	
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadc	ast signals shall	
instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple chann		9
Space G.		9
In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fer receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take		Computation
exclusion, you must:	duvantage of this	of Base Rate Fee
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant	to the same	and
station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine		Syndicated
DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee fo	r each group.	Exclusivity Surcharge
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		for
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B b		Partially Distant
your cable system is wholly located outside all major television markets, complete block A only.	ciow. However, ii	Stations, and
How to Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
Step 1: For each community served, determine the local service area of each wholly distant and each partially distant sta	ition you	Stations
carried to that community.		
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were loutside the station's local service area. A subscriber located outside the local service area of a station is distant to that st		
same token, the station is distant to the subscriber.)	ation (and, 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 the	nat a cable system	
will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your systems.	stem's subscriber	
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 a	II 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 4 of this schedule; or,	in parts 2, 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 in the pager \$A3 form.	instructions	
in the paper SA3 form. • Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the	nreceding	
page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the	nat is, the total	
DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not ne actual calculations on the form.	ed to show your	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	STEM ID#
	Cumberland Cellular LLC	027285
	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	e
	and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream.	
	You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement	
	entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary	
	transmitter or an association representing the primary transmitter.	

LEGAL NAME OF OWNE Cumberland Cellu		SYSTEM:				S	YSTEM ID# 027285	Name
	BLOCK A:	COMPUTATION O	BASE RA	ATE FEES FOR EACH	SUBSCRII	BER GROUP		
FIRST SUBSCRIBER GROUP						SUBSCRIBER GROUP		^
COMMUNITY/ AREA Jamestown, Russell Springs			COMMUNITY/ AREA	Columbia, Adair County			9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
WKYU-DT	0.25							Base Rate Fee
WLKY-DT	0.25							and
								Syndicated
								Exclusivity
	"							Surcharge
								for
	<u> </u>							Partially
	"							Distant
								Stations
	<u> </u>							
Total DSEs		!	0.50	Total DSEs	-	11	0.00	
Gross Receipts First G	roun	¢ 2/11	,386.34	Gross Receipts Secon	d Group			
Orosa Mecelhis Elisi G	Joup	<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Necelhis Secon	ч Отоир	\$ 22	20,001.31	
Base Rate Fee First G	Base Rate Fee First Group \$ 1,816.18			Base Rate Fee Second Group \$ 0.00				
		SUBSCRIBER GROU	Р		FOURTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA	Cumber	rland County		COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
WMYO-MyNet	1.00							
WHAS-DT	0.25							
WKYT-DT	0.25							
WLKY-DT	0.25							
WKYU-DT	0.25							
WMYO-CW	1.00							
WLKY-32	1.00							
	<u> </u>							
	<u> </u>							
	<u> </u>							
	<u>.</u>							
Total DSEs 4.00		Total DSEs			0.00			
Gross Receipts Third Group		<u>\$</u> 16	5,927.26	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Group		\$	536.09	Base Rate Fee Fourth Group \$		\$	0.00	
Page Pote Fee: A 110	. he	. face for!	har	O obours in the Law				
Enter here and in block			ivei group a	s shown in the boxes abo	ove.	\$	2,352.26	

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Cumberland Cellular LLC 027285								Name
E		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EACH			P	
COMMUNITY/ AREA Jamestown, Russel				COMMUNITY/ AREA	SECOND SUBSCRIBER GROUP Columbia, Adair County			9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee and
								Syndicated
								Exclusivity Surcharge
								for Partially
								Distant
								Stations
							<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 341,386.34			Gross Receipts Secon	d Group	\$ 226,081.97			
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Second		\$	0.00	
THIRD SUBSCRIBER GROUP COMMUNITY/ AREA Cumberland County				FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				
COMMONT / AREA Cumbertain County								
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							<u></u>	
							<u></u>	
Total DSEs	1		0.00	Total DSEs	1		0.00	
Gross Receipts Third Group \$ 16,927.26		Gross Receipts Fourth	Group	\$	0.00			
Base Rate Fee Third Group		\$	0.00	Base Rate Fee Fourth Group		\$	0.00	
				<u>II</u>				
Base Rate Fee: Add the Enter here and in block			iber group a	s shown in the boxes ab	ove.	\$	0.00	

ACCOUNTING PERIOD: 2023/2 FORM SA3E. PAGE 20 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **Cumberland Cellular LLC** 027285 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: **Base Rate Fee** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE SURCHARGE** First Group Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge

computation

SYNDICATED EXCLUSIVITY

SURCHARGE

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

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SYNDICATED EXCLUSIVITY

SURCHARGE