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				
2/27/24	\$				
2/2//27	ALLOCATION NUMBER				

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting	2023/2				
Period					
B Owner	Instructions:     Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation.     List any other name or names under which the owner conducts the busines If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account. Check here if this is the system's first filing. If not, enter the system's ID  LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM  WAVE DIVISION HOLDINGS LLC	ss of the cable syster on the last day of the unting period.	em. the accounting period should st	ubmit	61498
				6149820	)232
				61498 20	23/2
	3700 MONTE VILLA PARKWAY				
	BOTHELL WA 98021				
С	INSTRUCTIONS: In line 1, give any business or trade names used to i				se
	names already appear in space B. In line 2, give the mailing address o	of the system, if dif	ferent from the address giv	en in space B.	
System	1 IDENTIFICATION OF CABLE SYSTEM:				
	WAVE BROADBAND  MAILING ADDRESS OF CABLE SYSTEM:				
	3700 MONTE VILLA PARKWAY				
	2 (Number, street, rural route, apartment, or suite number)				
	BOTHELL WA 98021 (City, town, state, zip code)				
D	Instructions: For complete space D instructions, see page 1b. Identify	only the fret com	munity served below and r	alist on nage 1h	`
Area	with all communities.	only the hat com	inding served below and n	Silot Oil Paye IL	,
Served	CITY OR TOWN	STATE			
First	SOUTH SAN FRANCISCO	CA			
Community	Below is a sample for reporting communities if you report multiple ch.	annel line-ups in S	Space G.		
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP	P#
Sample	Alda	MD	Α	1	
Campic	Alliance	MD	В	2	
	Gering	MD	В	3	

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

**ACCOUNTING PERIOD: 2023/2** FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 61498 WAVE DIVISION HOLDINGS LLC 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 fillings. 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. CH LINE UP SUB GRP# CITY OR TOWN STATE **SOUTH SAN FRANCISCO** CA **First** SAN FRANCISCO CA Α Community CA **BURLINGAME** Α **DALY CITY** CA Α REDWOOD CITY CA Α CA SAN MATEO See instructions for additional information on alphabetization. Add rows as necessary.

l	
l	

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM: WAVE DIVISION HOLDINGS LLC

SYSTEM ID# 61498

# E

#### 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 SUBSCRIBERS RATE	
Residential:					
<ul> <li>Service to first set</li> </ul>	2,864	\$	35.95		
<ul> <li>Service to additional set(s)</li> </ul>					
<ul> <li>FM radio (if separate rate)</li> </ul>					
Motel, hotel	413	\$	2.09		
Commercial	280	\$	4.15		
Converter					
Residential					
Non-residential	1				
		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 2				
CATEGORY OF SERVICE	RATE		CATEGORY OF SERVICE	RATE		
Continuing Services:		Installation: Non-residential				
• Pay cable	\$ 17.00	Motel, hotel				
<ul> <li>Pay cable—add'l channel</li> </ul>		Commercial				
Fire protection		• Pay cable			Refer to tab "Pg2 - Sectio	
Burglar protection		<ul> <li>Pay cable-add'l channel</li> </ul>				
Installation: Residential		Fire protection				
First set	\$ 79.95	Burglar protection				
<ul> <li>Additional set(s)</li> </ul>	\$	Other services:				
• FM radio (if separate rate)		Reconnect	\$ 40.00			
Converter		Disconnect		ı		
	 	Outlet relocation				
		Move to new address				
				ı		

## WAVE DIVISION HOLDINGS LLC - SOUTH SAN FRANCISCO, CA

## Page 2 - Section F- Block 2

#### Additional Services Other Than Secondary Transmissions:Rate

Service	Туре	<b>Retail Rate</b>		
Preferred TV	Expanded Content	\$	86.33	
Premiere TV-Entertainment	Digital Tier Packages	\$	14.00	
Premiere TV-Variety	Digital Tier Packages	\$	9.25	
Premiere TV-Sports	Digital Tier Packages	\$	13.00	
Premiere TV (includes Premiere TV-Entertainment, Variety & Sports)	Digital Tier Packages	\$	33.75	
Pacquete en Espanol (Spanish Digital Tier)	Digital Tier Packages	\$	10.00	
НВО	Premium	\$	20.00	
HBO Max	Premium	\$	15.99	
Showtime/The Movie Channel (TMC)	Premium	\$	20.00	
Cinemax	Premium	\$	19.50	
Starz	Premium	\$	18.00	
Movieplex	Premium	\$	5.00	
HD Tier	High Definition Package	\$	7.00	
ART America - Arabic	International Premium	\$	12.95	
CCTV4	International Premium	\$	12.00	
Deutsche Welle International	International Premium	\$	9.95	
GMA Network	International Premium	\$	12.00	
GMA Pinoy/TFC Bundle	International Premium	\$	19.00	
RAI Italia	International Premium	\$	9.95	
RTN	International Premium	\$	12.00	
The Filipino Channel (TFC) On Demand	International Premium	\$	7.00	
The Filipino Channel (TFC)	International Premium	\$	12.00	
TV5 Monde	International Premium	\$	9.95	
TV Asia	International Premium	\$	14.95	
TV Japan	International Premium	\$	29.95	
Zee TV	International Premium	\$	12.00	
Zhong Tian	International Premium	\$	12.00	
Zhong Tian/ CCTV4	International Premium	\$	19.00	

LEGAL NAME OF OWNER OF CABL WAVE DIVISION HOLDII					SYSTEM ID 6149	Namo
PRIMARY TRANSMITTERS: TELEV					0143	+
n General: In space G, identify e		station (incl	iding translator	stations and low r	power television stations)	_
carried by your cable system duri						G
FCC rules and regulations in effects						Primary
76.59(d)(2) and (4), 76.61(e)(2) a substitute program basis, as expla				u (4))]; and (2) ce	rtain stations carried on a	Transmitters
Substitute Basis Stations: W	ith respect to	any distant st	ations carried b	y your cable syste	em on a substitute program	Television
pasis under specifc FCC rules, re Do not list the station here in spa				Statement and Pr	rogram Log)—if the	
station was carried only on a s			c i (inc openiai	Otatement and 11	ogram Eog/—ii the	
List the station here, and also in						
basis. For further information of in the paper SA3 form.	oncerning sub	stitute basis :	stations, see pa	ge (v) of the gene	eral instructions located	
Column 1: List each station's	-				• • • • • • • • • • • • • • • • • • •	
each multicast stream associated cast stream as "WETA-2". Simulc						
NETA-simulcast).	asi sileanis in	ust be reporte	sa iii colalliii i (	iist each stream s	separately, for example	
Column 2: Give the channel n						
its community of license. For exar on which your cable system carrie		Channel 4 in	Washington, D.	C. This may be di	fferent from the channel	
Column 3: Indicate in each ca	se whether the					
educational station, by entering the						
(for independent multicast), "E" (for For the meaning of these terms, s						
Column 4: If the station is outs	side the local s	service area,	(i.e. "distant"), e	nter "Yes". If not,	enter "No". For an ex	
planation of local service area, se Column 5: If you have entered	e page (v) of t	he general in	structions locate	ed in the paper SA	A3 form.	
cable system carried the distant s						
carried the distant station on a pa	rt-time basis b	ecause of lac	k of activated cl	hannel capacity.		
For the retransmission of a dis of a written agreement entered in						
the cable system and a primary tr						
tion "E" (exempt). For simulcasts,	also enter "E"	. If you carrie	d the channel or	n any other basis,	, enter "O." For a further	
explanation of these three catego Column 6: Give the location o	ries, see page f each station	(v) of the ger For U.S. stat	neral instructions ions, list the cor	s located in the participal in	aper SA3 torm. the station is licensed by the	
FCC. For Mexican or Canadian st						
Note: If you are utilizing multiple						
		CHANN	IEL LINE-UP	AA		
1 0411	0 DICACT	1			C LOCATION OF STATION	=
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
OIGN	NUMBER	STATION	(162 OLINO)	(If Distant)		
KAYT Catchy Comody	22	ı	No	(,	SAN EDANCISCO CA	
KAXT - Catchy Comedy			•		SAN FRANCISCO, CA	
KBCW - CW	44	N	No		SAN FRANCISCO, CA	See instructions for
KCNS - Independent	38	I	No		SAN FRANCISCO, CA	additional informat on alphabetization.
KDTV - Univision	14	N	No		SAN FRANCISCO, CA	on aiphabetization.
KEMO - Azteca	50.1	N	No		FREMONT, CA	
	66	N	No			
KFSF - UniMas			•		VALLEJO, CA	
KFSFDT2 - Bounce TV	66.3	N	No		VALLEJO, CA	
KFSFDT4 - Grit	66.4	N	No		VALLEJO, CA	
KFSFDT5 - True Crime	66.5	N	No		VALLEJO, CA	
KGO TV- ABC	7	N	No		SAN FRANCISCO, CA	
KGODT2 - Localish	7.2	N	No		SAN FRANCISCO, CA	***
			•	••••••		
KGODT3 - This TV	7.3	N	No	•	SAN FRANCISCO, CA	
KICU - KTVU Plus	36	I	No		SAN JOSE, CA	
KICUDT2 - KEMS/KBS Wo	36.2	I	No		SAN JOSE, CA	
KICUDT3 - Fox Weather	36.3	ı	No		SAN JOSE, CA	
KKPX - ION	65	N	No		SAN JOSE, CA	
KMTP - Independent	32	ı	No	•	SAN FRANCISCO, CA	
				••••••		
KNTV - NBC	11	N	No	•	SAN JOSE, CA	
KNTVDT2 - Cozi	11.2	N	No		SAN JOSE, CA	
KNTVDT5 - Lx	11.5	N	No		SAN JOSE, CA	
KOFY - Independent	20	1	No		SAN FRANCISCO, CA	
KPIX - CBS	5	N	No		SAN FRANCISCO, CA	
KPIXDT2 - Start TV	5.2	N	No		SAN FRANCISCO, CA	
KPIXDT3 - DABL	5.3	N	No		SAN FRANCISCO, CA	
KPJK - Independent	27	<b> </b>	No		SAN MATEO, CA	
KPJKDT3 - NHK World	60.3	I	No		SAN MATEO, CA	
KPJKDT4 - DW	60.4	ı	No	<u></u>	SAN MATEO, CA	]
KPJKDT5 - FNX	60.5	I	No		SAN MATEO, CA	
KQED - PBS	9	Е	No	1	SAN FRANCISCO, CA	
	9.2		•	<b>†</b>	SAN FRANCISCO, CA	""
KQEDDT2 - KQED Plus		E	No	<b></b>		
	54.3	E	No		SAN JOSE, CA	
KQEHDT3 - World	54.4	Е	No		SAN JOSE, CA	
KQEHDT3 - World KQEHDT4 - Kids		N	No		FORT BRAGG, CA	
KQEHDT3 - World KQEHDT4 - Kids	8	Е	No	T	COTATI, CA	
KQEHDT3 - World KQEHDT4 - Kids KQSL - TLN	8 5	_	•	<b></b>	COTATI, CA	""
KQEHDT3 - World KQEHDT4 - Kids KQSL - TLN KRCB - PBS	5		N <sub>C</sub>			
KQEHDT3 - World KQEHDT4 - Kids KQSL - TLN KRCB - PBS KRCBDT2 - Create	5 22.2	E	No			
KQEHDT3 - World KQEHDT4 - Kids KQSL - TLN KRCB - PBS KRCBDT2 - Create KRON - MyNetworkTV	5 22.2 4	E N	No		SAN FRANCISCO, CA	
KQEHDT3 - World KQEHDT4 - Kids KQSL - TLN KRCB - PBS KRCBDT2 - Create KRON - MyNetworkTV	5 22.2	E	1		SAN FRANCISCO, CA SAN FRANCISCO, CA	
KQEHDT3 - World KQEHDT4 - Kids KQSL - TLN KRCB - PBS KRCBDT2 - Create KRON - MyNetworkTV KRONDT2 - AntennaTV	5 22.2 4	E N	No			
KQEHDT3 - World KQEHDT4 - Kids KQSL - TLN KRCB - PBS KRCBDT2 - Create KRON - MyNetworkTV KRONDT2 - AntennaTV KRONDT3 - Rewind TV	5 22.2 4 4.2	E N N	No No		SAN FRANCISCO, CA	 
KQEHDT3 - World KQEHDT4 - Kids KQSL - TLN KRCB - PBS KRCBDT2 - Create KRON - MyNetworkTV KRONDT2 - AntennaTV KRONDT3 - Rewind TV KRONDT4 - Charge!	5 22.2 4 4.2 4.3 4.4	E N N N	No No No No		SAN FRANCISCO, CA SAN FRANCISCO, CA SAN FRANCISCO, CA	
KQEHDT3 - World KQEHDT4 - Kids KQSL - TLN KRCB - PBS KRCBDT2 - Create KRON - MyNetworkTV KRONDT2 - AntennaTV KRONDT3 - Rewind TV KRONDT4 - Charge! KRONDT5 - Shop LC	5 22.2 4 4.2 4.3 4.4 4.5	E N N N N	No No No No		SAN FRANCISCO, CA SAN FRANCISCO, CA SAN FRANCISCO, CA SAN FRANCISCO, CA	
KQEHDT3 - World  KQEHDT4 - Kids  KQSL - TLN  KRCB - PBS  KRCBDT2 - Create  KRON - MyNetworkTV  KRONDT2 - AntennaTV  KRONDT3 - Rewind TV  KRONDT4 - Charge!  KRONDT5 - Shop LC  KSTS - Telemundo	5 22.2 4 4.2 4.3 4.4 4.5	E N N N N	No No No No No		SAN FRANCISCO, CA SAN FRANCISCO, CA SAN FRANCISCO, CA SAN FRANCISCO, CA SAN JOSE, CA	
KQEHDT3 - World KQEHDT4 - Kids KQSL - TLN KRCB - PBS KRCBDT2 - Create KRON - MyNetworkTV KRONDT2 - AntennaTV KRONDT3 - Rewind TV KRONDT4 - Charge! KRONDT5 - Shop LC KSTS - Telemundo KSTSDT2 - TeleXitos	5 22.2 4 4.2 4.3 4.4 4.5	E N N N N	No No No No		SAN FRANCISCO, CA SAN FRANCISCO, CA SAN FRANCISCO, CA SAN FRANCISCO, CA	

U.S. Copyright Office

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
WAVE DIVISION	N HOLDING	SLLC			61498		
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specific FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried ti carried the distant stat For the retransmiss of a written agreement	ERS: TELEVISION Consists as explained Stations: With CC rules, regular there in space only on a substantian consistency of the station's call associated with a cast, see the cast, see attention is outsided for a part-tipion on a part-tipion of a distantian of a distantian of a cast, and a cast the cast of a cast of the cast of a cast	y television sinhe accounting June 24, 15 (4), or 76.63 (ed in the next respect to an ations, or autiliance I, if the statement of the station accell, if the statement of the station whether the setter "N" (for roncommerciance I, when the station whether the setter "N" (for roncommerciance I) of the local seriance I (v) of the station whether the setter "N" (for roncommerciance I) of the local seriance I (v) of the station whether the setter "N" (for roncommerciance I) of the local seriance I (v) of the station whether the seriance I (v) of the station or before June III (v) or the local seriance I (v) of the station or before June III (v) or the station or the station or before June III (v) or the station or the	g period except 281, permitting to 76.4 paragraph y distant station norizations: st it in space I (to attion was carried itute basis static report origination coording to its over the permitted in the sassigned to permitted in the sassigned in the sassigned in the sassigned in the sassigned to permitted in the sassigned in the sass	(1) stations carriche carriage of ce 61(e)(2) and (4))] is carried by your he Special Stater and both on a subsons, see page (v) on program serviciver-the-air design column 1 (list eather the the theory of the television station, an industrial or "E-M" (for network multions located in "distant"), enter "Stations located in the television stations located in the theory of the television stations located in the televisions located in the television and located in the televis	Yes". If not, enter "No". For an ex ne paper SA3 form , stating the basis on which you ntering "LAC" if your cable syster	Primary Transmitters: Television	
tion "E" (exempt). For explanation of these the Column 6: Give the	simulcasts, als nree categories e location of ea Canadian statio	o enter "E". If s, see page (v ach station. Fo ons, if any, giv	you carried the y) of the general or U.S. stations, ye the name of t	channel on any instructions loca , list the community wi	other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the th which the station is identifec		
		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		
KT KTLNDT2 - MeTV	68.2	N	No		PALO ALTO, CA		
KT  KTNC - SBN	42	N	No		CONCORD, CA		
KT! KTSF - Independent	26	I	No		SAN FRANCISCO, CA		
KT' KTVU - FOX	T'KTVU - FOX 2 N NO OAKLAND, CA						
KT' KTVUDT2 - Fox Weat							
KT' KTVUDT3 - Movies!	UDT3 - Movies! 2.2 N No OAKLAND, CA						

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name WAVE DIVISION HOLDINGS LLC 61498 PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

FURINI SAJE. PAGE 5.						ACCOUNTING	PERIOD: 2023/2
LEGAL NAME OF OWNER OF WAVE DIVISION HOLD					5	SYSTEM ID# 61498	Name
SUBSTITUTE CARRIAG	F: SPECIA	AI STATEME	NT AND PROGRAM I O	G			
In General: In space I, ident substitute basis during the avexplanation of the programm form.	ify every no	nnetwork televi	sion program broadcast by a	a distant statio C rules, regul	lations, or authorizations	. For a further	Substitute
1. SPECIAL STATEMEN	T CONCE	DNING SUDS	TITLITE CADDIACE				Carriage:
<ul> <li>During the accounting pe broadcast by a distant sta</li> </ul>	riod, did yo			sis, any noni	network television prog	ram <b>X</b> No	Special Statement and Program Log
<b>Note:</b> If your answer is "No log in block 2.	o", leave the	e rest of this pa	age blank. If your answer is	s "Yes," you ı	must complete the prog	ram	
period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love Column 2: If the progra Column 3: Give the call Column 4: Give the brothe case of Mexican or Cal Column 5: Give the mofirst. Example: for May 7 gi Column 6: State the tim to the nearest five minutes stated as "6:00–6:30 p.m."	titute prograce, please of every not observed a distant stategulations, of the state of the stat	am on a separ attach addition connetwork teletion and that your or authorization of use general BA Basketball adcast live, ent station broadd on's location ( ons, if any, the yown your sy e substitute pr a program car e listed program ions in effect of	nal pages. vision program (substitute your cable system substitute rour cable system substitut ns. See page (vi) of the ge categories like "movies", ref "Yes." Otherwise enter casting the substitute prog- the community to which the restem carried the substitute rogram was carried by you ried by a system from 6:07 m was substituted for prog- during the accounting perio-	program) thated for the program instructor "basketbal "No." ram. e station is lide program. Ur cable syste :15 p.m. to 6 ramming thated; enter the	at, during the accounting ogramming of another stions located in the paper. List specific programming by the FCC or, lentified). See numerals, with the num. List the times accurately accurately by the first of the second by the second by the first of the second by the first of the second by the second	g station er in nonth ately	
				WHE	EN SUBSTITUTE	7. REASON	
1. TITLE OF PROGRAM	UBSTITUT 2. LIVE?	E PROGRAM  3. STATION'S	1	5. MONTH	6. TIMES	FOR DELETION	
	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM — TO		
					<u> </u>		
					_		
					_	"	
					<u> </u>		
					_		
						"	
					<u> </u>		
					_		
						"	
						ļ	
					_		
					_		

LEGA	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
WA	VE DIVISION HOLDINGS LLC	61498	Name
Inst all a (as	COSS 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 cone (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s) during the accounting period.	dary transmission service	<b>K</b> Gross Receipts
IMP	ORTANT: You must complete a statement in space P concerning gross receipts.	(Amount of gross receipts)	
• Con • Con • If you fee to accomp	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the amo from block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable parts ompanying this form and attach the schedule to your statement of account.  urt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be ear	s of the DSE Schedule	Copyright Royalty Fee
bloc	k 3 below.  Int 6 of the DSE schedule was completed, the amount from line 7 of block C should be en		
3 be	low.		
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should block 4 below.	d be entered on line	
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.	s 1.064 percent of the	
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064	\$ 1,343,663.99	
	Enter the result here. This is your minimum fee.	\$ 14,296.58	
	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. <b>3.75 Fee:</b> 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. <b>BASE RATE FEE/3.75 FEE or MINIMUM FEE:</b> 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	\$ 14,296.58	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
	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	\$ 15,021.58	appropriate form for submitting the additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (Se general instructions located in the paper SA3 form for more information.)	ee page (i) of the	

ACCOUNTING PERIOD: 2023/2 FORM SA3E, PAGE 8.

						FURIN SASE, FAGE 6.						
Name	WAVE DIVISION					SYSTEM ID# 61498						
М		=	the number of channels on which	-		ations						
Channels	1. Enter the total	number of cl	nnels on which the cable		Γ	48						
		ble system c	vated channels ried television broadcast stations			400						
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)  Name Morgan Conkle Telephone 347-835-7661											
for Further Information												
	(Numbe	Address 650 College Road East, Suite 3100 (Number, street, rural route, apartment, or suite number)  Princeton, NJ 08540										
		wn, state, zip)	.conkle@astound.com		Fax (optional)							
_	CERTIFICATION (	This stateme	of account must be certifed and sign	gned in accordanc	ce with Copyright Office regula	tions.)						
O Certifcation	• I, the undersigned	d, hereby cer	that (Check one, but only one, of the	e boxes.)								
			on or partnership) I am the owner of									
	in line 1 of	space B and	orporation or partnership) I am the at the owner is not a corporation or partner (if a corporation) or a partner (if	artnership; or								
	<ul> <li>(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.</li> <li>I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.</li> <li>[18 U.S.C., Section 1001(1986)]</li> </ul>											
		X	/s/ Parisa Salehani									
		(e.g., /s/	ectronic signature on the line above us hn Smith). Before entering the first for n type /s/ and your name. Pressing th	ward slash of the /s	s/ signature, place your cursor in t							
		Typed o	printed name: Parisa Saleha	ni		100100100100100100100100100100100100100						
		Title:	Senior Vice President, Con									
		Date:	larch 1, 2024									

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 th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephon 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 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 t 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 lav

U.S. Copyright Office

LEGAL NAME OF OWNER OF CABLE SYSTEM:  WAVE DIVISION HOLDINGS LLC  61498	Namo				
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					
Name Mailing Address 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	1111				

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

DSE SCHEDULE. PAG	E 11. (CONTINUED)					
4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			SY	STEM ID#
1	WAVE DIVISION HOLDI	NGS LLC				61498
	SUM OF DSEs OF CATEGOR		MC:			
	Add the DSEs of each station		NJ.			
	Enter the sum here and in line		s schedule.		0.00	
		•				
2	Instructions:					
	In the column headed "Call S	Sign": list the ca	all signs of all distant station	s identified by the	e letter "O" in column 5	
Computation	of space G (page 3). In the column headed "DSE"	": for each indep	endent station, give the DS	F as "1.0": for ea	ch network or noncom-	
of DSEs for	mercial educational station, given			,		
Category "O"	. 0		CATEGORY "O" STATIO	NS: DSEs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
				···		
Add rows as						
necessary.						
Remember to copy						
all formula into new						
rows.						
				···		
				···		
				···		
				···		
				···		

Name	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as "25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.  CATEGORY LAC STATIONS: COMPUTATION OF DSES  1. CALL SIGN OF HOURS OF HOURS OF HOURS OF HOURS CARRIED BY SYSTEM ON AIR  ** ** ** ** ** ** ** ** ** ** ** ** **	61498						
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 1: Li Column 2 figure should Column 3 Column 4 be carried ou Column 9 give the type- Column 6 third decimal	ist the call sign of all dista 2: For each station, give correspond with the informal 3: For each station, give 4: Divide the figure in column t at least to the third decilor 5: For each independent -value as ".25." 6: Multiply the figure in column	the number of rmation giver the total num umn 2 by the mal point. Th station, give	of hours your cable system in space J. Calculated ber of hours that the stringure in column 3, and its its the "basis of carrow the "type-value" as "1 are figure in column 5, and the figure in column 5, and the stringure in column 5, and the string	stem carried the only one DSE for station broadcast and give the result it is age value" for the control of the	station during the accordance of each station over the air during the in decimals in column e station.  work or noncommercial of the column of	accounting period. 4. This figure must I educational station to no less than the	
Capacity		С	ATEGORY	LAC STATIONS	: COMPUTAT	TION OF DSEs		
		OF HOU CARRIE	JRS ED BY	OF HOURS STATION	CARRIA			SE
			÷	***************************************	=	x	=	
					=		=	
			÷		=	x	=	
	Add the DSEs	of each station.		schedule,	<b>&gt;</b>	0.0	00	
Computation of DSEs for Substitute-Basis Stations	Column 1: Giv  Was carried tions in effetors a Broadcast of space 1). Column 2: at your option. Column 3: Column 4:	d by your system in subsitect on October 19, 1976 one or more live, nonnetwork for each station give the This figure should correct the number of day Divide the figure in colur This is the station's DSE	titution for a p (as shown by ork programs e number of li spond with th s in the caler nn 2 by the fi (For more in	orogram that your system that your system the letter "P" in colunt during that optional cove, nonnetwork prograte information in space dar year: 365, except gure in column 3, and formation on rounding	em was permitte nn 7 of space I); ; arriage (as shown ams carried in su e I. in a leap year. give the result ir l, see page (viii)	nd to delete under FCC and by the word "Yes" in colubstitution for programs a column 4. Round to not the general instruction	rules and regular- umn 2 of that were deleted to less than the thirc	3 form)
					1 1		T	T
		OF	OF DA	YS	1 1	OF	OF DAYS	4. DSE
							÷	
				=				=
		÷		= = = = = = = = = = = = = = = = = = = =			÷	=
	Add the DSEs	s OF SUBSTITUTE-BAS of each station.	IS STATION			0.0		
5				ne boxes in parts 2, 3, a	and 4 of this sched	dule and add them to pro	ovide the total	
Total Number	1. Number o	of DSEs from part 2 ●				<b>&gt;</b>	0.00	
of DSEs		•				<u> </u>		
	3. Number o	of DSEs from part 4 ●				<b>-</b>	0.00	
	TOTAL NUMBE	ER OF DSEs					_•	0.00

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

LEGAL NAME OF C							S	YSTEM ID# 61498	Name
Instructions: Bloc	ck A must be com	pleted.							
schedule.		·	·	7 of the DSE sche	edule blank ar	nd complete pa	art 8, (page 16) of	the	6
• If your answer if	"No," complete blo			ELEVISION M.	ARKETS				Computation of
Is the cable syster	n located wholly o			ller markets as de		ection 76.5 of F	FCC rules and reg	gulations in	3.75 Fee
effect on June 24,		schodulo [		PLETE THE REMA	VINDED OF B	ADT 6 AND 7			
<b>→</b>	elete blocks B and		JO NOT COM	LETE THE KEIVIP	AINDEN OF F	AIN O AIND T	•		
		BLO	CK B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulations of DSE Sche	ons prior to Jur dule. (Note: Th	part 2, 3, and 4 of ne 25, 1981. For fu ne letter M below ro Act of 2010.)	ırther explana	tion of permitte	ed stations, see th	ne	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerce D Grandfatherec instructions fo E Carried pursua *F A station pre	eles and regued pursuant of the pursuant of th	lations cited be to the FCC mand in 76.5(kk) (7 al station [76.565) (see paragulule). Lal waiver of Fed on a part-timitrithin grade-B of the station station in the station	ne or substitute bas contour, [76.59(d)(	se in effect or 6.57, 76.59(b e)(1), 76.63(a 63(a) referring estitution of gr	n June 24, 198 ), 76.61(b)(c), ) referring to 70 g to 76.61(d)] randfathered s	76.63(a) referring 6.61(e)(1) tations in the		
Column 3:		e stations ide	ntified by the le	parts 2, 3, and 4 o			orksheet on page	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
						II.		0.00	•
		E	BLOCK C: CC	MPUTATION OI	F 3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule			1		
Line 2: Enter the	sum of permitte	d DSEs fro	m block B ab	ove					
				r of DSEs subjec 7 of this schedu		rate.	, <del>,</del>	0.00	
Line 4: Enter gro	ss receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent
Line 5: Multiply I	ine 4 by 0.0375 a	and enter s	um here				X 0.00	<u></u>	partially permited/ partially
	al number of DSI		***************************************				х		nonpermitted carriage? If yes, see part
Line o. Linter tota	a. namboi di Dol		. •						9 instructions.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  WAVE DIVISION HOLDINGS LLC  61498										
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	A—Part-time spe 76.59( B—Late-night pr 76.61( S—Substitute ca genera Column 5: Indicate to Column 6: Compare	or to June 25, call sign for ea the DSE for the accounting the basis of call call the program (d)(1),76.61(e) cogramming: C(e)(3)). arriage under call instructions the station's Detail the DSE figure B, column 3 conformation your call significant of the program	1981, under former ch distant station id is station for a sing g period and year in arriage on which the egulations cited be inming: Carriage, or (1), or 76.63 (referr carriage under FCC certain FCC rules, rein the paper SA3 for SE for the current ares listed in column of part 6 for this status give in columns 2	FCC rules gover lentifed by the le le accounting pure which the carrie e station was callow pertain to the part apart-time basing to 76.61(e)( rules, sections egulations, or a form.  accounting period is 2 and 5 and li ion.	erning part-time an etter "F" in column eriod, occurring be age and DSE occurried by listing one ose in effect on Jusis, of specialty profile.  76.59(d)(3), 76.61 authorizations. For the smaller of the effect of the stress of the smaller of the effect of the effect of the stress of the smaller of the effect o	d substitute carri 2 of part 6 of the etween January 1 urred (e.g., 1981/ e of the following ine 24, 1981.) ogramming under (e)(3), or 76.63 ( further explanation parts 2, 3, and 4 he two figures her	age.) DSE schedule. , 1978 and June 1). letters:  FCC rules, sectoreferring to on, see page (vi) of this schedule	30, 198 tions of the anould be	1. entered		
			ED DSE FOR STA								
	1. CALL SIGN	2. PRIC		COUNTING ERIOD	4. BASIS OF CARRIAGE	-	RESENT DSE	6. PE	ERMITTED DSE		
	CIGIT	DOL		LITTOD	O/ II (I II / IOL		DOL		DOL		
<b>7</b> Computation of the	-	"Yes," comple	te blocks B and C, ocks B and C blank	and complete p							
Syndicated Exclusivity			BLOCK	( A: MAJOR )	TELEVISION M	IARKET					
Surcharge	• Is any portion of the c	able system w	ithin a top 100 majoı	r television mark	et as defned by sec	ction 76.5 of FCC	rules in effect Jun	ne 24, 198	81?		
	X Yes—Complete	blocks B and	C .		No—Proc	eed to part 8					
	BLOCK B: Ca	arriage of VHF	Grade B Contour	Stations	- I	BLOCK C: Comp	utation of Exemp	ot DSEs			
	Is any station listed in commercial VHF station or in part, over the cal	on that places			11	n listed in block B he cable system rule 76.159)	•	•			
	X Yes—List each st	ation below with	h its appropriate perm	nitted DSE	X Yes—List	each station below	with its appropriat	e permitte	ed DSE		
	No—Enter zero a	nd proceed to p	part 8.		No—Enter	zero and proceed	to part 8.				
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIG	N DSE	CALL SIGI	N	DSE		
		-									
			TOTAL DSEs	0.00			TOTAL DS	Es	0.00		

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: WAVE DIVISION HOLDINGS LLC	SYSTEM ID# 61498	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,343,663.99	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC?  Yes—Complete section 3 below.		ı
	SECTION 3: TOP 50 TELEVISION MARKET		ı
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 DS	25	ſ
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	5L	1
	A. Enter 0.00599 of gross receipts (the amount in section1)		1
	B. Enter 0.00377 of gross receipts (the amount in section.1)		1
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		1
	D. Multiply line B by line C and enter here	_	ı
	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.		ſ
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		1
	A. Enter 0.00599 of gross receipts (the amount in section 1)		1
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ \$		ı
	C. Multiply line B by 3.000 and enter here		ı
	D. Enter 0.00178 of gross receipts (the amount in section 1)		ı
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		ı
	F. Multiply line D by line E and enter here		ı
	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		l
	SECTION 4: SECOND 50 TELEVISION MARKET		1
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		1
Section 4a	Yes—Complete part 9 of this schedule.  X No—Complete the applicable section below.		ı
	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)	SE	l
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		1
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		ı
	D. Multiply line B by line C and enter here		ı
	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		ı

Name			SYSTEM ID# 61498
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	45	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		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 pa	rt
		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		ar answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	
of	_	ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below	ow .
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 "loca	l
	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?	
		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)	9_
	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.).	00
	0 "	use the total number of DSEs from part 5.)	00
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.	
		NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts  (the amount in section 1)	
		(the amount in Section 1).	
		B. Enter 0.00701 of gross receipts	
		(the amount in section 1) ▶ _ \$ 9,419.08	
		C. Subtract 1.000 from total DSEs	
		(the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	_
		E. Add lines A, and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7)  Base Rate Fee	-
	1	- Φ	<u></u> - :

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

552 551125422.17.62 17.	Accounting	71 ENIOD: 2023/2
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
WAVE DIVISION HOLDINGS LLC	61498	
Section If the figure in section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.		
A. Enter 0.01064 of gross receipts		8
(the amount in section 1) ▶		
B. Enter 0.00701 of gross receipts (the amount in section 1)  * \$		Computation of Base Rate Fee
C. Multiply line B by 3.000 and enter here <b>▶</b>		Dase Rate Fee
D. Enter 0.00330 of gross receipts (the amount in section 1)  **State**   \$    **Transport		
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	
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of tele	evision broadcast signals	
shall instead be reported on a community-by-community basis (subscriber groups) if the cable system reporting in Space G.		9
In General: If any of the stations you carried were partially distant, the statute allows you, in computing you		Computation
receipts from subscribers located within the station's local service area, from your system's total gross receipts exclusion, you must:	elpts. To take advantage of	of Base Rate Fee
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers th	nat 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 syst DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate b <b>Finally:</b> Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your	ase rate fee for each group.	Syndicated Exclusivity Surcharge
NOTE: If any portion of your cable system is located within the top 100 television market and the station is must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete b	not exempt in part 7, you	for Partially Distant
However, if your cable system is wholly located outside all major television markets, complete block A only	<i>1</i> .	Stations, and for Partially
How to Identify a Subscriber Group for Partially Distant Stations		Permitted
<b>Step 1:</b> For each community served, determine the local service area of each wholly distant and each part carried to that community.	ially distant station you	Stations
<b>Step 2:</b> For each wholly distant and each partially distant station you carried, determine which of your subsoutside the station's local service area. A subscriber located outside the local service area of a station is dithe same token, the station is distant to the subscriber.)		
<b>Step 3:</b> Divide your subscribers into subscriber groups according to the complement of stations to which the subscriber group must consist entirely of subscribers who are distant to exactly the same complement of subscriber will have only one subscriber group when the distant stations it carried have local service areas the	tations. Note that a cable	
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each subscriber groups.	ach of your system's	
In each section:		
<ul> <li>Identify the communities/areas represented by each subscriber group.</li> <li>Give the call sign for each of the stations in the subscriber group's complement—that is, each station that subscribers in the group.</li> </ul>	t is distant to all of the	
• If:		
1) your system is located wholly outside all major and smaller television markets, give each station's DSE and 4 of this schedule; or,	as you gave it in parts 2, 3,	
2) any portion of your system is located in a major or smaller televison market, give each station's DSE as part 6 of this schedule.	you gave it in block B,	
• 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) in the paper SA3 form.	of the general instructions	
• Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this sc page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscribes for that group's complement of stations and total gross receipts from the subscribers in that group). your actual calculations on the form.	criber group (that is, the total	

LEGAL NAME OF OWNE						S	61498	Name	
В		COMPUTATION O		TE FEES FOR EAG		IBER GROUP SUBSCRIBER GRO	UP		
COMMUNITY/ AREA South San Francisco, San Franc				COMMUNITY/ ARE			0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	CALL SIGN DSE CALL SIGN DSE				
								Base Rate F and	
								Syndicated	
								Exclusivity Surcharge	
								for	
								Partially Distant	
								Stations	
Total DSEs			0.00	Total DSEs	1		0.00		
Gross Receipts First G	Group	\$ 1,34	3,663.99	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	0.00		
COMMUNITY/ AREA	THIRD	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ ARE		SUBSCRIBER GRO	UP <b>0</b>		
COMMONTT / ANLA				COMMONT IT AIL					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-							
Total DSEs			0.00	Total DSEs	•		0.00		
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00		
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00		
Base Rate Fee: Add the			criber group	as shown in the boxe	s above.	¢	0.00		
Enter here and in bloc	κο, iiiie i, s	space L (page /)				Þ	0.00		

LEGAL NAME OF OWNE WAVE DIVISION H						•	61498	Name		
BI				TE FEES FOR EAC						
		SUBSCRIBER GRO				SUBSCRIBER GRO	_	9		
COMMUNITY/ AREA	South S	San Francisco, S	San Franc	COMMUNITY/ AREA	DMMUNITY/ AREA 0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computat of		
				0.122.21011				Base Rate		
								and		
						-		Syndicat		
						-		Exclusivi		
						-		Surcharg		
						-		for		
						-		Partially		
		-						Distant		
						-		Stations		
						-				
otal DSEs			0.00	Total DSEs	•		0.00			
ross Receipts First G	roup	s 1,343	3,663.99	Gross Receipts Seco	nd Group	\$	0.00			
ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00			
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP			
OMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
		•								
otal DSEs			0.00	Total DSEs			0.00			
						-				
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00			
se Rate Fee: Add th	ne <b>base rat</b>	te fees for each subs	criber group	as shown in the boxes	s above.					
nter here and in block	3, line 1, s	space L (page 7)				\$	0.00			

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name WAVE DIVISION HOLDINGS LLC 61498 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 mus also compute a 9 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 First 50 major television market Second 50 major television market of **Base Rate Fee INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of 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 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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown . \$