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				
	\$				
2-28-24	ALLOCATION NUMBER				

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	AC	COUNTING PERIOD COVERED BY THIS STATEMENT:							
Accounting Period		2023/2							
B	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. 1062 LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM								
	Volunteer Wireless, LLC								
					062414	20232			
					062414	2023/2			
		P.O. Box 670 McMinnville, TN 37111							
С		STRUCTIONS: In line 1, give any business or trade names used to it mes already appear in space B. In line 2, give the mailing address of	,						
System	1	IDENTIFICATION OF CABLE SYSTEM:							
		MAILING ADDRESS OF CABLE SYSTEM:							
	2	(Number, street, rural route, apartment, or suite number)							
		(City, town, state, zip code)							
D	Ins	tructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and rel	ist on page 1	1b			
Area Served	wit	n all communities. CITY OR TOWN	STATE						
First		McMinnville	TN						
Community	В	elow is a sample for reporting communities if you report multiple cha		pace G.					
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB G	3RP#			
Sample	Ald		MD	Α	1				
·		ance	MD	В	2				
	Gei	ring	MD	В	3				

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 062414 Volunteer Wireless, 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 first community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# McMinnville TN В 6 First **Altamont** ΤN C 8 Community TN **Beech Grove** В 5 C Beersheba Springs TN 8 В Bethany TN 6 **Bon Air** В TN 4 See instructions for **Bone Cave** TN В additional information on alphabetization. ΤN В 1 Campaign В Cassville TN 4 Centertown TN В Coalmont ΤN C 2 Add rows as necessary. Crossville TN Α 3 Derossett ΤN В 4 Dibrell В TN **Doyle** ΤN В 4 C Gruetli-Laager TN В **Hiawassee** TN 1 В Hillsboro TN 5 В Manchester TN 5 Monteagle-Grundy Co. TN C 9 Monteagle-Marion Co. TN С 9 В Morrison TN Quebeck TN В Palmer TN С 2 C Pelham TN 8 Ravenscroft В TN 4 В Rock Island TN **Smartt** TN В В Sparta TN 4 TN В **Spencer** C 2 Tracy City TN Viola В TN 6 Walling В TN 4 **Fairfield Glade** TN Α 3 Sewanee TN В 10 Bedford Co. TN В 6 Cannon Co TN В 6 В Dekalb Co. TN 6 TN В Rutherford Co. 6

Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#
Volunteer Wireless, LLC 062414

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.

OCK 1		BLOCK 2			
NO. OF			NO. OF		
SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE	
8,821	\$ 51.95	Roku	122	\$ 35.95	
2,367	\$ 4.95	HD Box	855	\$ 4.95	
		HD/DVR/Whole Home DVR	45	\$ 4.95	
		DVR Box	57	\$ 4.95	
			•	•	
	NO. OF SUBSCRIBERS 8,821	NO. OF SUBSCRIBERS RATE 8,821 \$ 51.95	NO. OF SUBSCRIBERS RATE CATEGORY OF SERVICE	NO. OF SUBSCRIBERS RATE CATEGORY OF SERVICE NO. OF SUBSCRIBERS 8,821 \$ 51.95 Roku 122 2,367 \$ 4.95 HD Box 855 HD/DVR/Whole Home DVR 45	

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

	BLO	CK 1			BLOCK 2		
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	F	RATE	CATEGORY OF SERVICE	F	RATE
Continuing Services:		Installation: Non-residential					
Pay cable		Motel, hotel			Cinemax	\$	11.95
 Pay cable—add'l channel 		Commercial			НВО	\$	17.95
Fire protection		Pay cable			HBO/Cinemax	\$	28.95
•Burglar protection		Pay cable-add'l channel			HBO/Cinemax/Strz/Encr	\$	37.95
Installation: Residential		Fire protection			Showtime/Cinemax/HBO	\$	37.95
First set		Burglar protection			Showtime/Flix/TMC	\$	10.99
Additional set(s)		Other services:			Starz/Encore	\$	11.95
• FM radio (if separate rate)		Reconnect	\$	30.00	Starz/Encore/Showtime	\$	20.95
Converter		Disconnect			HBO/Cmax/Showtime/		
		Outlet relocation	\$	70.00	Starz/Encore	\$	49.95
		 Move to new address 	\$	55.00	Variety Tier	\$	6.95
					Hispanic Tier	\$	4.95

LEGAL NAME OF OWN						-1
		STEM:			SYSTEM ID#	Name
Volunteer Wirel	ess, LLC				062414	,
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
•			, ,		nd low power television stations) only on a part-time basis under	G
	_			•	n network programs [sections	
76.59(d)(2) and (4), 76.	Primary					
substitute program basi Substitute Basis St	Transmitters: Television					
basis under specifc FC	, ,	,		0	4 and Durana Lan) . # #-	
station was carried of	•		it in space i (the	Special Statemen	t and Program Log)—if the	
 List the station here, a 	and also in spac	ce I, if the stati			e basis and also on some other	
in the paper SA3 for		erning substitu	ite basis stations	s, see page (v) or t	he general instructions located	
Column 1: List each	n station's call s	_			such as HBO, ESPN, etc. Identify	
			•	•	n. For example, report multi- stream separately; for example	
WETA-simulcast).			·	•		
			· ·		n for broadcasting over-the-air in ay be different from the channel	
on which your cable sys	stem carried the	e station.		,	•	
					endent station, or a noncommercial t), "I" (for independent), "I-M"	
(for independent multication	ast), "E" (for no	ncommercial	educational), or	"E-M" (for noncom	mercial educational multicast).	
For the meaning of thes					paper SA3 form. . If not, enter "No". For an ex-	
planation of local service	e area, see pa	ge (v) of the g	eneral instructio	ns located in the p	aper SA3 form.	
			-		ating the basis on which your	
carried the distant station		•	• •	•	ing "LAC" if your cable system pacity.	
					ayment because it is the subject	
_				-	m or an association representing transmitter, enter the designa-	
tion "E" (exempt). For s	imulcasts, also	enter "E". If y	ou carried the ch	nannel on any othe	er basis, enter "O." For a further	
explanation of these thr Column 6: Give the					in the paper SA3 form. o which the station is licensed by the	
FCC. For Mexican or C	anadian statior	ıs, if any, give	the name of the	community with w	hich the station is identifed.	
Note: If you are utilizing	g multiple chan	nel line-ups, u	se a separate sp			
			<u> </u>	bace G for each cr	nannel line-up.	
1		CHANN		A-Crossville	annel line-up.	
1. CALL	2. B'CAST	CHANN 3. TYPE			6. LOCATION OF STATION	- - -
1. CALL SIGN	CHANNEL	3. TYPE OF	EL LINE-UP	A-Crossville 5. BASIS OF CARRIAGE	· 	
SIGN	CHANNEL NUMBER	3. TYPE OF STATION	EL LINE-UP 4. DISTANT?	A-Crossville 5. BASIS OF	6. LOCATION OF STATION	_
SIGN WATE-DT	CHANNEL NUMBER 26	3. TYPE OF STATION N-M	EL LINE-UP 4. DISTANT?	A-Crossville 5. BASIS OF CARRIAGE	6. LOCATION OF STATION Knoxville, TN	
SIGN WATE-DT WATE-HD	CHANNEL NUMBER 26 26.1	3. TYPE OF STATION	EL LINE-UP 4. DISTANT?	A-Crossville 5. BASIS OF CARRIAGE	6. LOCATION OF STATION Knoxville, TN Knoxville, TN	
SIGN WATE-DT	CHANNEL NUMBER 26	3. TYPE OF STATION N-M	EL LINE-UP 4. DISTANT?	A-Crossville 5. BASIS OF CARRIAGE	6. LOCATION OF STATION Knoxville, TN	-
SIGN WATE-DT WATE-HD	CHANNEL NUMBER 26 26.1	3. TYPE OF STATION N-M N	EL LINE-UP 4. DISTANT?	A-Crossville 5. BASIS OF CARRIAGE	6. LOCATION OF STATION Knoxville, TN Knoxville, TN	See instructions for
SIGN WATE-DT WATE-HD WATE-DT2	CHANNEL NUMBER 26 26.1 26.2	3. TYPE OF STATION N-M N N-M	EL LINE-UP 4. DISTANT?	A-Crossville 5. BASIS OF CARRIAGE	6. LOCATION OF STATION Knoxville, TN Knoxville, TN Knoxville, TN	
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WATE-DT WATE-HD WATE-DT2 WATE-DT3 WATE-DT4 WBIR-DT	CHANNEL NUMBER 26 26.1 26.2 26.3 26.4 10	3. TYPE OF STATION N-M N-M N-M N-M N-M N-M N-M	EL LINE-UP 4. DISTANT?	A-Crossville 5. BASIS OF CARRIAGE	6. LOCATION OF STATION Knoxville, TN Knoxville, TN Knoxville, TN Knoxville, TN Knoxville, TN Knoxville, TN	additional information
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WATE-DT WATE-HD WATE-DT2 WATE-DT3 WATE-DT4 WBIR-DT WBIR-HD WBXX-DT WBXX-HD WCTE-DT	CHANNEL NUMBER 26 26.1 26.2 26.3 26.4 10 10.1 20 20.1	3. TYPE OF STATION N-M N-M N-M N-M N-M N-M I-M I	EL LINE-UP 4. DISTANT?	A-Crossville 5. BASIS OF CARRIAGE	6. LOCATION OF STATION Knoxville, TN Knoxville, TN Knoxville, TN Knoxville, TN Knoxville, TN Crossville, TN Crossville, TN Cookeville, TN	additional information
WATE-DT WATE-HD WATE-DT2 WATE-DT3 WATE-DT4 WBIR-DT WBIR-HD WBXX-DT WBXX-DT WBXX-HD WCTE-DT	CHANNEL NUMBER 26 26.1 26.2 26.3 26.4 10 10.1 20 20.1 22 22.1	3. TYPE OF STATION N-M N-M N-M N-M N-M I-M E-M E	EL LINE-UP 4. DISTANT?	A-Crossville 5. BASIS OF CARRIAGE	6. LOCATION OF STATION Knoxville, TN Knoxville, TN Knoxville, TN Knoxville, TN Knoxville, TN Knoxville, TN Crossville, TN Crossville, TN Crossville, TN Cookeville, TN	additional information
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WATE-DT WATE-HD WATE-DT2 WATE-DT3 WATE-DT4 WBIR-DT WBIR-HD WBXX-DT WBXX-HD WCTE-DT WCTE-HD WKOP-HD WTNZ-DT WTNZ-HD WVLT-DT WVLT-DT	CHANNEL NUMBER 26 26.1 26.2 26.3 26.4 10 10.1 20 20.1 22 22.1 17 17.1 34 34.1 48 30 30.1	3. TYPE OF STATION N-M N-M N-M N-M I-M I E-M E I-M I I N-M N-M N	EL LINE-UP 4. DISTANT?	A-Crossville 5. BASIS OF CARRIAGE	6. LOCATION OF STATION Knoxville, TN Knoxville, TN Knoxville, TN Knoxville, TN Knoxville, TN Knoxville, TN Crossville, TN Crossville, TN Cookeville, TN Cookeville, TN Knoxville, TN Knoxville, TN Cookeville, TN Knoxville, TN	additional information
WATE-DT WATE-HD WATE-DT2 WATE-DT3 WATE-DT4 WBIR-DT WBIR-HD WBXX-DT WBXX-HD WCTE-DT WCTE-HD WKOP-HD WTNZ-DT WTNZ-HD WVLR-DT WVLT-DT WVLT-DT	CHANNEL NUMBER 26 26.1 26.2 26.3 26.4 10 10.1 20 20.1 22 22.1 17 17.1 34 34.1 48 30 30.1 30.2	3. TYPE OF STATION N-M N-M N-M N-M I-M I E-M E I-M I I N-M N-M N	EL LINE-UP 4. DISTANT?	A-Crossville 5. BASIS OF CARRIAGE	6. LOCATION OF STATION Knoxville, TN Knoxville, TN Knoxville, TN Knoxville, TN Knoxville, TN Knoxville, TN Crossville, TN Crossville, TN Cookeville, TN Cookeville, TN Knoxville, TN	additional information

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CARLE SYSTEM Name Volunteer Wireless, LLC 062414 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

CHANNEL LINE	E-UP B			Coffee, Fran	Coffee, Franklin, Warren, White & VanBuren Co		
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		
WCTE-DT	22	E-M	Yes	0	Cookeville, TN		
WCTE-HD	22.1	E	Yes	E	Cookeville, TN		
WKRN-DT	27	N-M			Nashville, TN		
VKRN-HD	27.1	N			Nashville, TN		
VNAB-DT	23	I-M			Nashville, TN		
VNAB-HD	23.1	ı			Nashville, TN		
NPT-DT	8	E-M	Yes	0	Nashville, TN		
/NPT-HD	8.1	Е	Yes	Е	Nashville, TN		
/SMV-DT	10	N-M			Nashville, TN		
SMV-HD	10.1	N			Nashville, TN		
SMV-DT3	10.3	I-M			Nashville, TN		
/TVF-DT	5	N-M			Nashville, TN		
/TVF-HD	5.1	N			Nashville, TN		
/TVF-DT3	5.3	I-M			Nashville, TN		
VUXP-DT	21	I-M			Nashville, TN		
VUXP-HD	21.1	I			Nashville, TN		
/ZTV-DT	15	I-M			Nashville, TN		
ZTV-HD	15.1	<u> </u>			Nashville, TN		
/TVF-DT2	5.2	N-M			Nashville, TN		
VKRN-DT2	27.2	I-M		-	Nashville, TN		
/KRN-DT3	27.3	I-M			Nashville, TN		
/KRN-DT4	27.4	I-M			Nashville, TN		
/SMV-DT2	10.2	I-M			Nashville, TN		
/JFB	44	I			Nashville, TN		
VNPX	28	I			Nashville, TN		
VNPX.3	28.3	I-M			Nashville, TN		

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

Nashville, TN

I-M

15.2

WZTV.2

ACCOUNTING PERIOD: 2023/2 FORM SA3F_PAGE 3 LEGAL NAME OF OWNER OF CABLE SYSTEM SYSTEM ID# Name 062414 Volunteer Wireless, 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 pasis 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 C-Grundy & Marion Counties 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 4. DISTANT? 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER STATION (If Distant) WCTE-DT** 22 E-M Yes 0 Cookeville, TN WCTE-HD** 22.1 Cookeville, TN Ε Yes Ε I-M 0 WNAB-DT*** 23 Yes Nashville, TN WNAB-HD*** 23.1 Yes Ε ı Nashville, TN WNPT-DT** 8 E-M Yes 0 Nashville, TN WNPT-HD** 8.1 Ε Yes Ε Nashville, TN 10 N-M WSMV-DT* Yes 0 Nashville, TN WSMV-HD* 10.1 Ν Yes Ε Nashville, TN WSMV-DT3* 10.3 I-M Yes 0 Nashville, TN WTVF-DT* 5 N-M Yes 0 Nashville, TN WTVF-HD* 5.1 Ν Yes Ε Nashville, TN WUXP-DT** 21 I-M Yes 0 Nashville, TN WUXP-HD** 21.1 ı Yes Ε Nashville, TN WDEF-DT 12 Ν Chattanooga, TN WDEF-HD 12.1 Ν Chattanooga, TN N-M WDEF-DT2 12.2 Chattanooga, TN WDEF-DT3 12.3 N-M Chattanooga, TN WDEF-DT4 12.4 I-M Chattanooga, TN **WRCB** 13 Chattanooga, TN N WRCB-HD 13.1 N Chattanooga, TN WTVC-DT Chattanooga, TN 9 N WTVC-HD 9.1 N₋M Chattanooga, TN

*DISTANT IN MARION COUNTY ONLY *** DISTANT IN GRUNDY COUNTY ONLY

9.2

9.3

5.3

5.2

10.2

I-M

I-M

I-M

N-M

I-M

Yes

Yes

Yes

WTVC-DT2

WTVC-HD2

WTVF-DT3*

WTVF-DT2*

WSMV-DT2

DISTANT IN GRUNDY & MARION COUNTIES

Chattanooga, TN

Chattanooga, TN

Nashville, TN

Nashville, TN

Nashville, TN

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

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

	, -							
Name	LEGAL NAME OF C			Л:				SYSTEM ID# 062414
Primary Transmitters: Radio	PRIMARY TRA In General: Lis all-band basis v Special Instruct receivable if (1) on the basis of For detailed info located in the p Column 1: lo Column 2: S Column 3: If signal, indicate Column 4: G	t every radio s whose signals to the carried by monitoring, to promation about aper SA3 form dentify the call state whether to the radio statist by placing Sive the station	RADIO tation ca were "ge rning All the syst be receit the the lusting and the statio on's sign a check is location."	rried on a separate and discrenerally receivable" by your careally receivable by your careally receivable. Under Community to which the scan whenever it is received at wed at the headend, with the scan station carried. In is AM or FM. It was electronically processed mark in the "S/D" column. In the community to which the community with which the	ble system during copyright Office ret the system's heasystem's FM ante on this point, see ed by the cable system is licens	g the accounting gulations, an adend, and (2) nna, during capage (vi) of the system as a segret by the FCC	ng period FM sign.) it can b ertain sta e genera parate a	d. al is generally be expected, ated intervals. al instructions and discrete
			,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
	WAKI	AM		McMinnville, TN				
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FORM SA3E. PAGE 5.							ACCOUNTING	PERIOD: 2023/2
LEGAL NAME OF OWNER OF		EM:				S	YSTEM ID#	Name
Volunteer Wireless, LL	.C						062414	Name
SUBSTITUTE CARRIAGE								I
In General: In space I, identi substitute basis during the ac								
explanation of the programm				general instru	uctions located	in the pape	er SA3 form.	Substitute Carriage:
 SPECIAL STATEMENT During the accounting per broadcast by a distant stat 	iod, did you			s, any nonnet	_		⊠No	Special Statement and Program Log
Note: If your answer is "No	, leave the	rest of this pag	je blank. If your answer is "	Yes," you mu		- ·		
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the program Column 3: Give the call Column 4: Give the broathe case of Mexican or Can Column 5: Give the mon first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	itute progra ce, please a of every noi distant stati gulations, o tion. Do no .ucy" or "NE n was broad sign of the s adcast static addan static ath and day ye "5/7." es when the Example: a er "R" if the and regulatic ogramming	m on a separa attach additional network televition and that your authorizations to use general of the Basketball: deast live, enterestation broadca on's location (thins, if any, the of when your system substitute program carried listed program ons in effect du	al pages. ision program (substitute piur cable system substitute piur cable system substitute piur cable system substitute piur cable system substitute piur categories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "N isting the substitute programe community to which the stommunity with which the stem carried the substitute piur carried the substitute piur carried by a system from 6:01:1 was substituted for programing the accounting period;	rogram) that, I for the program instructio "basketball". o." n. station is licer tation is iden rogram. Use able system. 5 p.m. to 6:26 mming that you enter the letter.	during the accramming of an ins located in the List specific pursued by the FC tiffied). In the times 8:30 p.m. showour system water "P" if the list	counting other station paper rogram CC or, in the month accurately ald be sequired ted pro	h	
· · · · · · · · · · · · · · · · · · ·					EN SUBSTITU		7. REASON	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	E PROGRAM 3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	IAGE OCCUF 6. TIM FROM —		FOR DELETION	
					_			
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ACCOUNTING PERIOD: 2023/2 FORM SA3E. PAGE 6.

Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:
Volunteer Wireless, LLC
SYSTEM ID#
062414

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Part-Time Carriage Log

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
- State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.—3:15 a.m. app."
- You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.–12:00 p.m."

	DATES AND HOURS OF PART-TIME CARRIAGE								
CALL SIGN	WHEN CARRIAGE O			CALL SIGN	WHEN	WHEN CARRIAGE OCCURRED			
O, LEE GIGIT	DATE	HOUF FROM	RS TO	37 KEE 31311	DATE	HOUR FROM	S TO		
						<u> </u>			
									
						_			
		_				_			
		_				_			
		_							
		_				_			

LEGA	L NAME OF OWNER OF CABLE SYSTEM: unteer Wireless, LLC	SY	STEM ID# 062414	Name
Inst all a (as pag	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount y 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 cond (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	dary transmission service mpute this amount, see	,774.20	K Gross Receipts
COPY Instru • Con • Con • If your feer • If your	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: aplete block 1, showing your minimum fee. applete block 2, showing whether your system carried any distant television stations. For block 1 on line 1 of block 4, and calculate the total royalty fee. For block 1 on line 1 of block 4, and calculate the total royalty fee. For system did carry any distant television stations, you must complete the applicable participating this form and attach the schedule to your statement of account.	ount of the minimum	ns)	L Copyright Royalty Fee
bloc ▶ If pa	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be k 3 below. rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be er			
▶ If pa	low. 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 least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.	\$ 2,790	,774.20	
Block 2	This is your minimum fee. DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the ir 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 control to the property of the property	nformation you gave in a 4, you must check	,693.84	
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	\$ 13	,148.38	
	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	\$ 13	,148.38	
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 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	\$ 29	0.00	Cable systems submitting additional
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	deposits under Section 111(d)(7) should contact
	Line 4. FILING FEE	\$	725.00	additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 30	,418.84	appropriate form for submitting the additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (S general instructions located in the paper SA3 form for more information.)	ee page (i) of the		

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

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID# 062414
	Volunteer Wireless, LLC	002414
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.	
	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 Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
for Further Information	Name Amelia Mooneyham Telephone 931-815-1536	
	Address P.O. Box 670 (Number, street, rural route, apartment, or suite number)	······································
	McMinnville, TN 37111 (City, town, state, zip)	
	Email Fax (optional)	······································
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)	
0	,	
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 identified as owner of the cable system in line 1 of space B.	m
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	
	X /s/ Greg Smartt	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	; "F2"
	Typed or printed name: Greg Smartt	
	Title: President (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:	SYSTEM ID#	Name
Volunteer Wireless, LLC	062414	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyrig lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cab service of providing secondary transmissions of primary broadcast transmitters, the sy scribers and amounts collected from subscribers receiving secondary transmissions p	le system for the basic stem shall not include sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the gen paper SA3 form.	neral instructions in the	Concerning Gross Receipts Exclusion
During the accounting period did the cable system exclude any amounts of gross receipts for made by satellite carriers to satellite dish owners?	secondary transmissions	ZAGIGGIGII
X NO		
YES. Enter the total here and list the satellite carrier(s) below		
Name Name		
Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late p For an explanation of interest assessment, see page (viii) of the general instructions in the pa	, ,	Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
	х	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-	
	xdays	
Line 3 Multiply line 2 by the number of days late and enter the sum here		
	x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	\$ -	
	(interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	further assistance please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day lat	e.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the please list below the owner, address, first community served, accounting period, and ID numb 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 sufficiency 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.

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

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

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

 1.064% of gross receipts
 Each of the second, third, and fourth DSEs
 0.701% of gross receipts

The fifth and each additional DSE

0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

- Calculate a separate base rate fee for each subscriber group, using (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

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

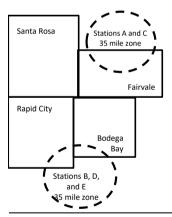
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

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



Distant Stations Carr	ied	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)	<u>0.25</u>	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
 \$6.384.00

		ψ0,001.00			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94

In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

DSE SCHEDULE, PAGE					0.	VOTERA ID#					
1					S						
•						062414					
			IS:								
					0.05						
	Enter the sum here and in line 1 of part 5 of this schedule.										
	Instructions:										
2	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5										
Commutation	of space G (page 3).	for each indepe	andont station, give the DSE	oo "1 O": for ood	sh natwork or nancom						
of DSEs for	mercial educational station, give	e the DSE as ".2	5."	as 1.0 , 101 eac	in network of noncom-						
	, g			IS: DSEs							
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
	WCTE-DT	0.250									
	WNAB-DT	1.000									
	WNPT-DT										
	WUXP-DT										
	B	0.250									
	WSMV-DT3	1.000				······································					
Volunteer Wireless, LLC SUM OF DSEs OF CATEGORY "O" STATIONS: Add the DSEs of each station. Enter the sum here and in line 1 of part 5 of this schedule. Computation of DSEs for Category "O" Stations CALL SIGN CALL SIGN DSE CALL SIGN WCTE-DT WNAB-DT WNAB-DT WNAB-DT WNAB-DT WNAB-DT WUXP-DT WUXP-DT WSMV-DT O.250 }											
	WTVF-DT2	0.250				"in column 5 Ork or noncom- CALL SIGN DSE					
TOWS.	WSMV-DT2	1.000			y the letter "O" in column 5 or each network or noncom-						
		WINER OF CABLE SYSTEM: Precises, LLC 062414 DECATEGORY "0" STATIONS: of each station. re and in line 1 of part 5 of this schedule. 8.25 Readed "Call Sign": list the call signs of all distant stations identified by the letter "0" in column 5 (3). Readed "DSE": for each independent station, give the DSE as "1,0"; for each network or noncomnal station, give the DSE as									
l rows											
				<u> </u>							
				<u> </u>							
				<u> </u>							

Name	Volunteer W	ireless, LLC					<u> </u>	062414
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	st the call sign of all distant: For each station, give the correspond with the information: For each station, give the Divide the figure in colurnat least to the third decimation of the column of the column of the column of the column of the call signs of the call distance of the	te number of hournation given in spa te total number of mn 2 by the figure al point. This is th tation, give the "ty umn 4 by the figur	s your cable system ace J. Calculate only hours that the statio in column 3, and give "basis of carriage pe-value" as "1.0." Fe in column 5, and g	carried the station one DSE for each n broadcast over the result in decivalue" for the station each network of the result in control of the result in control of the result in control of the station in	on during the accounting per in station. the air during the accounti cimals in column 4. This fi ion. or noncommercial education	ng period. gure must onal station, than the	
Capacity	0.10.10.11.11		CATEGORYI	AC STATIONS:		ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	R 3. JRS ED BY	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	5. TYPE	6. DS	;E
			÷		=	x	=	
					= -	<u>x</u>		
						x x		
			÷		=	x	=	
							<u> </u>	
			÷			x x	=	
	Add the DSEs	OF CATEGORY LAC ST of each station. m here and in line 2 of pa		lle,		0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efference to broadcast of space I). Column 2: at your option. Column 3: Column 4:	e the call sign of each stal by your system in substit ct on October 19, 1976 (a ne or more live, nonnetwo For each station give the r This figure should corresp Enter the number of days Divide the figure in column This is the station's DSE (I	ution for a programs shown by the leark programs during number of live, no bond with the inform the calendar years by the figure in 2 by the figure in	m that your system witter "P" in column 7 or that optional carriage innetwork programs or mation in space I. ear: 365, except in a column 3, and give	vas permitted to dof space I); and ge (as shown by the carried in substitution leap year. the result in colur	elete under FCC rules and e word "Yes" in column 2 of tion for programs that wer nn 4. Round to no less tha	e deleted an the third	
		Sl	JBSTITUTE-B	ASIS STATION	S: COMPUTA	TION OF DSEs	.	
	1. CALL SIGN	2. NUMBER OF	3. NUMBER OF DAYS	4. DSE	1. CALL SIGN	2. NUMBER OF	3. NUMBER OF DAYS	4. DSE
		PROGRAMS	IN YEAR	=		PROGRAMS .	IN YEAR	_
				=		÷		=
		+		=		÷		=
		÷		=		÷		=
		+		=		÷		=
	Add the DSEs	OF SUBSTITUTE-BASIS of each station. m here and in line 3 of pa		ıle,		0.00		
5		ER OF DSEs: Give the amo		es in parts 2, 3, and	4 of this schedule a	and add them to provide th	e total	
Total Number	1. Number	of DSEs from part 2 ●					6.25	
of DSEs	2. Number	of DSEs from part 3 ●)	<u> </u>	0.00	
	3. Number	of DSEs from part 4 ●				>	0.00	
	TOTAL NUMBE	R OF DSEs						6.25

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

LEGAL NAME OF O		SYSTEM:					S	YSTEM ID#	Name
voiunteer vvire	eless, LLC							062414	
Instructions: Bloc In block A:	k A must be comp	leted.							•
 If your answer if " schedule. 	Yes," leave the re	mainder of pa	art 6 and part 7	of the DSE schedu	ule blank and o	complete part	8, (page 16) of the		6
If your answer if "	No," complete blo	cks B and C		ELEVISION MA	ADVETS				Computation of
Is the cable system	n located wholly ou	ıtside of all m				on 76.5 of FC	C rules and regula	tions in	3.75 Fee
effect on June 24,	1981?						· •		
	plete part 8 of the lete blocks B and		O NOT COMPL	ETE THE REMAIN	NDER OF PAR	RT 6 AND 7.			
X No—Comp	iete biocks b and	C below.							
				IAGE OF PERM					
Column 1: CALL SIGN	FCC rules and re	gulations pride DSE Sche	or to June 25, 19 dule. (Note: The	981. For further ex e letter M below ref	planation of pe	ermitted statio	m was permitted to ns, see the stream as set forth	,	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)]	lles and reguled pursuant to	lations cited bel o the FCC mark	s on which you car ow pertain to those tet quota rules [76.	e in effect on J .57, 76.59(b), 7	une 24, 1981. 76.61(b)(c), 76	5.63(a) referring to		
	C Noncommeric	al educationa I station (76.6	al station [76.596 65) (see paragra	.59(d)(1), 76.61(e) (c), 76.61(d), 76.63 aph regarding subs	B(a) referring to	o 76.61(d)]			
		viously carrie IHF station w	d on a part-time ithin grade-B co	e or substitute basi entour, [76.59(d)(5)			ring to 76.61(e)(5)]	I	
Column 3:		stations ide	ntified by the let	parts 2, 3, and 4 of ter "F" in column 2			rksheet on page 14	4 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
WCTE-DT	С	0.25	WTVF-DT	A	0.25				
WNAB-DT WNPT-DT	C	1.00 0.25	WTVF-DT2 WTVF-DT3	M M	0.25 1.00				
WUXP-DT	A	1.00	WSMV-DT3		1.00		·		
WSMV-DT	Α	0.25							
WSMV-DT2	M	1.00							
								6.25	
		E	BLOCK C: CO	MPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this s	chedule					
Line 2: Enter the	sum of permitte	d DSEs fron	n block B abov	/e					
Line 3: Subtract I (If zero, le				of DSEs subject 7 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	and 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	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Volunteer Wireless, LLC 062414 Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. the DSE Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). Carriage B-Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B. column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 6. PERMITTED 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT SIGN DSE **PERIOD CARRIAGE** DSE DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. of the **Syndicated BLOCK A: MAJOR TELEVISION MARKET 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: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159) or in part, over the cable system? Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No-Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Volunteer Wireless, LLC	062414	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	2,790,774.20	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. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	E	
	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.		
	End lines A and B. This is your surdraige. 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: Volunteer Wireless, LLC												
			062414										
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.											
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ _\$											
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ _											
Surcharge		C. Multiply line B by 3.000 and enter here											
		D. Enter 0.00089 of gross receipts (the amount in section 1)											
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here											
		F. Multiply line D by line E and enter here											
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)											
		Syndicated Exclusivity Surcharge	<u></u> .										
8 Computation of Base Rate Fee	You mu 6 was 6 In blo If you If you blank What i	Instructions: You must complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part 6 was checked "Yes," use the total number of DSEs from part 5. In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. If your answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below blank. What is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers were located within that station's local service area and others were located outside that area. For the definition of a station's "local service area," see page (v) of the general instructions.											
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS											
	• Did v	our cable system retransmit the signals of any partially distant television stations during the accounting period?											
	_	X Yes—Complete part 9 of this schedule.											
	Ľ												
	Castian	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 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)											
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts											
		(the amount in section 1)											
		B. Enter 0.00701 of gross receipts (the amount in section 1)											
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here											
		D. Multiply line B by line C and enter here											
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)											
		Base Rate Fee	0.00										

DSE SCH	IEDU	ILE. PAGE 17.				ACCOUNTING	G PERIOD: 2023/2
		OF OWNER OF CABLE SYSTEM: r Wireless, LLC				SYSTEM ID# 062414	Name
Section 4	If the	e figure in section 2 is more than 4.000, compute your base r	rate fee here	and leave section 3 blank			
4	A.	Enter 0.01064 of gross receipts (the amount in section 1)		▶ \$		_	8
	В.	Enter 0.00701 of gross receipts (the amount in section 1)	<u> </u>				Computation of
	C.	Multiply line B by 3.000 and enter here		▶ \$		_	Base Rate Fee
	D.	Enter 0.00330 of gross receipts (the amount in section 1)	> \$				
	E.	Subtract 4.000 from total DSEs (the figure in section 2) and enter here	<u> </u>				
	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	
	be r	IT: It is no longer necessary to report television signals reported on a community-by-community basis (subscrib	•	•		•	9
receipts	s froi	If any of the stations you carried were partially distant m subscribers located within the station's local service you must:		•	0,		Computation of Base Rate Fee
		e all of your subscribers into subscriber groups, each g le same group of stations. Next: Treat each subscriber					and Syndicated

DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.

NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, if your cable system is wholly located outside all major television markets, complete block A only.

How to Identify a Subscriber Group for Partially Distant Stations

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

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

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

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

In each section:

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

Surcharge for **Partially** Distant Stations, and for Partially Permitted Stations

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 062414 Volunteer Wireless, LLC Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNER Volunteer Wireless		SYSTEM:				5	062414	Name	
В	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCRIB	ER GROUP			
		SUBSCRIBER GROUP				SUBSCRIBER GRO	JP	_	
COMMUNITY/ AREA	Centert	own, Morrison, Di	brell	COMMUNITY/ AREA	Coalmon	t, GruetliLaager	Palmer	9	
Rock Island		n, Hiawassee, Smartt			Tracy			Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
				WUXP-DT	1.00			Base Rate Fee	
				WNPT-DT	0.25			and	
				WCTE-DT	0.25			Syndicated	
				WNAB-DT	1.00			Exclusivity	
								Surcharge	
							•••••	for	
							•••••	Partially	
							•••••	Distant	
							•••••	Stations	
							•••••		
					····		•••••		
					·····				
					·····				
	1								
Total DSEs	<u> </u>		0.00	Total DSEs			2.50		
Gross Receipts First Gro	oup	\$ 40.	432.90	Gross Receipts Seco	ond Group	\$ 1	132,696.10		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	2,807.19		
	THIRD	SUBSCRIBER GROU)		FOURTH	SUBSCRIBER GRO	JP		
COMMUNITY/ AREA	Crossvi	lle, Fairfield Glade)	COMMUNITY/ AREA					
					COMMUNITY/ AREA BonAir, Doyle Cassville, Derossett, Quebeck, Ravenscroft, Sparta, Walling				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
CALL SIGN	DOL	CALL SIGN	DOL	WNPT-DT	0.25	CALL SIGN	DSL		
				With 1-D1	0.20				
					·····				
	·····				·····				
Total DSEs	!		0.00	Total DSEs			0.25		
	roup	¢ 172			th Croun	¢ £			
Gross Receipts Third G	oup	φ 1/3 _.	684.65	Gross Receipts Four	ui Group	\$	521,466.95		
Base Rate Fee Third Gr	roup	\$	0.00	Base Rate Fee Four	th Group	\$	1,653.10		
				11					
Base Rate Fee: Add the Enter here and in block			er group a	s shown in the boxes a	bove.	\$	13,148.38		

LEGAL NAME OF OWNER Volunteer Wireless		SYSTEM:				S	062414	Name
F	BLOCK A:	COMPUTATION O	F BASF RA	ATE FEES FOR EAC	CH SUBSCRI	BER GROUP		
		SUBSCRIBER GROU						
COMMUNITY/ AREA	Hillsbor	o, Beech Grove		COMMUNITY/ AREA	A McMinn	ville, Viola, Betha	ny,	9
	Manche	ester		Be	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
WCTE-DT	0.25					-		Base Rate Fee
								and
								Syndicated
	-							Exclusivity Surcharge
	-							for
								Partially
								Distant
								Stations
			<u></u>					
	-		<u> </u>					
								
			······································					
Total DSEs	1		0.25	Total DSEs	'		0.00	
Gross Receipts First Gr	oup.	\$ 272	2,052.65	Gross Receipts Sec	and Group	\$ 1,0	12,944.75	
Gross receipts rirst Gr	oup	<u>* </u>	.,002.00	Gross Receipts dec	ona Group	,,,,	12,544.76	
Base Rate Fee First Gr	oup	\$	723.66	Base Rate Fee Sec	ond Group	\$	0.00	
;	SEVENTH	SUBSCRIBER GROU	JP		EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	Spence	r, Bone Cave		COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
WNPT-DT	0.25			WNPT-DT	0.25	-		
			<u></u>	WNAB-DT	1.00			
				WUXP-DT	1.00			
				WCTE-DT	0.25			
	·		···					
	·							
						-		
			<u></u>					
	-							
	 							
			<u></u>					
Total DSEs			0.25	Total DSEs		•	2.50	
Gross Receipts Third G	roup	\$ 147	,764.75	Gross Receipts Fou	rth Group	\$ 3	46,385.20	
Base Rate Fee Third G	roup	\$	393.05	Base Rate Fee Fou	rth Group	\$	7,327.78	
	•	<u> </u>			•		, -	
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNE Volunteer Wireles		SYSTEM:				\$	062414	Name
E	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
		SUBSCRIBER GROU				SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Montea	gle		COMMUNITY/ AREA	Sewane	90		9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
WCTE-DT	0.25							Base Rate Fee
WNPT-DT	0.25			-				and
WSMV-DT	0.25			-				Syndicated
WSMV-DT2	1.00							Exclusivity
WTVF-DT	0.25							Surcharge
WUXP-DT	1.00			·	···		•••••	for
WSMV-DT3	1.00				···			Partially
WTVF-DT2	0.25		······································		····	+		Distant
WTVF-DT3	1.00							Stations
WIVE-DIS	1.00			-			······	Stations
							·····	
		-						
Total DSEs			5.25	Total DSEs			0.00	
Gross Receipts First G	oup	\$ 6	,805.45	Gross Receipts Secon	d Group	\$	36,540.80	
Base Rate Fee First G	oup	\$	243.60	Base Rate Fee Secon	d Group	\$	0.00	
E	LEVENTH	SUBSCRIBER GROU	JP		TWELVTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u> </u>			
	<u>.</u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			iber group a	s shown in the boxes ab	ove.	\$		

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNE Volunteer Wireles		E SYSTEM:	•			S	062414	Name
E				ATE FEES FOR EACH			ID.	
COMMUNITY/ AREA Centertown, Morrison, Dibrell			SECOND SUBSCRIBER GROUP COMMUNITY/ AREA Coalmont, GruetliLaager, Palmer				9	
CALL SIGN	DSE	CALL SIGN DSE		CALL SIGN	DSE CALL SIGN DSE			Computation
								Base Rate Fee
								and Syndicated
					<u>.</u>			Exclusivity
								Surcharge
			<u></u>					for Partially
					·			Distant
								Stations
			<u></u>					
	···		-		<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 40	,432.90	Gross Receipts Second Group \$ 132,696.10				
C. 000 1 (000) pto 1 (101 C)		<u>, </u>	,,	Cross rassipis seemin	. О.опр	<u>, </u>		
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
THIRD SUBSCRIBER GROUP					JP			
COMMUNITY/ AREA Crossville, Fairfield Glade				COMMUNITY/ AREA	BonAir,	Doyle		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
					<u></u>			
						.		
Total DSEs	1	H	0.00	Total DSEs	ļ	++	0.00	
Gross Receipts Third Group \$ 173,684.65		Gross Receipts Fourth	ross Receipts Fourth Group \$ 621,466.95		21,466.95			
Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fourth	Group	\$	0.00		
				Щ				
Base Rate Fee: Add th Enter here and in block			riber group a	as shown in the boxes abo	ove.	\$	0.00	

Nonpermitted 3.75 Stations

Volunteer Wireless		E SYSTEM:				S	YSTEM ID# 062414	Name
E	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
	FIFTH	SUBSCRIBER GROU	JP		SIXTI	H SUBSCRIBER GROU	Р	•
COMMUNITY/ AREA Hillsboro, Beech Grove			COMMUNITY/ AREA	McMini	nville, Viola, Bethar	ıy,	9	
Manchester				Bedf	ord, Cannon	, DeKalb, Rutherford		Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		_						and
								Syndicated
		_						Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
								
					<u>.</u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$ 272	,052.65	Gross Receipts Secon	d Group	\$ 1,01	12,944.75	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
;	SEVENTH	SUBSCRIBER GROU	JP		EIGHT	H SUBSCRIBER GROU	Р	
COMMUNITY/ AREA Spencer, Bone Cave				COMMUNITY/ AREA Altamont, Beersheba, Pelham				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
			<u></u>		<u>.</u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 147,764.75		Gross Receipts Fourth Group \$ 346,385.20						
Base Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	Group	\$	0.00			
Base Rate Fee: Add the Enter here and in block				as shown in the boxes ab		\$		

Nonpermitted 3.75 Stations

Volunteer Wireles		E SYSTEM:				•	062414	Name
E				ATE FEES FOR EACH				
NINTH SUBSCRIBER GROUP						SUBSCRIBER GRO	JP	9
COMMUNITY/ AREA Monteagle				COMMUNITY/ AREA	Sewanee			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
			<u> </u>					for
								Partially
								Distant
								Stations
	<u></u>							
	······································		<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	oup	\$	5,805.45	Gross Receipts Second	d Group	\$	36,540.80	
Base Rate Fee First Group \$ 0.00				Base Rate Fee Second	d Group	\$	0.00	
E	LEVENTH	SUBSCRIBER GRO	UP		TWELVTH	SUBSCRIBER GRO	JP	
COMMUNITY/ AREA 0				COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u> </u>					
	•				*			
		<u> </u>						
			<u></u>					
	. 							
Total DSEs	-		0.00	Total DSEs	1		0.00	
Gross Receipts Third Group \$ 0.00		Gross Receipts Fourth	Group	\$	0.00			
Base Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	Group	\$	0.00			
Base Rate Fee: Add th Enter here and in block			riber group a	as shown in the boxes abo	ove.	\$		

ACCOUNTING PERIOD: 2023/2

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Volunteer Wireless, LLC 062414 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 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 Base Rate Fee INSTRUCTIONS: and 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 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. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. **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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First 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 computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2023/2

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Volunteer Wireless, LLC 062414 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 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 Base Rate Fee INSTRUCTIONS: and 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 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. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. **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. FIFTH SUBSCRIBER GROUP SIXTH 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 SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group SEVENTH SUBSCRIBER GROUP EIGHTH 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 Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Volunteer Wireless, LLC 062414 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 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 Base Rate Fee INSTRUCTIONS: and 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 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. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. **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. NINTH SUBSCRIBER GROUP TENTH 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 SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group **ELEVENTH SUBSCRIBER GROUP** TWELVTH 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 Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

C	Cable Worksheet		Total amount of remittance	Numb	er of SAs rec'd	Initials		
			Date of remittance	Check	EFT	FILI	NG FEES	
Cable ID #						Amount	Initials	
Examined by		Reviewed by	Date examination completed	Allocation i	number			
Space A Accounting Period								
	Jan	uary 1 - June 30, 2017	[July 1 - Decembe	r 31, 2017			
	Lett	er sent	[Information recei	ved			
	Acc	epted]	Phone call/Date/Contact				
Space B Owner								
	Lett	er sent	[Information recei	ved			
	Acc	epted	[Phone call/Date/0	Contact			
Space D Area Served								
	Lett	er sent		Information recei	ved			
	Acc	epted		Phone call/Date/0	Contact			
Space E Secondary Transission								
Service Subscribers:	Lett	er sent		Information recei	ved			
and Rates	Acc	epted		Phone call/Date/0	Contact			
Space G Primary Transmitters:								
Television	Lett	er sent		Information recei	ived			
	☐ Acc	epted		Phone call/Date/0	Contact			
Space H Primary Transmitters:				-				
Radio	Acc	epted		Phone call/Date/0	Contact			

		Space I Substitute Carriage
Letter sent	☐ Information received	1
Accepted	☐ Phone call/Date/Contact	
		Space J Part-time Carriage Log
✓ Letter sent	☐ Information received	(SA3 only)
Accepted	Phone call/Date/Contact	
		Space K Gross Receipts
Letter sent	☐ Information received	1
Letter sent	Phone call/Date/Contact	1
		Space L Copyright Filing and Royalty Fees
Royalty Fee should be	Refund request to fiscal	
Letter sent	☐ Information received	
Accepted	Phoe call/Date/Contact	
		Space M Channels
Letter sent	☐ Information received	
Accepted	Phone call/Date/Contact	
		Space O Certification
Letter sent	☐ Information received	
Accepted	Phone call/Date/Contact	
		Space P Statement of Gross Receipts
Letter sent	☐ Information received	
Accepted	Phone call/Date/Contact	
		Space Q Interest Assessment
Letter sent	☐ Info/add'l fee received	
Accepted	Phone call/Date/Contact	