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							
AMOUNT							
\$							
ALLOCATION NUMBER							

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:			
Accounting	2023/2			
Period				
Bowner	Instructions:     Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation.     List any other name or names under which the owner conducts the busines If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire acco.  Check here if this is the system's first filing. If not, enter the system's ID  LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM  WAVE DIVISION HOLDINGS LLC	ss of the cable syster on the last day of the unting period.	em. he accounting period should st	ubmit 648
				648120232
				6481 2023/2
	3700 MONTE VILLA PARKWAY BOTHELL WA 98021			
	INSTRUCTIONS: In line 1, give any business or trade names used to i	identify the busine	ess and operation of the sys	stem unless these
С	names already appear in space B. In line 2, give the mailing address o			
System	1 IDENTIFICATION OF CABLE SYSTEM:			
	WAVE BROADBAND			
	MAILING ADDRESS OF CABLE SYSTEM:			
	2 (Number, street, rural route, apartment, or suite number)			
	BOTHELL WA 98021			
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst com	munity served below and re	elist on page 1b
Area Served	with all communities.  CITY OR TOWN	STATE		
First	PORT ANGELES	WA		
Community	Below is a sample for reporting communities if you report multiple ch.		Space C	
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#
Carrent-	Alda	MD	A	1
Sample	Alliance	MD	В	2
	Gering	MD	В	3

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

FORM SA3E. PAGE 1b.			ACCOUNT	ING PERIOD: 2023/2					
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#						
WAVE DIVISION HOLDINGS LLC			6481						
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.									
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.									
If all communities receive the same complement of television broadcast stations (i.e., 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 channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns by	a subscriber grou								
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#						
PORT ANGELES	WA	Α		First					
SEQUIM	WA	A		Community					
				See instructions for					
				additional information on alphabetization.					
				Add rows as necessary.					

l	
l	

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

## WAVE DIVISION HOLDINGS LLC

## 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.

BLO	OCK 1		П	BLOCK 2			
	NO. OF			П		NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS		RATE	Ш	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:							
<ul> <li>Service to first set</li> </ul>	4,379	\$	35.95				
<ul> <li>Service to additional set(s)</li> </ul>				İ			
<ul> <li>FM radio (if separate rate)</li> </ul>				ľ			
Motel, hotel	488	\$	2.92	İľ			
Commercial	558	\$	5.15	İ			
Converter				İľ			
Residential				İľ			
Non-residential				ľľ			
				1 ľ			

# F

#### Services Other Than Secondary Transmissions: Rates

#### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2							
CATEGORY OF SERVICE	CATEGORY OF SERVICE RATE CATEGORY OF SERVICE RATE						F	RATE
Continuing Services:			Installation: Non-residential					
<ul> <li>Pay cable</li> </ul>	\$	17.00	Motel, hotel			Expanded Content	\$	86.33
<ul> <li>Pay cable—add'l channel</li> </ul>			Commercial		""	Digital Favorites	\$	14.00
<ul> <li>Fire protection</li> </ul>	ire protection •				""	Digital Variety	\$	9.25
•Burglar protection			Pay cable-add'l channel		""	Digital Sports	\$	13.00
Installation: Residential			Fire protection		""	Digital Cable Pack	\$	33.75
• First set	\$	79.95	Burglar protection		""	НВО	\$	20.00
<ul> <li>Additional set(s)</li> </ul>	\$	30.00	Other services:		1	HBOMax	\$	15.99
• FM radio (if separate rate)			Reconnect	\$ 40.00	۱	Showtime/The Movie Cha	\$	20.00
Converter			Disconnect		""	Cinemax	\$	19.50
			Outlet relocation		""	Starz	\$	18.00
			Move to new address		""	Movieplex	\$	5.00
					""	HD Bonus Pack		\$7.00

FORM SA3E. PAGE 3.					OVOTEM ID		
LEGAL NAME OF OWNER OF CABLE SYSTEM:  WAVE DIVISION HOLDINGS LLC	<u>.</u>				SYSTEM ID# 6481	Name	
PRIMARY TRANSMITTERS: TELEVISION							
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 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 is substitute program basis, as explained in the next paragraph  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program							
basis under specific FCC rules, regulations, o			oial Statement	and Program Log	) if the		
<ul> <li>Do not list the station here in space G—but station was carried only on a substitute ba</li> </ul>		ice i (the Spe	ciai Statement a	and Program Log	)—if the		
<ul> <li>List the station here, and also in space I, if it basis. For further information concerning:</li> </ul>							
in the paper SA3 form.							
Column 1: List each station's call sign. Do each multicast stream associated with a stati							
cast stream as "WETA-2". Simulcast streams WETA-simulcast).	s must be repor	rted in columi	n 1 (list each str	eam separately; f	or example		
Column 2: Give the channel number the its community of license. For example, WRC on which your cable system carried the station	is Channel 4 in						
Column 3: Indicate in each case whether educational station, by entering the letter "N"							
for independent multicast), "E" (for noncomr	nercial educati	onal), or "E-N	1" (for noncomm	ercial educationa			
For the meaning of these terms, see page (v Column 4: If the station is outside the loc					For an ex		
planation of local service area, see page (v)  Column 5: If you have entered "Yes" in co	of the general i	instructions lo	cated in the pa	per SA3 form			
cable system carried the distant station durin	g the accounti	ng period. Ind	licate by enterin	g "LAC" if your ca			
carried the distant station on a part-time basi For the retransmission of a distant multice of a written agreement entered into on or bef the cable system and a primary transmitter o tion "E" (exempt). For simulcasts, also enter	ast stream that fore June 30, 2 r an associatio	is not subject 009, between n representin	t to a royalty pay a cable system g the primary tr	yment because it n or an association ansmitter, enter th	n representin <sub>i</sub> ne designa		
explanation of these three categories, see pa Column 6: Give the location of each station FCC. For Mexican or Canadian stations, if ar Note: If you are utilizing multiple channel line	on. For U.S. stany, give the nar	ations, list the me of the com	e community to work to whom to the community with whom to the community with whom to the community with the	which the station i ich the station is i	is licensed by the		
		CHANN	EL LINE-UP	AA		-	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	1	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)	VANGOUNED DO	-	
CBUT - CBC	2 6	l I	Yes	0	VANCOUVER, BC	•	
CHEK - Independent		<b></b>	No	•	VANCOUVER RC	See instructions for additional information	
CKVU - Citytv Vancouver	10 27	l E	Yes No	0	TACOMA, WA	on alphabetization.	
KBTC - PBS KCPQ - FOX	13	N	No		TACOMA, WA	•	
KCTS - PBS	9	E	No		SEATTLE, WA		
CTSDT2 - PBS Kids	9.2	E	No		SEATTLE, WA		
CTSDT3 - Create	9.3	E	No		SEATTLE, WA	1	
KFFV - MeTV	44.1	N	No		SEATTLE, WA		
KFFVDT 2- Movies!	44.2	N	No		SEATTLE, WA		
KFFVDT 4 -Decades	44.4	N	No		SEATTLE, WA		
KING - NBC	5	N	No		SEATTLE, WA		
KINGDT2 - True Crime	5.2	N	No		SEATTLE, WA		
KINGDT3 - Quest	5.3	N	No		SEATTLE, WA		
KINGDT4 - Twist	5.4	N	No		SEATTLE, WA		
KIRO - CBS	7	N	No No		SEATTLE, WA		
KIRODT2 - Cozi TV KIRODT3 - Laff	7.2	N N	No No		SEATTLE, WA SEATTLE. WA	1	
	7.3 7.4	N N	No No		SEATTLE, WA	1	
KIRODT4 - Telemundo		•	No No				
COMO - ABC	4	N N	No No		SEATTLE, WA	1	
KOMODT2 - CometTV KOMODT3 - Charge!	4.2 4.3	N N	No No		SEATTLE, WA SEATTLE, WA		
KONG - Independent 16 I No EVERETT, WA							
KONGDT3 - ThisTV KSTW - CW	16.3	N N	No No		•		
		<b>†</b>			TACOMA, WA		
KSTWDT2 - Decades	11.2	N N	No No		TACOMA, WA		
KVOS - Heroes & Icons	12.1	N	No No		BELLINGHAM, WA	-	
KWPX - ION	33	N	No No		BELLEVUE, WA		
KWPX DT3 - Bounce TV	33.3	N	No		BELLEVUE, WA		

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name					
WAVE DIVISION	N HOLDING	S LLC			6481	Name					
PRIMARY TRANSMITTERS: TELEVISION											
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a											
substitute program basis, as explained in the next paragraph  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program											
basis under specifc FCC rules, regulations, or authorizations:  • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the											
station was carried only on a substitute basis  List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.											
each multicast stream	associated wi	th a station ac	ccording to its o	ver-the-air design	es such as HBO, ESPN, etc. Identifi ation. For example, report multi ch stream separately; for example						
			-		ation for broadcasting over-the-air ir						
on which your cable sy	ystem carried t	he station			s may be different from the channe dependent station, or a noncommercia						
(for independent multid For the meaning of the Column 4: If the st planation of local servi	cast), "E" (for rese terms, see ation is outside ice area, see p	noncommercian page (v) of the ethe local ser page (v) of the	al educational), ne general instru rvice area, (i.e. ' e general instruc	or "E-M" (for none uctions located in "distant"), enter "\otions located in the	res". If not, enter "No". For an ex ne paper SA3 form						
cable system carried the carried the distant state.  For the retransmiss	he distant stati ion on a part-t sion of a distan	on during the me basis bed t multicast str	accounting per cause of lack of ream that is not	iod. Indicate by e activated channe subject to a royal	, stating the basis on which you ntering "LAC" if your cable syster I capacity ty payment because it is the subjec ystem or an association representin						
the cable system and a tion "E" (exempt). For	a primary trans simulcasts, als	smitter or an a so enter "E". It	association repr f you carried the	esenting the prime channel on any	ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form						
Column 6: Give the	e location of ea	ach station. F	or U.S. stations	, list the commun	ity to which the station is licensed by the th which the station is identifec						
Note: If you are utilizir											
		CHANN	EL LINE-UP	AB							
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION						
KZJO - MyNetwor	22	N	No		SEATTLE, WA						
KZJODT3 - Anten		N	No	•	SEATTLE, WA						
		•									
		•									
						-					
		<u> </u>									

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name WAVE DIVISION HOLDINGS LLC 6481 PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

FURINI SAJE. PAGE 5.						ACCOUNTING	PERIOD: 2023/2			
LEGAL NAME OF OWNER OF WAVE DIVISION HOLD					S	YSTEM ID# 6481	Name			
SUBSTITUTE CARRIAG	E: SPECIA	AL STATEME	NT AND PROGRAM LO	G						
In General: In space I, ident substitute basis during the a explanation of the programm form.	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regu	lations, or authorizations.	For a further	Substitute			
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE										
SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE     During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?  Yes  No										
<b>Note:</b> If your answer is "No log in block 2.	Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program									
period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love Column 2: If the progra Column 3: Give the call Column 4: Give the brothe case of Mexican or Cal Column 5: Give the mofirst. Example: for May 7 gi Column 6: State the tim to the nearest five minutes stated as "6:00–6:30 p.m."	titute prograce, please of every not distant stategulations, of the please of every not distant stategulations. On the please of	am on a separ attach addition onnetwork teletion and that your authorizatio ot use general BA Basketball adcast live, ent station broaddion's location (ons, if any, the your sy e substitute pra program care listed programions in effect of	nal pages. vision program (substitute our cable system substitut ns. See page (vi) of the ge categories like "movies", 76ers vs. Bulls." er "Yes." Otherwise enter casting the substitute prog- the community to which the ecommunity with which the estem carried the substitute ogram was carried by you ried by a system from 6:0° m was substituted for prog- during the accounting perio-	program) the ded for the preneral instructor "basketba" "No." ram. e station is lie e station is lie program. Ur cable system in the code program in the code program in the code of the code program in the code of the code	at, during the accounting orgramming of another strions located in the papill". List specific program icensed by the FCC or, identified). Use numerals, with the materials accurately a specific program is accurately a specific program in the second program is accurately a specific program is accurately a specific program is accurately a specific program is accurately accur	g etation er in nonth ately				
9	IJRSTITLIT	E PROGRAM	1		EN SUBSTITUTE IAGE OCCURRED	7. REASON				
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	FOR DELETION				
					_					
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LEGA	L NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#							
WA	VE DIVISION HOLDINGS LLC		6481	Name						
Inst all a (as i	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount mounts (gross receipts) paid to your cable system by subscribers for the system's seco dentified in space E) during the accounting period. For a further explanation of how to c e (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)	ndary	transmission service te this amount, see	<b>K</b> Gross Receipts						
IMP	during the accounting period.  DRTANT: You must complete a statement in space P concerning gross receipts.		\$ 2,305,942.51 (Amount of gross receipts)							
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe:  • Complete block 1, showing your minimum fee.  • Complete block 2, showing whether your system carried any distant television stations.  • If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee.  • If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.										
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be $\mathfrak c$ 3 below.	e ente	ered on line 1 of							
▶ If pa 3 be	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be $\epsilon$ low.	entere	d on line 2 in block							
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld 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.		φ 2,303,342.31							
	This is your minimum fee.	\$	24,535.23							
	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colun "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting perion in the column in the property of the pro	nn 4, y od?	ou must check							
Block 3	4, or part 9, block A of the DSE schedule. If none, enter zero		\$ 40,699.89							
	Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		0.00							
	Line 3. Add lines 1 and 2 and enter here	\$	40,699.89							
Block 4	Line 1. <b>BASE RATE FEE/3.75 FEE or MINIMUM FEE:</b> Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger		\$ 40,699.89	Cable systems						
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter	r	0.00	submitting additional deposits under						
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)									
	Line 4. <b>FILING FEE</b>									
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.  Add Lines 1, 2 and 3 of block 4 and enter total here	\$	41,424.89	appropriate form for submitting the additional fees.						
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See p	age (i) of the	additional lees.						

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

Name		FOWNER OF CABLES					SYSTEM ID:			
M Channels	to its subsc	ns: You must give ribers and (2) the e total number of c	cable system's	total number of a	ctivated channels, du	n carried television broadcast sring the accounting period.	etations 31			
	on which	e total number of a the cable system roadcast services	carried television	on broadcast station			325			
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	"	Morgan Conk				Telephone	347-835-7661			
	(	650 College F (Number, street, rural Princeton, NJ (City, town, state, zip)	route, apartment, o							
	Email			astound.com		Fax (optional)				
0		•			-	nce with Copyright Office regul	lations.)			
Certifcation		rsigned, hereby ce				n as identifed in line 1 of space E	3; ог			
					m the duly authorized an or partnership; or	agent of the owner of the cable s	system as identified			
	in lin  I have exar are true, cor	e 1 of space B.	nt of account and	d hereby declare u	nder penalty of law tha	t all statements of fact contained are made in good faith.				
		X	/s/ Parisa	Salehani						
		(e.g., /s	/ John Smith). B	efore entering the f	irst forward slash of the	ure to certify this statement. /s/ signature, place your cursor ir void enabling Excel's Lotus comp				
		Typed	or printed nam	e: Parisa Sal	ehani					
		Title:		ce President,						
		Date:	March 1, 2024	4						

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 the form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephon numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes ance search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in t completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of lav

LEGAL NAME OF OWNER OF CABLE SYSTEM:  WAVE DIVISION HOLDINGS LLC  648'	Namo
WAVE DIVISION HOLDINGS LLC 648'	l l
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.	Concerning Gross Receipts Exclusion
During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?	
X NO	
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Mailing Address Mailing Address	
INTEREST ASSESSMENTS	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.  For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- -
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 further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.	
Owner Address	
First community served	<del></del>
Accounting period	nu
ID number	1111

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

4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#											
1	WAVE DIVISION HOLDINGS LLC 648											
	SUM OF DSEs OF CATEGORY											
	Add the DSEs of each station.											
	Enter the sum here and in line 1	of part 5 of this	schedule.		2.00							
						<u>"</u>						
2	Instructions: In the column headed "Call Signature 11 Signature 12 In the column headed "Call Signature 12 In the column had been supported in the column had been su	nn": liet the call	eigne of all distant statio	ne identified by the	e letter "Ω" in column 5							
_	of space G (page 3).	gir . not the can	signs of all distant station	no identified by the	c letter o ili columno							
Computation	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-											
of DSEs for	mercial educational station, give the DSE as ".25."											
Category "O"			CATEGORY "O" STATION									
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
	CKVU - Cityty Vancouve	1.000										
	CBUT - CBC	1.000										
Add rows as												
necessary.												
Remember to copy												
all formula into new												
rows.												
						l						

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  WAVE DIVISION HOLDINGS LLC  64										
Name											
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-1 Column 6	at the call sign of all distates: For each station, give correspond with the information at least to the third decition.	the number of hour mation given in sp the total number of umn 2 by the figure mal point. This is the station, give the "ty olumn 4 by the figu	rs your cable syst ace J. Calculate of hours that the sta e in column 3, and ne "basis of carria ype-value" as "1.0 re in column 5, ar	em carried the sonly one DSE for ation broadcast of give the result in ge value" for the in." For each netwind give the result	tation during the accourteach station over the air during the action decimals in column 4 estation. over to noncommercial tin column 6. Round to	accounting period.  This figure must educational station, no less than the	ег			
Capacity	CATEGORY LAC STATIONS: COMPUTATION OF DSEs										
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	JRS C ED BY S	IUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE			SE			
			÷		=	X	=				
			÷		=	<u>x</u>	=				
			<u>÷</u>		=	<u>x</u>	=				
			·····		=	X					
			÷ ÷			×	<u>=</u>				
			<u>-</u>			<u>x</u>					
			<u>-</u>			x x	<u>-</u>				
Computation of DSEs for Substitute-Basis Stations	Was carried tions in effe     Broadcast o space I).     Column 2:     at your option.     Column 3:     Column 4:	e the call sign of each st by your system in subsict on October 19, 1976 one or more live, nonnetw For each station give the This figure should corre Enter the number of day Divide the figure in colur This is the station's DSE	itution for a progra (as shown by the le ork programs durin e number of live, no spond with the info s in the calendar yenn 2 by the figure i (For more informa	Im that your syste tetter "P" in column g that optional car onnetwork programmation in space ear: 365, except in column 3, and g tion on rounding,	m was permitted in 7 of space I); a rriage (as shown the scarried in subtle I. In a leap year, give the result in see page (viii) o	d to delete under FCC r nd by the word "Yes" in colur estitution for programs t column 4. Round to no f the general instruction	ules and regularmn 2 of hat were deleted less than the thirc	form)			
				1		ATION OF DSEs	1	T			
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE			
		÷		=			÷	=			
		÷		=			÷	=			
				=			÷	=			
		÷					÷ ÷				
		÷					÷				
	Add the DSEs	OF SUBSTITUTE-BAS	IS STATIONS:	ule,	▶	0.0					
5		R OF DSEs: Give the and applicable to your system		es in parts 2, 3, an	d 4 of this sched	ule and add them to prov	vide the total				
Total Number	1 Number of	f DSEs from part 2 ●				_	2.00				
of DSEs		•					0.00				
OI DOES		f DSEs from part 3 •									
	3. Number of	f DSEs from part 4 ●				<b>-</b>	0.00				
	TOTAL NUMBE	R OF DSEs					•	2.00			

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

	OWNER OF CABLE ON HOLDINGS						S	YSTEM ID# 6481	Name
n block A:	ck A must be com	•	art 6 and part	7 of the DSE sche	edule blank ar	nd complete pa	art 8, (page 16) of	the	6
	"No," complete blo	ocks B and C	below.						
			BLOCK A: 1	ELEVISION M	ARKETS				Computation of 3.75 Fee
effect on June 24, Yes—Com	plete part 8 of the	schedule—D	•				·	gulations in	
X No—Comp	olete blocks B and	C below.							
		BLOC	CK B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulations  e DSE Schee	ons prior to Jur dule. (Note: Th	part 2, 3, and 4 of ne 25, 1981. For function ne letter M below ro Act of 2010.)	ırther explana	ation of permitte	ed stations, see th	ne	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC r. A Stations carrivation of the Stations carrivation of the Station  ales and reguled pursuant to on as defined all educations of the state	lations cited be of the FCC mand in 76.5(kk) (7 and station [76.565) (see paragule). It is all waiver of F d on a part-timithin grade-B of the football in the football is all waiver of F d on a part-timithin grade-B of the football is all waiver of F d on a part-timithin grade-B of the football is all waiver of F d on a part-timithin grade-B of the football is all in the football is all in the football is all in the football in the football is all in the football in the football is all in the football in	6.59(d)(1), 76.61(e)(c), 76.61(d), 76.61(d), 76.raph regarding sulfice (76.7) the or substitute bacontour, [76.59(d)(	se in effect or 6.57, 76.59(b e)(1), 76.63(a 63(a) referring bstitution of g sis prior to Ju	n June 24, 198 ), 76.61(b)(c), ) referring to 7 g to 76.61(d)] randfathered s	76.63(a) referring 6.61(e)(1) tations in the			
Column 3:		e stations ide	ntified by the le	parts 2, 3, and 4 etter "F" in column			orksheet on page	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
CKVU - City CBUT - CB	<b>4</b>	1.00 1.00							
	•					•	•	1	
								2.00	•
		В	LOCK C: CC	MPUTATION O	F 3.75 FEE				
ine 1: Enter the	e total number of	DSEs from	part 5 of this	schedule			ı <del>,</del>		
ine 2: Enter the	sum of permitte	ed DSEs fror	n block B ab	ove			ı <del>,</del>		
	line 2 from line 1 leave lines 4–7 b			•		rate.	.,-		
ine 4: Enter gro	oss receipts from	space K (p	age 7)				x 0.03	375	Do any of th DSEs represe partially
ne 5: Multiply I	ine 4 by 0.0375	and enter su	ım here				<u> </u>		permited/ partially nonpermitte
ine 6: Enter tota	al number of DS	Es from line	3						carriage? If yes, see pa 9 instructions
ine 7: Multiply I	ine 6 by line 5 a	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00	

ACCOUNTING PERIOD: 2023/2

Name		N HOLDINGS LLC				6481				
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.)  Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule.  Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981.  Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1).  Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters:  (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)  A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)).  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.									
1		PERMITTED DSE	FOR STATIONS CARRI	ED ON A PART-TIME AN	ID SUBSTITUTE BASIS					
ı	1. CALL	2. PRIOR	3. ACCOUNTING	4. BASIS OF	5. PRESENT	6. PERMITTED				
l	SIGN	DSE	PERIOD	CARRIAGE	DSE	DSE				
<b>7</b> Computation	•	"Yes," complete block								
of the	If your answer is	"No," leave blocks B a	and C blank and complete	•						
Syndicated	BLOCK A: MAJOR TELEVISION MARKET									
Exclusivity Surcharge	Is any portion of the or	able system within a to	on 100 major television mar	ket as defined by section 76	3.5 of FCC rules in effect Ju	ne 24 1981?				
	X Yes—Complete	•	p roomajor toloriolen man	No—Proceed to						
	7 Tes Complete	blooks B and G .		110 110000010	part					
	BLOCK B: Ca	arriage of VHF/Grade	B Contour Stations	BLOCK C: Computation of Exempt DSEs						
	Is any station listed in commercial VHF stati or in part, over the cal	on that places a grade	•		in block B of part 7 carrie le system prior to March 3 .159)					
		tation below with its applied and proceed to part 8.	ropriate permitted DSE		ation below with its appropriand proceed to part 8.	ate permitted DSE				
	CALL SIGN CKVU - Cityty V CBUT - CBC	DSE CA 1.00 1.00	LL SIGN DSE	CALL SIGN CKVU - Cityty V CBUT - CBC	DSE CALL SIGN 1.00 1.00	SN DSE				
		ТОТ	AL DSEs 2.00		TOTAL DS	SEs 2.00				

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: \$ WAVE DIVISION HOLDINGS LLC	6481	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	,305,942.51	7
Section 2	A. Enter the total DSEs from block B of part 7	2.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	2.00	of the Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC?  Yes—Complete section 3 below.  X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?      X Yes—Complete part 9 of this schedule.  No—Complete the applicable section below.  If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE		
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ \$		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule.   No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.  A. Enter 0.00300 of gross receipts (the amount in section 1)		
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		

Name		ME OF OWNER OF CABLE SYSTEM:  WAVE DIVISION HOLDINGS LLC	E. PAGE 16. STEM ID# 6481						
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.  A. Enter 0.00300 of gross receipts (the amount in section 1).  B. Enter 0.00189 of gross receipts (the amount in section 1).  C. 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.  S	6481						
8	You m	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.  **Ctions:*  ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes." use the total number of DSEs from part 5.							
Computation of Base Rate Fee	<ul> <li>6 was checked "Yes," use the total number of DSEs from part 5.</li> <li>In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.</li> <li>If your answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.</li> <li>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.</li> <li>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.</li> </ul>								
	_	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS  rour cable system retransmit the signals of any partially distant television stations during the accounting period?  X Yes—Complete part 9 of this schedule.							
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE							
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ \$							
	Section Enter the total number of permitted DSEs from block B, part 6 of this schedule.  2 (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)								
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.  A. Enter 0.01064 of gross receipts (the amount in section 1).  B. Enter 0.00701 of gross receipts (the amount in section 1).  C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here.  D. Multiply line B by line C and enter here.  E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	0.00						

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

LECAL N	AME OF OWNER OF CABLE SYSTEM:	CVCTEM ID#	
		SYSTEM ID# 6481	Name
WAVI	E DIVISION HOLDINGS LLC	0401	
Section 4	If the figure in section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.		•
7	A. Enter 0.01064 of gross receipts (the amount in section 1)  **State		8
	B. Enter 0.00701 of gross receipts (the amount in section 1)  \$ \bigseleft\{ \bigseleft\} \bigseleft\} \bigseleft\{ \bigseleft\} \bigseleft\{ \bigseleft\} \bigseleft\{ \bigseleft\} \bigseleft\} \bigseleft\{ \bigseleft\} \bigseleft\} \bigseleft\{ \bigseleft\} \bigseleft\{ \bigseleft\} \bigseleft\} \bigse		Computation of Base Rate Fee
	C. Multiply line B by 3.000 and enter here ▶		Dage Nate 1 ce
	D. Enter 0.00330 of gross receipts		
	(the amount in section 1) \$		
	E. Subtract 4.000 from total DSEs		
	(the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your base rate fee	<del></del> -	
	Enter here and in block 3, line 1, space L (page 7)		
	Base Rate Fee	0.00	
	<b>TANT:</b> It is no longer necessary to report television signals on a system-wide basis. Carriage of television broastead be reported on a community-by-community basis (subscriber groups) if the cable system reported multip		0
	Space G.		9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate		Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To tak clusion, you must:	te advantage of	of
			Base Rate Fee and
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are dista or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determ		Syndicated
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee		Exclusivity Surcharge
Finally	: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		for
	If any portion of your cable system is located within the top 100 television market and the station is not exempt		Partially
	so compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A er, if your cable system is wholly located outside all major television markets, complete block A only.	and B below.	Distant Stations, and
	Identify a Subscriber Group for Partially Distant Stations		for Partially
	For each community served, determine the local service area of each wholly distant and each partially distant	station you	Permitted
	to that community.	Station you	Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were the station's local service area. A subscriber located outside the local service area of a station is distant to that ne token, the station is distant to the subscriber.)		
subscri	Divide your subscribers into subscriber groups according to the complement of stations to which they are distable group must consist entirely of subscribers who are distant to exactly the same complement of stations. Not will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
_	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your ber groups.	system's	
	section:		
• Identi	fy the communities/areas represented by each subscriber group.		
	the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant t bers in the group.	o all of the	
• If:			
and 4 d	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave if this schedule; or,	-	
	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it 6 of this schedule.	in block B,	
• Add t	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the gene paper SA3 form.	ral instructions	
page. DSEs f	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group or that group's complement of stations and total gross receipts from the subscribers in that group). You do not ctual calculations on the form.	(that is, the total	

LEGAL NAME OF OWNE						S	YSTEM ID# 6481	Name
В		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA PORT ANGELES, SEQUIM				COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN	LL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE							of
CBUT - CBC	1.00							Base Rate Fee
CKVU - Citytv Var	1.00							and Syndicated Exclusivity Surcharge
								for Partially Distant Stations
				***************************************				
Total DSEs			2.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 2,305	,942.51	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G			,699.89	Base Rate Fee Seco		\$	0.00	
001111111111111111111111111111111111111	THIRD	SUBSCRIBER GROU				SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$	40,699.89	

LEGAL NAME OF OWNER OF CABLE SYSTEM:  WAVE DIVISION HOLDINGS LLC  6481								Name
В				ATE FEES FOR EA				
COMMUNITY/ AREA		SUBSCRIBER GRO		COMMUNITY/ ARE		SUBSCRIBER GRO	0 0	9
								Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate
								and
		=						Syndicat
								Exclusiv
								Surchar
		_						for
								Partiall <sub>i</sub> Distan
								Station
		-						
		_						
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 2,30	5,942.51	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		H						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
,	•				•			
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
				<u>II</u>				
			criber group	as shown in the boxe	es above.			
inter here and in block	3, line 1,	space L (page 7)				\$	0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name WAVE DIVISION HOLDINGS LLC 6481 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus also compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market of **Base Rate Fee INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group . . . . . . . . . . . . THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group . . . . . . . . . . . . . . . . Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown . \$