This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA3E Long Form

Return completed workbook by email to:

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

General instructions are located in the first tab of this workbook.

FOR COPYRIGHT	OFFICE USE ONLY
DATE RECEIVED	AMOUNT
8/30/21	\$
0/00/21	ALLOCATION NUMBER

coplicsoa@loc.gov

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

	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:						
Accounting Period	2021/1						
B Owner	Instructions: Give the full legal name of the owner of the cable system rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner of If there were different owners during the accounting per a single statement of account and royalty fee payment cover Check here if this is the system's first filing. If not, error	n. conducts the business of the cable system. eriod, only the owner on the last day of the a ering the entire accounting period.	accounting period should st		64		
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CA WAVE DIVISION HOLDINGS LLC	BLE SYSTEM					
				648 ⁻	12021		
				6481	2021/1		
	3700 MONTE VILLA PARKWAY BOTHELL WA 98021						
С	INSTRUCTIONS: In line 1, give any business or trad names already appear in space B. In line 2, give the						
System	1 IDENTIFICATION OF CABLE SYSTEM: WAVE BROADBAND						
	WAVE BROADBAND MAILING ADDRESS OF CABLE SYSTEM: 3700 MONTE VILLA PARKWAY (Number, street, rural route, apartment, or suite number) BOTHELL WA 98021 (City, town, state, zip code)						
D	MAILING ADDRESS OF CABLE SYSTEM: 3700 MONTE VILLA PARKWAY (Number, street, rural route, apartment, or suite number) BOTHELL WA 98021	e page 1b. Identify only the frst commu	unity served below and r	relist on pag			
D Area Served	MAILING ADDRESS OF CABLE SYSTEM: 3700 MONTE VILLA PARKWAY (Number, street, rural route, apartment, or suite number) BOTHELL WA 98021 (City, town, state, zip code) Instructions: For complete space D instructions, see with all communities.		unity served below and r	relist on paç	ge 1b		
Area	MAILING ADDRESS OF CABLE SYSTEM: 3700 MONTE VILLA PARKWAY (Number, street, rural route, apartment, or suite number) BOTHELL WA 98021 (City, town, state, zip code) Instructions: For complete space D instructions, see	e page 1b. Identify only the frst commu STATE WA	unity served below and r	relist on paç	ge 1b		
Area Served	MAILING ADDRESS OF CABLE SYSTEM: 3700 MONTE VILLA PARKWAY (Number, street, rural route, apartment, or suite number) BOTHELL WA 98021 (City, town, state, zip code) Instructions: For complete space D instructions, see with all communities. CITY OR TOWN PORT ANGELES Below is a sample for reporting communities if you	STATE WA	ace G.		ge 1b		
Area Served First Community	MAILING ADDRESS OF CABLE SYSTEM: 3700 MONTE VILLA PARKWAY (Number, street, rural route, apartment, or suite number) BOTHELL WA 98021 (City, town, state, zip code) Instructions: For complete space D instructions, see with all communities. CITY OR TOWN PORT ANGELES	STATE WA report multiple channel line-ups in Spa	·	SUB			
Area Served First	MAILING ADDRESS OF CABLE SYSTEM: 3700 MONTE VILLA PARKWAY 2 INUmber, street, rural route, apartment, or suite number) BOTHELL WA 98021 (City, town, state, zip code) Instructions: For complete space D instructions, see with all communities. CITY OR TOWN PORT ANGELES Below is a sample for reporting communities if you CITY OR TOWN (SAMPLE)	STATE WA report multiple channel line-ups in Spa STATE	ace G. CH LINE UP	SUB	GRP#		

FORM	SA3E.	PAGE	1b.

ORM SA3E. PAGE 1D.				
LEGAL NAME OF OWNER OF CABLE SYSTEM: WAVE DIVISION HOLDINGS LLC			SYSTEM ID# 6481	
	' is the same as a	"community unit"		
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 hom below the identified city or town.	e parks should be	e reported in pare	ntheses	
If all communities receive the same complement of television broadcast stations (i.e., on all communities with the channel line-up "A" in the appropriate column below or leave the on a partially distant or partially permitted basis in the DSE Schedule, associate each rel designated by a number (based on your reporting from Part 9).	e column blank. If	you report any st	ations	
When reporting the carriage of television broadcast stations on a community-by-commun 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 b	a subscriber grou			
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	
PORT ANGELES	WA	Α		First
SEQUIM	WA	Â		Community
<u>~</u>				Connunty
				See instructions for
				additional information
				on alphabetization.
				Add rows as necessary.

Name	LEGAL NAME OF OWNER OF CABL	E SYSTEM:						S	(STE	EM ID
	WAVE DIVISION HOLDI	NGS LLC								648
-	SECONDARY TRANSMISSION	SERVICE: S	UBSCR	BERS AND R	ATES					
E	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								
Secondary		about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the ast day of the accounting period (June 30 or December 31, as the case may be).								
Transmission Service: Sub-	Number of Subscribers: Bot						ahla eveta	m broken		
scribers and	down by categories of secondar									
Rates	each category by counting the n									
	separately for the particular serv							Ū		
	Rate: Give the standard rate of									
	unit in which it is generally billed					ard rate variatio	ns within a	ı particular rate		
	category, but do not include disc Block 1: In the left-hand block					condary transm	ission son	vice that cable		
	systems most commonly provide	•		-		•				
	that applies to your system. Not									
	categories, that person or entity			-		•				
	subscriber who pays extra for ca	able service to	addition	nal sets would	be include	d in the count u	under "Serv	vice to the		
	first set" and would be counted of									
	Block 2: If your cable system	-		-						
	printed in block 1 (for example, t									
	with the number of subscribers a sufficient.	and rates, in th	ie right-	nand block. A l	wo- or thre	ee-wora aescrip	blion of the	service is		
		DCK 1					BLOC	к 2		
		NO. OF	-				BLOG	NO. OF		
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CATE	EGORY OF SE	RVICE	SUBSCRIBERS	R	ATE
	Residential:									
	 Service to first set 		5,664	\$ 29.95						
	 Service to additional set(s) 									
	 FM radio (if separate rate) 									
	Motel, hotel		488	\$ 2.93						
	Commercial		587	\$ 13.85						
	Converter									
	Residential									
	Non-residential									
					-0					
	SERVICES OTHER THAN SEC In General: Space F calls for ra					all vour cable sy	ustem's se	nvices that were		
F	not covered in space E, that is, t		,		•	• •				
	service for a single fee. There a					,	,			
Services	furnished at cost or (2) services	or facilities fur	nished	to nonsubscrib	ers. Rate i	nformation sho	uld include	both the		
Other Than	amount of the charge and the ur		s usually	y billed. If any r	ates are c	harged on a va	riable per-	program basis,		
Secondary	enter only the letters "PP" in the rate column.									
ransmissions: Rates	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									
Nates	-				-	-				
	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						BLOCK 2		
	CATEGORY OF SERVICE	RATE		GORY OF SER	VICE	RATE	CATEGO	DRY OF SERVICE	R	ATE
	Continuing Services:		Install	ation: Non-res	idential					
	• Pay cable	\$ 17.00	• Mo	tel, hotel			Expande	ed Content	\$	77.3
	• Pay cable—add'l channel		• Co	mmercial				avorites	\$	13.0
	Fire protection		• Pa	y cable			Digital V	/ariety	\$	8.2
	•Burglar protection		•Pa	, y cable-add'l cl	nannel		Digital S	ports	\$	12.0
	Installation: Residential		• Fire	e protection				able Pack	\$	32.
	• First set	\$ 80.00	• Bu	rglar protection	I		HBO		\$	19.
	 Additional set(s) 	\$ 30.00	Other	services:			HBOMax	(\$	14.9
	• FM radio (if separate rate)		•Re	connect		\$ 40.00	Showtin	ne/The Movie Cha	\$	19.
	Converter		• Dis	connect			Cinemax	C	\$	18.
	1	[1				Starz		\$	17.
			۰Ou	tlet relocation		I	Otarz		÷	
			_	ve to new add	ess		Moviepl	ex	\$	5.

ACCOUNTING PERIOD: 2021/1

	R OF CABLE SYS				SYSTEM ID#	Namo
WAVE DIVISION		-			6481	
RIMARY TRANSMITTE						
					and low power television stations) only on a part-time basis unde	G
				,		•
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						Primary
ubstitute program bas				carried by your c	able system on a substitute prograr	Transmitters: Television
asis under specifc FC				carried by your c	able system on a substitute program	relevision
Do not list the station	here in space	G-but do list		e Special Stateme	ent and Program Log)—if th	
station was carried	•		tion was corriad	l both on a cubatit	ute basis and also an same oth	
					ute basis and also on some othe f the general instructions locate	
in the paper SA3 for						
		•			s such as HBO, ESPN, etc. Identif ion. For example, report mult	
			•	•	n stream separately; for exampl	
/ETA-simulcast).	- b - a - b - c - b - c - b - c - b - c - c - b - c				f h	
			-		on for broadcasting over-the-air i may be different from the channe	
n which your cable sy				ington, D.o. mio		
					pendent station, or a noncommerci	
					ast), "I" (for independent), "I-M mmercial educational multicast	
or the meaning of the	se terms, see p	bage (v) of the	e general instruc	ctions located in th	e paper SA3 form	
			, (<i>, , , , , , , , , ,</i>	s". If not, enter "No". For an e>	
lanation of local servic Column 5: If you ha					stating the basis on which you	
able system carried th	e distant statio	on during the a	accounting perio	od. Indicate by ent	ering "LAC" if your cable syste	
arried the distant stati					apacity payment because it is the subje	
					stem or an association representin	
he cable system and a	primary transi	mitter or an as	ssociation repres	senting the prima	y transmitter, enter the design	
					her basis, enter "O." For a furthe d in the paper SA3 form	
					to which the station is licensed by th	
					which the station is identifed	
ote: If you are utilizing	g multiple char	nel line-ups,	use a separate :	space G for each	channel line-up.]
		CHANN	EL LINE-UP	AA]
CALL	2 B'CAST	3 TYPE	4 DISTANT?		6 LOCATION OF STATION	
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	-
	-	-			6. LOCATION OF STATION	
SIGN	CHANNEL	OF		CARRIAGE	6. LOCATION OF STATION VANCOUVER, BC	
SIGN CBUT - CBC	CHANNEL NUMBER 2	OF STATION N	(Yes or No) Yes	CARRIAGE (If Distant)	VANCOUVER, BC	
SIGN CBUT - CBC CHEK - Independe	CHANNEL NUMBER 2 6	OF STATION N	(Yes or No) Yes No	CARRIAGE (If Distant) O	VANCOUVER, BC VICTORIA, BC	. See instructions for additional information
SIGN CBUT - CBC CHEK - Independe CKVU - Citytv Var	CHANNEL NUMBER 2 6 10	OF STATION N I	(Yes or No) Yes No Yes	CARRIAGE (If Distant)	VANCOUVER, BC VICTORIA, BC VANCOUVER, BC	
SIGN CBUT - CBC CHEK - Independe CKVU - Cityty Var (BTC - PBS	CHANNEL NUMBER 2 6 10 27	OF STATION N I E	(Yes or No) Yes No Yes No	CARRIAGE (If Distant) O	VANCOUVER, BC VICTORIA, BC VANCOUVER, BC TACOMA, WA	additional information
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SIGN SIGN SEUT - CBC CHEK - Independe CKVU - Citytv Var (BTC - PBS (CPQ - FOX (CTS - PBS (CTSDT2 - PBS K (CTSDT3 - Create (FFV - MeTV (FFVDT 4 -Decad (ING - NBC (INGDT2 - Justice (INGDT2 - Justice (INGDT3 - Cass (IRODT2 - getTV (IRODT3 - Laff (OMO - ABC (OMODT3 - Char (OMODT3 - Char (ONG - Independ (STW - CW	CHANNEL NUMBER 2 6 10 27 13 9 9.2 9.3 44.1 44.2 44.4 5 5.2 5.3 7 7.2 7.3 4 4 4.2 7.3 4 4.2 16 11	OF STATION I I E E E E E N N N N N N N N N N N N	(Yes or No) Yes No Yes No No No No No No No No No No No No No	CARRIAGE (If Distant) O	VANCOUVER, BC VICTORIA, BC TACOMA, WA TACOMA, WA SEATTLE, WA	additional information
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SIGN SIGN SEUT - CBC CHEK - Independe CKVU - Citytv Var (BTC - PBS (CPQ - FOX (CTS - PBS (CTSDT2 - PBS K (CTSDT3 - Create (FFV - MeTV (FFVDT 4 -Decad (ING - NBC (INGDT2 - Justice (INGDT2 - Justice (INGDT3 - Cass (IRODT2 - getTV (IRODT3 - Laff (OMO - ABC (OMODT3 - Care (OMODT3 - Chare (ONG - Independ (STW - CW	CHANNEL NUMBER 2 6 10 27 13 9 9.2 9.3 44.1 44.2 44.4 5 5.2 5.3 7 7.2 7.3 4 4 4.2 7.3 4 4.2 16 11	OF STATION I I E E E E E N N N N N N N N N N N N	(Yes or No) Yes No Yes No No No No No No No No No No No No No	CARRIAGE (If Distant) O	VANCOUVER, BC VICTORIA, BC TACOMA, WA TACOMA, WA SEATTLE, WA	additional information
SIGN SIGN SEUT - CBC CHEK - Independe CKVU - Citytv Var (BTC - PBS (CPQ - FOX (CTS - PBS (CTSDT2 - PBS K (CTSDT3 - Create (FFVDT 2- Movies (FFVDT 4 -Decad (ING - NBC (INGDT2 - Justice (INGDT3 - Quest (INGDT3 - Quest (IRO - CBS (IRODT2 - getTV (IRODT3 - Laff (OMO - ABC (OMODT3 - Come (OMODT3 - Charg (OMOT3 - Charg (ONG - Independ (STW - CW (STWDT2 - Decad	CHANNEL NUMBER 2 6 10 27 13 9 9.2 9.3 44.1 44.2 44.4 5 5.2 5.3 7 7.2 7.3 4 4 4.2 7.3 4 4.2 4.3 16 11 11.2	OF STATION I I E N E E N N N N N N N N N N N N N	(Yes or No) Yes No Yes No No No No No No No No No No No No No	CARRIAGE (If Distant) O	VANCOUVER, BC VICTORIA, BC VANCOUVER, BC TACOMA, WA TACOMA, WA SEATTLE, WA	additional information
SIGN SIGN SUT - CBC CHEK - Independe CKVU - Citytv Var (BTC - PBS (CPQ - FOX (CTS - PBS (CTSDT2 - PBS K (CTSDT3 - Create (CTSDT3 - Create (FFV - MeTV (FFVDT 2 - Movies (FFVDT 4 -Decad (INGDT2 - Justice (INGDT2 - Justice (INGDT3 - Quest (INGDT3 - Quest (INGDT3 - Quest (INGDT3 - Laff (OMO - ABC (OMODT3 - Come (OMODT3 - Charg (OMOT3 - Charg (ONG - Independ (STW - CW (STWDT2 - Decad (VOS - Herces &	CHANNEL NUMBER 2 6 10 27 13 9 9.2 9.3 44.1 44.2 44.4 5 5.2 5.3 7 7.2 7.3 4 4 4.2 4.3 16 11 11.2 12.1	OF STATION I I E E E E N N N N N N N N N N N N N	(Yes or No) Yes No Yes No No No No No No No No No No No No No	CARRIAGE (If Distant) O	VANCOUVER, BC VICTORIA, BC VANCOUVER, BC TACOMA, WA TACOMA, WA SEATTLE, WA	additional information

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

FORM SA3E. PAGE 5.							ACCOUNTING	PERIOD: 2021/1
LEGAL NAME OF OWNER OF O	CABLE SYS	TEM:				S	YSTEM ID#	N
WAVE DIVISION HOLD	INGS LL	С					6481	Name
SUBSTITUTE CARRIAGE	SPECIA							
In General: In space I, identif substitute basis during the acc explanation of the programmin form.	y every noi	nnetwork televis eriod, under spe	sion program broadcast by ecific present and former F0	a distant statio C rules, regu	lations, or a	authorizations.	For a further	Substitute
								Carriage:
1. 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?								Special Statement and Program Log
Note: If your answer is "No" log in block 2.			age blank. If your answer	s "Yes," you	must com	olete the progr	am	
 LOG OF SUBSTITUTE In General: List each substiclear. If you need more space Column 1: Give the title of period, was broadcast by a of under certain FCC rules, reg SA3 form for futher informat titles, for example, "I Love L Column 2: If the program Column 3: Give the call s Column 4: Give the broa the case of Mexican or Cana Column 5: Give the mon first. Example: for May 7 giv Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m." Column 7: Enter the letter to delete under FCC rules a gram was substituted for pro- effect on October 19, 1976. 	itute progr. ce, please of every no distant sta gulations, o tion. Do no ucy" or "N n was broa sign of the idcast stati adian stati th and day re "5/7." es when th Example: er "R" if the nd regulat	am on a separ attach addition connetwork tele tion and that y or authorizatio ot use general BA Basketball adcast live, ent station broadc ion's location (ons, if any, the y when your sy e substitute pr a program car e listed program ions in effect c	nal pages. vision program (substitute our cable system substitu ns. See page (vi) of the g categories like "movies", : 76ers vs. Bulls." er "Yes." Otherwise enter casting the substitute prog the community to which the community with which the stem carried the substitute ogram was carried by you ried by a system from 6:0 m was substituted for prog luring the accounting peri	program) the ted for the pr eneral instruct or "basketbal "No." ram. te station is li e station is li e program. U tr cable syste 1:15 p.m. to 6 tramming that od; enter the	at, during sogrammin ogrammin tions local II". List sp censed by lentified). Ise numera to numera consection c	the accounting g of another si ted in the pape ecific program the FCC or, in als, with the m e times accura n. should be tem was require f the listed pro	g tation er n onth tely red	
SU	IBSTITUT	E PROGRAM	1		EN SUBST	-	7. REASON	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	1	TIMES — TO	FOR DELETION	
						_		
						_		
						_		
						_		
						_		
						_		
						—		

FORM	SA3E. PAGE 7.		
LEG	L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
WA	VE DIVISION HOLDINGS LLC	6481	Name
Inst all a (as pag	DSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amoun mounts (gross receipts) paid to your cable system by subscribers for the system's sec dentifed in space E) during the accounting period. For a further explanation of how to de (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.	ondary transmission service	K Gross Receipts
 Instru Cont Cont If you fee If you 	'RIGHT ROYALTY FEE ctions : Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the a from block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable p ompanying this form and attach the schedule to your statement of account.		L Copyright Royalty Fee
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b k 3 below.	e entered on line 1 of	
	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low.	entered 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.	ould be entered on line	
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or mor least the minimum fee, regardless of whether they carried any distant stations. This fe 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.	\$ 2,395,238.92	
	This is your minimum fee.	\$ 25,485.34	
Block 2	 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 colur "Yes" in this block. Did your cable system carry any distant television stations during the accounting per X Yes—Complete the DSE schedule. 	nn 4, you must check iod?	
Block	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	\$ 25,485.34	
3	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	\$ 25,485.34	
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	\$ 25,485.34	Cable systems
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.		submitting additional deposits under
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	Section 111(d)(7) should contact
	Line 4. FILING FEE	\$ 725.00	the Licensing additional fees. Division for the appropriate
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 26,210.34	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 page (i) of the	

ACCOUNTING PERI	DD: 2021/1	FORM SA3E. PAGE 8.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	WAVE DIVISION HOLDINGS LLC	6481
М	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcas to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	st stations
Channels		
	1. Enter the total number of channels on which the cable system carried television broadcast stations	27
	2. Enter the total number of activated channels	
	on which the cable system carried television broadcast stations	
	and nonbroadcast services	353
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 Katie Lake Telephon	ne 516-521-3549
	Address 650 College Road East, Suite 3100 (Number, street, rural route, apartment, or suite number)	
	Princeton, NJ 08540 (City, town, state, zip)	
	Email katie.lake@rcn.net Fax (optional)	
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office re	gulations.)
Certifcation	• I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of spac	e B; or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable in line 1 of space B and that the owner is not a corporation or partnership; or	le system as identified
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as a in line 1 of space B.	owner of the cable system
	 I have examined the statement of account and hereby declare under penalty of law that all statements of fact contain 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)] 	ned herein
	/s/ Parisa Salehani	
	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 curso button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus co	
	Typed or printed name: Parisa Salehani	
	Title: Senior Vice President, Controller (Title of official position held in corporation or partnership)	
	Date: August 30, 2021	
Privacy Act Notice	I : Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying informa	ation (PII) requested on th
	cess your statement of account. PII is any personal information that can be used to identify or trace an individual, such as na	

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 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 law

FORM	SA3E	PAGE9
	JAJL.	I AGES

LEGAL NAME OF OWNER OF CABLE			SYSTEM ID# 6481	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing 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 sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."				
For more information on whe paper SA3 form.	en to exclude these amounts, see the	note on page (vii) of the general instructions ir	the	Concerning Gross Receipts Exclusion
During the accounting period made by satellite carriers to X NO		nounts of gross receipts for secondary transmi	ssions	
	e and list the satellite carrier(s) below			
Name Mailing Address		Name Mailing Address		
	ksheet for those royalty payments sub	pmitted as a result of a late payment or underpa leneral instructions in the paper SA3 form.	ayment.	Q
Line 1 Enter the amount of	late payment or underpayment	x		Interest Assessment
Line 2 Multiply line 1 by the	e interest rate* and enter the sum here	əx	- days	
Line 3 Multiply line 2 by the	e number of days late and enter the su		-	
	00274** enter here and on line 3, bloc age 7)	\$	- t charge)	
	e chart click on <i>www.copyright.gov/lic</i> Division at (202) 707-8150 or licensing	ensing/interest-rate.pdf. For further assistance		
** This is the decimal eq	uivalent of 1/365, which is the interest	t assessment for one day late.		
	-	count already submitted to the Copyright Offce, ounting period, and ID number as given in the o	original	
Owner Address				
First community served				
ID number				
Privacy Act Notice: Section 111 of title	e 17 of the United States Code authorizes the C	Copyright Offce to collect the personally identifying information	tion (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 Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#									
1	WAVE DIVISION HOLDIN	NGS LLC				6481				
	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. 1.00									
2	nstructions: n the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5									
Computation	of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-									
of DSEs for Category "O"	mercial educational station, give the DSE as ".25." CATEGORY "O" STATIONS: DSEs									
Stations	CALL SIGN	DSE	CATEGORY O STATION CALL SIGN	DSE	CALL SIGN	DSE				
olutions	CKVU - Citytv Vancouve		O/ LE CICIV	DOL						
Add rows as										
necessary.										
Remember to copy all formula into new										
rows.										
10W3.										
				L						

	k aan ahaan ah	

Name		OWNER OF CABLE SYSTEM:					DSE SCHEDULE. PAGE 12 SYSTEM ID: 648
3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	Column 2 figure should Column 3 be carried out Column 5 give the type- Column 6	st the call sign of all dista 2: For each station, give the correspond with the infor 3: For each station, give the 4: Divide the figure in colu- that least to the third decir 5: For each independent st value as ".25." 5: Multiply the figure in co- point. This is the station's	he number of hours mation given in spa he total number of I imn 2 by the figure nal point. This is th station, give the "typ lumn 4 by the figure s DSE. (For more in	your cable system ce J. Calculate or nours that the stat in column 3, and g e "basis of carriag be-value" as "1.0." a in column 5, and formation on roun	m carried the stat hly one DSE for e ion broadcast ove give the result in o e value" for the s For each networ I give the result in ding, see page (\	ion during the accounting ach station. er the air during the accound decimals in column 4. Thi tation. k or noncommercial educ a column 6. Round to no I viii) of the general instruct	unting period. is figure must cational station, ess than the
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	JRS C D BY S	UMBER DF HOURS DTATION DN AIR	4. BASIS OF CARRIAG VALUE	5. TYPE	6. DSE
			+ + + + + + + +			x x x x	
4 Computation of DSEs for Substitute- Basis Stations	Instructions: Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4:	Im here and in line 2 of p re the call sign of each sta d by your system in subst act on October 19, 1976 (one or more live, nonnetwo For each station give the This figure should correst Enter the number of days Divide the figure in colum This is the station's DSE	ation listed in space itution for a prograr as shown by the lei ork programs during number of live, nor spond with the infor s in the calendar ye in 2 by the figure in	I (page 5, the Lo n that your system ter "P" in column that optional carri metwork program mation in space I. ar: 365, except in column 3, and giv	g of Substitute Pr n was permitted to 7 of space I); and iage (as shown by s carried in subst a leap year. ye the result in co	o delete under FCC rules the word "Yes" in column 2 itution for programs that v lumn 4. Round to no less	and regular- : of were deleted : than the third
	1. CALL SIGN	2. NUMBER OF	3. NUMBER OF DAYS	SIS STATION 4. DSE	S: COMPUTA 1. CALL SIGN	TION OF DSEs 2. NUMBER OF	3. NUMBER OF DAYS
		PROGRAMS + + + + + + + + + + + + + + + + + + +		=		PROGRAMS + + + + + + + + + + + + + + + + + + +	
	Add the DSEs	OF SUBSTITUTE-BAS of each station. Im here and in line 3 of p.		e,		0.00	
5 Total Number of DSEs	number of DSE 1. Number o 2. Number o 3. Number o	ER OF DSEs: Give the am s applicable to your systen of DSEs from part 2 • of DSEs from part 3 • of DSEs from part 4 •		s in parts 2, 3, and	4 of this schedule	and add them to provide t	1.00 0.00 0.00
	TOTAL NUMBE	R OF DSEs					1.00

									G PERIOD: 2021
EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID: VAVE DIVISION HOLDINGS LLC 6481							S		Name
								040	
nstructions: Bloo n block A:	ck A must be com	pleted.							
If your answer if	"Yes," leave the re	emainder of p	part 6 and part	7 of the DSE sche	edule blank an	id complete pa	art 8, (page 16) of	the	6
chedule. If your answer if '	"No," complete blo	ocks B and C	below.						
	, 1			ELEVISION M	ARKETS				Computation
		utside of all ı	major and sma	aller markets as de	efined under se	ection 76.5 of I	FCC rules and reg	gulations in	3.75 Fee
effect on June 24,		schedule [PLETE THE REM					
	blete blocks B and				AINDER OF F	ART 0 AND 7	•		
X NO-Comp		C below.							
		BLOC	CK B: CARR	IAGE OF PERI	MITTED DS	Es			
Column 1: CALL SIGN	under FCC rules	and regulations are consistent and regulations are consistent and regulations are consistent and regulations are consistent are consis	ons prior to Ju dule. (Note: T	part 2, 3, and 4 of ne 25, 1981. For fu he letter M below r Act of 2010.)	urther explana	ition of permitt	ed stations, see th	ne	
Column 2: BASIS OF PERMITTED CARRIAGE	Enter the approp (Note the FCC r. A Stations carrie 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfathered instructions fo E Carried pursua *F A station pre	riate letter in illes and regu ed pursuant i on as defined al educationa d station (76. r DSE sched ant to individi viously carrie IHF station w	dicating the ba lations cited b to the FCC ma d in 76.5(kk) (7 al station [76.5 65) (see parag lule). ual waiver of F ed on a part-tir <i>v</i> ithin grade-B	asis on which you o elow pertain to tho irket quota rules [7 76.59(d)(1), 76.61(9(c), 76.61(d), 76. graph regarding su FCC rules (76.7) ne or substitute ba contour, [76.59(d)(ose in effect or 76.57, 76.59(b (e)(1), 76.63(a .63(a) referring ubstitution of gu	n June 24, 198), 76.61(b)(c),) referring to 7 g to 76.61(d)] randfathered s ne 25, 1981	76.63(a) referring 6.61(e)(1) tations in the		
Column 3:		e stations ide determine the	ntified by the l	n parts 2, 3, and 4 etter "F" in column 2. PERMITTED			vorksheet on page		
SIGN	2. PERMITTED BASIS	3. DSE	SIGN	2. PERMITTED BASIS	3. DSE	SIGN	2. PERMITTED BASIS	3. DSE	
CKVU - City	D	1.00							
				•					
								1.00	
		B	LOCK C: CC		F 3.75 FEE			1.00	
ine 1: Enter the	e total number of				F 3.75 FEE			1.00	
	e total number of e sum of permitte	DSEs from	part 5 of this	schedule	F 3.75 FEE				
ne 2: Enter the ne 3: Subtract	sum of permitte	DSEs from d DSEs froi	part 5 of this m block B ab e total numbe	schedule	ct to the 3.75	rate.		1.00	
ne 2: Enter the ne 3: Subtract (If zero, le	sum of permitte	DSEs from d DSEs froi . This is the lank and pr	part 5 of this m block B ab e total numbe oceed to part	schedule ove r of DSEs subjec	ct to the 3.75	rate.		1.00 1.00 0.00	-
ine 2: Enter the ine 3: Subtract (If zero, le ine 4: Enter gro	e sum of permitte line 2 from line 1 eave lines 4–7 b	DSEs from d DSEs froi . This is the lank and pr space K (p	part 5 of this m block B ab e total numbe oceed to part age 7)	schedule ove r of DSEs subjec	ct to the 3.75	rate.	× 0.03	1.00 1.00 0.00	DSEs repres partially permited/ partially
ine 2: Enter the ine 3: Subtract (If zero, I ine 4: Enter gro ine 5: Multiply Ii	e sum of permitte line 2 from line 1 eave lines 4–7 b oss receipts from	DSEs from d DSEs froi I. This is the lank and pr space K (p and enter su	part 5 of this m block B ab e total numbe oceed to part age 7) um here	schedule ove r of DSEs subjec	ct to the 3.75	rate.	x 0.03	1.00 1.00 0.00	DSEs repres partially permited/ partially nonpermitte carriage? If yes, see pa
ine 2: Enter the ine 3: Subtract (If zero, I ine 4: Enter gro ine 5: Multiply li	e sum of permitte line 2 from line 1 eave lines 4–7 b oss receipts from ine 4 by 0.0375 a	DSEs from d DSEs froi I. This is the lank and pr space K (p and enter su	part 5 of this m block B ab e total numbe oceed to part age 7) um here	schedule ove r of DSEs subjec	ct to the 3.75	rate.		1.00 1.00 0.00	permited/ partially nonpermitte

Name	WAVE DIVISION HOLDINGS LLC 6481							
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the of Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the Fo A—Part-time sp 76.59 B—Late-night pr 76.61 S—Substitute ca gener Column 5: Indicate Column 6: Compare in block	or to June 25, 1981, ur call sign for each dista the DSE for this statio the accounting period the basis of carriage of CC rules and regulatio ecialty programming: ((d)(1),76.61(e)(1), or 7 rogramming: Carriage (e)(3)). arriage under certain F al instructions in the p the station's DSE for t e the DSE figures liste s B, column 3 of part 6	ader former FCC rules goonnt station identifed by the n for a single accounting and year in which the car on which the station was of ns cited below pertain to Carriage, on a part-time b 76.63 (referring to 76.61(e under FCC rules, section FCC rules, regulations, or aper SA3 form. he current accounting per d in columns 2 and 5 and for this station.	i identifed by the letter "F" verning part-time and sub letter "F" in column 2 of p period, occurring betweer riage and DSE occurred arried by listing one of the those in effect on June 24 asis, of specialty program ()(1)). s 76.59(d)(3), 76.61(e)(3) authorizations. For furthe riod as computed in parts list the smaller of the two st be accurate and is subjo	stitute carriage.) art 6 of the DSE schedu a January 1, 1978 and Ju (e.g., 1981/1). e following letters: , 1981.) ming under FCC rules, s , or 76.63 (referring to r explanation, see page (2, 3, and 4 of this sched figures here. This figure	e. ine 30, 1981. ections vi) of the ule. should be entered		
				ED ON A PART-TIME AN				
	1. CALL	2. PRIOR	3. ACCOUNTING	4. BASIS OF	5. PRESENT	6. PERMITTED		
	SIGN	DSE	PERIOD	CARRIAGE	DSE	DSE		
						n <u>namanananananananananananananananananan</u>		
7 Computation of the	,	"Yes," complete block	and C blank and complete	part 8 of the DSE schedu		1		
Syndicated			BLOCK A: MAJOR	TELEVISION MARK	ET			
Exclusivity Surcharge	• Is any portion of the c	able system within a to	n 100 major television mar	ket as defined by section 7	5.5 of ECC rules in effect	lune 24 10812		
Gurenarge	X Yes—Complete	-		et as defned by section 76.5 of FCC rules in effect June 24, 1981?				
	BLOCK B: Ca	arriage of VHF/Grade	B Contour Stations	BLOCK C: Computation of Exempt DSEs				
	commercial VHF stati or in part, over the ca	-	B contour, in whole	Was any station listed in block B of part 7 carried in any commu- nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159)				
		tation below with its appr and proceed to part 8.	opriate permitted DSE	X Yes—List each station below with its appropriate permitted DSE No—Enter zero and proceed to part 8.				
	CALL SIGN	DSE CAL 1.00	LL SIGN DSE		DSE CALL S	IGN DSE		
	CKVO - Citytv V	1.00		CKVU - Cityty V	1.00			
					Į			
		тот	AL DSEs 1.00		TOTAL I	DSEs 1.00		

DSE SCHEDULE. PAGE 14.

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
	WAVE DIVISION HOLDINGS LLC	6481	
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	2,395,238.92	7
Section 2	A. Enter the total DSEs from block B of part 7	1.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	1.00	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 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 D is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	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 D is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	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		

ACCOUNTING PERIOD: 2021/1

DSE	SCHED	ULE.	PAGE	16

	LEGAL NAM	IE OF OWNER OF CABLE SYSTEM: SYSTEM ID#					
Name	١	WAVE DIVISION HOLDINGS LLC 6481					
7 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)					
8 Computation of Base Rate Fee	 b 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 belock B belock B. 						
		BLOCK AL CARRIAGE OF RARTIALLY DISTANT STATIONS					
	• Did y	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS our cable system retransmit the signals of any partially distant television stations during the accounting period?					
	Г	Yes—Complete part 9 of this schedule.					
	Section	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE					
	1	Enter the amount of gross receipts from space K (page 7) \$ 2,395,238.92					
	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.). 1.00					
	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)					

DSE SCHEDULE. PAGE 17.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM SYSTEM	
WAVE DIVISION HOLDINGS LLC	6481 ^{Name}
Section If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.	
4 A. Enter 0.01064 of gross receipts (the amount in section 1)►\$	8
 B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$ 	Computation of Base Rate Fee
C. Multiply line B by 3.000 and enter here ▶	
D. Enter 0.00330 of gross receipts (the amount in section 1) ▶ \$	
E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here	
F. Multiply line D by line E and enter here ▶ \$	
G. Add lines A, C, and F. This is your base rate fee Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$ 0.	00
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast sign shall instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel ups in Space G.	
In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exercice preceipts from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage this exclusion, you must:	
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the sa station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the num DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each generate. 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 before the summary of the subscriber group.	mber of group. Surcharge for you Distant
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	Stations, and for Partially
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.	Permitted Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (at the same token, the station is distant to the subscriber.)	nd, by
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 cal system will have only one subscriber group when the distant stations it carried have local service areas that coincide.	ble
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. 	
• If: 1) your system is located wholly outside all major and smaller television markets give each station's DSE as you gave it in parts	2.3
 your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts and 4 of this schedule; or, 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 instructi in the paper SA3 form.	ions
 Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preced page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, th DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to sh your actual calculations on the form. 	e total

LEGAL NAME OF OWNE WAVE DIVISION H						S	6481	Name
BI	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC				
		SUBSCRIBER GROU		SECOND SUBSCRIBER GROUP				9
COMMUNITY/ AREA	PORT	ANGELES, SEQUI	Μ	COMMUNITY/ AREA 0				-
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and
								Syndicated
						-		Exclusivity Surcharge
								for
								Partially
		-						Distant
		-				-		Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 2,395	,238.92	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First Gr	roup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	IP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		-						
							0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxe	s above.	\$	0.00	

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#WAVE DIVISION HOLDINGS LLC6481							Name	
FIRST SUBSCRIBER GROUP				ATE FEES FOR EACH SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP			9	
COMMUNITY/ AREA PORT ANGELES, SEQUIM				COMMUNITY/ AREA 0				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				•				Base Rate Fee and Syndicated Exclusivity
				 Manual Anti-Anti-Anti-Anti-Anti-Anti-Anti-Anti-			·	Surcharge for Partially
				· · · · · · · · · · · · · · · · · · ·				Distant Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 2,395,238.92			238.92	Gross Receipts Secon	ld Group	\$	0.00	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Secon		\$	0.00	
THIRD SUBSCRIBER GROUP COMMUNITY/ AREA 0				FOURTH SUBSCRIBER GROUP 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 Group		\$	0.00	Gross Receipts Fourth Group		\$	0.00	
Base Rate Fee Third Group \$ 0.00			0.00	Base Rate Fee Fourth	I Group	\$	0.00	
Base Rate Fee: Add the base rate fees for each subscriber group Enter here and in block 3, line 1, space L (page 7)				as shown in the boxes a	above.	\$	0.00	

ACCOUNTING PERIOD: 2021/1

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#						
Name	WAVE DIVISION HOLDINGS LLC 648'							
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP							
9	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 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:							
Computation of	First 50 major television market INSTRUCTIONS: Stop 1, Jalian 1, give the total DSEs by subscriber group for commercial V/JE Crade B contour stations listed in black A, part 0 of							
Base Rate Fee								
and Syndicated	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 this schedule.							
Exclusivity	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							
Surcharge for	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.							
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 Stations	schedule. In making this computation, use gross receipts fig your actual calculations on this form.	gures applicable to the particular group. You do not need to show						
	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 total number of DSEs for	and enter here. This is the total number of DSEs for						
	this subscriber group	this subscriber group						
	subject to the surcharge	subject to the surcharge						
	computation	computation						
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE						
	First Group	Second Group						
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP						
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs						
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs						
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1						
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for						
	this subscriber group	this subscriber group						
	subject to the surcharge computation	subject to the surcharge computation						
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY						
	SURCHARGE	SURCHARGE						
	Third Group	Fourth Group						
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)							
	in the boxes above. Enter here and in block 4, line 2 of space E (page							