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:

coplicsoa@copyright.gov

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

Α	AC	COUNTING PERIOD COVERED BY	Y THIS STATEMENT:						
Accounting Period		2024/1							
B Owner	rate	Tructions: Give the full legal name of the owner of the out title of the subsidiary, not that of the parent or List any other name or names under which th If there were different owners during the accu- ingle statement of account and royalty fee pay Check here if this is the system's first filing	orporation. ne owner conducts the busines ounting period, only the owner ment covering the entire accou	ss of the cable syste on the last day of th unting period.	m. e accounting period should su		40750		
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM								
		NEW KNOXVILLE TELEPHONE							
						40750	020241		
						40750	2024/1		
		301 WEST SOUTH ST. NEW KNOXVILLE, OH 45871							
С		STRUCTIONS: In line 1, give any busines		,	, , , , , , , , , , , , , , , , , , , ,				
-	names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.								
System	1	IDENTIFICATION OF CABLE SYSTEM:							
	MAILING ADDRESS OF CABLE SYSTEM:								
	2	(Number, street, rural route, apartment, or suite number)							
	2	(Number, street, rurar route, apartment, or suite number)							
	(City, town, state, zip code)								
D	Ins	tructions: For complete space D instruc	tions, see page 1b. Identify	only the frst com	munity served below and re	elist on pa	ge 1b		
Area	wit	n all communities.							
Served		CITY OR TOWN		STATE					
First		New Knoxville		ОН					
Community	E	elow is a sample for reporting communiti	es if you report multiple ch	annel line-ups in S	pace G.				
		CITY OR TOWN (SAMPLE)		STATE	CH LINE UP	SUB	GRP#		
Sample	Ald	a		MD	Α		1		
		ance		MD	В		2		
	Gei	ing		MD	В		3		
Privacy Act Notic	e: Ser	tion 111 of title 17 of the United States Code autho	rizes the Copyright Offce to collec	t the personally identify	ving information (PII) requested o	n this			
-		your statement of account. PII is any personal inform							
• •	-	II, you are agreeing to the routine use of it to establi	•		•				
	•	for the public. The effect of not providing the PII req ements of account, and it may affect the legal suffci		• •	•	he			
completed record	or otal	sine is account, and it may anout the logal suffer		Would be made by					

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

08/29/2024

the first tab of this workbook.

STATEMENT OF ACCOUNT for Secondary Transmissions by

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#			
NEW KNOXVILLE TELEPHONE			40750			
Instructions: List each separate community served by the cable system. A "community" in FCC rules: "a separate and distinct community or municipal entity (including unincorpor areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frs of system identification hereafter known as the "first community." Please use it as the first	orated communitient to community that	es within unincorp you list will serve	oorated	D Area Served		
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.						
If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).						
When reporting the carriage of television broadcast stations on a community-by-community 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#			
New Knoxville Botkins	OH OH	B	3	First Community		
Anna	OH	A	1			
Jackson Center	ОН	Α	1			
Fort Loramie	OH	Α	2			
Sidney	OH	Α	2	See instructions for		
Russia	OH	A	2	additional information on alphabetization.		
Uninc. Mercer County	OH	A	1			
New Bremen Minster	OH	B	3			
	OH	В	3			
				Add rows as necessary.		
		I		I		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:								
	NEW KNOXVILLE TELE	PHONE							4075
E Secondary Transmission Service: Sub- scribers 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 or Block 2: If your cable system printed in block 1 (for example, the with the number of subscribers a sufficient.	has rate categ iers of service and rates, in th	jories fo s that ir	or secondary tr nclude one or r	ansmissior nore secor	n service that ai ndary transmiss	ions), list tl otion of the	hem, together service is	
	BLC	DCK 1 NO. OF	:				BLOC	K 2 NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATI	EGORY OF SE	RVICE	SUBSCRIBERS	RATE
	Residential: • Service to first set		2,960	\$ 51.95					
	 Service to additional set(s) FM radio (if separate rate) 								
	Motel, hotel								
	Commercial Converter								
	Residential								
	Non-residential								
F Services Other Than Secondary Fransmissions: Rates	In General: Space F calls for ra not covered in space E, that is, t service for a single fee. There au furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard ra Block 2: List any services that	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							
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATE	GORY OF SEF		RATE	CATEGO	ORY OF SERVICE	RATE
	Continuing Services: Pay cable			ation: Non-rest otel, hotel	sidential				
	• Pay cable—add'l channel			mmercial					
	Fire protection			y cable					
	•Burglar protection Installation: Residential			y cable-add'l c	hannel				
				e protection rglar protectior	n				
	Additional set(s)			services:	-				
	• FM radio (if separate rate)			connect					
	Converter			sconnect					
		1	• Ou	tlet relocation					
			• Mc	ove to new add	ress				

PRIMARY TRANSMIT	LEGAL NAME OF OWNER OF CABLE SYSTEM: NEW KNOXVILLE TELEPHONE				SYSTEM ID 4075	Name
 carried by your cable FCC rules and regulation FCC rules and regulation FCC rules and regulation Substitute program to the statis Substitute Basis basis under specific Do not list the statis station was carried List the station her basis. For further in the paper SA3 Column 1: List end 	e system during t lations in effect or 76.61(e)(2) and (oasis, as explaine s Stations: With FCC rules, regula ion here in space ed only on a subs re, and also in spa- information conc- form. each station's call	he accountin- n June 24, 19 (4), or 76.63 (dd in the next respect to an ations, or auth G—but do lis titute basis ace I, if the st cerning substi- sign. Do not	g period except 081, permitting to 76.0 paragraph y distant statior horizations: st it in space I (t ation was carrie itute basis station report origination	(1) stations carri the carriage of ce 61(e)(2) and (4))] ns carried by your the Special State ed both on a subs ons, see page (v) on program servio	ns and low power television stations) ed only on a part-time basis under rtain network programs [section: ; and (2) certain stations carried on a r cable system on a substitute program ment and Program Log)—if the stitute basis and also on some othe of the general instructions located ces such as HBO, ESPN, etc. Identifi- nation. For example, report multi	G Primary Transmitters: Television
WETA-simulcast). Column 2: Give its community of lice on which your cable Column 3: Indica educational station, (for independent mu For the meaning of t Column 4: If the planation of local se Column 5: If you cable system carried carried the distant si For the retransmi of a written agreement the cable system an tion "E" (exempt). For explanation of these	the channel numlense. For example system carried thate in each case of by entering the le ulticast), "E" (for n these terms, see station is outside orvice area, see po a have entered "Y d the distant static tation on a part-ti- ission of a distant ent entered into o ad a primary trans or simulcasts, als	ber the FCC I e, WRC is Ch ne station whether the s atter "N" (for r oncommercia page (v) of the the local ser age (v) of the es" in columr on during the me basis bec t multicast str n or before Ju mitter or an a o enter "E". If	has assigned to nannel 4 in Was station is a netw network), "N-M" al educational), ne general instruct general instruct a, you must co accounting per accounting per accoun	the television st bington, D.C. Th ork station, an in (for network mul- or "E-M" (for non uctions located in "distant"), enter "" ctions located in to omplete column 5 riod. Indicate by e activated channe subject to a roya between a cable s resenting the prime channel on any	5, stating the basis on which you entering "LAC" if your cable syster	
Column 6: Give FCC. For Mexican o	or Canadian static	ich station. Fo	or U.S. stations ve the name of	, list the commun the community w	ited in the paper SA3 form ity to which the station is licensed by the ith which the station is identifec ch channel line-up.	
Column 6: Give FCC. For Mexican o	or Canadian static	ich station. Fo ons, if any, giv nnel line-ups,	or U.S. stations ve the name of	, list the commun the community w e space G for eac	ity to which the station is licensed by the ith which the station is identifec	_
Column 6: Give	or Canadian static zing multiple cha	ich station. Fo ons, if any, giv nnel line-ups,	or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No)	, list the commun the community w e space G for eac	ity to which the station is licensed by the ith which the station is identifec	
Column 6: Give FCC. For Mexican o Note: If you are utili 1. CALL SIGN	or Canadian static zing multiple char 2. B'CAST CHANNEL	ich station. Fe ons, if any, giv nnel line-ups, CHANN 3. TYPE OF	or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No)	, list the commun the community w e space G for eac AA 5. BASIS OF CARRIAGE	ity to which the station is licensed by the ith which the station is identifec the channel line-up.	
Column 6: Give FCC. For Mexican o Note: If you are utili 1. CALL SIGN	2. B'CAST CHANNEL NUMBER	ich station. Fe ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION	or U.S. stations ve the name of use a separate EL LINE-UP 4. DISTANT? (Yes or No)	, list the commun the community w e space G for eac AA 5. BASIS OF CARRIAGE	ity to which the station is licensed by the ith which the station is identifec th channel line-up. 6. LOCATION OF STATION	
Column 6: Give FCC. For Mexican o Note: If you are utili 1. CALL SIGN WDTN WHIO	2. B'CAST CHANNEL NUMBER 50	ich station. Fe ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION N	or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO	, list the commun the community w e space G for eac AA 5. BASIS OF CARRIAGE	ity to which the station is licensed by the ith which the station is identifec ch channel line-up. 6. LOCATION OF STATION DAYTON, OH	additional informatio
Column 6: Give FCC. For Mexican o Note: If you are utili 1. CALL SIGN WDTN WHIO WHIO-DT2	2. B'CAST CHANNEL NUMBER 50 41	ich station. Fe ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION N N	or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO	, list the commun the community w e space G for eac AA 5. BASIS OF CARRIAGE	ity to which the station is licensed by the ith which the station is identifec th channel line-up. 6. LOCATION OF STATION DAYTON, OH DAYTON, OH	
Column 6: Give FCC. For Mexican o Note: If you are utili 1. CALL SIGN WDTN WHIO WHIO WHIO-DT2 WKEF	2. B'CAST CHANNEL NUMBER 50 41 41.2	ich station. Fo ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION N N I-M	or U.S. stations ve the name of use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO	, list the commun the community w e space G for eac AA 5. BASIS OF CARRIAGE	ity to which the station is licensed by the ith which the station is identifec ch channel line-up. 6. LOCATION OF STATION DAYTON, OH DAYTON, OH DAYTON, OH	additional informatio
Column 6: Give FCC. For Mexican o Note: If you are utili 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF WKEF-DT2	2. B'CAST CHANNEL NUMBER 50 41 41.2 18	ich station. Fe ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION N N I-M N	or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO	, list the commun the community w e space G for eac AA 5. BASIS OF CARRIAGE	ity to which the station is licensed by the ith which the station is identifec ch channel line-up. 6. LOCATION OF STATION 6. LOCATION, OH DAYTON, OH DAYTON, OH DAYTON, OH	additional informatio
Column 6: Give FCC. For Mexican o Note: If you are utili 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF WKEF-DT2 WKEF-DT3	2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2	ich station. Fe ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION N I-M N N-M	or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO	, list the commun the community w e space G for eac AA 5. BASIS OF CARRIAGE	ity to which the station is licensed by the ith which the station is identifec ch channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH	additional informatio
Column 6: Give FCC. For Mexican o Note: If you are utili 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF WKEF-DT2 WKEF-DT3 WRGT	2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3	ich station. Fe ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION N N I-M N N-M I-M	or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO	, list the commun the community w e space G for eac AA 5. BASIS OF CARRIAGE	ity to which the station is licensed by the ith which the station is identifec ch channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH	additional information
Column 6: Give FCC. For Mexican of Note: If you are utili 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF-DT2 WKEF-DT3 WKEF-DT3 WRGT-DT2	2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 36	ich station. Fe ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION N N I-M I-M I-M I-M I	or U.S. stations ve the name of use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO	, list the commun the community w e space G for eac AA 5. BASIS OF CARRIAGE	ity to which the station is licensed by the ith which the station is identifec ch channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH	additional information
Column 6: Give FCC. For Mexican of Note: If you are utili 1. CALL SIGN WDTN WHIO-DT2 WKEF-DT2 WKEF-DT2 WKEF-DT3 WRGT-DT2 WRGT-DT2 WRGT-DT3	2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 36 36.2	ich station. Fe ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION N N I-M I-M I-M I-M I-M	or U.S. stations ve the name of use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO	, list the commun the community w e space G for eac AA 5. BASIS OF CARRIAGE	ity to which the station is licensed by the ith which the station is identified ch channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH	additional information
Column 6: Give FCC. For Mexican of Note: If you are utili 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF-DT2 WKEF-DT2 WKEF-DT3 WRGT WRGT-DT3 WRGT-DT3 WRGT-DT3	2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 36 36.2 36.3	ich station. Fe ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION N N I-M I-M I-M I-M I-M I-M	or U.S. stations ve the name of use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	, list the commun the community w e space G for eac AA 5. BASIS OF CARRIAGE	ity to which the station is licensed by the ith which the station is identifec ch channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH	additional information
Column 6: Give FCC. For Mexican o Note: If you are utili 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF WKEF-DT2 WKEF-DT3 WRGT WRGT-DT2 WRGT-DT3 WRGT-DT3 WRGT-DT3	r Canadian static zing multiple char 2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 36 36.2 36.3 16	ich station. Fe ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION N N I-M I-M I I-M I-M I-M E	or U.S. stations ve the name of use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO	, list the community we space G for each of the community we space G for each of the community of the commun	ity to which the station is licensed by the ith which the station is identified ch channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH	additional information
Column 6: Give FCC. For Mexican o Note: If you are utili 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF-DT2 WKEF-DT2 WKEF-DT3 WRGT WRGT-DT3 WRGT-DT3 WRGT-DT3 WPTD WBGU	r Canadian static zing multiple char 2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 36 36.2 36.3 16 27	ich station. Fe ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION N N I-M I-M I-M I-M I-M E E E	or U.S. stations ve the name of use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	, list the community we space G for ead AA 5. BASIS OF CARRIAGE (If Distant)	ity to which the station is licensed by the ith which the station is identifec ch channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH BAYTON, OH	additional information
Column 6: Give FCC. For Mexican o Note: If you are utili 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF WKEF-DT3 WKEF-DT3 WRGT-DT3 WRGT-DT3 WRGT-DT3 WRGT-DT3 WRGT-DT3 WRGT-DT3 WRGU-DT3	r Canadian static zing multiple char 2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 36 36.2 36.3 16 27 27.2	ich station. Fe ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION N I-M I-M I-M I-M I-M E E E-M	or U.S. stations ve the name of use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO YES YES YES	, list the community we space G for each of the community we space G for each of the community of the commun	ity to which the station is licensed by the ith which the station is identified ch channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH BOWLING GREEN, OH BOWLING GREEN, OH	additional information
Column 6: Give FCC. For Mexican o Note: If you are utili 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF-DT2 WKEF-DT2 WKEF-DT3 WRGT-DT3 WRGT-DT3 WRGT-DT3 WPTD WBGU WBGU-DT2 WBGU-DT3 WTLW	r Canadian static zing multiple char 2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 36 36.2 36.3 16 27 27.2 27.2 27.3 44	ich station. Fe ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION N I-M I-M I-M I-M I-M E E E-M E-M I	or U.S. stations ve the name of use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO YES YES YES NO	, list the community we space G for each of the community we space G for each of the community of the commun	ity to which the station is licensed by the ith which the station is identifec ch channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH BOWLING GREEN, OH BOWLING GREEN, OH LIMA, OH	additional informatio
Column 6: Give FCC. For Mexican o Note: If you are utili 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF WKEF-DT2 WKEF-DT3 WRGT WRGT-DT3 WRGT-DT3 WPTD WBGU-DT2 WBGU-DT3 WHIO	r Canadian static zing multiple char 2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 36 36.2 36.3 16 27 27.2 27.2 27.3 44 8	ich station. Fe ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION N N N N-M I-M I I-M I I-M E E E-M E-M I N	or U.S. stations ve the name of use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO SO NO NO NO NO NO NO NO NO NO NO NO NO NO	, list the community we space G for each of the community we space G for each of the community of the commun	ity to which the station is licensed by the ith which the station is identified ch channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH BOWLING GREEN, OH BOWLING GREEN, OH LIMA, OH	additional informatio
Column 6: Give FCC. For Mexican o Note: If you are utili	r Canadian static zing multiple char 2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 36 36.2 36.3 16 27 27.2 27.2 27.3 44	ich station. Fe ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION N I-M I-M I-M I-M I-M E E E-M E-M I	or U.S. stations ve the name of use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO YES YES YES NO	, list the community we space G for each of the community we space G for each of the community of the commun	ity to which the station is licensed by the ith which the station is identifec ch channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH BOWLING GREEN, OH BOWLING GREEN, OH LIMA, OH	additional informatio

	IER OF CABLE SY	'STEM'			SYSTEM ID#			
NEW KNOXVILLE TELEPHONE					40750	Name		
PRIMARY TRANSMITT	ERS: TELEVISI	ON						
carried by your cable FCC rules and regulat 76.59(d)(2) and (4), 70 substitute program ba	n General: In space G, identify every television station (including translator stations and low power television stations) arried by your cable system during the accounting period except (1) stations carried only on a part-time basis under CC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 6.59(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 ubstitute 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 F4 Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fc Column 1: List ear each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give th ts community of licen- on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you h cable system carried the carried the distant station for the retransmission of the cable system and for the retransmission a written agreement the cable system and for "E" (exempt). For 	CC rules, regul n here in space only on a subs and also in sp nformation com- orm. ch station's call associated wit A-2". Simulcast e channel num se. For exampl ystem carried t e in each case y entering the la cast), "E" (for r est terms, see tation is outside ice area, see p have entered "Y the distant stati tion on a part-ti sion of a distant t entered into c a primary trans simulcasts, als hree categories e location of ea Canadian station	ations, or aut G—but do lis stitute basis ace I, if the st cerning subst sign. Do not th a station ac streams mus ber the FCC e, WRC is Cf he station whether the s etter "N" (for n oncommercia page (v) of the des (v) of the state of the state of the me basis bed t multicast stron on during the me basis bed t multicast stron on or before J smitter or an a so enter "E". If s, see page (v)	horizations: st it in space I (t ation was carrie itute basis statio report originatio ccording to its o it be reported in has assigned to hannel 4 in Was station is a netw network), "N-M" al educational), ne general instru- vice area, (i.e. ' e general instru- vice area, (i.e. ' accounting per sause of lack of eam that is not une 30, 2009, b association repr f you carried the c) of the general or U.S. stations we the name of	he Special Stater ad both on a subsons, see page (v) on program service ver-the-air design column 1 (list ea o the television stathington, D.C. Thi ork station, an ine (for network mult or "E-M" (for non- uctions located in "distant"), enter "" stions located in to omplete column 5 iod. Indicate by e activated channe subject to a roya estimated channel subject to a roya estimated channel on any instructions located , list the community w	nent and Program Log)—if the titute basis and also on some othe of the general instructions located tes such as HBO, ESPN, etc. Identify tation. For example, report multi ch stream separately; for example ation for broadcasting over-the-air ir is may be different from the channe dependent station, or a noncommercia icast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form (es". If not, enter "No". For an ex ne paper SA3 form , 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 ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ty to which the station is licensed by the th which the station is identifec	Television		
		•	•					
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
WBDT	26	1	NO	, ,	SPRINGFIELD, OH			
					DAYTON, OH			

PRIMARY TRANSMITTERS: TELEVISION In General: In space G. (Jertify every felovision station (including transitor stations and low power television stations) entired by your cable system dring the accounting period or To 75 (16/2) and (21); and (2) certifies basis under space). To 75 (16/2) and (21); and (2) certifies basis under space). To 75 (16/2) and (21); and (2) certifies basis under space). To 75 (16/2); and (21); and (2) certifies that stations carried by your cable system on a substitute program basis, sex systained in the most paragraph in assumed by your cable system on a substitute program basis under space). To CC culse, segulations, or anthrotoxicols: On the station here, and also in space 1. (If the station was carried by your cable system carried by the station here in space 6—but do Isi It in space 1 (the Special Statement and Program Log)(If the station here in space 6—but do Isi It in space 1 (the Special Statement and Program Log)(If the station here in space 6—but do Isi It in space 1 (the special Statement and Program Log)(If the station here in space 6) (If the station have carried by and the station count of the station here in the station of the station does and the station carried by and the station of the station of the carried by the station of the station of the station of the station of a noncommercial data frame. For example, MCC is channel (I is the station is a statistic in a network station, an independent station, or a noncommercial data frame table in the interver Via C in save system carried the station of the station is a station of the station of the station of the station of the station is a network station, an independent station, or a noncommercial data frame system carried by early in column 5. It stating the basis on which you calle system carried the data station, is a network station, and the station is a network station in the station is a netwo	NEW KNOXV	WNER OF CABLE SY		SYSTEM ID# 40750	Name		
Memory: In General:							
on which your cable system carried the station Colum 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter 'N' (for network), 'N-M' (for network multicast), 'T' (for independent for independent multicast), 'E' (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Colum 4: If the station is outside the local service area, (i.e. 'disarif'), enter 'No'. If not, enter 'No'. For an ex Deplaration of local service area, see page (v) of the general instructions located in the paper SA3 form Colum 5: If you have entered 'Yes' in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering 'LAC' if your cable syster carried the distant station during the accounting period. Indicate by entering 'LAC' if your cable syster carried the distant multicast stream that in or subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system carried the distant multicast stream that in on subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system carried the distant stations. For US is stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community to which the station is identified Number STATION Viet: If you are utilized multiple channel line-up. WDTN 50 N NO DAYTON, OH WHIO 41 N NO DAYTON, OH WHIO 41 N NO DAYTON, OH WKEF-DT3 18.3 I-M NO DAYTON, OH WBGU-DT2 2, Z, E-M NO BOWLI	 n 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 ECC 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 specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir 						
1. CALL SIGN2. B'CAST CHANNEL NUMBER3. TYPE OF STATION4. DISTANT? (Yes or No)5. BASIS OF CARRIAGE (If Distant)6. LOCATION OF STATIONWDTN50NNODAYTON, OHWHIO41NNODAYTON, OHWHIO.DT241.2I-MNODAYTON, OHWKEF18NNODAYTON, OHWKEF-DT218.2N-MNODAYTON, OHWKEF-DT318.3I-MNODAYTON, OHWBGU27ENODAYTON, OHWBGU-DT227.2E-MNOBOWLING GREEN, OHWBGU-DT327.3E-MNOLIMA, OHWLIO8NNOLIMA, OHWHIO.DT28.2N-MNOBOWLING GREEN, OHWBGU-DT327.3E-MNOLIMA, OHWHIO38NNOLIMA, OHWARS-LD38NNOLIMA, OH	Column 3: Indica educational station, (for independent mu For the meaning of Column 4: If the planation of local se Column 5: If you cable system carried carried the distant s For the retransm	ate in each case is by entering the le ulticast), "E" (for n these terms, see station is outside ervice area, see p I have entered "Y d the distant stati tation on a part-ti ission of a distan	whether the s etter "N" (for r ioncommercia page (v) of the age (v) of the age (v) of the ces" in column on during the me basis bec t multicast str	network), "N-M" al educational), ne general instru- rvice area, (i.e. general instruct n 4, you must co accounting per cause of lack of ream that is not	(for network mul- or "E-M" (for non- uctions located in "distant"), enter " ctions located in to omplete column 5 riod. Indicate by e activated channe subject to a roya	ticast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form Yes". If not, enter "No". For an ex he paper SA3 form 5, stating the basis on which you entering "LAC" if your cable syster el capacity Ity payment because it is the subjec	
SIGNCHANNEL NUMBEROF STATION(Yes or No)CARRIAGE (If Distant)WDTN50NNODAYTON, OHWHIO41NNODAYTON, OHWHIO-DT241.2I-MNODAYTON, OHWKEF18NNODAYTON, OHWKEF-DT218.2N-MNODAYTON, OHWKEF-DT318.3I-MNODAYTON, OHWKEF-DT316ENODAYTON, OHWBGU27ENODAYTON, OHWBGU-DT227.2E-MNOBOWLING GREEN, OHWBGU-DT327.3E-MNOLIMA, OHWLIO8NNOLIMA, OHWLIO-DT28.2N-MNOLIMA, OHWAMS-LD38NNOLIMA, OH	the cable system an tion "E" (exempt). Fo explanation of these Column 6: Give FCC. For Mexican c	ad a primary trans or simulcasts, als three categories the location of ea or Canadian statio	o enter "E". I s, see page (\ ach station. F ons, if any, gi	f you carried the /) of the genera or U.S. stations ve the name of	e channel on any l instructions loca , list the commun the community w	ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identifec	
WHIO41NNODAYTON, OHWHIO-DT241.2I-MNODAYTON, OHWKEF18NNODAYTON, OHWKEF-DT218.2N-MNODAYTON, OHWKEF-DT318.3I-MNODAYTON, OHWFTD16ENODAYTON, OHWBGU27ENOBOWLING GREEN, OHWBGU-DT227.2E-MNOBOWLING GREEN, OHWTLW44INOLIMA, OHWLIO8NNOLIMA, OHWLIO-DT28.2N-MNOLIMA, OHWAMS-LD38NNOMINSTER/NEW BREMEN, OH	the cable system an tion "E" (exempt). Fo explanation of these Column 6: Give FCC. For Mexican c	ad a primary trans or simulcasts, als three categories the location of ea or Canadian statio	o enter "E". It s, see page (v ach station. F ons, if any, gi nnel line-ups	f you carried the /) of the genera or U.S. stations ve the name of , use a separate	e channel on any l instructions loca , list the commun the community w e space G for eac	ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identifec	
WHIO-DT241.2I-MNODAYTON, OHWKEF18NNODAYTON, OHWKEF-DT218.2N-MNODAYTON, OHWKEF-DT318.3I-MNODAYTON, OHWKEF-DT316ENODAYTON, OHWBGU27ENOBOWLING GREEN, OHWBGU-DT227.2E-MNOBOWLING GREEN, OHWBGU-DT327.3E-MNOBOWLING GREEN, OHWLIO8NNOLIMA, OHWLIO-DT28.2N-MNOLIMA, OHWPNM-LD27NNOLIMA, OHWAMS-LD38NNOMINSTER/NEW BREMEN, OH	the cable system an tion "E" (exempt). Fo explanation of these Column 6: Give FCC. For Mexican o Note: If you are utili	ad a primary trans or simulcasts, als the three categories the location of ea or Canadian static zing multiple cha 2. B'CAST CHANNEL	o enter "E". I: s, see page (\ ach station. F ons, if any, gi nnel line-ups CHANN 3. TYPE OF	f you carried the) of the genera or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No)	e channel on any l instructions loca , list the community w e space G for eac AB 5. BASIS OF CARRIAGE	ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identifec ch channel line-up.	
WKEF18NNODAYTON, OHWKEF-DT218.2N-MNODAYTON, OHWKEF-DT318.3I-MNODAYTON, OHWPTD16ENODAYTON, OHWBGU27ENOBOWLING GREEN, OHWBGU-DT227.2E-MNOBOWLING GREEN, OHWBGU-DT327.3E-MNOBOWLING GREEN, OHWLIO8NNOLIMA, OHWLIO-DT28.2N-MNOLIMA, OHWPNM-LD27NNOLIMA, OHWAMS-LD38NNOMINSTER/NEW BREMEN, OH	the cable system an tion "E" (exempt). Fo explanation of these Column 6: Give FCC. For Mexican o Note: If you are utili 1. CALL SIGN	ad a primary trans or simulcasts, als three categories the location of ea or Canadian static zing multiple cha 2. B'CAST CHANNEL NUMBER	o enter "E". It s, see page (\ ach station. F ons, if any, gi nnel line-ups CHANN 3. TYPE OF STATION	f you carried the) of the genera or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No)	e channel on any l instructions loca , list the community w e space G for eac AB 5. BASIS OF CARRIAGE	Arry transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identifec ch channel line-up.	
WKEF-DT218.2N-MNODAYTON, OHWKEF-DT318.3I-MNODAYTON, OHWPTD16ENODAYTON, OHWBGU27ENOBOWLING GREEN, OHWBGU-DT227.2E-MNOBOWLING GREEN, OHWBGU-DT327.3E-MNOBOWLING GREEN, OHWTLW44INOLIMA, OHWLIO8NNOLIMA, OHWLIO-DT28.2N-MNOLIMA, OHWPNM-LD27NNOLIMA, OHWAMS-LD38NNOMINSTER/NEW BREMEN, OH	the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN	ad a primary trans or simulcasts, als three categories the location of ea or Canadian static zing multiple cha 2. B'CAST CHANNEL NUMBER 50	o enter "E". I s, see page (v ach station. F ons, if any, gi nnel line-ups CHANN 3. TYPE OF STATION N	f you carried the) of the genera or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO	e channel on any l instructions loca , list the community w e space G for eac AB 5. BASIS OF CARRIAGE	Aary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identifec th channel line-up. 6. LOCATION OF STATION DAYTON, OH	
WKEF-DT318.3I-MNODAYTON, OHWPTD16ENODAYTON, OHWBGU27ENOBOWLING GREEN, OHWBGU-DT227.2E-MNOBOWLING GREEN, OHWBGU-DT327.3E-MNOBOWLING GREEN, OHWTLW44INOLIMA, OHWLIO8NNOLIMA, OHWLIO-DT28.2N-MNOLIMA, OHWPNM-LD27NNOLIMA, OHWAMS-LD38NNOMINSTER/NEW BREMEN, OH	the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WDTN WHIO	ad a primary trans or simulcasts, als the location of ea or Canadian static zing multiple cha 2. B'CAST CHANNEL NUMBER 50 41	o enter "E". It s, see page (\ ach station. F ons, if any, gi nnel line-ups CHANN 3. TYPE OF STATION N N	f you carried the) of the genera or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO	e channel on any l instructions loca , list the community w e space G for eac AB 5. BASIS OF CARRIAGE	Aary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identifec ch channel line-up. 6. LOCATION OF STATION 6. LOCATION, OH DAYTON, OH	
WPTD16ENODAYTON, OHWBGU27ENOBOWLING GREEN, OHWBGU-DT227.2E-MNOBOWLING GREEN, OHWBGU-DT327.3E-MNOBOWLING GREEN, OHWTLW44INOLIMA, OHWLIO8NNOLIMA, OHWLIO-DT28.2N-MNOLIMA, OHWPNM-LD27NNOLIMA, OHWAMS-LD38NNOMINSTER/NEW BREMEN, OH	the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WDTN WHIO WHIO-DT2	ad a primary transfor simulcasts, also three categories the location of ear or Canadian static zing multiple cha	o enter "E". It s, see page (v ach station. F ons, if any, gir nnel line-ups CHANN 3. TYPE OF STATION N I-M	f you carried the) of the genera or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO	e channel on any l instructions loca , list the community w e space G for eac AB 5. BASIS OF CARRIAGE	Aary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identifec th channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH	
WPTD16ENODAYTON, OHWBGU27ENOBOWLING GREEN, OHWBGU-DT227.2E-MNOBOWLING GREEN, OHWBGU-DT327.3E-MNOBOWLING GREEN, OHWTLW44INOLIMA, OHWLIO8NNOLIMA, OHWLIO-DT28.2N-MNOLIMA, OHWPNM-LD27NNOLIMA, OHWAMS-LD38NNOMINSTER/NEW BREMEN, OH	the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WDTN WHIO WHIO WHIO WHIO WHIO WHIO WHIO WHIO	ad a primary transfor simulcasts, als e three categories the location of ea or Canadian static zing multiple cha 2. B'CAST CHANNEL NUMBER 50 41 41.2 18	o enter "E". It s, see page (v ach station. F ons, if any, gi nnel line-ups CHANN 3. TYPE OF STATION N N I-M N	f you carried the) of the genera or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO	e channel on any l instructions loca , list the community w e space G for eac AB 5. BASIS OF CARRIAGE	Aary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identifec ch channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH DAYTON, OH	
WBGU27ENOBOWLING GREEN, OHWBGU-DT227.2E-MNOBOWLING GREEN, OHWBGU-DT327.3E-MNOBOWLING GREEN, OHWTLW44INOLIMA, OHWLIO8NNOLIMA, OHWLIO-DT28.2N-MNOLIMA, OHWPNM-LD27NNOLIMA, OHWAMS-LD38NNOMINSTER/NEW BREMEN, OH	the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF WKEF-DT2	d a primary trans or simulcasts, als the location of ea or Canadian static zing multiple cha 2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2	o enter "E". It s, see page (v ach station. F ons, if any, gir nnel line-ups CHANN 3. TYPE OF STATION N I-M N N-M	f you carried the) of the genera or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO	e channel on any l instructions loca , list the community w e space G for eac AB 5. BASIS OF CARRIAGE	Aary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identifec th channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH	
WBGU-DT227.2E-MNOBOWLING GREEN, OHWBGU-DT327.3E-MNOBOWLING GREEN, OHWTLW44INOLIMA, OHWLIO8NNOLIMA, OHWLIO-DT28.2N-MNOLIMA, OHWPNM-LD27NNOLIMA, OHWAMS-LD38NNOMINSTER/NEW BREMEN, OH	the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF WKEF-DT2 WKEF-DT3	d a primary trans or simulcasts, als a three categories the location of ea or Canadian static zing multiple cha 2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3	o enter "E". It s, see page (v ach station. F ons, if any, gi nnel line-ups CHANN 3. TYPE OF STATION N N I-M N-M I-M	f you carried the) of the genera or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO	e channel on any l instructions loca , list the community w e space G for eac AB 5. BASIS OF CARRIAGE	Aary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identifec th channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH	
WBGU-DT327.3E-MNOBOWLING GREEN, OHWTLW44INOLIMA, OHWLIO8NNOLIMA, OHWLIO-DT28.2N-MNOLIMA, OHWPNM-LD27NNOLIMA, OHWAMS-LD38NNOMINSTER/NEW BREMEN, OH	the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF WKEF-DT2 WKEF-DT3 WPTD	d a primary trans or simulcasts, als the location of ea or Canadian static zing multiple cha 2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 16	o enter "E". It s, see page (v ach station. F ons, if any, gir nnel line-ups CHANN 3. TYPE OF STATION N N I-M I-M E	f you carried the) of the genera or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO	e channel on any l instructions loca , list the community w e space G for eac AB 5. BASIS OF CARRIAGE	ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identifec th channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH	
WTLW44INOLIMA, OHWLIO8NNOLIMA, OHWLIO-DT28.2N-MNOLIMA, OHWPNM-LD27NNOLIMA, OHWAMS-LD38NNOMINSTER/NEW BREMEN, OH	the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF WKEF-DT3 WFTD WBGU	d a primary trans or simulcasts, als a three categories the location of ea or Canadian static zing multiple cha 2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 16 27	o enter "E". It s, see page (v ach station. F ons, if any, gir nnel line-ups CHANN 3. TYPE OF STATION N I-M I-M E E E	f you carried the) of the genera or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	e channel on any l instructions loca , list the community w e space G for eac AB 5. BASIS OF CARRIAGE	Aary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identifec th channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH	
WLIO8NNOLIMA, OHWLIO-DT28.2N-MNOLIMA, OHWPNM-LD27NNOLIMA, OHWAMS-LD38NNOMINSTER/NEW BREMEN, OH	the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WDTN WHIO-DT2 WKEF-DT2 WKEF-DT2 WKEF-DT3 WPTD WBGU WBGU-DT2	d a primary trans or simulcasts, als the location of ea or Canadian static zing multiple cha 2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 16 27 27.2	o enter "E". It s, see page (v ach station. F ons, if any, gir nnel line-ups CHANN 3. TYPE OF STATION N I-M I-M I-M E E E E-M	f you carried the of the general or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	e channel on any l instructions loca , list the community w e space G for eac AB 5. BASIS OF CARRIAGE	Aary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identifec ch channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH DAYTON, OH BOWLING GREEN, OH	
WLIO-DT28.2N-MNOLIMA, OHWPNM-LD27NNOLIMA, OHWAMS-LD38NNOMINSTER/NEW BREMEN, OH	the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF-DT2 WKEF-DT2 WKEF-DT3 WPTD WBGU-DT2 WBGU-DT2 WBGU-DT3	d a primary trans or simulcasts, als a three categories the location of ea or Canadian static zing multiple cha 2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 16 27 27.2 27.2 27.3	o enter "E". It s, see page (v ach station. F ons, if any, gir nnel line-ups CHANN 3. TYPE OF STATION N I-M I-M I-M E E E E-M	f you carried the of the general or U.S. stations we the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	e channel on any l instructions loca , list the community w e space G for eac AB 5. BASIS OF CARRIAGE	 ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identifec th channel line-up. 6. LOCATION OF STATION DAYTON, OH BAYTON, OH BOWLING GREEN, OH BOWLING GREEN, OH 	
WPNM-LD 27 N NO LIMA, OH WAMS-LD 38 N NO MINSTER/NEW BREMEN, OH	the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utili 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF-DT2 WKEF-DT3 WPTD WBGU WBGU-DT2 WBGU-DT3 WTLW	d a primary trans or simulcasts, als a three categories the location of ea or Canadian static zing multiple cha 2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 16 27 27.2 27.3 44	o enter "E". It s, see page (v ach station. F ons, if any, gi nnel line-ups CHANN 3. TYPE OF STATION N I-M I-M I-M E E E-M E-M I	f you carried the c) of the general or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	e channel on any l instructions loca , list the community w e space G for eac AB 5. BASIS OF CARRIAGE	 hary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identified the channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH BOWLING GREEN, OH BOWLING GREEN, OH LIMA, OH 	
WAMS-LD 38 N NO MINSTER/NEW BREMEN, OH	the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF-DT2 WKEF-DT2 WKEF-DT3 WPTD WBGU-DT2 WBGU-DT3 WTLW WLIO	d a primary trans or simulcasts, als a three categories the location of ea or Canadian static zing multiple cha 2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 16 27 27.2 27.2 27.3 44 8	o enter "E". It s, see page (v ach station. F ons, if any, gir nnel line-ups CHANN 3. TYPE OF STATION N N N-M I-M E E E-M E-M I N	f you carried the of the general or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	e channel on any l instructions loca , list the community w e space G for eac AB 5. BASIS OF CARRIAGE	 ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identified the channel line-up. 6. LOCATION OF STATION DAYTON, OH BOWLING GREEN, OH BOWLING GREEN, OH LIMA, OH LIMA, OH 	
	the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF-DT3 WKEF-DT3 WFTD WBGU-DT2 WBGU-DT3 WTLW WLIO WLIO-DT2	d a primary trans or simulcasts, als a three categories the location of ea or Canadian static zing multiple cha 2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 16 27 27.2 27.3 44 8 8 8.2	o enter "E". It s, see page (v ach station. F ons, if any, gir nnel line-ups CHANN 3. TYPE OF STATION N I-M I-M E E E-M E-M I N N-M	f you carried the i) of the genera or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	e channel on any l instructions loca , list the community w e space G for eac AB 5. BASIS OF CARRIAGE	 hary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identified of the channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION DAYTON, OH BAYTON, OH BOWLING GREEN, OH BOWLING GREEN, OH LIMA, OH LIMA, OH 	
	the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF-DT2 WKEF-DT2 WKEF-DT3 WPTD WBGU WBGU-DT2 WBGU-DT3 WTLW WLIO WLIO-DT2 WPNM-LD	d a primary trans or simulcasts, als a three categories the location of ea or Canadian static zing multiple cha 2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 16 27 27.2 27.2 27.3 44 8 8 8.2 27	o enter "E". It s, see page (v ach station. F ons, if any, gir nnel line-ups CHANN 3. TYPE OF STATION N N N-M I-M E E E-M E-M I N N-M N N-M	f you carried the c) of the general or U.S. stations ve the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	e channel on any l instructions loca , list the community w e space G for eac AB 5. BASIS OF CARRIAGE	 ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identifec th channel line-up. 6. LOCATION OF STATION DAYTON, OH BAYTON, OH BAYTON, OH BOWLING GREEN, OH BOWLING GREEN, OH LIMA, OH LIMA, OH LIMA, OH LIMA, OH 	
	the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WDTN WHIO WHIO-DT2 WKEF-DT3 WKEF-DT3 WFTD WBGU-DT2 WBGU-DT3 WBGU-DT3 WTLW WLIO WLIO-DT2 WPNM-LD WAMS-LD	d a primary trans or simulcasts, als a three categories the location of ea or Canadian static zing multiple cha 2. B'CAST CHANNEL NUMBER 50 41 41.2 18 18.2 18.3 16 27 27.2 27.3 44 8 8.2 27 38	o enter "E". It s, see page (v ach station. F ons, if any, gir nnel line-ups CHANN 3. TYPE OF STATION N N N-M I-M E E E-M E-M I N N-M N N-M	f you carried the c) of the general or U.S. stations we the name of , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	e channel on any l instructions loca , list the community w e space G for eac AB 5. BASIS OF CARRIAGE	 hary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identified the channel line-up. 6. LOCATION OF STATION DAYTON, OH BAYTON, OH BAYTON, OH BOWLING GREEN, OH BOWLING GREEN, OH LIMA, OH LIMA, OH LIMA, OH LIMA, OH MINSTER/NEW BREMEN, OH 	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# NEW KNOXVILLE TELEPHONE 40750										
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). 										
			0/0				0/0				
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION			

LEGAL NAME OF OWNER OF					S	YSTEM ID# 40750	Name	
SUBSTITUTE CARRIAGI	E: SPECI	AL STATEME		G				
In General: In space I, identi substitute basis during the ac explanation of the programm form.	ify every not	nnetwork televi eriod, under spe	sion program broadcast by a ecific present and former FC	a distant statio C rules, regu	lations, or authorizations.	For a further	Substitute	
 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? 								
Note: If your answer is "No log in block 2.		e rest of this pa	age blank. If your answer is	s "Yes," you	-	-	Program Log	
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love I Column 2: If the prograr Column 3: Give the call Column 4: Give the broa the case of Mexican or Car Column 5: Give the mor first. Example: for May 7 gi Column 6: State the tim to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progr ace, please of every no distant sta gulations, of tion. Do ne Lucy" or "N m was broa sign of the adcast stati addast stati addast stati addast stati addast stati addast stati es when th Example: the "R" if the and regulat	am on a separ attach additio connetwork tele tion and that y or authorizatio ot use general BA Basketball idcast live, ent station broadc ion's location (ons, if any, the v when your sy e substitute pr a program car e listed program ions in effect c	nal pages. vision program (substitute our cable system substitut ns. See page (vi) of the ge categories like "movies", o : 76ers vs. Bulls." er "Yes." Otherwise enter casting the substitute prog the community to which the e community with which the stem carried the substitute ogram was carried by you ried by a system from 6:07 m was substituted for prog luring the accounting period	program) the ted for the pre- eneral instruc- or "basketbal "No." ram. e station is lic e station is lic e program. U r cable syste 1:15 p.m. to 6 ramming that od; enter the	at, during the accounting ogramming of another s tions located in the pap I". List specific program censed by the FCC or, i lentified). Ise numerals, with the m m. List the times accura 5:28:30 p.m. should be t your system was requi letter "P" if the listed pro	g station er n in nonth ately ired		
		E PROGRAM	1		EN SUBSTITUTE	7. REASON		
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN		5. MONTH AND DAY	6. TIMES FROM — TO	FOR DELETION		
					_			
					_			

FORM SA3E. PAGE 5.

ACCOUNTING	PERIOD: 2024/1 FORM SA3E. PAGE 6.											
Name	LEGAL NAME OF C								8YSTEM ID# 40750			
J Part-Time Carriage Log	In General: Thi time carriage du hours your syste Column 1 (C column 5 of spa Column 2 (D curred during th • Give the mont "4/10." • State the start television statio "app." Example:	 State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.– 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.– 										
			DATE	ES AND HOURS	OF F	PART-TIME CAR	RIAGE					
	CALL SIGN	WHEN	I CARRIAGE OCC			CALL SIGN	WHEN	I CARRIAGE OCCL	IRRED			
	GALL SIGN	DATE	HOU FROM	JRS TO		GALL SIGN	DATE	HOUF	RS TO			
		DATE	-	-			DATE	_	10			
				_				_				
				_								
				_								
				-								
				-								
			-	_				_				
			_	_								
				-								
				-								
				-								
				_				_				
								_				
				_								
				_								
				-								
					-			<u> </u>				
				_	1							
				_	1							
			-	-				_				
			_	_				_				
				_								
				_								
				-	-							

	IL NAME OF OWNER OF CABLE SYSTEM: W KNOXVILLE TELEPHONE		SYSTEM ID# 40750	Name							
NE			40750								
Inst all a (as	DSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount y mounts (gross receipts) paid to your cable system by subscribers for the system's secon dentifed in space E) during the accounting period. For a further explanation of how to co e (vii) of the general instructions.	dary transmission ser	vice	K Gross Receipts							
	Gross receipts from subscribers for secondary transmission service(s) during the accounting period.	s	931,151.80								
IMP	ORTANT: You must complete a statement in space P concerning gross receipts.	(Amount of gross									
 Instru Con Con If you fee If you 	 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 k 3 below.	entered on line 1 of									
	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be er low.	ntered on line 2 in bloc	×k								
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoul block 4 below.	d be entered on line									
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.										
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064	\$	931,151.80								
	Enter the result here.	*	0.007.40								
	This is your minimum fee.	\$	9,907.46								
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the ispace G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period x Yes—Complete the DSE schedule.	n 4, you must check									
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$	2,100.15								
0	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	¢	0 400 45								
	here	\$	2,100.15								
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	\$	9,907.46	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		0.00	submitting additional							
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	deposits under Section 111(d)(7) should contact							
	Line 4. FILING FEE	\$	725.00	the Licensing additional fees. Division for the							
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	10,632.46	appropriate form for submitting the							
	EFT Trace # or TRANSACTION ID #			additional fees.							
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (S general instructions located in the paper SA3 form and the Excel instructions ta		ı.)								

FORM SA3E. PAGE 7.

ACCOUNTING PERIO	DD: 2024/1	FORM SA	A3E. PAGE 8.
Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SY	STEM ID#
Name	NEW KNOXVILLE TELEPHONE		40750
	CHANNELS		
84			
Μ		which the cable system carried television broadcast stations	
<u>.</u>	to its subscribers and (2) the cable system's total number of	activated channels, during the accounting period.	
Channels			
	1. Enter the total number of channels on which the cable	20	
	system carried television broadcast stations		
	2. Enter the total number of activated channels		
	on which the cable system carried television broadcast sta	150+	
	and nonbroadcast services	······································	
Ν	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMA	ATION IS NEEDED: (Identify an individual	
	we can contact about this statement of account.)		
Individual to			
Be Contacted			
for Further	Name Cara Baumeister	Telephone 240-420-3660	
Information			
	Address 1000 Willow Circle		
	(Number, street, rural route, apartment, or suite number)		
	Hagerstown, MD 21740 (City, town, state, zip)		
	(01), 10111, 01110, 2197		
	Email cbaumeister@schurz.com	Fax (optional)	
	CERTIFICATION (This statement of account must be certifed	and signed in accordance with Copyright Office regulations.)	
0			
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one	e, of the boxes.)	
	(Owner other than corporation or partnership) I am the o	wner of the cable system as identifed in line 1 of space B; or	
	(Agent of owner other than corporation or partnership)	am the duly authorized agent of the owner of the cable system as identified	
	in line 1 of space B and that the owner is not a corporati		
	(Officer or partner) I am an officer (if a corporation) or a partial in line 1 of space B.	artner (if a partnership) of the legal entity identifed as owner of the cable system	
		under penalty of law that all statements of fact contained herein	
	are true, complete, and correct to the best of my knowledge, int	formation, and belief, and are made in good faith.	
	[18 U.S.C., Section 1001(1986)]		
	/s/ Preston Meyer		
	Enter an electronic signature on the line a	bove using an "/s/" signature to certify this statement.	
		e first forward slash of the /s/ signature, place your cursor in the box and press the "F essing the "F" button will avoid enabling Excel's Lotus compatibility settings.	2"
	button, then type /s/ and your hame. Fre	ssing the P button will avoid enabling Excers Lotus compatibility settings.	
	Typed or printed name: Preston	Meyer	
		-	
	Title: General Manager		
	(Title of official position held in corr	poration or partnership)	
	Data: August 00,0004		
	Date: August 28, 2024		
·			
		pyright Offce to collect the personally identifying information (PII) requested on th	
torm in order to proc	ess your statement of account. PII is any personal information that o	can be used to identify or trace an individual, such as name, address and telepho	

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 telephol numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in t completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of lay

FORM	SA3F	PAGE9

LEGAL NAME OF OWNER OF CABLE SYSTEM: S	STEM ID# 40750	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.")-	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. 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.		Concerning Gross Receipts Exclusion
Name Name 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	-	
x	days	
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)	- e)	
* 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@copyright.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		
ID number		
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) 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, addre		ne

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 suffciency of the fling, a determination that would be made by a court of law.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerica value given by the Copyright Act to each distant television station carriec by a cable system during an accounting period. Your system's total number of DSEs determines the royalty you owe. For the full definition, see page (v) of the General Instructions in the paper SA3 form.

FORMULAS FOR COMPUTING A STATION'S DSE

There are two different formulas for computing DSEs: (1) a basic formula for all distant stations listed in space G (page 3), and (2) a special formula for those stations carried on a substitute basis and listed in space I (page 5). (Note that if a particular station is listed in both space G and space I, a DSE must be computed twice for that station: once under the basic formula and again under the special formula. However, a station's total DSE is not to exceed its full type-value. If this happens, contact the Licensing Division.)

BASIC FORMULA: FOR ALL DISTANT STATIONS LISTED IN SPACE G OF SA3E (LONG FORM)

Step 1: Determine the station's type-value. For purposes of computing DSEs, the Copyright Act gives different values to distant stations depending upon their type. If, as shown in space G of your statement of accoun (page 3), a distant station is:

Independent: its type-value is	1.00
• Network: its type-value is	0.25
• Noncommercial educational: its type-value is	0.25
Note that local stations are not counted at all in computing DSEs.	

Step 2: Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space G of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station broadcast over the air during the accounting period. The basis of carriage value for all other station slisted in space G is 1.0.

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

The Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable sys-

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

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following: 1) A station actually carried within any portion of a cable system prior

2) A station first carried after June 24, 1981, which could have beer

carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.

3) A station of the same type substituted for a carried network, noncommercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)] in effect on June 24, 1981.

4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.

5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

NOTE: If your cable system carried a station that you believe qualifies as a permitted station but does not fall into one of the above categories, please attach written documentation to the statement of account detailing the basis for its classification.

Substitution of Grandfathered Stations. Under section 76.65 of the former FCC rules, a cable system was not required to delete any statior that it was authorized to carry or was lawfully carrying prior to March 31 1972, even if the total number of distant stations carried exceeded the market quota imposed for the importation of distant stations. Carriage of these grandfathered stations is not subject to the 3.75 percent rate but is subject to the Base Rate, and where applicable, the Syndicatec Exclusivity Surcharge. The Copyright Royalty Tribunal has stated its view that, since section 76.65 of the former FCC rules would not have permitted substitution of a grandfathered station, the 3.75 percent Rate applies to a station substituted for a grandfathered station if carriage of the station exceeds the market quota imposed for the importation of distant stations.

COMPUTING THE 3.75 PERCENT RATE—PART 6 OF THE DSE SCHEDULE

- Determine which distant stations were carried by the system pursuan to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/o part-time basis only and complete the log to determine the portion of the DSE exempt from the 3.75 percent rate.
- Subtract the number of DSEs resulting from this carriage from the number of DSEs reported in part 5 of the DSE Schedule. This is the total number of DSEs subject to the 3.75 percent rate. Multiply these DSEs by gross receipts by .0375. This is the 3.75 fee.

COMPUTING THE SYNDICATED EXCLUSIVITY SURCHARGE— PART 7 OF THE DSE SCHEDULE

- Determine if any portion of the cable system is located within a top 100 major television market as defined by the FCC rules and regulations in effect on June 24, 1981. If no portion of the cable system is located ir a major television market, part 7 does not have to be completed.
- Determine which station(s) reported in block B, part 6 are commercial VHF stations and place a grade B contour, in whole, or in part, over the cable system. If none of these stations are carried, part 7 does not have to be completed.
- Determine which of those stations reported in block b, part 7 of the DSE Schedule were carried before March 31,1972. These stations are exempt from the FCC's syndicated exclusivity rules in effect on June 24 1981. If you qualify to calculate the royalty fee based upon the carriage of partially-distant stations, and you elect to do so, you must compute the surcharge in part 9 of this schedule.
- Subtract the exempt DSEs from the number of DSEs determined in block B of part 7. This is the total number of DSEs subject to the Syndicated Exclusivity Surcharge.
- Compute the Syndicated Exclusivity Surcharge based upon these DSEs and the appropriate formula for the system's market position.

DSE SCHEDULE. PAGE 11.

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE SCHEDULE

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

 If none of the stations were partially distant, calculate your base rate fee according to the following rates—for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable. First DSE
 1.064% of gross receipts

Each of the second, third, and fourth DSEs0.701% of gross receiptsThe fifth and each additional DSE0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULEIf any of the stations were partially distant:

1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.

 Identify the communities/areas represented by each subscriber group.
 For each subscriber group, calculate the total number of DSEs of that group's complement of stations.

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

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

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

 Calculate a separate base rate fee for each subscriber group, using (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.

 $\ensuremath{6}\xspace.$ Add together the base rate fees for each subscriber group to determine the system's total base rate fee.

7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

Rounding Off DSEs. In computing DSEs on the DSE schedule, you may round off to no less than the third decimal point. If you round off a DSE in any case, you must round off DSEs throughout the schedule as follows: • When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains

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

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

EXAMPLE:

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

	Distant Stations Carried		Identification	of Subscriber (Groups		
In most cases under current FCC	STATION	DSE	CITY	OUTSIDE LO	CAL	GRO	SS RECEIPTS
rules, all of Fairvale would be within	A (independent)	1.0		SERVICE AR	EA OF	FROM S	UBSCRIBERS
the local service area of both stations	B (independent)	1.0	Santa Rosa	Stations A, B,	C, D ,E		\$310,000.00
A and C and all of Rapid City and Bo-	C (part-time)	0.083	Rapid City	Stations A and	d C		100,000.00
dega Bay would be within the local	D (part-time)	0.139	Bodega Bay	Stations A and	d C		70,000.00
service areas of stations B, D, and E.	E (network)	<u>0.25</u>	Fairvale	Stations B, D,	and E		120,000.00
	TOTAL DSEs	2.472		TOTAL GRO	SS RECEIPTS		\$600,000.00
, 、	Minimum Fee Total Gross	Receipts		\$600,000.00			
Santa Rosa Stations A and C				x .01064			
35 mile zone				\$6,384.00			
	First Subscriber Group		Second Subso	riber Group		Third Subscriber Group	
	(Santa Rosa)		(Rapid City and	l Bodega Bay)		(Fairvale)	
Fairvale		#040.000.00			\$4 7 0 000 00		# 400.000.00
	Gross receipts	. ,	Gross receipts		\$170,000.00	Gross receipts	\$120,000.00
Rapid City	DSEs		DSEs		1.083	DSEs	1.389
	Base rate fee	\$6,497.20	Base rate fee		\$1,907.71	Base rate fee	\$1,604.03
Bodega	\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .010	64 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
Boulega Bay	\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .007	01 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
	Base rate fee	\$6,497.20	Base rate fee	_	\$1,907.71	Base rate fee	\$1,604.03
Stations B, D,	Total Daga Data Face #C		74 · ¢4 co4 oo -	¢40.000.04			
and E	Total Base Rate Fee: \$6,4						
35 mile zone	In this example, the cable	system would ent	er \$10,008.94 in	space L, block	3, line 1 (page	7)	
~ _ ~							

DSE SCHEDULE. PAGE 11. (CONTINUED)

	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			S	STEM ID#
1	NEW KNOXVILLE TELE					40750
			NG:			101 00
	 SUM OF DSEs OF CATEGOR Add the DSEs of each station 		N5:			
	Enter the sum here and in line		s schedule.		0.75	
		•				
2	Instructions: In the column headed "Call S	Sign": list the or	all signs of all distant station	e identified by	the latter "O" in column 5	
-	of space G (page 3).		an signs of an distant station	is identified by		
Computation	In the column headed "DSE'			E as "1.0"; fo	r each network or noncom-	
of DSEs for	mercial educational station, give	ve the DSE as ".				
Category "O"			CATEGORY "O" STATIO			
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	WBGU	0.250	WBGU-DT2	0.250	WBGU-DT3	0.250
Add rows as						
necessary.						
Remember to copy						
all formula into new						
rows.						
	I			L		

Name		OWNER OF CABLE SYSTEM:					S	SYSTEM ID#
		VILLE TELEPHONE					<u></u>	40750
3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column figure should Column be carried ou Column give the type Column	: CAPACITY ist the call sign of all dist 2: For each station, give correspond with the info 3: For each station, give 4: Divide the figure in co it at least to the third dec 5: For each independent -value as ".25." 6: Multiply the figure in c point. This is the station	the number of prmation given the total num lumn 2 by the imal point. Th t station, give column 4 by th	of hours your cable sys in in space J. Calculate aber of hours that the s e figure in column 3, ar his is the "basis of carri the "type-value" as "1. he figure in column 5, a	tem carried the s only one DSE fo tation broadcast d give the result age value" for the 0." For each netw	tation during the accour r each station over the air during the a in decimals in column 4 e station. vork or noncommercial e t in column 6. Round to	ccounting period. This figure must educational station, no less than the	
Capacity		C	CATEGOR	Y LAC STATIONS	COMPUTAT	ION OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOI CARRIE SYSTE	URS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OI CARRIAC VALUE			ŝE
			÷		=	x	=	
			÷ ÷		=	x x	=	
			÷		=	x	=	
			÷		=	×	=	
			÷ ÷		=	X X	=	
			÷		=	x	=	
4 Computation of DSEs for Substitute- Basis Stations	Was carrie tions in eff Broadcast space I). Column 2: at your option. Column 3: Column 4:	ve the call sign of each s d by your system in subs ect on October 19, 1976 one or more live, nonnetv For each station give the This figure should corre Enter the number of day Divide the figure in colu This is the station's DSE	stitution for a (as shown by vork programs e number of l espond with th ys in the cale mn 2 by the f	program that your syst y the letter "P" in colum s during that optional ca ive, nonnetwork progra- he information in space ndar year: 365, except igure in column 3, and	em was permitted in 7 of space I); a arriage (as shown ams carried in sul b I. in a leap year. give the result in	d to delete under FCC ruind by the word "Yes" in colur ostitution for programs th column 4. Round to no	iles and regular nn 2 of nat were deleted less than the thirc	form)
		SU	IBSTITUTE	-BASIS STATION	NS: COMPUT	ATION OF DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUME OF DA IN YEA	YS	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
			÷	=			÷ ÷	=
			<u>.</u>	_			<u>.</u>	-
			<u>.</u>	=			<u>.</u>	-
			÷	=			* +	=
	Add the DSEs	s OF SUBSTITUTE-BAS of each station. um here and in line 3 of				0.00)	
5		ER OF DSEs: Give the ar Es applicable to your syste		ne boxes in parts 2, 3, a	nd 4 of this sched	ule and add them to prov	de the total	
Total Number	1. Number of	of DSEs from part 2 ●				<u> </u>	0.75	
of DSEs		of DSEs from part 3 ●				•	0.00	
	3. Number of	of DSEs from part 4 ●				►	0.00	
	TOTAL NUMB	ER OF DSEs				ı	•	0.75

EGAL NAME OF C	OWNER OF CABLE	SYSTEM:					S	YSTEM ID#	
NEW KNOXVI	LLE TELEPHO	NE						40750	Name
n block A: If your answer if schedule.	ck A must be com "Yes," leave the re "No," complete blo	emainder of		7 of the DSE sche	edule blank ar	nd complete pa	rt 8, (page 16) of	the	6
5	· •			ELEVISION M	ARKETS				Computation
ffect on June 24	m located wholly o , 1981? Iplete part 8 of the Dete blocks B and	schedule—[-					gulations in	3.75 Fee
		BLO	CK B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulations of the second se	ons prior to Jur dule. (Note: Th	part 2, 3, and 4 of the 25, 1981. For fu the letter M below re Act of 2010.)	irther explana	ation of permitte	ed stations, see th	he	
Column 2: BASIS OF PERMITTED CARRIAGE	 (Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfathered instructions for E Carried pursua *F A station pre 	les and regued pursuant on as define- al educations d station (76. r DSE scheo ant to individ viously carried IHF station w	lations cited be to the FCC main al station [76.56 65) (see parago lule). Lual waiver of Fr ed on a part-tim vithin grade-B c	6.59(d)(1), 76.61(d) 9(c), 76.61(d), 76.6 raph regarding sub CC rules (76.7) ne or substitute bas contour, [76.59(d)(s	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), 7) referring to 7(g to 76.61(d)] randfathered st ne 25, 1981	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 d atter "F" in column 2. PERMITTED			orksheet on page	T	
SIGN	BASIS	0. DOL	SIGN	BASIS	0. 002	SIGN	BASIS	0. 002	
WBGU	С	0.25	WBGU-DT	С	0.25	WBGU-DT	C	0.25	
								0.75	
		E	BLOCK C: CO	MPUTATION OF	F 3.75 FEE				
ine 1: Enter the	e total number of	DSEs from	part 5 of this	schedule					
ine 2: Enter the	e sum of permitte	d DSEs fro	m block B abo	ove					
	line 2 from line 1 leave lines 4–7 b					i rate.	<u>.</u>		
ine 4: Enter gro	oss receipts from	space K (p	age 7)				x 0.0	375	Do any of th DSEs represe partially
ine 5: Multiply I	ine 4 by 0.0375 a	and enter s	um here				x		permited/ partially nonpermitte
ine 6: Enter tot	al number of DSI	Es from line	93				<u> </u>		carriage? If yes, see pa 9 instruction
ine 7: Multiply I	ine 6 by line 5 ar	nd enter he	re and on line	2, block 3, space	e L (page 7))		0.00	

DSE SCHEDULE. PAGE 13.

	LEGAL NAME OF OWN	IER OF CABLE SYSTE	M:			SYSTEM ID#	
Name	NEW KNOXVIL	LE TELEPHONE				40750	
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried prior Column 1: List the of Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the FC A—Part-time spy 76.59(B—Late-night pr 76.61(S—Substitute ca genera Column 5: Indicate Column 6: Compare in block	or to June 25, 1981, un call sign for each dista the DSE for this static the accounting period the basis of carriage of CC rules and regulatic ecialty programming: (d)(1),76.61(e)(1), or ogramming: Carriage (e)(3)). arriage under certain f al instructions in the p the station's DSE for e the DSE figures liste B, column 3 of part 6 information you give in	nder former FCC rules go nt station identifed by the on for a single accounting and year in which the ca on which the station was of ons 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. the current accounting per d in columns 2 and 5 and for this station.	identifed by the letter "F" in verning part-time and subsi- letter "F" in column 2 of pa- period, occurring between rriage and DSE occurred (e- carried by listing one of the those in effect on June 24, asis, of specialty programm)(1)). s 76.59(d)(3), 76.61(e)(3), authorizations. For further riod as computed in parts 2 l list the smaller of the two f	titute carriage.) art 6 of the DSE schedule January 1, 1978 and Jun e.g., 1981/1). following letters: 1981.) ning under FCC rules, se or 76.63 (referring to explanation, see page (2, 3, and 4 of this schedu figures here. This figure	e. ne 30, 1981. ections (i) of the le. should be entered	
	statement of account on fle in the Licensing Division.						
		PERMITTED DSI	FOR STATIONS CARR	IED ON A PART-TIME AN	D SUBSTITUTE BASIS		
	1. CALL	2. PRIOR	3. ACCOUNTING	4. BASIS OF	5. PRESENT	6. PERMITTED	
	SIGN	DSE	PERIOD	CARRIAGE	DSE	DSE	
7 Computation of the	-	"Yes," complete block		e part 8 of the DSE schedul	e.	1	
Syndicated			BLOCK A: MAJOF	R TELEVISION MARKE	ET		
Exclusivity Surcharge		cable system within a to blocks B and C .	op 100 major television ma	rket as defned by section 76 X No—Proceed to		une 24, 1981?	
	BLOCK B: C	arriage of VHF/Grade	B Contour Stations	BLOCK	C: Computation of Exer	mpt DSEs	
	Is any station listed in commercial VHF stati or in part, over the cal	block B of part 6 the on that places a grade	primary stream of a e B contour, in whole	Was any station listed nity served by the cabl to former FCC rule 76.	in block B of part 7 carri e system prior to March	ed in any commu- 31, 1972? (refer	
	X No—Enter zero a	ina proceed to part 8.		X No—Enter zero ar			
	CALL SIGN	DSE CA	LL SIGN DSE	CALL SIGN	DSE CALL S	IGN DSE	
		-					
		ТО	AL DSEs 0.00	ון ני	TOTAL D	OSEs 0.00	

DSE SCHEDULE. PAGE 14.

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: S NEW KNOXVILLE TELEPHONE	6YSTEM ID# 40750	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section	Enter the amount of gross receipts from space K (page 7)	931,151.80	7
1 Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is any	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below. If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the 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)		
	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		
Section 4a	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 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		

	-	DSE SCH	EDULE. PAGE 16.
Name		ME OF OWNER OF CABLE SYSTEM: NEW KNOXVILLE TELEPHONE	SYSTEM ID# 40750
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	You m 6 was • In blo • If you • If you blank What i were lo	ctions: nust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of checked "Yes," use the total number of DSEs from part 5. bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B b	part elow
	• Did y	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS vour cable system retransmit the signals of any partially distant television stations during the accounting period?	
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7)	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1)	

0.00

DSE SCHEDULE. PAGE 17.

LEGAL NAME OF OWNER OF CABLE SYSTEM: NEW KNOXVILLE TELEPHONE	SYSTEM ID# 40750	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		8
 A. Enter 0.01064 of gross receipts (the amount in section 1) 		0
 B. Enter 0.00701 of gross receipts (the amount in section 1) 		Computation of
C. Multiply line B by 3.000 and enter here \$		Base Rate Fee
D. Enter 0.00330 of gross receipts (the amount in section 1) ▶ \$		
E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here▶		
F. Multiply line D by line E and enter here S		
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	
	0.00	
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broas shall instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multipure is Space C		9
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	e fee, to exclude	-
receipts from subscribers located within the station's local service area, from your system's total gross receipts. To tal this exclusion, you must:		Computation of Base Rate Fee
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are dista	ant to the same	and Syndicated
station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Detern DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee		Exclusivity
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		Surcharge for
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exemp must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A However, if your cable system is wholly located outside all major television markets, complete block A only.		Partially Distant Stations, and
How to Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
Step 1: For each community served, determine the local service area of each wholly distant and each partially distant carried to that community.	station you	Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers we outside the station's local service area. A subscriber located outside the local service area of a station is distant to the the same token, the station is distant to the subscriber.)		
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are dist subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. No system will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your subscriber groups.	system's	
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 is subscribers in the group. 	to all of the	
• If:		
1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave and 4 of this schedule; or,	e it in parts 2, 3,	
 any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it part 6 of this schedule. 	in block B,	
• Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
 Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the gene in the paper SA3 form. 	eral instructions	
• Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not your actual calculations on the form.	o (that is, the total	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SY	STEM I
Maille	NEW KNOXVILLE TELEPHONE	407
	Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals	
	Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and	
	partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these	
	subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant	
	signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by	
	.0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported	
	for each part 9 used in steps 1 and 2 must equal the amount reported in space K.	
	Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant	
	signals from step 1 that is subject to this surcharge.	
	Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams	
	Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from	
	a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate	
	and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement	
	entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary	
	transmitter or an association representing the primary transmitter.	

LEGAL NAME OF OWNE						S	40750 VSTEM	Name
BI	OCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	CH SUBSCRI	BER GROUP		
FIRST SUBSCRIBER GROUP				SECOND	SUBSCRIBER GRO	UP	•	
COMMUNITY/ AREA Mercer and Shelby Counties			COMMUNITY/ AREA Shelby County				9 Computatio	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-		WBGU	0.25			Base Rate F
				WBGU-DT2 WBGU-DT3	0.25 0.25			and Syndicated
								Exclusivity Surcharge
								for
						-		Partially Distant
		-				-		Stations
Total DSEs			0.00	Total DSEs0.75				
Gross Receipts First Gr	oup	<u>\$ 180</u>	,067.91	Gross Receipts Sec	Gross Receipts Second Group \$ 263,176.18		263,176.18	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	2,100.15	
THIRD SUBSCRIBER GROUP				FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA	Auglaiz	ze County		COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
		-				-		
						-		
						-		
		_						
Total DSEs 0.00		Total DSEs 0.00		0.00				
Gross Receipts Third Group \$ 487,907.		,907.71	Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group \$		0.00	Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	s above.	\$	2,100.15	

FORM SA3E. PAGE 19.

LEGAL NAME OF OWNE						S	40750 WSTEM	Name
B		COMPUTATION OF SUBSCRIBER GRO		ATE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	
COMMUNITY/ AREA Mercer and Shelby Counties			COMMUNITY/ AREA				9 Computatio	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and Syndicate
		-						Exclusivit
						-		Surcharg
								for Partially
		-						Distant
		-						Stations
		-				-		
Total DSEs 0.00				Total DSEs			0.00	
Gross Receipts First G	roup	\$ 180	,067.91	Gross Receipts Seco	nd Group	\$ 2	263,176.18	
3ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Auglaiz	ze County		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		\$ 487,907.71		Gross Receipts Fourth Group		\$ 0.00		
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	¢	0.00	
mer nere and in pioch	s, ine 1, 9	space L (page /)				φ	0.00	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#					
Name		40750					
	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 musi 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:						
9							
Computation of	☐ First 50 major television market ☐ Second 50 major television market						
Base Rate Fee	INSTRUCTIONS:						
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 figures applicable to the particular group. You do not need to show your actual calculations on this form.						
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP					
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs					
1	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs					
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 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 computation	subject to the surcharge					
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY					
	SURCHARGE First Group	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 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the					
	total number of DSEs for	total number of DSEs for					
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge					
	computation	computation					
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY					
	SURCHARGE Third Group	SURCHARGE 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)						