

**THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 2011 SA3**

If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

**Long Form**

**STATEMENT OF ACCOUNT**  
for Secondary Transmissions by  
Cable Systems (Long Form)

General instructions are at the  
end of this form [pages i-viii].

FOR COPYRIGHT OFFICE USE ONLY	
DATE RECEIVED	AMOUNT
2/27/2025	\$
	ALLOCATION NUMBER

Return to:

Library of Congress  
Copyright Office

Licensing Division  
101 Independence Ave. SE  
Washington, DC 20557-6400  
(202) 707-8150

For courier deliveries, see  
page ii of the general  
instructions

<b>A</b> Accounting Period	<b>ACCOUNTING PERIOD COVERED BY THIS STATEMENT:</b> <b>JULY 1 - DECEMBER 31, 2024</b>																						
<b>B</b> Owner	<p><b>Instructions:</b> Your file has been established under the information given below. If there are any changes, draw a line through the incorrect information and print or type the correct information beside it.</p> <p>Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.</p> <p>List any other name or names under which the owner conducts the business of the cable system.</p> <p><i>If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.</i></p> <p><input type="checkbox"/> Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. <span style="float: right;"><b>010659</b></span></p> <p><b>LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM</b> <b>TIME WARNER CABLE MIDWEST LLC</b></p> <div style="text-align: center;">   <b>01065920242</b> </div> <p style="text-align: right;"><b>*01065920242*</b> <b>010659 2024/2</b></p> <p><b>12405 POWERSCOURT DRIVE</b> <b>ST. LOUIS, MO 63131</b></p>																						
<b>C</b> System	<p><b>INSTRUCTIONS:</b> In line 1, give any business or trade names used to identify the business and operation of the system unless these 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.</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 20px; text-align: center;">1</td> <td><b>IDENTIFICATION OF CABLE SYSTEM:</b> <b>Charter Communications</b></td> </tr> <tr> <td style="text-align: center;">2</td> <td><b>MAILING ADDRESS OF CABLE SYSTEM:</b> <b>12405 Powerscourt Drive</b> <small>(Number, street, rural route, apartment, or suite number)</small> <b>St. Louis, MO 63131-3674</b> <small>(City, town, state, zip code)</small></td> </tr> </table>			1	<b>IDENTIFICATION OF CABLE SYSTEM:</b> <b>Charter Communications</b>	2	<b>MAILING ADDRESS OF CABLE SYSTEM:</b> <b>12405 Powerscourt Drive</b> <small>(Number, street, rural route, apartment, or suite number)</small> <b>St. Louis, MO 63131-3674</b> <small>(City, town, state, zip code)</small>																
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<b>D</b> Area Served  First Community  Sample	<p><b>Instructions:</b> For complete space D instructions, see page 1b. Identify only the first community served below and relist on page 1b with all communities.</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 60%;">CITY OR TOWN</td> <td>STATE</td> </tr> <tr> <td><b>Columbus City (Franklin Co)</b></td> <td><b>OH</b></td> </tr> </table> <p>Below is a sample for reporting communities if you report multiple channel line-ups in Space G.</p> <table border="1" style="width: 100%;"> <thead> <tr> <th>CITY OR TOWN (SAMPLE)</th> <th>STATE</th> <th>CH LINE UP</th> <th>SUB GRP#</th> </tr> </thead> <tbody> <tr> <td><b>Alda</b></td> <td><b>MD</b></td> <td><b>A</b></td> <td><b>1</b></td> </tr> <tr> <td><b>Alliance</b></td> <td><b>MD</b></td> <td><b>B</b></td> <td><b>2</b></td> </tr> <tr> <td><b>Gering</b></td> <td><b>MD</b></td> <td><b>B</b></td> <td><b>3</b></td> </tr> </tbody> </table>			CITY OR TOWN	STATE	<b>Columbus City (Franklin Co)</b>	<b>OH</b>	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#	<b>Alda</b>	<b>MD</b>	<b>A</b>	<b>1</b>	<b>Alliance</b>	<b>MD</b>	<b>B</b>	<b>2</b>	<b>Gering</b>	<b>MD</b>	<b>B</b>	<b>3</b>
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**Privacy Act Notice:** Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effects of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>		SYSTEM ID# <b>010659</b>	Name
<p><b>Instructions:</b> List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.</p> <p><b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.</p> <p>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).</p> <p>When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below.</p>			<b>D Area Served</b>
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#
Columbus City (Franklin Co)	OH	AA	1
Adams Township (Coshocton Co)	OH	AC	4
Adams Township (Guernsey Co)	OH	AI	28
Adams Township (Washington Co)	OH	AG	22
Adamsville Village (Muskingum Co)	OH	AQ	65
Adelphi Village (Ross Co)	OH	AR	45
Albany Village (Athens Co)	OH	AL	33
Alexander Township (Athens Co)	OH	AS	50
Alexander Township (Athens Co)	OH	AF	18
Alexandria Village (Licking Co)	OH	AA	1
Amanda Township (Fairfield Co)	OH	AT	51
Amanda Township (Fairfield Co)	OH	AB	2
Ashley Village (Delaware Co)	OH	AD	10
Ashville Village (Pickaway Co)	OH	AB	3
Athens Township (Athens Co)	OH	AF	18
Athens City (Athens Co)	OH	AF	18
Aurelis Township (Washington Co)	OH	AG	22
Bainbridge Village (Ross Co)	OH	AK	30
Baltimore Village (Fairfield Co)	OH	AB	2
Bearfield Township (Perry Co)	OH	AN	38
Beaver Township (Pike Co)	OH	AL	32
Beaver Township (Noble Co)	OH	AH	68
Beaver Village (Pike Co)	OH	AL	32
Bedford Township (Coshocton Co)	OH	AC	4
Belle Center Village (Logan Co)	OH	AD	9
Belle Valley Village (Noble Co)	OH	AH	27
Bellefontaine City (Logan Co)	OH	AU	53
Belpre Township (Washington Co)	OH	AG	23
Bennington Township (Licking Co)	OH	AC	5
Benton Township (Pike Co)	OH	AE	16
Berkshire Township (Delaware Co)	OH	AA	1
Berkshire Township (Delaware Co)	OH	AT	51
Berlin Township (Delaware Co)	OH	AA	1
Berlin Township (Delaware Co)	OH	AT	51
Berlin Township (Delaware Co)	OH	AW	57
Berne Township (Fairfield Co)	OH	AB	2
Bethlehem Township (Coshocton Co)	OH	AC	4
Beverly Village (Washington Co)	OH	AG	22
Bexley City (Franklin Co)	OH	AA	1
Blendon Township (Franklin Co)	OH	AT	51
Bloom Township (Fairfield Co)	OH	AB	3
Bloom Township (Fairfield Co)	OH	AT	51
Bloom Township (Morgan Co)	OH	AG	26

First  
Community



LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>		SYSTEM ID# <b>010659</b>		Name
<p><b>Instructions:</b> List each separate community served by the cable system. A “community” is the same as a “community unit” as defined in FCC rules: “a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas.” 47 C.F.R. §76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the “first community.” Please use it as the first community on all future filings.</p> <p><b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.</p> <p>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).</p> <p>When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below.</p>				<b>D Area Served</b>
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	First Community
Circleville City (Pickaway Co)	OH	AB	2	
Circleville Township (Pickaway Co)	OH	AB	2	
Claibourne Township (Union Co)	OH	AA	1	
Claridon Township (Marion Co)	OH	AX	58	
Clarksburg Village (Ross Co)	OH	AR	47	
Clay Township (Auglaize Co)	OH	AZ	60	
Clay Township (Knox Co)	OH	AA	1	
Clay Township (Muskingum Co)	OH	AQ	43	
Clayton Township (Perry Co)	OH	AN	38	
Clearcreek Township (Fairfield Co)	OH	AB	2	
Clinton Township (Franklin Co)	OH	AA	1	
Clinton Township (Franklin Co)	OH	AT	51	
Clinton Township (Knox Co)	OH	AA	1	
Clinton Township (Vinton Co)	OH	AL	33	
Coal Township (Jackson Co)	OH	AL	35	
Coalton Village (Jackson Co)	OH	AL	35	
Colerain Township (Ross Co)	OH	AR	45	
College Township (Knox Co)	OH	AA	1	
Columbus City (Franklin Co)	OH	AB	3	
Columbus City (Franklin Co)	OH	AT	51	
Commercial Point Village (Pickaway Co)	OH	AA	1	
Concord Township (Delaware Co)	OH	AA	1	
Concord Township (Fayette Co)	OH	AP	41	
Concord Township (Ross Co)	OH	AR	47	
Conesville Village (Coshocton Co)	OH	AC	4	
Coolville Village (Athens Co)	OH	AG	25	
Coshocton City (Coshocton Co)	OH	AC	4	
Crawford Township (Coshocton Co)	OH	AC	4	
Crestline City (Crawford Co)	OH	AV	54	
Crooksville Village (Perry Co)	OH	AQ	43	
Cumberland Village (Guernsey Co)	OH	AI	28	
Danville Village (Knox Co)	OH	AA	1	
Darby Township (Madison Co)	OH	AA	1	
Darby Township (Pickaway Co)	OH	AA	1	
Darby Township (Union Co)	OH	AA	1	
Darbyville Village (Pickaway Co)	OH	AA	1	
Deer Creek Township (Madison Co)	OH	AA	1	
Deerfield Township (Ross Co)	OH	AR	47	
Delaware Township (Delaware Co)	OH	AA	1	
Delaware Township (Delaware Co)	OH	AT	51	
Delaware Township (Delaware Co)	OH	AW	57	
Delaware City (Delaware Co)	OH	AW	57	
Dover Township (Athens Co)	OH	AF	17	

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CITY OR TOWN	STATE	CH LINE UP	SUB GRP#
Dover Township (Union Co)	OH	AA	1
Dresden Village (Muskingum Co)	OH	AQ	43
Dublin City (Franklin Co)	OH	AA	1
Dudley Township (Hardin Co)	OH	AD	6
Eden Township (Licking Co)	OH	AC	5
Edison Village (Morrow Co)	OH	AJ	29
Elk Township (Noble Co)	OH	AH	27
Elk Township (Vinton Co)	OH	AL	33
Enoch Township (Noble Co)	OH	AH	27
Etna Township (Licking Co)	OH	AA	1
Etna Township (Licking Co)	OH	AT	51
Fairfield Township (Madison Co)	OH	AA	1
Falls Township (Hocking Co)	OH	AB	2
Falls Township (Muskingum Co)	OH	AQ	43
Flushing Township (Belmont Co)	OH	AH	67
Forest Village (Hardin Co)	OH	AD	6
Frankfort Village (Ross Co)	OH	AR	47
Franklin Township (Franklin Co)	OH	AA	1
Franklin Township (Jackson Co)	OH	AL	34
Franklin Township (Licking Co)	OH	AC	5
Franklin Township (Licking Co)	OH	AN	38
Franklin Township (Ross Co)	OH	AR	46
Frazeysburg Village (Muskingum Co)	OH	AQ	43
Fredericktown Village (Knox Co)	OH	AJ	29
Fulton Village (Morrow Co)	OH	AA	1
Fultonham Village (Muskingum Co)	OH	AQ	43
Gahanna City (Franklin Co)	OH	AA	1
Gahanna City (Franklin Co)	OH	AT	51
Galena Village (Delaware Co)	OH	AA	1
Galion City (Crawford Co)	OH	AV	54
Gambier Village (Knox Co)	OH	AA	1
Genoa Township (Delaware Co)	OH	AA	1
Genoa Township (Delaware Co)	OH	AT	51
Good Hope Township (Hocking Co)	OH	AB	2
Goshen Township (Auglaize Co)	OH	AZ	60
Goshen Township (Hardin Co)	OH	AD	6
Grand Prairie Township (Marion Co)	OH	AX	58
Grand Township (Marion Co)	OH	AA	1
Grandview Heights City (Franklin Co)	OH	AA	1
Granville Village (Licking Co)	OH	AC	5
Granville Township (Licking Co)	OH	AA	1
Granville Township (Licking Co)	OH	AC	5
Gratiot Village (Licking Co)	OH	AQ	43

First  
Community

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>		SYSTEM ID# <b>010659</b>	Name
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CITY OR TOWN	STATE	CH LINE UP	SUB GRP#
Green Camp Village (Marion Co)	OH	AA	1
Green Township Township (Fayette Co)	OH	AP	42
Green Township Township (Ross Co)	OH	AR	45
Greenfield Township (Fairfield Co)	OH	AB	2
Greenfield Township (Gallia Co)	OH	AL	34
Greenfield City (Highland/Ross Co)	OH	AK	31
Grove City City (Franklin Co)	OH	AA	1
Groveport Village (Franklin Co)	OH	AA	1
Hale Township (Hardin Co)	OH	AD	6
Hamden Village (Vinton Co)	OH	AL	33
Hamilton Township (Franklin Co)	OH	AB	3
Hamilton Township (Franklin Co)	OH	AA	1
Hamilton Township (Jackson Co)	OH	AL	34
Hanover Village (Licking Co)	OH	AC	4
Hanover Township (Licking Co)	OH	AC	4
Harlem Township (Delaware Co)	OH	AA	1
Harlem Township (Delaware Co)	OH	AT	51
Harmony Township (Morrow Co)	OH	AJ	29
Harrisburg Village (Franklin Co)	OH	AA	1
Harrison Township (Knox Co)	OH	AC	5
Harrison Township (Licking Co)	OH	AA	1
Harrison Township (Logan Co)	OH	AU	53
Harrison Township (Muskingum Co)	OH	AQ	43
Harrison Township (Perry Co)	OH	AQ	43
Harrison Township (Pickaway Co)	OH	AB	3
Harrison Township (Pickaway Co)	OH	AT	51
Harrison Township (Ross Co)	OH	AR	45
Hartford Village (Licking Co)	OH	AA	1
Hartford Township (Licking Co)	OH	AA	1
Hayden Heights MHP (Franklin Co)	OH	AA	1
Heath City (Licking Co)	OH	AC	5
Hebron Village (Licking Co)	OH	AC	5
Highland Township (Muskingum Co)	OH	AQ	65
Hilliard Township (Knox Co)	OH	AA	1
Hilliard City (Franklin Co)	OH	AA	1
Hocking Township (Fairfield Co)	OH	AB	2
Hopewell Township (Licking Co)	OH	AQ	43
Hopewell Township (Muskingum Co)	OH	AQ	43
Howard Township (Knox Co)	OH	AA	1
Huntington Township (Gallia Co)	OH	AL	34
Huntington Township (Ross Co)	OH	AR	46
Huntsville Village (Logan Co)	OH	AU	52
Jackson Township (Coshocton Co)	OH	AC	4

First  
Community

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>		<b>SYSTEM ID#</b> <b>010659</b>	Name
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CITY OR TOWN	STATE	CH LINE UP	SUB GRP#
Jackson Township (Crawford Co)	OH	AV	54
Jackson Township (Franklin Co)	OH	AA	1
Jackson Township (Guernsey Co)	OH	AI	28
Jackson Township (Hardin Co)	OH	AD	6
Jackson Township (Jackson Co)	OH	AR	49
Jackson Township (Knox Co)	OH	AA	1
Jackson Township (Muskingum Co)	OH	AQ	43
Jackson Township (Noble Co)	OH	AH	27
Jackson Township (Perry Co)	OH	AN	38
Jackson Township (Pickaway Co)	OH	AA	1
Jackson Township (Pike Co)	OH	AE	15
Jackson City (Jackson Co)	OH	AL	34
Jasper Township (Fayette Co)	OH	AP	41
Jefferson Township (Coshocton Co)	OH	AC	4
Jefferson Township (Crawford Co)	OH	AV	54
Jefferson Township (Fayette Co)	OH	AP	41
Jefferson Township (Franklin Co)	OH	AT	51
Jefferson Township (Guernsey Co)	OH	AI	28
Jefferson Township (Jackson Co)	OH	AL	34
Jefferson Township (Logan Co)	OH	AU	53
Jefferson Township (Madison Co)	OH	AA	1
Jefferson Township (Ross Co)	OH	AR	46
Jefferson Township (Tuscarawas Co)	OH	AO	39
Jeffersonville Village (Fayette Co)	OH	AP	41
Jerome Township (Union Co)	OH	AA	1
Jersey Township (Licking Co)	OH	AA	1
Jersey Township (Licking Co)	OH	AT	51
Johnstown Village (Licking Co)	OH	AA	1
Junction City Village (Perry Co)	OH	AN	38
Kenton City (Hardin Co)	OH	AD	6
Kingston Village (Ross Co)	OH	AR	45
Kingston Township (Delaware Co)	OH	AA	1
Kirkersville Village (Licking Co)	OH	AA	1
Kirkwood Township (Belmont Co)	OH	AH	67
Knox Township (Guernsey Co)	OH	AI	28
Knox Township (Vinton Co)	OH	AL	33
La Rue Village (Marion Co)	OH	AD	8
Lafayette Township (Coshocton Co)	OH	AC	4
Lake Township (Logan Co)	OH	AU	53
Lakeview Village (Logan Co)	OH	AU	52
Lancaster City (Fairfield Co)	OH	AB	2
Laurelville Village (Hocking Co)	OH	AR	45
Leesburg Township (Union Co)	OH	AA	1

First  
Community

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CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	First Community
Liberty Township (Delaware Co)	OH	AA	1	
Liberty Township (Delaware Co)	OH	AT	51	
Liberty Township (Fairfield Co)	OH	AA	1	
Liberty Township (Fairfield Co)	OH	AT	51	
Liberty Township (Fairfield Co)	OH	AB	2	
Liberty Township (Guernsey Co)	OH	AI	28	
Liberty Township (Jackson Co)	OH	AL	35	
Liberty Township (Knox Co)	OH	AA	1	
Liberty Township (Licking Co)	OH	AA	1	
Liberty Township (Licking Co)	OH	AC	5	
Liberty Township (Logan Co)	OH	AU	53	
Liberty Township (Ross Co)	OH	AR	46	
Liberty Township (Union Co)	OH	AA	1	
Lick Township (Jackson Co)	OH	AL	34	
Licking Township (Licking Co)	OH	AC	5	
Licking Township (Licking Co)	OH	AN	38	
Licking Township (Muskingum Co)	OH	AQ	43	
Lithopolis Village (Fairfield Co)	OH	AB	3	
Lithopolis Village (Franklin Co)	OH	AT	51	
Lockbourne Village (Franklin Co)	OH	AT	51	
Lockbourne Village (Pickaway Co)	OH	AB	3	
Logan City (Hocking Co)	OH	AB	2	
London City (Madison Co)	OH	AA	1	
Londonderry Townshiop (Guernsey Co)	OH	AI	28	
Lowell Village (Washington Co)	OH	AG	22	
Lynn Township (Hardin Co)	OH	AD	6	
Madison Township (Fayette Co)	OH	AP	41	
Madison Township (Franklin Co)	OH	AB	3	
Madison Township (Franklin Co)	OH	AT	51	
Madison Township (Guernsey Co)	OH	AI	28	
Madison Township (Jackson Co)	OH	AL	34	
Madison Township (Licking Co)	OH	AC	5	
Madison Township (Muskingum Co)	OH	AQ	43	
Madison Township (Perry Co)	OH	AA	1	
Madison Township (Pickaway Co)	OH	AT	51	
Magnetic Springs Village (Union Co)	OH	AA	1	
Malta Village (Morgan Co)	OH	AG	26	
Manchester Township (Morgan Co)	OH	AG	26	
Marble Cliff Village (Franklin Co)	OH	AA	1	
Marengo Village (Morrow Co)	OH	AA	1	
Marengo Village (Morrow Co)	OH	AD	10	
Marion City (Marion Co)	OH	AX	58	
Marian Township (Fayette Co)	OH	AP	41	

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>		SYSTEM ID# <b>010659</b>	Name
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CITY OR TOWN	STATE	CH LINE UP	SUB GRP#
Marion Township (Hocking Co)	OH	AB	2
Marion Township (Marion Co)	OH	AX	58
Marion Township (Pike Co)	OH	AL	32
Marseilles Township (Wyandot Co)	OH	AD	12
Martinsburg Village (Knox Co)	OH	AA	1
Mary Ann Township (Licking Co)	OH	AC	5
Marysville City (Union Co)	OH	AA	1
McArthur Township (Logan Co)	OH	AU	52
McArthur Village (Vinton Co)	OH	AL	33
McConnelsville Village (Morgan Co)	OH	AG	26
McDonald Township (Hardin Co)	OH	AD	6
McKean Township (Licking Co)	OH	AC	5
Meigs Township (Muskingum Co)	OH	AM	36
Midway Village (Madison Co)	OH	AY	59
Mifflin Township (Franklin Co)	OH	AA	1
Mifflin Township (Franklin Co)	OH	AT	51
Mifflin Township (Pike Co)	OH	AE	16
Milford Center Village (Union Co)	OH	AA	1
Millcreek Township (Union Co)	OH	AA	1
Miller Township (Knox Co)	OH	AA	1
Millersport Village (Fairfield Co)	OH	AB	2
Millwood Township (Guernsey Co)	OH	AI	28
Minerva Park Village (Franklin Co)	OH	AA	1
Milton Township (Jackson Co)	OH	AL	34
Monroe Township (Guernsey Co)	OH	AI	28
Monroe Township (Knox Co)	OH	AA	1
Monroe Township (Licking Co)	OH	AA	1
Monroe Township (Licking Co)	OH	AT	51
Monroe Township (Logan Co)	OH	AU	53
Monroe Township (Madison Co)	OH	AA	1
Monroe Township (Muskingum Co)	OH	AQ	65
Morgan Township (Knox Co)	OH	AA	1
Morrill Village (Marion Co)	OH	AX	58
Morris Township (Knox Co)	OH	AA	1
Mount Gilead Village (Morrow Co)	OH	AJ	29
Mount Sterling Village (Madison Co)	OH	AA	1
Mount Sterling Village (Madison Co)	OH	AY	59
Mount Vernon City (Knox Co)	OH	AA	1
Mount Victory Village (Hardin Co)	OH	AD	6
Muhlenburg Township (Pickaway Co)	OH	AA	1
Murray City Village (Hocking Co)	OH	AF	20
Muskingum Township (Muskingum Co)	OH	AQ	43
New Albany Village (Franklin Co)	OH	AA	1

First  
Community



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CITY OR TOWN	STATE	CH LINE UP	SUB GRP#
Perry Township (Gallia Co)	OH	AL	34
Perry Township (Licking Co)	OH	AC	4
Perry Township (Logan Co)	OH	AD	12
Perry Township (Muskingum Co)	OH	AQ	65
Philo Village (Muskingum Co)	OH	AQ	65
Pickaway Township (Pickaway Co)	OH	AB	2
Pickerington City (Franklin Co)	OH	AA	1
Pickerington City (Franklin Co)	OH	AT	51
Pike Township (Coshocton Co)	OH	AC	4
Pike Township (Perry Co)	OH	AN	38
Piketon Village( Pike Co)	OH	AE	15
Plain City Village (Madison Co)	OH	AA	1
Plain Township (Franklin Co)	OH	AA	1
Plain Township (Franklin Co)	OH	AT	51
Plainfield Village (Coshocton Co)	OH	AQ	44
Pleasant Township (Fairfield Co)	OH	AB	2
Pleasant Township (Fairfield Co)	OH	AN	38
Pleasant Township (Franklin Co)	OH	AA	1
Pleasant Township (Hardin Co)	OH	AD	6
Pleasant Township (Knox Co)	OH	AA	1
Pleasant Township (Marion Co)	OH	AA	1
Pleasant Township (Marion Co)	OH	AX	58
Pleasantville Village (Fairfield Co)	OH	AB	2
Polk Township (Crawford Co)	OH	AV	54
Porter Township (Delaware Co)	OH	AA	1
Powell City (Delaware Co)	OH	AA	1
Prairie Township (Franklin Co)	OH	AA	1
Prospect Village (Marion Co)	OH	AA	1
Prospect Township (Marion Co)	OH	AA	1
Prospect Township (Marion Co)	OH	AX	58
Racoon Township (Gallia Co)	OH	AL	34
Radnor Township (Delaware Co)	OH	AW	57
Range Township (Madison Co)	OH	AY	59
Reading Township (Perry Co)	OH	AN	38
Reynoldsburg City (Franklin Co)	OH	AT	51
Reynoldsburg City (Licking Co)	OH	AT	51
Rich Hill Township (Muskingum Co)	OH	AM	36
Richland Township (Clinton Co)	OH	AP	42
Richland Township (Fairfield Co)	OH	AN	38
Richland Township (Guernsey Co)	OH	AI	28
Richland Township (Logan Co)	OH	AU	52
Richland Township (Logan Co)	OH	AZ	62
Richland Township (Marion Co)	OH	AA	1

First  
Community

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CITY OR TOWN	STATE	CH LINE UP	SUB GRP#
Richland Township (Vinton Co)	OH	AL	33
Richwood Village (Union Co)	OH	AA	1
Ridgeway Village (Logan Co)	OH	AD	9
Rio Grande Village (Gallia Co)	OH	AL	34
Riverlea Village (Franklin Co)	OH	AA	1
Riverside City (Muskingum Co)	OH	AM	37
Rome Township (Athens Co)	OH	AG	25
Roseville Village (Perry Co)	OH	AQ	43
Roundhead Township (Hardin Co)	OH	AZ	64
Rushcreek Township (Logan Co)	OH	AU	52
Rush Creek Township (Fairfield Co)	OH	AB	2
Rush Creek Township (Fairfield Co)	OH	AN	38
Rushville Village (Fairfield Co)	OH	AN	38
Rushsylvania Village (Logan Co)	OH	AD	9
Russells Point Village (Logan Co)	OH	AU	52
Rutland Township (Meigs Co)	OH	AS	50
Sabina Village (Clinton Co)	OH	AP	42
Saint Albans Township (Licking Co)	OH	AA	1
Salem Township (Muskingum Co)	OH	AQ	65
Salisbury Township (Meigs Co)	OH	AS	50
Salt Creek Township (Muskingum Co)	OH	AM	36
Sandusky Township (Richland Co)	OH	AV	56
Scioto Township (Pickaway Co)	OH	AA	1
Scioto Township (Ross Co)	OH	AR	45
Scipio Township (Meigs Co)	OH	AS	50
Seal Township (Pike Co)	OH	AE	15
Seneca Township (Noble Co)	OH	AH	27
Sharon Township (Franklin Co)	OH	AA	1
Sharon Township (Franklin Co)	OH	AT	51
Sharon Township (Noble Co)	OH	AH	27
Shawnee Hills Village (Delaware Co)	OH	AA	1
Somerford Township (Madison Co)	OH	AA	1
Somerset Village (Perry Co)	OH	AN	38
South Bloomfield Village (Pickaway Co)	OH	AB	3
South Salem Village (Ross Co)	OH	AR	48
South Zanesville City (Muskingum Co)	OH	AQ	43
Sparta Village (Morrow Co)	OH	AA	1
Spencer Township (Guernsey Co)	OH	AI	28
Springfield Township (Muskingum Co)	OH	AQ	43
Springfield Township (Richland Co)	OH	AV	56
Springfield Township (Ross Co)	OH	AR	45
Springfield Township (Gallia Co)	OH	AL	34
St. Albans Township (Licking Co)	OH	AA	1

First  
Community

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CITY OR TOWN	STATE	CH LINE UP	SUB GRP#
St. Louisville Village (Licking Co)	OH	AC	5
Stokes Township (Logan Co)	OH	AU	52
Stokes Township (Logan Co)	OH	AZ	62
Stoutsville Village (Fairfield Co)	OH	AB	2
Sugar Grove Village (Fairfield Co)	OH	AB	2
Sunbury Village (Delaware Co)	OH	AA	1
Sunfish Township (Pike Co)	OH	AE	16
Taylor Creek Township (Hardin Co)	OH	AD	6
Taylor Township (Union Co)	OH	AA	1
Thorn Township (Perry Co)	OH	AN	38
Thornville Village (Perry Co)	OH	AN	38
Thurston Village (Fairfield Co)	OH	AB	2
Trenton Township (Delaware Co)	OH	AA	1
Troy Township (Delaware Co)	OH	AW	57
Truro Township (Franklin Co)	OH	AT	51
Tuscarawas Township (Coshocton Co)	OH	AC	4
Twin Township (Ross Co)	OH	AR	48
Twin Township (Ross Co)	OH	AK	30
Union Township (Auglaize Co)	OH	AZ	60
Union Township (Knox Co)	OH	AA	1
Union Township (Licking Co)	OH	AA	1
Union Township (Licking Co)	OH	AC	5
Union Township (Licking Co)	OH	AN	38
Union Township (Logan Co)	OH	AU	53
Union Township (Madison Co)	OH	AA	1
Union Township (Muskingum Co)	OH	AQ	65
Union Township (Pike Co)	OH	AL	32
Union Township (Ross Co)	OH	AR	45
Union Township (Union Co)	OH	AA	1
Unionville Center Village (Union Co)	OH	AA	1
Uniopolis Village (Auglaize Co)	OH	AZ	60
Upper Arlington City (Franklin Co)	OH	AA	1
Urbancrest Village (Franklin Co)	OH	AA	1
Utica Village (Licking Co)	OH	AA	1
Valley Hi Village (Logan Co)	OH	AD	14
Valley Township (Guernsey Co)	OH	AI	28
Valleyview Village (Franklin Co)	OH	AA	1
Venedocia Village (Van Wert Co)	OH	AZ	63
Vernon Township (Crawford Co)	OH	AV	54
Village of Tarlton (Pickaway Co)	OH	AB	2
Village of Tarlton (Pickaway Co)	OH	AR	45
Violet Township (Fairfield Co)	OH	AB	3
Violet Township (Fairfield Co)	OH	AT	51

First  
Community

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>		<b>SYSTEM ID#</b> <b>010659</b>	Name
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CITY OR TOWN	STATE	CH LINE UP	SUB GRP#
Waldo Village (Marion Co)	OH	AA	1
Walnut Township (Fairfield Co)	OH	AC	5
Walnut Township (Fairfield Co)	OH	AN	38
Walnut Township (Pickaway Co)	OH	AB	2
Walnut Township (Pickaway Co)	OH	AB	3
Warsaw Village (Coshocton Co)	OH	AC	4
Wahington Court House City (Fayette Co)	OH	AP	41
Washington Township (Franklin Co)	OH	AA	1
Washington Township (Guernsey Co)	OH	AI	28
Washington Township (Harden Co)	OH	AD	7
Washington Township (Jackson Co)	OH	AL	69
Washington Township (Licking Co)	OH	AA	1
Washington Township (Logan Co)	OH	AU	52
Washington Township (Morrow Co)	OH	AV	55
Washington Township (Muskingum Co)	OH	AQ	43
Washington Township (Pickaway Co)	OH	AB	2
Washington Township (Tuscarawas Co)	OH	AO	40
Washington Township (Union Co)	OH	AA	1
Waterford Township (Washington Co)	OH	AG	22
Waterloo Township (Athens Co)	OH	AF	21
Waverly City City (Pike Co)	OH	AE	15
Wayne Township (Auglaize Co)	OH	AZ	61
Wayne Township (Clinton Co)	OH	AP	42
Wayne Township (Muskingum Co)	OH	AM	36
Wayne Township (Muskingum Co)	OH	AQ	43
Wayne Township (Noble Co)	OH	AH	27
Waynesfield Village (Auglaize Co)	OH	AZ	61
Wellston City (Jackson Co)	OH	AL	34
West Jefferson Village (Madison Co)	OH	AA	1
West Lafayette Township (Coshocton Co)	OH	AQ	44
West Mansfield Village (Logan Co)	OH	AD	12
West Rushville Village (Fairfield Co)	OH	AN	38
Westerville City (Delaware Co)	OH	AT	51
Westerville City (Franklin Co)	OH	AA	1
Westerville City (Franklin Co)	OH	AT	51
Westland Township (Guernsey Co)	OH	AI	28
Wharton Village (Wyandot Co)	OH	AD	13
Wheeling Township (Guernsey Co)	OH	AI	28
Whetstone Township (Crawford Co)	OH	AV	54
White Eyes Township (Coshocton Co)	OH	AC	4
Whitehall City (Franklin Co)	OH	AT	51
Wilkesville Township (Vinton Co)	OH	AL	33
Williamsport (Pickaway Co)	OH	AR	47

First Community



<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>
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<b>E</b>  <b>Secondary Transmission Service: Subscribers and Rates</b>	<p><b>SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES</b>  <b>In General:</b> 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).  <b>Number of Subscribers:</b> 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).  <b>Rate:</b> 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.  <b>Block 1:</b> 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. <b>Note:</b> Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)."  <b>Block 2:</b> If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.</p>					
BLOCK 1			BLOCK 2			
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	
<b>Residential:</b> • Service to first set • Service to additional set(s) • FM radio (if separate rate)	<b>206,217</b>	<b>9.99-36.00</b>				
<b>Motel, hotel</b>						
<b>Commercial</b>	<b>7,648</b>	<b>8.85-75.74</b>				
<b>Converter</b> • Residential • Non-residential						

<b>F</b>  <b>Services Other Than Secondary Transmissions: Rates</b>	<p><b>SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES</b>  <b>In General:</b> 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.  <b>Block 1:</b> Give the standard rate charged by the cable system for each of the applicable services listed.  <b>Block 2:</b> List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.</p>					
BLOCK 1			BLOCK 2			
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	
<b>Continuing Services:</b> • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection	<b>5.99-15.00</b> <b>5.99-15.00</b>	<b>Installation: Non-residential</b> • Motel, hotel • Commercial • Pay cable • Pay cable-add'l channel • Fire protection • Burglar protection				
<b>Installation: Residential</b> • First set • Additional set(s) • FM radio (if separate rate) • Converter	<b>\$ 49.99</b>	<b>Other services:</b> • Reconnect • Disconnect • Outlet relocation • Move to new address	<b>\$ 49.99</b> <b>\$ 49.99</b>			

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	Name
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**PRIMARY TRANSMITTERS: TELEVISION**

**In General:** In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a 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 other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.

**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 in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions.

**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

**Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

**G**  
**Primary Transmitters: Television**

**CHANNEL LINE-UP AA**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	No		Columbus, OH
WBNS-2	21.2	I-M	No		Columbus, OH
WBNS-3	21.3	I-M	No		Columbus, OH
WCMH	14	N	No		Columbus, OH
WCMH-2	14.2	I-M	No		Columbus, OH
WCMH-4	14.4	I-M	No		Columbus, OH
WOSU	34	E	Yes	O	Columbus, OH
WOSU-2	34.2	E-M	Yes	O	Columbus, OH
WOSU-3	34.3	E-M	Yes	O	Columbus, OH
WOSU-4	34.4	E-M	Yes	O	Columbus, OH
WSFJ	51	I	No		London, OH
WSYX	6	N	No		Columbus, OH
WSYX-2	6.2	I-M	No		Columbus, OH
WSYX-3	6.3	I-M	No		Columbus, OH
WTTE	28	I	No		Columbus, OH
WTTE-2	28.2	I-M	No		Columbus, OH
WWHO	53	I	No		Chillicothe, OH
WWHO-2	53.2	I-M	No		Chillicothe, OH



LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	<b>Name</b>
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**PRIMARY TRANSMITTERS: TELEVISION**

**In General:** In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a 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 other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.

**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 in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions.

**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

**Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

**G**

**Primary Transmitters: Television**

**CHANNEL LINE-UP AB**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	No		Columbus, OH
WBNS-2	21.2	I-M	No		Columbus, OH
WBNS-3	21.3	I-M	No		Columbus, OH
WCMH	14	N	No		Columbus, OH
WCMH-2	14.2	I-M	No		Columbus, OH
WCMH-4	14.4	I-M	No		Columbus, OH
WOSU	34	E	No		Columbus, OH
WOSU-2	34.2	E-M	No		Columbus, OH
WOSU-3	34.3	E-M	No		Columbus, OH
WOSU-4	34.4	E-M	No		Columbus, OH
WOUB	20	E	Yes	O	Athens, OH
WSFJ	51	I	No		London, OH
WSYX	6	N	No		Columbus, OH
WSYX-2	6.2	I-M	No		Columbus, OH
WSYX-3	6.3	I-M	No		Columbus, OH
WTTE	28	I	No		Columbus, OH
WTTE-2	28.2	I-M	No		Columbus, OH
WWHO	53	I	No		Chillicothe, OH



LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	Name
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**PRIMARY TRANSMITTERS: TELEVISION**

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**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 other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.

**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 in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions.

**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

**Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

**G**  
**Primary Transmitters: Television**

**CHANNEL LINE-UP AC**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	No		Columbus, OH
WBNS-2	21.2	I-M	No		Columbus, OH
WBNS-3	21.3	I-M	No		Columbus, OH
WCMH	14	N	No		Columbus, OH
WCMH-2	14.2	I-M	No		Columbus, OH
WCMH-4	14.4	I-M	No		Columbus, OH
WHIZ	18	N	No		Zanesville, OH
WOSU	34	E	No		Columbus, OH
WOSU-2	34.2	E-M	No		Columbus, OH
WOSU-3	34.3	E-M	No		Columbus, OH
WOSU-4	34.4	E-M	No		Columbus, OH
WOUC	44	E	Yes	O	Cambridge, OH
WSFJ	51	I	No		London, OH
WSYX	6	N	No		Columbus, OH
WSYX-2	6.2	I-M	No		Columbus, OH
WSYX-3	6.3	I-M	No		Columbus, OH
WTTE	28	I	No		Columbus, OH
WTTE-2	28.2	I-M	No		Columbus, OH



LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	<b>Name</b>
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**PRIMARY TRANSMITTERS: TELEVISION**

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**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.
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**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 in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

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**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

**Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

**G**  
**Primary Transmitters: Television**

**CHANNEL LINE-UP AD**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	No		Columbus, OH
WBNS-2	21.2	I-M	No		Columbus, OH
WBNS-3	21.3	I-M	No		Columbus, OH
WCMH	14	N	No		Columbus, OH
WCMH-2	14.2	I-M	No		Columbus, OH
WCMH-4	14.4	I-M	No		Columbus, OH
WLIO	8	N	Yes	O	Lima, OH
WLMA	44	I	Yes	O	Lima, OH
WOSU	34	E	Yes	O	Columbus, OH
WOSU-2	34.2	E-M	Yes	O	Columbus, OH
WOSU-3	34.3	E-M	Yes	O	Columbus, OH
WOSU-4	34.4	E-M	Yes	O	Columbus, OH
WSFJ	51	I	Yes	O	London, OH
WSYX	6	N	Yes	O	Columbus, OH
WSYX-2	6.2	I-M	Yes	O	Columbus, OH
WSYX-3	6.3	I-M	Yes	O	Columbus, OH
WTLW-LP	44	I	Yes	O	Lima, OH
WTTE	28	I	No		Columbus, OH



LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	<b>Name</b>
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**PRIMARY TRANSMITTERS: TELEVISION**

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**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 in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

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**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

**Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

**G**

**Primary Transmitters: Television**

**CHANNEL LINE-UP AE**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	No		Columbus, OH
WBNS-2	21.2	I-M	No		Columbus, OH
WBNS-3	21.3	I-M	No		Columbus, OH
WCMH	14	N	No		Columbus, OH
WCMH-2	14.2	I-M	No		Columbus, OH
WCMH-4	14.4	I-M	No		Columbus, OH
WOSU	34	E	Yes	O	Columbus, OH
WOSU-2	34.2	E-M	Yes	O	Columbus, OH
WOSU-3	34.3	E-M	Yes	O	Columbus, OH
WOSU-4	34.4	E-M	Yes	O	Columbus, OH
WOUB	20	E	Yes	O	Athens, OH
WSAZ	3	N	No		Huntington, WV
WSFJ	51	I	No		London, OH
WSYX	6	N	No		Columbus, OH
WSYX-2	6.2	I-M	No		Columbus, OH
WSYX-3	6.3	I-M	No		Columbus, OH
WTTE	28	I	No		Columbus, OH
WTTE-2	28.2	I-M	No		Columbus, OH



LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	Name
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**PRIMARY TRANSMITTERS: TELEVISION**

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**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).

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**Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

**G**

**Primary Transmitters: Television**

**CHANNEL LINE-UP AF**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	No		Columbus, OH
WBNS-2	21.2	I-M	No		Columbus, OH
WBNS-3	21.3	I-M	No		Columbus, OH
WCHS	41	N	No		Charleston, WV
WCHS-2	41.2	I-M	Yes	O	Charleston, WV
WCHS-3	41.3	I-M	Yes	O	Charleston, WV
WCMH	14	N	Yes	O	Columbus, OH
WCMH-4	14.4	I-M	No		Columbus, OH
WLPX	29	I	Yes	O	Charleston, WV
WOUB	20	E	No		Athens, OH
WOUB-2	20.2	E-M	No		Athens, OH
WOUB-3	20.3	E-M	No		Athens, OH
WOUB-4	20.4	E-M	No		Athens, OH
WQCW	30	I	Yes	O	Portsmouth, OH
WSAZ	3	N	Yes	O	Huntington, WV
WSAZ-2	3.2	I-M	Yes	O	Huntington, WV
WSFJ	51	I	No		London, OH
WSYX	6	N	No		Columbus, OH





LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	Name
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**PRIMARY TRANSMITTERS: TELEVISION**

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**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 in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

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**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

**Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

**G**

**Primary Transmitters: Television**

**CHANNEL LINE-UP AH**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	Yes	O	Columbus, OH
WBNS-3	21.3	I-M	Yes	O	Columbus, OH
WHIZ	18	N	No		Zanesville, OH
WOSU	34	E	Yes	O	Columbus, OH
WOSU-2	34.2	E-M	Yes	O	Columbus, OH
WOSU-3	34.3	E-M	Yes	O	Columbus, OH
WOSU-4	34.4	E-M	Yes	O	Columbus, OH
WOUC	44	E	No		Cambridge, OH
WSFJ	51	I	Yes	O	London, OH
WSYX	6	N	Yes	O	Columbus, OH
WSYX-2	6.2	I-M	Yes	O	Columbus, OH
WSYX-3	6.3	I-M	Yes	O	Columbus, OH
WTAP	15	N	Yes	O	Parkersburg, WV
WTOV	9	N	No		Steubenville, OH
WTRF	7	N	No		Wheeling, WV
WTRF-2	7.2	I-M	No		Wheeling, WV
WTRF-3	7.3	N-M	No		Wheeling, WV
WTRF-4	7.4	I-M	No		Wheeling, WV



LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	Name
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**PRIMARY TRANSMITTERS: TELEVISION**

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**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 in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

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**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

**Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

**G**

**Primary Transmitters: Television**

**CHANNEL LINE-UP AI**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	No		Columbus, OH
WBNS-2	21.2	I-M	No		Columbus, OH
WBNS-3	21.3	I-M	No		Columbus, OH
WCMH	14	N	No		Columbus, OH
WCMH-2	14.2	I-M	No		Columbus, OH
WCMH-4	14.4	I-M	No		Columbus, OH
WHIZ	18	N	No		Zanesville, OH
WOSU	34	E	Yes	O	Columbus, OH
WOSU-2	34.2	E-M	Yes	O	Columbus, OH
WOSU-3	34.3	E-M	Yes	O	Columbus, OH
WOSU-4	34.4	E-M	Yes	O	Columbus, OH
WOUC	44	E	No		Cambridge, OH
WSFJ	51	I	No		London, OH
WSYX	6	N	No		Columbus, OH
WSYX-2	6.2	I-M	No		Columbus, OH
WSYX-3	6.3	I-M	No		Columbus, OH
WTOV	9	N	No		Steubenville, OH
WTTE	28	I	No		Columbus, OH



LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	<b>Name</b>
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**PRIMARY TRANSMITTERS: TELEVISION**

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**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 in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.

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**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

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**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

**Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

**G**

**Primary Transmitters: Television**

**CHANNEL LINE-UP AJ**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
<b>WBNS</b>	<b>21</b>	<b>N</b>	<b>No</b>		<b>Columbus, OH</b>
<b>WBNS-2</b>	<b>21.2</b>	<b>I-M</b>	<b>No</b>		<b>Columbus, OH</b>
<b>WBNS-3</b>	<b>21.3</b>	<b>I-M</b>	<b>No</b>		<b>Columbus, OH</b>
<b>WCMH</b>	<b>14</b>	<b>N</b>	<b>No</b>		<b>Columbus, OH</b>
<b>WCMH-2</b>	<b>14.2</b>	<b>I-M</b>	<b>No</b>		<b>Columbus, OH</b>
<b>WCMH-4</b>	<b>14.4</b>	<b>I-M</b>	<b>No</b>		<b>Columbus, OH</b>
<b>WMFD</b>	<b>68</b>	<b>I</b>	<b>No</b>		<b>Mansfield, OH</b>
<b>WOSU</b>	<b>34</b>	<b>E</b>	<b>No</b>		<b>Columbus, OH</b>
<b>WOSU-2</b>	<b>34.2</b>	<b>E-M</b>	<b>No</b>		<b>Columbus, OH</b>
<b>WOSU-3</b>	<b>34.3</b>	<b>E-M</b>	<b>No</b>		<b>Columbus, OH</b>
<b>WOSU-4</b>	<b>34.4</b>	<b>E-M</b>	<b>No</b>		<b>Columbus, OH</b>
<b>WSFJ</b>	<b>51</b>	<b>I</b>	<b>No</b>		<b>London, OH</b>
<b>WSYX</b>	<b>6</b>	<b>N</b>	<b>No</b>		<b>Columbus, OH</b>
<b>WSYX-2</b>	<b>6.2</b>	<b>I-M</b>	<b>No</b>		<b>Columbus, OH</b>
<b>WSYX-3</b>	<b>6.3</b>	<b>I-M</b>	<b>No</b>		<b>Columbus, OH</b>
<b>WTTE</b>	<b>28</b>	<b>I</b>	<b>No</b>		<b>Columbus, OH</b>
<b>WTTE-2</b>	<b>28.2</b>	<b>I-M</b>	<b>No</b>		<b>Columbus, OH</b>
<b>WWHO</b>	<b>53</b>	<b>I</b>	<b>No</b>		<b>Chillicothe, OH</b>



LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	Name
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**PRIMARY TRANSMITTERS: TELEVISION**

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**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 in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

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**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

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**G**  
**Primary Transmitters: Television**

**CHANNEL LINE-UP AK**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	No		Columbus, OH
WBNS-2	21.2	I-M	No		Columbus, OH
WBNS-3	21.3	I-M	No		Columbus, OH
WCMH	14	N	No		Columbus, OH
WCMH-2	14.2	I-M	No		Columbus, OH
WHIO	7	N	No		Dayton, OH
WKRC	12	N	Yes	O	Cincinnati, OH
WOSU	34	E	Yes	O	Columbus, OH
WOSU-2	34.2	E-M	Yes	O	Columbus, OH
WOSU-3	34.3	E-M	Yes	O	Columbus, OH
WOSU-4	34.4	E-M	Yes	O	Columbus, OH
WSTR	64	I	Yes	O	Cincinnati, OH
WSYX	6	N	No		Columbus, OH
WSYX-2	6.2	I-M	No		Columbus, OH
WTTE	28	I	No		Columbus, OH
WWHO	53	I	No		Chillicothe, OH
WXIX	29	I	Yes	O	Newport, KY
WXIX-3	29.3	I-M	Yes	O	Newport, KY

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	<b>Name</b>
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**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).

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**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.

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**G**

**Primary Transmitters: Television**

**CHANNEL LINE-UP AL**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	Yes	O	Columbus, OH
WCHS	41	N	Yes	O	Charleston, WV
WCHS-2	41.2	I-M	Yes	O	Charleston, WV
WCHS-3	41.3	I-M	Yes	O	Charleston, WV
WCMH	14	N	Yes	O	Columbus, OH
WOSU	34	E	Yes	O	Columbus, OH
WOSU-2	34.2	E-M	Yes	O	Columbus, OH
WOSU-3	34.3	E-M	Yes	O	Columbus, OH
WOUB	20	E	No		Athens, OH
WOUB-2	20.2	E-M	No		Athens, OH
WOUB-3	20.3	E-M	No		Athens, OH
WOUB-4	20.4	E-M	No		Athens, OH
WOWK	13	N	No		Huntington, WV
WQCW	30	I	No		Portsmouth, OH
WQCW-3	30.3	I-M	No		Portsmouth, OH
WSAZ	3	N	No		Huntington, WV
WSAZ-2	3.2	I-M	No		Huntington, WV
WSAZ-3	3.3	I-M	No		Huntington, WV



LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	Name
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**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

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**G**

**Primary Transmitters: Television**

**CHANNEL LINE-UP AM**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	No		Columbus, OH
WBNS-2	21.2	I-M	No		Columbus, OH
WBNS-3	21.3	I-M	No		Columbus, OH
WCMH	14	N	No		Columbus, OH
WCMH-2	14.2	I-M	No		Columbus, OH
WHIZ	18	N	No		Zanesville, OH
WHIZ-2	18.2	I-M	No		Zanesville, OH
WHIZ-3	18.3	I-M	No		Zanesville, OH
WOSU	34	E	Yes	O	Columbus, OH
WOSU-2	34.2	E-M	Yes	O	Columbus, OH
WOSU-3	34.3	E-M	Yes	O	Columbus, OH
WOSU-4	34.4	E-M	Yes	O	Columbus, OH
WOUC	44	E	No		Cambridge, OH
WSFJ	51	I	No		London, OH
WSYX	6	N	No		Columbus, OH
WSYX-2	6.2	I-M	No		Columbus, OH
WSYX-3	6.3	I-M	No		Columbus, OH
WTTE	28	I	No		Columbus, OH

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	Name
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**PRIMARY TRANSMITTERS: TELEVISION**

**In General:** In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a 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 other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.

**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 in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

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**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

**Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

**G**

**Primary Transmitters: Television**

**CHANNEL LINE-UP AN**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	No		Columbus, OH
WBNS-2	21.2	I-M	No		Columbus, OH
WBNS-3	21.3	I-M	No		Columbus, OH
WCMH	14	N	No		Columbus, OH
WCMH-2	14.2	I-M	No		Columbus, OH
WCMH-4	14.4	I-M	No		Columbus, OH
WHIZ	18	N	No		Zanesville, OH
WOSU	34	E	No		Columbus, OH
WOSU-2	34.2	E-M	No		Columbus, OH
WOSU-3	34.3	E-M	No		Columbus, OH
WOSU-4	34.4	E-M	No		Columbus, OH
WOUB	20	E	No		Athens, OH
WSFJ	51	I	No		London, OH
WSYX	6	N	No		Columbus, OH
WSYX-2	6.2	I-M	No		Columbus, OH
WSYX-3	6.3	I-M	No		Columbus, OH
WTTE	28	I	No		Columbus, OH
WTTE-2	28.2	I-M	No		Columbus, OH



LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	Name
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**PRIMARY TRANSMITTERS: TELEVISION**

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**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:

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**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 in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

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**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

**Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

**G**  
**Primary Transmitters: Television**

**CHANNEL LINE-UP AO**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNX	55	I	No		Akron, OH
WBNX-3	55.3	I-M	No		Akron, OH
WBNX-4	55.4	I-M	No		Akron, OH
WDLI	17	I	No		Canton, OH
WEWS	5	N	No		Cleveland, OH
WEWS-2	5.2	I-M	No		Cleveland, OH
WEWS-3	5.3	I-M	No		Cleveland, OH
WIVN-LD	29	I	No		Newcomerstown, OH
WJW	8	I	No		Cleveland, OH
WJW-2	8.2	I-M	No		Cleveland, OH
WJW-3	8.3	I-M	No		Cleveland, OH
WJW-4	8.4	I-M	No		Cleveland, OH
WKYC	3	N	No		Cleveland, OH
WKYC-2	3.2	I-M	No		Cleveland, OH
WKYC-3	3.3	I-M	No		Cleveland, OH
WMFD	68	I	No		Mansfield, OH
WNEO	45	E	Yes	O	Alliance, OH
WNEO-2	45.2	E-M	Yes	O	Alliance, OH

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	<b>Name</b>
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**PRIMARY TRANSMITTERS: TELEVISION**

**In General:** In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a 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:

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**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 in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

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**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

**Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

**G**  
**Primary Transmitters: Television**

**CHANNEL LINE-UP AO**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WNEO-3	45.3	E-M	Yes	O	Alliance, OH
WOCV-CD	35	I	No		Cleveland, OH
WOIO	19	N	No		Shaker Heights, OH
WOIO-2	19.2	I-M	No		Shaker Heights, OH
WOUC	44	E	No		Cambridge, OH
WQHS	61	I	No		Cleveland, OH
WQHS-3	61.3	I-M	No		Cleveland, OH
WRLM	47	I	No		Canton, OH
WTCL-LD	6	I	No		Cleveland, OH
WTCL-LD-3	6.3	I-M	No		Cleveland, OH
WTOV	9	N	No		Steubenville, OH
WUAB	43	I	No		Lorain, OH
WUAB-2	43.2	I-M	No		Lorain, OH
WVPX	23	I	No		Akron, OH

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	Name
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**PRIMARY TRANSMITTERS: TELEVISION**

**In General:** In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

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**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).

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**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

**Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

**G**

**Primary Transmitters: Television**

**CHANNEL LINE-UP AP**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	No		Columbus, OH
WBNS-2	21.2	I-M	No		Columbus, OH
WBNS-3	21.3	I-M	No		Columbus, OH
WCMH	14	N	No		Columbus, OH
WCMH-2	14.2	I-M	No		Columbus, OH
WCMH-4	14.4	I-M	No		Columbus, OH
WHIO	7	N	No		Dayton, OH
WOSU	34	E	Yes	O	Columbus, OH
WOSU-2	34.2	E-M	Yes	O	Columbus, OH
WOSU-3	34.3	E-M	Yes	O	Columbus, OH
WOSU-4	34.4	E-M	Yes	O	Columbus, OH
WSYX	6	N	No		Columbus, OH
WSYX-2	6.2	I-M	No		Columbus, OH
WSYX-3	6.3	I-M	No		Columbus, OH
WTTE	28	I	No		Columbus, OH
WTTE-2	28.2	I-M	No		Columbus, OH
WWHO	53	I	No		Chillicothe, OH

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	Name
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**PRIMARY TRANSMITTERS: TELEVISION**

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**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).

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**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

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**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

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**G**

**Primary Transmitters: Television**

**CHANNEL LINE-UP AQ**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	No		Columbus, OH
WBNS-2	21.2	I-M	No		Columbus, OH
WBNS-3	21.3	I-M	No		Columbus, OH
WCMH	14	N	No		Columbus, OH
WCMH-2	14.2	I-M	No		Columbus, OH
WHIZ	18	N	No		Zanesville, OH
WHIZ-2	18.2	I-M	No		Zanesville, OH
WHIZ-3	18.3	I-M	No		Zanesville, OH
WOSU	34	E	Yes	O	Columbus, OH
WOSU-2	34.2	E-M	Yes	O	Columbus, OH
WOSU-3	34.3	E-M	Yes	O	Columbus, OH
WOSU-4	34.4	E-M	Yes	O	Columbus, OH
WOUC	44	E	No		Cambridge, OH
WSFJ	51	I	No		London, OH
WSYX	6	N	No		Columbus, OH
WSYX-2	6.2	I-M	No		Columbus, OH
WSYX-3	6.3	I-M	No		Columbus, OH
WTTE	28	I	Yes	O	Columbus, OH

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	Name
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**PRIMARY TRANSMITTERS: TELEVISION**

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**G**

**Primary Transmitters: Television**

**CHANNEL LINE-UP AR**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	No		Columbus, OH
WBNS-2	21.2	I-M	No		Columbus, OH
WBNS-3	21.3	I-M	No		Columbus, OH
WCMH	14	N	No		Columbus, OH
WCMH-2	14.2	I-M	No		Columbus, OH
WCMH-4	14.4	I-M	No		Columbus, OH
WHIO	7	N	Yes	O	Dayton, OH
WOSU	34	E	Yes	O	Columbus, OH
WOSU-2	34.2	E-M	Yes	O	Columbus, OH
WOSU-3	34.3	E-M	Yes	O	Columbus, OH
WOSU-4	34.4	E-M	Yes	O	Columbus, OH
WOUB	20	E	Yes	O	Athens, OH
WSFJ	51	I	Yes	O	London, OH
WSYX	6	N	No		Columbus, OH
WSYX-2	6.2	I-M	No		Columbus, OH
WSYX-3	6.3	I-M	No		Columbus, OH
WTTE	28	I	No		Columbus, OH
WWHO	53	I	No		Chillicothe, OH

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	Name
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**PRIMARY TRANSMITTERS: TELEVISION**

**In General:** In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a 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 other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.

**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 in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions.

**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

**Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

G

**Primary  
Transmitters:  
Television**

**CHANNEL LINE-UP AS**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
<b>WCHS</b>	<b>41</b>	<b>N</b>	<b>No</b>		<b>Charleston, WV</b>
<b>WCHS-2</b>	<b>41.2</b>	<b>I-M</b>	<b>No</b>		<b>Charleston, WV</b>
<b>WCHS-3</b>	<b>41.3</b>	<b>I-M</b>	<b>No</b>		<b>Charleston, WV</b>
<b>WLPX</b>	<b>29</b>	<b>I</b>	<b>No</b>		<b>Charleston, WV</b>
<b>WOUB</b>	<b>20</b>	<b>E</b>	<b>No</b>		<b>Athens, OH</b>
<b>WOUB-2</b>	<b>20.2</b>	<b>E-M</b>	<b>No</b>		<b>Athens, OH</b>
<b>WOUB-3</b>	<b>20.3</b>	<b>E-M</b>	<b>No</b>		<b>Athens, OH</b>
<b>WOUB-4</b>	<b>20.4</b>	<b>E-M</b>	<b>No</b>		<b>Athens, OH</b>
<b>WOWK</b>	<b>13</b>	<b>N</b>	<b>No</b>		<b>Huntington, WV</b>
<b>WQCW</b>	<b>30</b>	<b>I</b>	<b>No</b>		<b>Portsmouth, OH</b>
<b>WQCW-3</b>	<b>30.3</b>	<b>I-M</b>	<b>No</b>		<b>Portsmouth, OH</b>
<b>WSAZ</b>	<b>3</b>	<b>N</b>	<b>No</b>		<b>Huntington, WV</b>
<b>WSAZ-2</b>	<b>3.2</b>	<b>I-M</b>	<b>No</b>		<b>Huntington, WV</b>
<b>WSAZ-3</b>	<b>3.3</b>	<b>I-M</b>	<b>No</b>		<b>Huntington, WV</b>
<b>WVAH</b>	<b>11</b>	<b>I</b>	<b>No</b>		<b>Charleston, WV</b>

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>					<b>SYSTEM ID#</b> <b>010659</b>	<b>Name</b>
<b>PRIMARY TRANSMITTERS: TELEVISION</b>						<b>G</b>  <b>Primary Transmitters: Television</b>
<p><b>In General:</b> In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"> <li>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.</li> <li>List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.</li> </ul> <p><b>Column 1:</b> 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).</p> <p><b>Column 2:</b> Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.</p> <p><b>Column 3:</b> Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.</p> <p><b>Column 4:</b> If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.</p> <p><b>Column 5:</b> If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.</p> <p>For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions.</p> <p><b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p> <p><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.</p>						
<b>CHANNEL LINE-UP AT</b>						
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
<b>WBNS</b>	<b>21</b>	<b>N</b>	<b>No</b>		<b>Columbus, OH</b>	
<b>WBNS-2</b>	<b>21.2</b>	<b>I-M</b>	<b>No</b>		<b>Columbus, OH</b>	
<b>WBNS-3</b>	<b>21.3</b>	<b>I-M</b>	<b>No</b>		<b>Columbus, OH</b>	
<b>WCMH</b>	<b>14</b>	<b>N</b>	<b>No</b>		<b>Columbus, OH</b>	
<b>WCMH-2</b>	<b>14.2</b>	<b>I-M</b>	<b>No</b>		<b>Columbus, OH</b>	
<b>WCMH-4</b>	<b>14.4</b>	<b>I-M</b>	<b>No</b>		<b>Columbus, OH</b>	
<b>WOSU</b>	<b>34</b>	<b>E</b>	<b>No</b>		<b>Columbus, OH</b>	
<b>WOSU-2</b>	<b>34.2</b>	<b>E-M</b>	<b>No</b>		<b>Columbus, OH</b>	
<b>WOSU-3</b>	<b>34.3</b>	<b>E-M</b>	<b>No</b>		<b>Columbus, OH</b>	
<b>WOSU-4</b>	<b>34.4</b>	<b>E-M</b>	<b>No</b>		<b>Columbus, OH</b>	
<b>WSFJ</b>	<b>51</b>	<b>I</b>	<b>No</b>		<b>London, OH</b>	
<b>WSYX</b>	<b>6</b>	<b>N</b>	<b>No</b>		<b>Columbus, OH</b>	
<b>WSYX-2</b>	<b>6.2</b>	<b>I-M</b>	<b>No</b>		<b>Columbus, OH</b>	
<b>WSYX-3</b>	<b>6.3</b>	<b>I-M</b>	<b>No</b>		<b>Columbus, OH</b>	
<b>WTTE</b>	<b>28</b>	<b>I</b>	<b>No</b>		<b>Columbus, OH</b>	
<b>WWHO</b>	<b>53</b>	<b>I</b>	<b>No</b>		<b>Chillicothe, OH</b>	

It is strongly recommended that operators list call signs in alphabetical order.

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>					<b>SYSTEM ID#</b> <b>010659</b>	<b>Name</b>
<b>PRIMARY TRANSMITTERS: TELEVISION</b>						<b>G</b>  <b>Primary Transmitters: Television</b>
<p><b>In General:</b> In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"> <li>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.</li> <li>List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.</li> </ul> <p><b>Column 1:</b> 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).</p> <p><b>Column 2:</b> Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.</p> <p><b>Column 3:</b> Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.</p> <p><b>Column 4:</b> If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.</p> <p><b>Column 5:</b> If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.</p> <p>For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions.</p> <p><b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p> <p><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.</p>						
<b>CHANNEL LINE-UP AU</b>						
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
WBDT	26	I	No		Springfield, OH	
WBDT-2	26.2	I-M	No		Springfield, OH	
WBGU	27	E	Yes	O	Bowling Green, OH	
WBNS	21	N	No		Columbus, OH	
WDTN	2	N	No		Dayton, OH	
WDTN-2	2.2	I-M	No		Dayton, OH	
WHIO	7	N	No		Dayton, OH	
WHIO-2	7.2	I-M	No		Dayton, OH	
WHIO-3	7.3	I-M	No		Dayton, OH	
WKEF	22	N	No		Dayton, OH	
WKEF-2	22.2	I-M	No		Dayton, OH	
WKEF-3	22.3	I-M	No		Dayton, OH	
WLIO	8	N	No		Lima, OH	
WLMA	44	I	No		Lima, OH	
WOSU	34	E	No		Columbus, OH	
WOSU-2	34.2	E-M	No		Columbus, OH	
WOSU-3	34.3	E-M	No		Columbus, OH	
WOSU-4	34.4	E-M	No		Columbus, OH	

It is strongly recommended that operators list call signs in alphabetical order.



LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	<b>Name</b>			
<b>PRIMARY TRANSMITTERS: TELEVISION</b>					
<p><b>In General:</b> In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.</li> </ul> <p><b>Column 1:</b> 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).</p> <p><b>Column 2:</b> Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.</p> <p><b>Column 3:</b> Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter “N” (for network), “N-M” (for network multicast), “I” (for independent), “I-M” (for independent multicast), “E” (for noncommercial educational), or “E-M” (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.</p> <p><b>Column 4:</b> If the station is outside the local service area, (i.e. “distant”), enter “Yes”. If not, enter “No”. For an explanation of local service area, see page (v) of the general instructions.</p> <p><b>Column 5:</b> If you have entered “Yes” in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering “LAC” if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.</p> <p>For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation “E” (exempt). For simulcasts, also enter “E”. If you carried the channel on any other basis, enter “O.” For a further explanation of these three categories, see page (v) of the general instructions.</p> <p><b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p> <p><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.</p>			<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">G</div> Primary Transmitters: Television		
<b>CHANNEL LINE-UP AV</b>					
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	No		Columbus, OH
WBNS-2	21.2	I-M	No		Columbus, OH
WBNS-3	21.3	I-M	No		Columbus, OH
WCMH	14	N	No		Columbus, OH
WCMH-2	14.2	I-M	No		Columbus, OH
WCMH-4	14.4	I-M	No		Columbus, OH
WEWS	5	N	Yes	O	Cleveland, OH
WJW	8	I	Yes	O	Cleveland, OH
WMFD	68	I	No		Mansfield, OH
WOSU	34	E	No		Columbus, OH
WOSU-2	34.2	E-M	No		Columbus, OH
WOSU-3	34.3	E-M	No		Columbus, OH
WOSU-4	34.4	E-M	No		Columbus, OH
WSFJ	51	I	No		London, OH
WSYX	6	N	No		Columbus, OH
WSYX-2	6.2	I-M	No		Columbus, OH
WSYX-3	6.3	I-M	No		Columbus, OH
WTOL	11	N	Yes	O	Toledo, OH

It is strongly recommended that operators list call signs in alphabetical order.



LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	<b>Name</b>			
<b>PRIMARY TRANSMITTERS: TELEVISION</b>		<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">G</div> Primary Transmitters: Television			
<p><b>In General:</b> In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.</li> </ul> <p><b>Column 1:</b> 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).</p> <p><b>Column 2:</b> Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.</p> <p><b>Column 3:</b> Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter “N” (for network), “N-M” (for network multicast), “I” (for independent), “I-M” (for independent multicast), “E” (for noncommercial educational), or “E-M” (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.</p> <p><b>Column 4:</b> If the station is outside the local service area, (i.e. “distant”), enter “Yes”. If not, enter “No”. For an explanation of local service area, see page (v) of the general instructions.</p> <p><b>Column 5:</b> If you have entered “Yes” in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering “LAC” if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.</p> <p>For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation “E” (exempt). For simulcasts, also enter “E”. If you carried the channel on any other basis, enter “O.” For a further explanation of these three categories, see page (v) of the general instructions.</p> <p><b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p> <p><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.</p>					
<b>CHANNEL LINE-UP AW</b>					
1. CALL SIGN	2. B’CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
It is strongly recommended that operators list call signs in alphabetical order.	<b>WBNS</b>	<b>21</b>	<b>N</b>	<b>No</b>	<b>Columbus, OH</b>
	<b>WBNS-2</b>	<b>21.2</b>	<b>I-M</b>	<b>No</b>	<b>Columbus, OH</b>
	<b>WBNS-3</b>	<b>21.3</b>	<b>I-M</b>	<b>No</b>	<b>Columbus, OH</b>
	<b>WCMH</b>	<b>14</b>	<b>N</b>	<b>No</b>	<b>Columbus, OH</b>
	<b>WCMH-2</b>	<b>14.2</b>	<b>I-M</b>	<b>No</b>	<b>Columbus, OH</b>
	<b>WCMH-4</b>	<b>14.4</b>	<b>I-M</b>	<b>No</b>	<b>Columbus, OH</b>
	<b>WOSU</b>	<b>34</b>	<b>E</b>	<b>No</b>	<b>Columbus, OH</b>
	<b>WOSU-2</b>	<b>34.2</b>	<b>E-M</b>	<b>No</b>	<b>Columbus, OH</b>
	<b>WOSU-3</b>	<b>34.3</b>	<b>E-M</b>	<b>No</b>	<b>Columbus, OH</b>
	<b>WOSU-4</b>	<b>34.4</b>	<b>E-M</b>	<b>No</b>	<b>Columbus, OH</b>
	<b>WSFJ</b>	<b>51</b>	<b>I</b>	<b>No</b>	<b>London, OH</b>
	<b>WSYX</b>	<b>6</b>	<b>N</b>	<b>No</b>	<b>Columbus, OH</b>
	<b>WSYX-2</b>	<b>6.2</b>	<b>I-M</b>	<b>No</b>	<b>Columbus, OH</b>
	<b>WSYX-3</b>	<b>6.3</b>	<b>I-M</b>	<b>No</b>	<b>Columbus, OH</b>
	<b>WTTE</b>	<b>28</b>	<b>I</b>	<b>No</b>	<b>Columbus, OH</b>
	<b>WTTE-2</b>	<b>28.2</b>	<b>I-M</b>	<b>No</b>	<b>Columbus, OH</b>
	<b>WWHO</b>	<b>53</b>	<b>I</b>	<b>No</b>	<b>Chillicothe, OH</b>
	<b>WWHO-2</b>	<b>53.2</b>	<b>I-M</b>	<b>No</b>	<b>Chillicothe, OH</b>



LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	<b>Name</b>			
<b>PRIMARY TRANSMITTERS: TELEVISION</b>					
<p><b>In General:</b> In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.</li> </ul> <p><b>Column 1:</b> 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).</p> <p><b>Column 2:</b> Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.</p> <p><b>Column 3:</b> Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter “N” (for network), “N-M” (for network multicast), “I” (for independent), “I-M” (for independent multicast), “E” (for noncommercial educational), or “E-M” (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.</p> <p><b>Column 4:</b> If the station is outside the local service area, (i.e. “distant”), enter “Yes”. If not, enter “No”. For an explanation of local service area, see page (v) of the general instructions.</p> <p><b>Column 5:</b> If you have entered “Yes” in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering “LAC” if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.</p> <p>For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation “E” (exempt). For simulcasts, also enter “E”. If you carried the channel on any other basis, enter “O.” For a further explanation of these three categories, see page (v) of the general instructions.</p> <p><b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p> <p><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.</p>			<div style="font-size: 2em; font-weight: bold; margin: 0;">G</div> <div style="font-weight: bold; margin: 5px 0 0 0;">Primary Transmitters: Television</div>		
<b>CHANNEL LINE-UP AX</b>					
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	No		Columbus, OH
WBNS-2	21.2	I-M	No		Columbus, OH
WBNS-3	21.3	I-M	No		Columbus, OH
WCMH	14	N	No		Columbus, OH
WCMH-2	14.2	I-M	No		Columbus, OH
WCMH-4	14.4	I-M	No		Columbus, OH
WOCB-CD	22	I	No		Marion, OH
WOSU	34	E	No		Columbus, OH
WOSU-2	34.2	E-M	No		Columbus, OH
WOSU-3	34.3	E-M	No		Columbus, OH
WOSU-4	34.4	E-M	No		Columbus, OH
WSFJ	51	I	No		London, OH
WSYX	6	N	No		Columbus, OH
WSYX-2	6.2	I-M	No		Columbus, OH
WSYX-3	6.3	I-M	No		Columbus, OH
WTTE	28	I	No		Columbus, OH
WTTE-2	28.2	I-M	No		Columbus, OH
WWHO	53	I	No		Chillicothe, OH

It is strongly recommended that operators list call signs in alphabetical order.



LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	<b>Name</b>			
<b>PRIMARY TRANSMITTERS: TELEVISION</b>					
<p><b>In General:</b> In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.</li> </ul> <p><b>Column 1:</b> 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).</p> <p><b>Column 2:</b> Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.</p> <p><b>Column 3:</b> Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter “N” (for network), “N-M” (for network multicast), “I” (for independent), “I-M” (for independent multicast), “E” (for noncommercial educational), or “E-M” (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.</p> <p><b>Column 4:</b> If the station is outside the local service area, (i.e. “distant”), enter “Yes”. If not, enter “No”. For an explanation of local service area, see page (v) of the general instructions.</p> <p><b>Column 5:</b> If you have entered “Yes” in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering “LAC” if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.</p> <p>For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation “E” (exempt). For simulcasts, also enter “E”. If you carried the channel on any other basis, enter “O.” For a further explanation of these three categories, see page (v) of the general instructions.</p> <p><b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p> <p><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.</p>			<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">G</div> Primary Transmitters: Television		
<b>CHANNEL LINE-UP AY</b>					
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS	21	N	No		Columbus, OH
WBNS-2	21.2	I-M	No		Columbus, OH
WBNS-3	21.3	I-M	No		Columbus, OH
WCMH	14	N	No		Columbus, OH
WCMH-2	14.2	I-M	No		Columbus, OH
WCMH-4	14.4	I-M	No		Columbus, OH
WHIO	7	N	No		Dayton, OH
WOSU	34	E	No		Columbus, OH
WOSU-2	34.2	E-M	No		Columbus, OH
WOSU-3	34.3	E-M	No		Columbus, OH
WOSU-4	34.4	E-M	No		Columbus, OH
WSYX	6	N	No		Columbus, OH
WSYX-2	6.2	I-M	No		Columbus, OH
WSYX-3	6.3	I-M	No		Columbus, OH
WTTE	28	I	No		Columbus, OH
WTTE-2	28.2	I-M	No		Columbus, OH
WWHO	53	I	No		Chillicothe, OH

It is strongly recommended that operators list call signs in alphabetical order.

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>					<b>SYSTEM ID#</b> <b>010659</b>	<b>Name</b>
<b>PRIMARY TRANSMITTERS: TELEVISION</b>						<b>G</b>  <b>Primary Transmitters: Television</b>
<p><b>In General:</b> In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"> <li>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.</li> <li>List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.</li> </ul> <p><b>Column 1:</b> 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).</p> <p><b>Column 2:</b> Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.</p> <p><b>Column 3:</b> Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions.</p> <p><b>Column 4:</b> If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.</p> <p><b>Column 5:</b> If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.</p> <p>For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions.</p> <p><b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p> <p><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.</p>						
<b>CHANNEL LINE-UP AZ</b>						
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
WBDT	26	I	Yes	O	Springfield, OH	
WBGU	27	E	No		Bowling Green, OH	
WBGU-2	27.2	E-M	No		Bowling Green, OH	
WBGU-3	27.3	E-M	No		Bowling Green, OH	
WBNS	21	N	Yes	O	Columbus, OH	
WHIO	7	N	Yes	O	Dayton, OH	
WKEF	22	N	Yes	O	Dayton, OH	
WKEF-2	22.2	I-M	Yes	O	Dayton, OH	
WKEF-3	22.3	I-M	Yes	O	Dayton, OH	
WLIO	8	N	No		Lima, OH	
WLIO-2	8.2	I-M	No		Lima, OH	
WLMA	44	I	No		Lima, OH	
WOHL-CD	35	N	No		Lima, OH	
WRGT	45	I	Yes	O	Dayton, OH	
WSYX	6	N	Yes	O	Columbus, OH	
WTLW-LP	44	I	No		Lima, OH	

It is strongly recommended that operators list call signs in alphabetical order.







LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	<b>Name</b>				
<b>GROSS RECEIPTS</b> <b>Instructions:</b> The figure you give in this space determines the form you file and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period.		<b>K</b> <b>Gross Receipts</b>				
<b>IMPORTANT:</b> You must complete a statement in space P concerning gross receipts.		<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: right;">\$</td> <td style="text-align: right;"><b>46,217,057.67</b></td> </tr> <tr> <td colspan="2" style="text-align: center; font-size: small;">(Amount of gross receipts)</td> </tr> </table>	\$	<b>46,217,057.67</b>	(Amount of gross receipts)	
\$	<b>46,217,057.67</b>					
(Amount of gross receipts)						
<b>COPYRIGHT ROYALTY FEE</b> <b>Instructions:</b> Use the blocks in this space L to determine the royalty fee you owe: <ul style="list-style-type: none"> <li>• Complete block 1, showing your minimum fee.</li> <li>• Complete block 2, showing whether your system carried any distant television stations.</li> <li>• 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.</li> <li>• 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.</li> </ul> <p>▶ If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of block 3 below.</p> <p>▶ If part 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 in block 3 below.</p> <p>▶ If part 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be entered on line 2 in block 4 below.</p>		<b>L</b> <b>Copyright Royalty Fee</b>				
Block 1	<b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or more are required to pay at least the minimum fee, regardless of whether they carried any distant stations. This fee is 1.064 percent of the system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K <span style="float: right;">\$ <b>46,217,057.67</b></span> Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here. <span style="float: right;">\$ <b>491,749.49</b></span> This is your minimum fee.					
Block 2	<b>DISTANT TELEVISION STATIONS CARRIED:</b> Your answer here must agree with the information you gave in space G. If, in space G, you identified any stations as "distant" by stating "Yes" in column 4, you must check "Yes" in this block. <ul style="list-style-type: none"> <li>• Did your cable system carry any distant television stations during the accounting period?  <input checked="" type="checkbox"/> Yes—Complete the DSE schedule.      <input type="checkbox"/> No—Leave block 3 below blank and complete line 1, block 4.</li> </ul>					
Block 3	Line 1. <b>BASE RATE FEE:</b> 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 <span style="float: right;">\$ <b>68,246.42</b></span> Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero <span style="float: right;"><b>145,568.30</b></span> Line 3. Add lines 1 and 2 and enter here <span style="float: right;">\$ <b>213,814.72</b></span>					
Block 4	Line 1. <b>BASE RATE FEE/3.75 FEE or MINIMUM FEE:</b> Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger <span style="float: right;">\$ <b>491,749.49</b></span> Line 2. <b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero. <span style="float: right;"><b>0.00</b></span> Line 3. <b>INTEREST CHARGE:</b> Enter the amount from line 4, space Q, page 9 (Interest Worksheet) <span style="float: right;"><b>0.00</b></span> <b>TOTAL ROYALTY FEE.</b> Add Lines 1, 2 and 3 of block 4 and enter total here <span style="float: right;">\$ <b>491,749.49</b></span>  Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See page (i) of the general instructions for more information.)	Cable systems submitting additional deposits under Section 111(d)(7) should contact the Licensing Division for the appropriate form for submitting the additional fees.				

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>
<b>M</b>  <b>Channels</b>	<b>CHANNELS</b> <b>Instructions:</b> You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	
	1. Enter the total number of channels on which the cable system carried television broadcast stations .....	<b>107</b>
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services .....	<b>572</b>
<b>N</b>  <b>Individual to Be Contacted for Further Information</b>	<b>INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED:</b> (Identify an individual to whom we can write or call about this statement of account.)	
	Name <b>JACOB C. SCHLECHTE</b>	Telephone <b>314-543-2294</b>
	Address <b>12405 POWERSCOURT DR</b> <small>(Number, street, rural route, apartment, or suite number)</small>	
	<b>ST LOUIS, MO 63131</b> <small>(City, town, state, zip)</small>	
	Email (optional) _____	Fax (optional) _____
<b>O</b>  <b>Certification</b>	<b>CERTIFICATION</b> (This statement of account must be certified and signed in accordance with Copyright Office regulations, as explained in the general instructions.)	
	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	<input type="checkbox"/> <b>(Owner other than corporation or partnership)</b> I am the owner of the cable system as identified in line 1 of space B; or	
	<input checked="" type="checkbox"/> <b>(Agent of owner other than corporation or partnership)</b> I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or	
	<input type="checkbox"/> <b>(Officer or partner)</b> I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.	
	• I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	
	 Handwritten signature: _____	/s/ Pamela K. Heflin
	Typed or printed name: <b>PAMELA K. HEFLIN</b>	
	Title: <b>MANAGER, ACCOUNTING</b> <small>(Title of official position held in corporation or partnership)</small>	
	Date: <b>2/21/2025</b>	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	<b>Name</b>
<p><b>SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS</b></p> <p>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:</p> <p style="padding-left: 40px;">“In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119.”</p> <p>For more information on when to exclude these amounts, see the note on page (vii) of the general instructions.</p> <p>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?</p> <p><input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES. Enter the total here and list the satellite carrier(s) below. . . . . \$ _____</p>		<p style="font-size: 2em; font-weight: bold;">P</p> <p style="text-align: center;"><b>Special Statement Concerning Gross Receipts Exclusion</b></p>
Name _____ Mailing Address _____ _____ _____	Name _____ Mailing Address _____ _____ _____	
<p><b>INTEREST ASSESSMENTS</b></p> <p>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.</p> <p>Line 1 Enter the amount of late payment or underpayment . . . . . _____</p> <p style="text-align: right; padding-right: 100px;">x _____</p> <p>Line 2 Multiply line 1 by the interest rate* and enter the sum here . . . . . _____ -</p> <p style="text-align: right; padding-right: 100px;">x _____ days</p> <p>Line 3 Multiply line 2 by the number of days late and enter the sum here . . . . . _____ -</p> <p style="text-align: right; padding-right: 100px;">x 0.00274</p> <p>Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7) . . . . . \$ _____ -</p> <p style="text-align: right; padding-right: 100px;">(interest charge)</p> <p>* To view the interest rate chart click on <a href="http://www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a>. For further assistance please contact the Licensing Division at (202) 707-8150 or <a href="mailto:licensing@loc.gov">licensing@loc.gov</a>.</p> <p>** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.</p> <p>NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.</p> <p>Owner _____                  Address _____                  _____                  _____</p> <p>First community served _____                  Accounting period _____                  ID number _____</p>		<p style="font-size: 2em; font-weight: bold;">Q</p> <p style="text-align: center;"><b>Interest Assessment</b></p>

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

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

**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 DSEs	0.701% of gross receipts
The fifth and each additional DSE	0.330% of gross receipts

**PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE**

- If any of the stations were partially distant:
  1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.
  2. Identify the communities/areas represented by each subscriber group.
  3. For each subscriber group, calculate the total number of DSEs of that group’s complement of stations.  
If your system is located wholly outside all major and smaller television markets, give each station’s DSEs as you gave them in parts 2, 3, and 4 of the schedule; or  
If any portion of your system is located in a major or smaller television market, give each station’s DSE as you gave it in block B, part 6 of this schedule.
  4. Determine the portion of the total gross receipts you reported in space K (page 7) that is attributable to each subscriber group.

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

6. Add together the base rate fees for each subscriber group to determine the system’s total base rate fee.

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

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

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

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

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

**EXAMPLE:**

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

In most cases under current FCC rules, all of Fairvale would be within the local service area of both stations A and C and all of Rapid City and Bodega Bay would be within the local service areas of stations B, D, and E.	<b>Distant Stations Carried</b>		<b>Identification of Subscriber Groups</b>		<b>GROSS RECEIPTS FROM SUBSCRIBERS</b>
	STATION	DSE	CITY	OUTSIDE LOCAL SERVICE AREA OF	
	A (independent)	1.0	Santa Rosa	Stations A, B, C, D, E	\$310,000.00
	B (independent)	1.0	Rapid City	Stations A and C	100,000.00
	C (part-time)	0.083	Bodega Bay	Stations A and C	70,000.00
	D (part-time)	0.139	Fairvale	Stations B, D, and E	120,000.00
	E (network)	0.25			
	<b>TOTAL DSEs</b>	<b>2.472</b>		<b>TOTAL GROSS RECEIPTS</b>	<b>\$600,000.00</b>
<b>Minimum Fee Total Gross Receipts</b>			\$600,000.00		
			x .01064		
			<b>\$6,384.00</b>		
<b>First Subscriber Group (Santa Rosa)</b>		<b>Second Subscriber Group (Rapid City and Bodega Bay)</b>		<b>Third Subscriber Group (Fairvale)</b>	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	<b>\$6,497.20</b>	Base rate fee	<b>\$1,907.71</b>	Base rate fee	<b>\$1,604.03</b>
<b>Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94</b>					
In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)					

<b>1</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>			
	<b>Instructions:</b> In the column headed “Call Sign”: list the call signs of all distant stations identified by the letter “O” in column 5 of space G (page 3). In the column headed “DSE”: for each independent station, give the DSE as “1.0”; for each network or noncommercial educational station, give the DSE as “.25.”				
<b>2</b> <b>Computation of DSEs for Category “O” Stations</b>	CATEGORY “O” STATIONS: DSEs				
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	WBDBT	1.00	WBNS-3	1.00	WCMH
	WBGU	0.25	WCHS	0.25	WEWS
	WBNS	0.25	WCHS-2	1.00	WHIO
	WBNS-2	1.00	WCHS-3	1.00	WHIZ
	<b>SUM OF DSEs OF CATEGORY “O” STATIONS:</b> • Add the DSEs of each station. Enter the sum here and in line 1 of part 5 of this schedule.				
<b>32.25</b>					



<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>		<b>SYSTEM ID#</b> <b>010659</b>				
<b>3</b>  Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	<b>Instructions: CAPACITY</b>						
	<b>Column 1:</b> List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3).						
	<b>Column 2:</b> For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station.						
	<b>Column 3:</b> For each station, give the total number of hours that the station broadcast over the air during the accounting period.						
	<b>Column 4:</b> Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station.						
<b>Column 5:</b> For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25."							
<b>Column 6:</b> Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions.)							
<b>CATEGORY LAC STATIONS: COMPUTATION OF DSEs</b>							
1. CALL SIGN	2. NUMBER OF HOURS CARRIED BY SYSTEM	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAGE VALUE	5. TYPE VALUE	6. DSE		
	÷	=	x	=			
	÷	=	x	=			
	÷	=	x	=			
	÷	=	x	=			
	÷	=	x	=			
	÷	=	x	=			
	÷	=	x	=			
	÷	=	x	=			
<b>SUM OF DSEs OF CATEGORY LAC STATIONS:</b> Add the DSEs of each station. Enter the sum here and in line 2 of part 5 of this schedule, . . . . . ▶				<b>0.00</b>			
<b>4</b>  Computation of DSEs for Substitute-Basis Stations	<b>Instructions:</b>						
	<b>Column 1:</b> Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station: • Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and • Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I).						
	<b>Column 2:</b> For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I.						
	<b>Column 3:</b> Enter the number of days in the calendar year: 365, except in a leap year.						
	<b>Column 4:</b> Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions.)						
<b>SUBSTITUTE-BASIS STATIONS: COMPUTATION OF DSEs</b>							
1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
	÷	=			÷	=	
	÷	=			÷	=	
	÷	=			÷	=	
	÷	=			÷	=	
	÷	=			÷	=	
	÷	=			÷	=	
<b>SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS:</b> Add the DSEs of each station. Enter the sum here and in line 3 of part 5 of this schedule, . . . . . ▶				<b>0.00</b>			
<b>5</b>  Total Number of DSEs	<b>TOTAL NUMBER OF DSEs:</b> Give the amounts from the boxes in parts 2, 3, and 4 of this schedule and add them to provide the total number of DSEs applicable to your system.						
	1. Number of DSEs from part 2 ◀ _____ ▶			<b>32.25</b>			
	2. Number of DSEs from part 3 ◀ _____ ▶			<b>0.00</b>			
	3. Number of DSEs from part 4 ◀ _____ ▶			<b>0.00</b>			
TOTAL NUMBER OF DSEs _____ ▶			<b>32.25</b>				

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<p><b>Instructions:</b> Block A must be completed.                  In block A:                  • If your answer is "Yes," leave the remainder of part 6 and part 7 of the DSE schedule blank and complete part 8, (page 16) of the schedule.                  • If your answer is "No," complete blocks B and C below.</p>									
<b>BLOCK A: TELEVISION MARKETS</b>									
Is the cable system located wholly outside of all major and smaller markets as defined under section 76.5 of FCC rules and regulations in effect on June 24, 1981? <input type="checkbox"/> Yes—Complete part 8 of the schedule—DO NOT COMPLETE THE REMAINDER OF PART 6 AND 7. <input checked="" type="checkbox"/> No—Complete blocks B and C below.									
<b>BLOCK B: CARRIAGE OF PERMITTED DSEs</b>									
Column 1: List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.)  Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station. (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) BASIS OF PERMITTED CARRIAGE A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)] B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1) C Noncommercial educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)] D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule). E Carried pursuant to individual waiver of FCC rules (76.7) *F A station previously carried on a part-time or substitute basis prior to June 25, 1981 G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)] M Retransmission of a distant multicast stream.  Column 3: List the DSE for each distant station listed in parts 2, 3, and 4 of the schedule. *(Note: For those stations identified by the letter "F" in column 2, you must complete the worksheet on page 14 of this schedule to determine the DSE.)									
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
<b>WBGU</b>	<b>C</b>	<b>0.25</b>	<b>WIYE-LD</b>	<b>A</b>	<b>0.25</b>	<b>WNEO</b>	<b>C</b>	<b>0.25</b>	
<b>WBNS-2</b>	<b>M</b>	<b>1.00</b>	<b>WKEF-2</b>	<b>M</b>	<b>1.00</b>	<b>WNEO-2</b>	<b>M</b>	<b>0.25</b>	
<b>WBNS-3</b>	<b>M</b>	<b>1.00</b>	<b>WKEF-3</b>	<b>M</b>	<b>1.00</b>	<b>WNEO-3</b>	<b>M</b>	<b>0.25</b>	
<b>WCHS-2</b>	<b>M</b>	<b>1.00</b>	<b>WLIO</b>	<b>A</b>	<b>0.25</b>	<b>WOSU</b>	<b>C</b>	<b>0.25</b>	
<b>WCHS-3</b>	<b>M</b>	<b>1.00</b>	<b>WLMA</b>	<b>A</b>	<b>1.00</b>	<b>WOSU-2</b>	<b>M</b>	<b>0.25</b>	
<b>WHIO</b>	<b>A</b>	<b>0.25</b>	<b>WLPX</b>	<b>A</b>	<b>1.00</b>	<b>WOSU-3</b>	<b>M</b>	<b>0.25</b>	
								<b>24.75</b>	
<b>BLOCK C: COMPUTATION OF 3.75 FEE</b>									
Line 1: Enter the total number of DSEs from part 5 of this schedule _____									
Line 2: Enter the sum of permitted DSEs from block B above _____									
Line 3: Subtract line 2 from line 1. This is the total number of DSEs subject to the 3.75 rate. (If zero, leave lines 4–7 blank and proceed to part 7 of this schedule) _____									
Line 4: Enter gross receipts from space K (page 7) _____ x 0.0375									
Line 5: Multiply line 4 by 0.0375 and enter sum here _____ x									
Line 6: Enter total number of DSEs from line 3 _____									
								<b>0.00</b>	
Line 7: Multiply line 6 by line 5 and enter here and on line 2, block 3, space L (page 7) _____									

6

Computation of 3.75 Fee

Do any of the DSEs represent partially permitted/ partially nonpermitted carriage? If yes, see part 9 instructions.





LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>		SYSTEM ID# <b>010659</b>	Name
<b>BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE</b>			
Section 1	Enter the amount of gross receipts from space K (page 7) . . . . . ▶ \$	<b>46,217,057.67</b>	7
Section 2	A. Enter the total DSEs from block B of part 7 . . . . . ▶	<b>0.00</b>	
	B. Enter the total number of exempt DSEs from block C of part 7 . . . . . ▶	<b>0.00</b>	
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. <b>If zero, proceed to part 8.</b> . . . . . ▶ \$	<b>0.00</b>	Computation of the Syndicated Exclusivity Surcharge
<p>• Is any portion of the cable system within a top 50 television market as defined by the FCC?  <input checked="" type="checkbox"/> Yes—Complete section 3 below.                      <input type="checkbox"/> No—Complete section 4 below.</p>			
<b>SECTION 3: TOP 50 TELEVISION MARKET</b>			
Section 3a	<p>• Did your cable system retransmit the signals of any partially distant television stations during the accounting period?  <input checked="" type="checkbox"/> Yes—Complete part 9 of this schedule.                      <input type="checkbox"/> No—Complete the applicable section below.</p> <p>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.</p> <p>A. Enter 0.00599 of gross receipts (the amount in section 1) . . . . . ▶ \$ <span style="background-color: yellow; border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></p> <p>B. Enter 0.00377 of gross receipts (the amount in section 1) . . . . . ▶ \$ <span style="background-color: yellow; border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></p> <p>C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here . . . . . ▶ <span style="background-color: yellow; border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></p> <p>D. Multiply line B by line C and enter here . . . . . ▶ <span style="background-color: yellow; border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></p> <p>E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) <b>Syndicated Exclusivity Surcharge</b> . . . . . ▶ \$ <span style="background-color: yellow; border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></p>		
Section 3b	<p>If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.</p> <p>A. Enter 0.00599 of gross receipts (the amount in section 1) . . . . . ▶ \$ <span style="background-color: yellow; border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></p> <p>B. Enter 0.00377 of gross receipts (the amount in section 1) . . . . . ▶ \$ <span style="background-color: yellow; border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></p> <p>C. Multiply line B by 3.000 and enter here . . . . . ▶ \$ <span style="background-color: yellow; border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></p> <p>D. Enter 0.00178 of gross receipts (the amount in section 1) . . . . . ▶ \$ <span style="background-color: yellow; border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></p> <p>E. Subtract 4.000 from total DSEs (the figure on line C in section 2) and enter here <span style="background-color: yellow; border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></p> <p>F. Multiply line D by line E and enter here . . . . . ▶ \$ <span style="background-color: yellow; border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></p> <p>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) <b>Syndicated Exclusivity Surcharge</b> . . . . . ▶ \$ <span style="background-color: yellow; border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></p>		
<b>SECTION 4: SECOND 50 TELEVISION MARKET</b>			
Section 4a	<p>Did your cable system retransmit the signals of any partially distant television stations during the accounting period?  <input checked="" type="checkbox"/> Yes—Complete part 9 of this schedule.                      <input type="checkbox"/> No—Complete the applicable section below.</p> <p>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.</p> <p>A. Enter 0.00300 of gross receipts (the amount in section 1) . . . . . ▶ \$ <span style="background-color: yellow; border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></p> <p>B. Enter 0.00189 of gross receipts (the amount in section 1) . . . . . ▶ \$ <span style="background-color: yellow; border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></p> <p>C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here . . . . . ▶ <span style="background-color: yellow; border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></p> <p>D. Multiply line B by line C and enter here . . . . . ▶ \$ <span style="background-color: yellow; border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></p> <p>E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) <b>Syndicated Exclusivity Surcharge</b> . . . . . ▶ \$ <span style="background-color: yellow; border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>		<b>SYSTEM ID#</b> <b>010659</b>
<b>7</b>  <b>Computation of the Syndicated Exclusivity Surcharge</b>	Section 4b	<p>If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.</p> <p>A. Enter 0.00300 of gross receipts (the amount in section 1). . . . . ▶ \$ _____</p> <p>B. Enter 0.00189 of gross receipts (the amount in section 1). . . . . ▶ \$ _____</p> <p>C. Multiply line B by 3.000 and enter here. . . . . ▶ \$ _____</p> <p>D. Enter 0.00089 of gross receipts (the amount in section 1). . . . . ▶ \$ _____</p> <p>E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here. . . . . ▶ _____</p> <p>F. Multiply line D by line E and enter here . . . . . ▶ \$ _____</p> <p>G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)</p> <p><b>Syndicated Exclusivity Surcharge.</b> . . . . . ▶ \$ _____</p>	
<b>8</b>  <b>Computation of Base Rate Fee</b>	<p><b>Instructions:</b></p> <p>You must complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part 6 was checked "Yes," use the total number of DSEs from part 5.</p> <ul style="list-style-type: none"> <li>• In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.</li> <li>• If your answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.</li> <li>• If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below blank.</li> </ul> <p><b>What is a partially distant station?</b> A station is "partially distant" if, at the time your system carried it, some of your subscribers were located within that station's local service area and others were located outside that area. For the definition of a station's "local service area," see page (v) of the general instructions.</p>		
<b>BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS</b>			
<p>• Did your cable system retransmit the signals of any partially distant television stations during the accounting period?</p> <p><input checked="" type="checkbox"/> Yes—Complete part 9 of this schedule.                      <input type="checkbox"/> No—Complete the following sections.</p>			
<b>BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE</b>			
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	<p>If the figure in section 2 is <b>4.000 or less</b>, compute your base rate fee here and leave section 4 blank.</p> <p>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.</p> <p>A. Enter 0.01064 of gross receipts (the amount in section 1). . . . . ▶ \$ _____</p> <p>B. Enter 0.00701 of gross receipts (the amount in section 1). . . . . ▶ _____</p> <p>C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here. . . . . ▶ _____ -</p> <p>D. Multiply line B by line C and enter here. . . . . ▶ \$ _____</p> <p>E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)</p> <p><b>Base Rate Fee.</b> . . . . . ▶ \$ _____ <b>0.00</b></p>		

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
<b>TIME WARNER CABLE MIDWEST LLC</b>	<b>010659</b>	
Section <b>4</b>	<p>If the figure in section 2 is <b>more than 4.000</b>, compute your base rate fee here and leave section 3 blank.</p> <p>A. Enter 0.01064 of gross receipts (the amount in section 1) ..... ▶ \$ _____</p> <p>B. Enter 0.00701 of gross receipts (the amount in section 1) ..... ▶ \$ _____</p> <p>C. Multiply line B by 3.000 and enter here ..... ▶ \$ _____</p> <p>D. Enter 0.00330 of gross receipts (the amount in section 1) ..... ▶ \$ _____</p> <p>E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here ..... ▶ _____</p> <p>F. Multiply line D by line E and enter here ..... ▶ \$ _____</p> <p>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)</p> <p><b>Base Rate Fee</b> ..... ▶ \$ <span style="border: 1px solid black; padding: 2px;">0.00</span></p>	<p><b>8</b></p> <p>Computation of Base Rate Fee</p>
<p><b>IMPORTANT:</b> It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in Space G.</p> <p><b>In General:</b> If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this exclusion, you must:</p> <p><b>First:</b> Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.</p> <p><b>Finally:</b> Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.</p> <p>NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, if your cable system is wholly located outside all major television markets, complete block A only.</p> <p><b>How to Identify a Subscriber Group for Partially Distant Stations</b></p> <p><b>Step 1:</b> For each community served, determine the local service area of each wholly distant and each partially distant station you carried to that community.</p> <p><b>Step 2:</b> For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by the same token, the station is distant to the subscriber.)</p> <p><b>Step 3:</b> Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable system will have only one subscriber group when the distant stations it carried have local service areas that coincide.</p> <p><b>Computing the base rate fee for each subscriber group:</b> Block A contains separate sections, one for each of your system's subscriber groups.</p> <p>In each section:</p> <ul style="list-style-type: none"> <li>• Identify the communities/areas represented by each subscriber group.</li> <li>• Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the subscribers in the group.</li> <li>• If:             <ol style="list-style-type: none"> <li>1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, and 4 of this schedule; or,</li> <li>2) 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.</li> </ol> </li> <li>• Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.</li> <li>• Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions.</li> <li>• Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your actual calculations on the form.</li> </ul>	<p><b>9</b></p> <p>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations, and for Partially Permitted Stations</p>	

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
FIRST SUBSCRIBER GROUP					SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 1</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 2</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs				<u>0.00</u>	Total DSEs				<u>0.00</u>
Gross Receipts First Group				\$ <u>18,500,929.80</u>	Gross Receipts Second Group				\$ <u>2,605,027.60</u>
Base Rate Fee First Group				\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>	Base Rate Fee Second Group				\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>
THIRD SUBSCRIBER GROUP					FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 3</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 4</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WOUB</b>	<b>0.25</b>								
Total DSEs				<u>0.25</u>	Total DSEs				<u>0.00</u>
Gross Receipts Third Group				\$ <u>444,092.40</u>	Gross Receipts Fourth Group				\$ <u>709,379.77</u>
Base Rate Fee Third Group				\$ <span style="border: 1px solid black; padding: 2px;">1,181.29</span>	Base Rate Fee Fourth Group				\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; padding: 2px;">68,246.42</span>			

**9**

Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
FIFTH SUBSCRIBER GROUP					SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 5</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 6</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WOUC</b>	<b>0.25</b>								
Total DSEs <span style="float: right;"><b>0.25</b></span>				Total DSEs <span style="float: right;"><b>0.00</b></span>					
Gross Receipts First Group <span style="float: right;"><b>\$ 2,441,497.36</b></span>				Gross Receipts Second Group <span style="float: right;"><b>\$ 358,957.84</b></span>					
Base Rate Fee First Group <span style="float: right;"><b>\$ 6,494.38</b></span>				Base Rate Fee Second Group <span style="float: right;"><b>\$ 0.00</b></span>					
SEVENTH SUBSCRIBER GROUP					EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 7</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 8</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WOSU</b>	<b>0.25</b>			<b>WLMA</b>	<b>1.00</b>				
<b>WOSU-2</b>	<b>0.25</b>			<b>WTLW-LP</b>	<b>1.00</b>				
<b>WOSU-3</b>	<b>0.25</b>								
<b>WOSU-4</b>	<b>0.25</b>								
Total DSEs <span style="float: right;"><b>1.00</b></span>				Total DSEs <span style="float: right;"><b>2.00</b></span>					
Gross Receipts Third Group <span style="float: right;"><b>\$ 8,535.92</b></span>				Gross Receipts Fourth Group <span style="float: right;"><b>\$ 29,426.46</b></span>					
Base Rate Fee Third Group <span style="float: right;"><b>\$ 90.82</b></span>				Base Rate Fee Fourth Group <span style="float: right;"><b>\$ 519.38</b></span>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7) <span style="float: right; border: 1px solid black; padding: 2px;">\$ _____</span>									

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Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations



LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
THIRTEENTH SUBSCRIBER GROUP					FOURTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 13</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 14</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WSYX-2</b>	<b>1.00</b>								
<b>WSYX-3</b>	<b>1.00</b>								
Total DSEs <b>2.00</b>				Total DSEs <b>0.00</b>					
Gross Receipts First Group \$ <b>7,188.14</b>				Gross Receipts Second Group \$ <b>7,637.40</b>					
Base Rate Fee First Group \$ <b>126.87</b>				Base Rate Fee Second Group \$ <b>0.00</b>					
FIFTEENTH SUBSCRIBER GROUP					SIXTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 15</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 16</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WOSU</b>	<b>0.25</b>			<b>WOSU</b>	<b>0.25</b>				
<b>WOSU-2</b>	<b>0.25</b>			<b>WOSU-2</b>	<b>0.25</b>				
<b>WOSU-3</b>	<b>0.25</b>			<b>WOSU-3</b>	<b>0.25</b>				
<b>WOSU-4</b>	<b>0.25</b>			<b>WOSU-4</b>	<b>0.25</b>				
				<b>WOUB</b>	<b>0.25</b>				
Total DSEs <b>1.00</b>				Total DSEs <b>1.25</b>					
Gross Receipts Third Group \$ <b>326,835.83</b>				Gross Receipts Fourth Group \$ <b>52,114.03</b>					
Base Rate Fee Third Group \$ <b>3,477.53</b>				Base Rate Fee Fourth Group \$ <b>645.82</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <input style="width: 150px;" type="text"/>			

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
SEVENTEENTH SUBSCRIBER GROUP					EIGHTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 17</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 18</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs				<u>0.00</u>	Total DSEs				<u>0.00</u>
Gross Receipts First Group				\$ <u>14,600.91</u>	Gross Receipts Second Group				\$ <u>396,920.22</u>
Base Rate Fee First Group				\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 15px;"></span> <u>0.00</u>	Base Rate Fee Second Group				\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 15px;"></span> <u>0.00</u>
NINETEENTH SUBSCRIBER GROUP					TWENTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 19</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 20</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
				<b>WCHS-2</b>	<b>1.00</b>				
				<b>WCHS-3</b>	<b>1.00</b>				
				<b>WSAZ</b>	<b>0.25</b>				
				<b>WSAZ-2</b>	<b>1.00</b>				
Total DSEs				<u>0.00</u>	Total DSEs				<u>3.25</u>
Gross Receipts Third Group				\$ <u>449.26</u>	Gross Receipts Fourth Group				\$ <u>8,985.18</u>
Base Rate Fee Third Group				\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 15px;"></span> <u>0.00</u>	Base Rate Fee Fourth Group				\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 15px;"></span> <u>237.32</u>
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span>	

**9**

Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
TWENTY-FIRST SUBSCRIBER GROUP					TWENTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 21</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 22</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WLPX</b>	<b>1.00</b>			<b>WBNS-2</b>	<b>1.00</b>				
				<b>WBNS-3</b>	<b>1.00</b>				
				<b>WSYX</b>	<b>0.25</b>				
Total DSEs				<b>1.00</b>	Total DSEs				<b>2.25</b>
Gross Receipts First Group				<b>\$ 37,962.38</b>	Gross Receipts Second Group				<b>\$ 235,860.91</b>
Base Rate Fee First Group				<b>\$ 403.92</b>	Base Rate Fee Second Group				<b>\$ 4,576.29</b>
TWENTY-THIRD SUBSCRIBER GROUP					TWENTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 23</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 24</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WBNS-2</b>	<b>1.00</b>			<b>WBNS-2</b>	<b>1.00</b>				
<b>WBNS-3</b>	<b>1.00</b>			<b>WBNS-3</b>	<b>1.00</b>				
<b>WSYX</b>	<b>0.25</b>			<b>WIYE-LD</b>	<b>0.25</b>				
				<b>WOVA-LD</b>	<b>1.00</b>				
Total DSEs				<b>2.25</b>	Total DSEs				<b>3.25</b>
Gross Receipts Third Group				<b>\$ 161,508.57</b>	Gross Receipts Fourth Group				<b>\$ 25,607.76</b>
Base Rate Fee Third Group				<b>\$ 3,133.67</b>	Base Rate Fee Fourth Group				<b>\$ 676.36</b>
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								<b>\$</b>	

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name			
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>											
TWENTY-FIFTH SUBSCRIBER GROUP					TWENTY-SIXTH SUBSCRIBER GROUP						
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 25</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 26</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
				<b>WIYE-LD</b>	<b>0.25</b>						
				<b>WOVA-LD</b>	<b>1.00</b>						
Total DSEs				<b>0.00</b>		Total DSEs				<b>1.25</b>	
Gross Receipts First Group				\$ <b>38,411.63</b>		Gross Receipts Second Group				\$ <b>177,232.63</b>	
Base Rate Fee First Group				\$ <b>0.00</b>		Base Rate Fee Second Group				\$ <b>2,196.36</b>	
TWENTY-SEVENTH SUBSCRIBER GROUP					TWENTY-EIGHTH SUBSCRIBER GROUP						
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 27</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 28</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
<b>WBNS-3</b>	<b>1.00</b>			<b>WOSU</b>	<b>0.25</b>						
<b>WOSU</b>	<b>0.25</b>			<b>WOSU-2</b>	<b>0.25</b>						
<b>WOSU-2</b>	<b>0.25</b>			<b>WOSU-3</b>	<b>0.25</b>						
<b>WOSU-3</b>	<b>0.25</b>			<b>WOSU-4</b>	<b>0.25</b>						
<b>WOSU-4</b>	<b>0.25</b>										
<b>WSYX-2</b>	<b>1.00</b>										
<b>WSYX-3</b>	<b>1.00</b>										
<b>WTTE-2</b>	<b>1.00</b>										
<b>WWHO-2</b>	<b>1.00</b>										
<b>WWHO-3</b>	<b>1.00</b>										
Total DSEs				<b>7.00</b>		Total DSEs				<b>1.00</b>	
Gross Receipts Third Group				\$ <b>203,065.01</b>		Gross Receipts Fourth Group				\$ <b>724,879.20</b>	
Base Rate Fee Third Group				\$ <b>8,441.41</b>		Base Rate Fee Fourth Group				\$ <b>7,712.71</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)											
\$ <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px;"></span>											

**9**

Computation  
of  
Base Rate Fee  
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Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
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Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
TWENTY-NINTH SUBSCRIBER GROUP					THIRTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 29</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 30</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
				WOSU	0.25				
				WOSU-2	0.25				
				WOSU-3	0.25				
				WOSU-4	0.25				
				WSTR	1.00				
				WXIX	0.25				
				WXIX-3	1.00				
Total DSEs				<u>0.00</u>	Total DSEs				<u>3.25</u>
Gross Receipts First Group				\$ <u>320,096.95</u>	Gross Receipts Second Group				\$ <u>27,629.42</u>
Base Rate Fee First Group				\$ <u>0.00</u>	Base Rate Fee Second Group				\$ <u>729.76</u>
THIRTY-FIRST SUBSCRIBER GROUP					THIRTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 31</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 32</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
WOSU	0.25			WCHS-2	1.00				
WOSU-2	0.25			WCHS-3	1.00				
WOSU-3	0.25			WOSU	0.25				
WOSU-4	0.25			WOSU-2	0.25				
				WOSU-3	0.25				
Total DSEs				<u>1.00</u>	Total DSEs				<u>2.75</u>
Gross Receipts Third Group				\$ <u>140,168.77</u>	Gross Receipts Fourth Group				\$ <u>68,062.72</u>
Base Rate Fee Third Group				\$ <u>1,491.40</u>	Base Rate Fee Fourth Group				\$ <u>1,559.15</u>
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								\$ <u>                    </u>	

**9**  
Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
THIRTY-THIRD SUBSCRIBER GROUP					THIRTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 33</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 34</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
WOSU	0.25			WOSU	0.25				
WOSU-2	0.25			WOSU-2	0.25				
WOSU-3	0.25			WOSU-3	0.25				
Total DSEs <span style="float: right;"><b>0.75</b></span>				Total DSEs <span style="float: right;"><b>0.75</b></span>					
Gross Receipts First Group <span style="float: right;"><b>\$ 165,327.27</b></span>				Gross Receipts Second Group <span style="float: right;"><b>\$ 567,638.59</b></span>					
Base Rate Fee First Group <span style="float: right;"><b>\$ 1,319.31</b></span>				Base Rate Fee Second Group <span style="float: right;"><b>\$ 4,529.76</b></span>					
THIRTY-FIFTH SUBSCRIBER GROUP					THIRTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 35</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 36</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
WOSU	0.25			WOSU	0.25				
WOSU-2	0.25			WOSU-2	0.25				
WOSU-3	0.25			WOSU-3	0.25				
				WOSU-4	0.25				
Total DSEs <span style="float: right;"><b>0.75</b></span>				Total DSEs <span style="float: right;"><b>1.00</b></span>					
Gross Receipts Third Group <span style="float: right;"><b>\$ 72,330.68</b></span>				Gross Receipts Fourth Group <span style="float: right;"><b>\$ 99,960.10</b></span>					
Base Rate Fee Third Group <span style="float: right;"><b>\$ 577.20</b></span>				Base Rate Fee Fourth Group <span style="float: right;"><b>\$ 1,063.58</b></span>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						<b>\$</b> <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span>			

**9**  
Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
THIRTY-SEVENTH SUBSCRIBER GROUP					THIRTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 37</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 38</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs				<b>0.00</b>	Total DSEs				<b>0.00</b>
Gross Receipts First Group				<b>\$ 133,654.52</b>	Gross Receipts Second Group				<b>\$ 592,797.09</b>
Base Rate Fee First Group				<b>\$ 0.00</b>	Base Rate Fee Second Group				<b>\$ 0.00</b>
THIRTY-NINTH SUBSCRIBER GROUP					FORTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 39</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 40</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
				<b>WNEO</b>	<b>0.25</b>				
				<b>WNEO-2</b>	<b>0.25</b>				
				<b>WNEO-3</b>	<b>0.25</b>				
Total DSEs				<b>0.00</b>	Total DSEs				<b>0.75</b>
Gross Receipts Third Group				<b>\$ 3,818.70</b>	Gross Receipts Fourth Group				<b>\$ 1,347.78</b>
Base Rate Fee Third Group				<b>\$ 0.00</b>	Base Rate Fee Fourth Group				<b>\$ 10.76</b>
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						<b>\$</b>			

**9**  
Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations







LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
FIFTY-THIRD SUBSCRIBER GROUP					FIFTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 53</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 54</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WBGU</b>	<b>0.25</b>								
Total DSEs <span style="float: right;"><b>0.25</b></span>				Total DSEs <span style="float: right;"><b>0.00</b></span>					
Gross Receipts First Group <span style="float: right;"><b>\$ 470,823.30</b></span>				Gross Receipts Second Group <span style="float: right;"><b>\$ 974,217.87</b></span>					
Base Rate Fee First Group <span style="float: right;"><b>\$ 1,252.39</b></span>				Base Rate Fee Second Group <span style="float: right;"><b>\$ 0.00</b></span>					
FIFTY-FIFTH SUBSCRIBER GROUP					FIFTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 55</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 56</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs <span style="float: right;"><b>0.00</b></span>				Total DSEs <span style="float: right;"><b>0.00</b></span>					
Gross Receipts Third Group <span style="float: right;"><b>\$ 43,353.48</b></span>				Gross Receipts Fourth Group <span style="float: right;"><b>\$ 8,086.66</b></span>					
Base Rate Fee Third Group <span style="float: right;"><b>\$ 0.00</b></span>				Base Rate Fee Fourth Group <span style="float: right;"><b>\$ 0.00</b></span>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						<b>\$</b> <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span>			

**9**

Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
FIFTY-SEVENTH SUBSCRIBER GROUP					FIFTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 57</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 58</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs				<u>0.00</u>	Total DSEs				<u>0.00</u>
Gross Receipts First Group				\$ <u>886,612.39</u>	Gross Receipts Second Group				\$ <u>1,139,994.40</u>
Base Rate Fee First Group				\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 15px;"></span> <u>0.00</u>	Base Rate Fee Second Group				\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 15px;"></span> <u>0.00</u>
FIFTY-NINTH SUBSCRIBER GROUP					SIXTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 59</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 60</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
				<b>WKEF-2</b>	<b>1.00</b>				
				<b>WKEF-3</b>	<b>1.00</b>				
Total DSEs				<u>0.00</u>	Total DSEs				<u>2.00</u>
Gross Receipts Third Group				\$ <u>16,622.58</u>	Gross Receipts Fourth Group				\$ <u>11,680.73</u>
Base Rate Fee Third Group				\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 15px;"></span> <u>0.00</u>	Base Rate Fee Fourth Group				\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 15px;"></span> <u>206.16</u>
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span>	

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Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
SIXTY-FIRST SUBSCRIBER GROUP					SIXTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 61</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 62</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WKEF-2</b>	<b>1.00</b>								
<b>WKEF-3</b>	<b>1.00</b>								
Total DSEs <span style="float: right;"><b>2.00</b></span>				Total DSEs <span style="float: right;"><b>0.00</b></span>					
Gross Receipts First Group <span style="float: right;"><b>\$ 21,115.17</b></span>				Gross Receipts Second Group <span style="float: right;"><b>\$ 139,270.25</b></span>					
Base Rate Fee First Group <span style="float: right;"><b>\$ 372.68</b></span>				Base Rate Fee Second Group <span style="float: right;"><b>\$ 0.00</b></span>					
SIXTY-THIRD SUBSCRIBER GROUP					SIXTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 63</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 64</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WHIO</b>	<b>0.25</b>			<b>WKEF-2</b>	<b>1.00</b>				
<b>WKEF-2</b>	<b>1.00</b>			<b>WKEF-3</b>	<b>1.00</b>				
<b>WKEF-3</b>	<b>1.00</b>								
Total DSEs <span style="float: right;"><b>2.25</b></span>				Total DSEs <span style="float: right;"><b>2.00</b></span>					
Gross Receipts Third Group <span style="float: right;"><b>\$ 1,347.78</b></span>				Gross Receipts Fourth Group <span style="float: right;"><b>\$ 25,158.50</b></span>					
Base Rate Fee Third Group <span style="float: right;"><b>\$ 26.15</b></span>				Base Rate Fee Fourth Group <span style="float: right;"><b>\$ 444.05</b></span>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						<b>\$</b> <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span>			

**9**

Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
SIXTY-FIFTH SUBSCRIBER GROUP					SIXTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 65</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 66</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
WOSU	0.25			WOSU	0.25				
WOSU-2	0.25			WOSU-2	0.25				
WOSU-3	0.25			WOSU-3	0.25				
WOSU-4	0.25			WOSU-4	0.25				
Total DSEs				<u>1.00</u>	Total DSEs				<u>1.00</u>
Gross Receipts First Group				\$ <u>373,109.50</u>	Gross Receipts Second Group				\$ <u>3,144.81</u>
Base Rate Fee First Group				\$ <u>3,969.89</u>	Base Rate Fee Second Group				\$ <u>33.46</u>
SIXTY-SEVENTH SUBSCRIBER GROUP					SIXTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 67</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 68</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
WBNS-3	1.00			WBNS-3	1.00				
WOSU	0.25			WOSU	0.25				
WOSU-2	0.25			WOSU-2	0.25				
WOSU-3	0.25			WOSU-3	0.25				
WOSU-4	0.25			WOSU-4	0.25				
WSFJ	1.00			WSFJ	1.00				
WSYX-2	1.00			WSYX-2	1.00				
WSYX-3	1.00			WSYX-3	1.00				
WTTE	1.00			WTTE	1.00				
WTTE-2	1.00			WTTE-2	1.00				
WWHO-2	1.00			WWHO-2	1.00				
WWHO-3	1.00			WWHO-3	1.00				
Total DSEs				<u>9.00</u>	Total DSEs				<u>9.00</u>
Gross Receipts Third Group				\$ <u>673.89</u>	Gross Receipts Fourth Group				\$ <u>449.26</u>
Base Rate Fee Third Group				\$ <u>32.46</u>	Base Rate Fee Fourth Group				\$ <u>21.64</u>
<b>Base Rate Fee:</b> Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								\$ <u>                    </u>	

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Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
SIXTY-NINTH SUBSCRIBER GROUP					SEVENTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 69</b>					COMMUNITY/ AREA <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
WOSU	0.25								
WOSU-2	0.25								
WOSU-3	0.25								
Total DSEs <b>0.75</b>				Total DSEs <b>0.00</b>					
Gross Receipts First Group \$ <b>12,579.25</b>				Gross Receipts Second Group \$ <b>0.00</b>					
Base Rate Fee First Group \$ <b>100.38</b>				Base Rate Fee Second Group \$ <b>0.00</b>					
SEVENTY-FIRST SUBSCRIBER GROUP					SEVENTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>0</b>					COMMUNITY/ AREA <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs <b>0.00</b>				Total DSEs <b>0.00</b>					
Gross Receipts Third Group \$ <b>0.00</b>				Gross Receipts Fourth Group \$ <b>0.00</b>					
Base Rate Fee Third Group \$ <b>0.00</b>				Base Rate Fee Fourth Group \$ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									
\$ <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span>									

**9**  
Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
FIRST SUBSCRIBER GROUP					SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 1</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 2</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs				<u>0.00</u>	Total DSEs				<u>0.00</u>
Gross Receipts First Group				\$ <u>18,500,929.80</u>	Gross Receipts Second Group				\$ <u>2,605,027.60</u>
Base Rate Fee First Group				\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>	Base Rate Fee Second Group				\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>
THIRD SUBSCRIBER GROUP					FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 3</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 4</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs				<u>0.00</u>	Total DSEs				<u>0.00</u>
Gross Receipts Third Group				\$ <u>444,092.40</u>	Gross Receipts Fourth Group				\$ <u>709,379.77</u>
Base Rate Fee Third Group				\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>	Base Rate Fee Fourth Group				\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; padding: 2px;">145,568.30</span>			

**9**  
Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
FIFTH SUBSCRIBER GROUP					SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 5</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 6</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs				<u>0.00</u>	Total DSEs				<u>0.00</u>
Gross Receipts First Group				\$ <u>2,441,497.36</u>	Gross Receipts Second Group				\$ <u>358,957.84</u>
Base Rate Fee First Group				\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>	Base Rate Fee Second Group				\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>
SEVENTH SUBSCRIBER GROUP					EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 7</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 8</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs				<u>0.00</u>	Total DSEs				<u>0.00</u>
Gross Receipts Third Group				\$ <u>8,535.92</u>	Gross Receipts Fourth Group				\$ <u>29,426.46</u>
Base Rate Fee Third Group				\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>	Base Rate Fee Fourth Group				\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								\$ <span style="border: 1px solid black; padding: 2px;"> </span>	

**9**

Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
NINTH SUBSCRIBER GROUP					TENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 9</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 10</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WSFJ</b>	<b>1.00</b>								
<b>WWHO</b>	<b>1.00</b>								
Total DSEs <span style="float: right;"><b>2.00</b></span>				Total DSEs <span style="float: right;"><b>0.00</b></span>					
Gross Receipts First Group <span style="float: right;"><b>\$ 61,323.84</b></span>				Gross Receipts Second Group <span style="float: right;"><b>\$ 134,777.66</b></span>					
Base Rate Fee First Group <span style="float: right;"><b>\$ 4,599.29</b></span>				Base Rate Fee Second Group <span style="float: right;"><b>\$ 0.00</b></span>					
ELEVENTH SUBSCRIBER GROUP					TWELVTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 11</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 12</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WLMA</b>	<b>1.00</b>								
<b>WTLW-LP</b>	<b>1.00</b>								
Total DSEs <span style="float: right;"><b>2.00</b></span>				Total DSEs <span style="float: right;"><b>0.00</b></span>					
Gross Receipts Third Group <span style="float: right;"><b>\$ 30,774.23</b></span>				Gross Receipts Fourth Group <span style="float: right;"><b>\$ 38,860.89</b></span>					
Base Rate Fee Third Group <span style="float: right;"><b>\$ 2,308.07</b></span>				Base Rate Fee Fourth Group <span style="float: right;"><b>\$ 0.00</b></span>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span>			

**9**

Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
THIRTEENTH SUBSCRIBER GROUP					FOURTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 13</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 14</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WSFJ</b>	<b>1.00</b>			<b>WSFJ</b>	<b>1.00</b>				
<b>WSYX</b>	<b>0.25</b>								
<b>WWHO</b>	<b>1.00</b>								
Total DSEs <span style="float: right;"><b>2.25</b></span>				Total DSEs <span style="float: right;"><b>1.00</b></span>					
Gross Receipts First Group <span style="float: right;"><b>\$ 7,188.14</b></span>				Gross Receipts Second Group <span style="float: right;"><b>\$ 7,637.40</b></span>					
Base Rate Fee First Group <span style="float: right;"><b>\$ 606.50</b></span>				Base Rate Fee Second Group <span style="float: right;"><b>\$ 286.40</b></span>					
FIFTEENTH SUBSCRIBER GROUP					SIXTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 15</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 16</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs <span style="float: right;"><b>0.00</b></span>				Total DSEs <span style="float: right;"><b>0.00</b></span>					
Gross Receipts Third Group <span style="float: right;"><b>\$ 326,835.83</b></span>				Gross Receipts Fourth Group <span style="float: right;"><b>\$ 52,114.03</b></span>					
Base Rate Fee Third Group <span style="float: right;"><b>\$ 0.00</b></span>				Base Rate Fee Fourth Group <span style="float: right;"><b>\$ 0.00</b></span>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						<b>\$</b> <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span>			

**9**

Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name		
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>										
SEVENTEENTH SUBSCRIBER GROUP					EIGHTEENTH SUBSCRIBER GROUP					
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 17</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 18</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
<b>WLPX</b>	<b>1.00</b>									
Total DSEs			<b>1.00</b>	Total DSEs			<b>0.00</b>			
Gross Receipts First Group			\$ <b>14,600.91</b>	Gross Receipts Second Group			\$ <b>396,920.22</b>			
Base Rate Fee First Group			\$ <b>547.53</b>	Base Rate Fee Second Group			\$ <b>0.00</b>			
NINETEENTH SUBSCRIBER GROUP					TWENTIETH SUBSCRIBER GROUP					
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 19</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 20</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
<b>WLPX</b>	<b>1.00</b>			<b>WCHS</b>	<b>0.25</b>					
<b>WQCW</b>	<b>1.00</b>			<b>WLPX</b>	<b>1.00</b>					
				<b>WQCW</b>	<b>1.00</b>					
Total DSEs			<b>2.00</b>	Total DSEs			<b>2.25</b>			
Gross Receipts Third Group			\$ <b>449.26</b>	Gross Receipts Fourth Group			\$ <b>8,985.18</b>			
Base Rate Fee Third Group			\$ <b>33.69</b>	Base Rate Fee Fourth Group			\$ <b>758.12</b>			
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <b>                    </b>				

**9**  
Computation  
of  
Base Rate Fee  
and  
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Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
TWENTY-FIRST SUBSCRIBER GROUP					TWENTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 21</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 22</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
				<b>WBNS</b>	<b>0.25</b>				
Total DSEs				<b>0.00</b>	Total DSEs				<b>0.25</b>
Gross Receipts First Group				<b>\$ 37,962.38</b>	Gross Receipts Second Group				<b>\$ 235,860.91</b>
Base Rate Fee First Group				<b>\$ 0.00</b>	Base Rate Fee Second Group				<b>\$ 2,211.20</b>
TWENTY-THIRD SUBSCRIBER GROUP					TWENTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 23</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 24</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
<b>WBNS</b>	<b>0.25</b>			<b>WBNS</b>	<b>0.25</b>				
<b>WHIZ</b>	<b>0.25</b>			<b>WHIZ</b>	<b>0.25</b>				
				<b>WSYX</b>	<b>0.25</b>				
Total DSEs				<b>0.50</b>	Total DSEs				<b>0.75</b>
Gross Receipts Third Group				<b>\$ 161,508.57</b>	Gross Receipts Fourth Group				<b>\$ 25,607.76</b>
Base Rate Fee Third Group				<b>\$ 3,028.29</b>	Base Rate Fee Fourth Group				<b>\$ 720.22</b>
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								<b>\$</b>	

**9**  
Computation  
of  
Base Rate Fee  
and  
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Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
TWENTY-FIFTH SUBSCRIBER GROUP					TWENTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 25</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 26</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WHIZ</b>	<b>0.25</b>			<b>WVAH</b>	<b>1.00</b>				
Total DSEs				<b>0.25</b>	Total DSEs				<b>1.00</b>
Gross Receipts First Group				<b>\$ 38,411.63</b>	Gross Receipts Second Group				<b>\$ 177,232.63</b>
Base Rate Fee First Group				<b>\$ 360.11</b>	Base Rate Fee Second Group				<b>\$ 6,646.22</b>
TWENTY-SEVENTH SUBSCRIBER GROUP					TWENTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 27</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 28</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WBNS</b>	<b>0.25</b>								
<b>WSFJ</b>	<b>1.00</b>								
<b>WSYX</b>	<b>0.25</b>								
<b>WTTE</b>	<b>1.00</b>								
<b>WWHO</b>	<b>1.00</b>								
Total DSEs				<b>3.50</b>	Total DSEs				<b>0.00</b>
Gross Receipts Third Group				<b>\$ 203,065.01</b>	Gross Receipts Fourth Group				<b>\$ 724,879.20</b>
Base Rate Fee Third Group				<b>\$ 26,652.28</b>	Base Rate Fee Fourth Group				<b>\$ 0.00</b>
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								<b>\$</b>	

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Computation  
of  
Base Rate Fee  
and  
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Exclusivity  
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for  
Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
TWENTY-NINTH SUBSCRIBER GROUP					THIRTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 29</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 30</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
				<b>WKRC</b>	<b>0.25</b>				
Total DSEs				<b>0.00</b>	Total DSEs				<b>0.25</b>
Gross Receipts First Group				<b>\$ 320,096.95</b>	Gross Receipts Second Group				<b>\$ 27,629.42</b>
Base Rate Fee First Group				<b>\$ 0.00</b>	Base Rate Fee Second Group				<b>\$ 259.03</b>
THIRTY-FIRST SUBSCRIBER GROUP					THIRTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 31</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 32</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
				<b>WCHS</b>	<b>0.25</b>				
Total DSEs				<b>0.00</b>	Total DSEs				<b>0.25</b>
Gross Receipts Third Group				<b>\$ 140,168.77</b>	Gross Receipts Fourth Group				<b>\$ 68,062.72</b>
Base Rate Fee Third Group				<b>\$ 0.00</b>	Base Rate Fee Fourth Group				<b>\$ 638.09</b>
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						<b>\$</b>			

**9**  
Computation  
of  
Base Rate Fee  
and  
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Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name			
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>											
THIRTY-THIRD SUBSCRIBER GROUP					THIRTY-FOURTH SUBSCRIBER GROUP						
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 33</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 34</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
				<b>WBNS</b>	<b>0.25</b>						
				<b>WCMH</b>	<b>0.25</b>						
				<b>WSYX</b>	<b>0.25</b>						
Total DSEs				<b>0.00</b>		Total DSEs				<b>0.75</b>	
Gross Receipts First Group				\$ <b>165,327.27</b>		Gross Receipts Second Group				\$ <b>567,638.59</b>	
Base Rate Fee First Group				\$ <b>0.00</b>		Base Rate Fee Second Group				\$ <b>15,964.84</b>	
THIRTY-FIFTH SUBSCRIBER GROUP					THIRTY-SIXTH SUBSCRIBER GROUP						
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 35</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 36</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
<b>WBNS</b>	<b>0.25</b>										
<b>WCMH</b>	<b>0.25</b>										
Total DSEs				<b>0.50</b>		Total DSEs				<b>0.00</b>	
Gross Receipts Third Group				\$ <b>72,330.68</b>		Gross Receipts Fourth Group				\$ <b>99,960.10</b>	
Base Rate Fee Third Group				\$ <b>1,356.20</b>		Base Rate Fee Fourth Group				\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)											
\$ <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span>											

**9**

Computation  
of  
Base Rate Fee  
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Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
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**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
FORTY-FIRST SUBSCRIBER GROUP					FORTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 41</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 42</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs				<u>0.00</u>	Total DSEs				<u>0.00</u>
Gross Receipts First Group				\$ <u>510,807.34</u>	Gross Receipts Second Group				\$ <u>166,675.04</u>
Base Rate Fee First Group				\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 15px;"></span> <u>0.00</u>	Base Rate Fee Second Group				\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 15px;"></span> <u>0.00</u>
FORTY-THIRD SUBSCRIBER GROUP					FORTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 43</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 44</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs				<u>0.00</u>	Total DSEs				<u>0.00</u>
Gross Receipts Third Group				\$ <u>2,233,490.50</u>	Gross Receipts Fourth Group				\$ <u>121,749.16</u>
Base Rate Fee Third Group				\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 15px;"></span> <u>0.00</u>	Base Rate Fee Fourth Group				\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 15px;"></span> <u>0.00</u>
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span>	

**9**

Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
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Partially  
Distant  
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**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
FORTY-FIFTH SUBSCRIBER GROUP					FORTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 45</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 46</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WHIO</b>	<b>0.25</b>			<b>WHIO</b>	<b>0.25</b>				
Total DSEs <span style="float: right;"><b>0.25</b></span>				Total DSEs <span style="float: right;"><b>0.25</b></span>					
Gross Receipts First Group <span style="float: right;"><b>\$ 1,066,989.83</b></span>				Gross Receipts Second Group <span style="float: right;"><b>\$ 284,605.50</b></span>					
Base Rate Fee First Group <span style="float: right;"><b>\$ 10,003.03</b></span>				Base Rate Fee Second Group <span style="float: right;"><b>\$ 2,668.18</b></span>					
FORTY-SEVENTH SUBSCRIBER GROUP					FORTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 47</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 48</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs <span style="float: right;"><b>0.00</b></span>				Total DSEs <span style="float: right;"><b>0.00</b></span>					
Gross Receipts Third Group <span style="float: right;"><b>\$ 110,068.42</b></span>				Gross Receipts Fourth Group <span style="float: right;"><b>\$ 31,897.38</b></span>					
Base Rate Fee Third Group <span style="float: right;"><b>\$ 0.00</b></span>				Base Rate Fee Fourth Group <span style="float: right;"><b>\$ 0.00</b></span>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						<b>\$</b> <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span>			

**9**  
Computation  
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**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
FORTY-NINTH SUBSCRIBER GROUP					FIFTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 49</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 50</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WHIO</b>	<b>0.25</b>								
Total DSEs <span style="float: right;"><b>0.25</b></span>				Total DSEs <span style="float: right;"><b>0.00</b></span>					
Gross Receipts First Group <span style="float: right;"><b>\$ 24,035.35</b></span>				Gross Receipts Second Group <span style="float: right;"><b>\$ 18,868.87</b></span>					
Base Rate Fee First Group <span style="float: right;"><b>\$ 225.33</b></span>				Base Rate Fee Second Group <span style="float: right;"><b>\$ 0.00</b></span>					
FIFTY-FIRST SUBSCRIBER GROUP					FIFTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 51</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 52</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs <span style="float: right;"><b>0.00</b></span>				Total DSEs <span style="float: right;"><b>0.00</b></span>					
Gross Receipts Third Group <span style="float: right;"><b>\$ 7,328,086.17</b></span>				Gross Receipts Fourth Group <span style="float: right;"><b>\$ 215,868.89</b></span>					
Base Rate Fee Third Group <span style="float: right;"><b>\$ 0.00</b></span>				Base Rate Fee Fourth Group <span style="float: right;"><b>\$ 0.00</b></span>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						<b>\$</b> <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span>			

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name			
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>											
FIFTY-THIRD SUBSCRIBER GROUP					FIFTY-FOURTH SUBSCRIBER GROUP						
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 53</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 54</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
				<b>WEWS</b>	<b>0.25</b>						
				<b>WJW</b>	<b>1.00</b>						
Total DSEs				<b>0.00</b>		Total DSEs				<b>1.25</b>	
Gross Receipts First Group				\$ <b>470,823.30</b>		Gross Receipts Second Group				\$ <b>974,217.87</b>	
Base Rate Fee First Group				\$ <b>0.00</b>		Base Rate Fee Second Group				\$ <b>45,666.46</b>	
FIFTY-FIFTH SUBSCRIBER GROUP					FIFTY-SIXTH SUBSCRIBER GROUP						
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 55</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 56</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
<b>WEWS</b>	<b>0.25</b>			<b>WTOL</b>	<b>0.25</b>						
<b>WJW</b>	<b>1.00</b>			<b>WWHO</b>	<b>1.00</b>						
<b>WTOL</b>	<b>0.25</b>										
Total DSEs				<b>1.50</b>		Total DSEs				<b>1.25</b>	
Gross Receipts Third Group				\$ <b>43,353.48</b>		Gross Receipts Fourth Group				\$ <b>8,086.66</b>	
Base Rate Fee Third Group				\$ <b>2,438.63</b>		Base Rate Fee Fourth Group				\$ <b>379.06</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)											
\$ <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px;"></span>											

**9**

Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name			
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>											
FIFTY-SEVENTH SUBSCRIBER GROUP					FIFTY-EIGHTH SUBSCRIBER GROUP						
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 57</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 58</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs				<b>0.00</b>		Total DSEs				<b>0.00</b>	
Gross Receipts First Group				<b>\$ 886,612.39</b>		Gross Receipts Second Group				<b>\$ 1,139,994.40</b>	
Base Rate Fee First Group				<b>\$ 0.00</b>		Base Rate Fee Second Group				<b>\$ 0.00</b>	
FIFTY-NINTH SUBSCRIBER GROUP					SIXTIETH SUBSCRIBER GROUP						
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 59</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 60</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
				<b>WBNS</b>	<b>0.25</b>						
				<b>WKEF</b>	<b>0.25</b>						
				<b>WSYX</b>	<b>0.25</b>						
Total DSEs				<b>0.00</b>		Total DSEs				<b>0.75</b>	
Gross Receipts Third Group				<b>\$ 16,622.58</b>		Gross Receipts Fourth Group				<b>\$ 11,680.73</b>	
Base Rate Fee Third Group				<b>\$ 0.00</b>		Base Rate Fee Fourth Group				<b>\$ 328.52</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)											
<div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div>											

**9**

Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
SIXTY-FIRST SUBSCRIBER GROUP					SIXTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 61</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 62</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WBDT</b>	<b>1.00</b>								
<b>WBNS</b>	<b>0.25</b>								
<b>WKEF</b>	<b>0.25</b>								
<b>WSYX</b>	<b>0.25</b>								
Total DSEs				<b>1.75</b>	Total DSEs				<b>0.00</b>
Gross Receipts First Group				\$ <b>21,115.17</b>	Gross Receipts Second Group				\$ <b>139,270.25</b>
Base Rate Fee First Group				\$ <b>1,385.68</b>	Base Rate Fee Second Group				\$ <b>0.00</b>
SIXTY-THIRD SUBSCRIBER GROUP					SIXTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 63</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 64</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WBDT</b>	<b>1.00</b>			<b>WKEF</b>	<b>0.25</b>				
<b>WBNS</b>	<b>0.25</b>			<b>WRGT</b>	<b>1.00</b>				
<b>WKEF</b>	<b>0.25</b>								
<b>WRGT</b>	<b>1.00</b>								
<b>WSYX</b>	<b>0.25</b>								
Total DSEs				<b>2.75</b>	Total DSEs				<b>1.25</b>
Gross Receipts Third Group				\$ <b>1,347.78</b>	Gross Receipts Fourth Group				\$ <b>25,158.50</b>
Base Rate Fee Third Group				\$ <b>138.99</b>	Base Rate Fee Fourth Group				\$ <b>1,179.30</b>
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								\$ <b>                    </b>	

**9**  
Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
SIXTY-FIFTH SUBSCRIBER GROUP					SIXTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 65</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 66</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WTTE</b>	<b>1.00</b>								
Total DSEs <span style="float: right;"><b>1.00</b></span>				Total DSEs <span style="float: right;"><b>0.00</b></span>					
Gross Receipts First Group <span style="float: right;"><b>\$ 373,109.50</b></span>				Gross Receipts Second Group <span style="float: right;"><b>\$ 3,144.81</b></span>					
Base Rate Fee First Group <span style="float: right;"><b>\$ 13,991.61</b></span>				Base Rate Fee Second Group <span style="float: right;"><b>\$ 0.00</b></span>					
SIXTY-SEVENTH SUBSCRIBER GROUP					SIXTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 67</b>					COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 68</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WBNS</b>	<b>0.25</b>			<b>WBNS</b>	<b>0.25</b>				
<b>WSYX</b>	<b>0.25</b>			<b>WSYX</b>	<b>0.25</b>				
<b>WTAP</b>	<b>0.25</b>			<b>WWHO</b>	<b>1.00</b>				
<b>WWHO</b>	<b>1.00</b>								
Total DSEs <span style="float: right;"><b>1.75</b></span>				Total DSEs <span style="float: right;"><b>1.50</b></span>					
Gross Receipts Third Group <span style="float: right;"><b>\$ 673.89</b></span>				Gross Receipts Fourth Group <span style="float: right;"><b>\$ 449.26</b></span>					
Base Rate Fee Third Group <span style="float: right;"><b>\$ 44.22</b></span>				Base Rate Fee Fourth Group <span style="float: right;"><b>\$ 25.27</b></span>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						<b>\$</b> <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span>			

**9**

Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>						SYSTEM ID# <b>010659</b>		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
SIXTY-NINTH SUBSCRIBER GROUP					SEVENTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>SUBSCRIBER GROUP # 69</b>					COMMUNITY/ AREA <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>WCMH</b>	<b>0.25</b>								
Total DSEs <b>0.25</b>				Total DSEs <b>0.00</b>					
Gross Receipts First Group \$ <b>12,579.25</b>				Gross Receipts Second Group \$ <b>0.00</b>					
Base Rate Fee First Group \$ <b>117.93</b>				Base Rate Fee Second Group \$ <b>0.00</b>					
SEVENTY-FIRST SUBSCRIBER GROUP					SEVENTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>0</b>					COMMUNITY/ AREA <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs <b>0.00</b>				Total DSEs <b>0.00</b>					
Gross Receipts Third Group \$ <b>0.00</b>				Gross Receipts Fourth Group \$ <b>0.00</b>					
Base Rate Fee Third Group \$ <b>0.00</b>				Base Rate Fee Fourth Group \$ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									
\$ <input style="width: 150px;" type="text"/>									

**9**

Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
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Partially  
Distant  
Stations

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>
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**BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP**

9

**Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations**

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 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:

First 50 major television market
  Second 50 major television market

**INSTRUCTIONS:**

**Step 1:** In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.

**Step 2:** In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as 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.

**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 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 . . . . . <span style="float: right;">_____</span> Line 2: Enter the Exempt DSEs . . . . . <span style="float: right;">_____</span> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <span style="float: right;">_____ -</span>	Line 1: Enter the VHF DSEs . . . . . <span style="float: right;">_____</span> Line 2: Enter the Exempt DSEs . . . . . <span style="float: right;">_____</span> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <span style="float: right;">_____ -</span>
<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> First Group . . . . . <span style="float: right;">\$ _____</span>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Second Group . . . . . <span style="float: right;">\$ _____</span>

THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP
Line 1: Enter the VHF DSEs . . . . . <span style="float: right;">_____</span> Line 2: Enter the Exempt DSEs . . . . . <span style="float: right;">_____</span> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <span style="float: right;">_____ -</span>	Line 1: Enter the VHF DSEs . . . . . <span style="float: right;">_____</span> Line 2: Enter the Exempt DSEs . . . . . <span style="float: right;">_____</span> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <span style="float: right;">_____ -</span>
<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Third Group . . . . . <span style="float: right;">\$ _____</span>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Fourth Group . . . . . <span style="float: right;">\$ _____</span>

**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) . . . . . \$ \_\_\_\_\_

FORM SA3. FILING FEE ADDENDUM

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>TIME WARNER CABLE MIDWEST LLC</b>	<b>SYSTEM ID#</b> <b>010659</b>	<b>Name</b>
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CITY OR TOWN <b>Columbus, City of</b>		STATE <b>OH</b>	First Community

Line 1. <b>ROYALTY FEE FROM SPACE L</b>	<b>\$ 491,749.49</b>	Total Fee
Line 2. <b>FILING FEE</b>	<b>725.00</b>	
Line 3. <b>TOTAL ROYALTY AND FILING FEES PAYABLE FOR ACCOUNTING PERIOD</b> Add lines 1 and 2 and enter here	<b>\$ 492,474.49</b>	

*Effective January 1, 2014, pursuant to the Satellite Television Extension and Localism Act of 2010 (STELA), which granted authority to the Copyright Office to establish fees for the filing of statements of account (SOAs) under the section 111, 119, and 122 statutory licenses, the Office now assesses filing fees for ALL SOAs for current, past and future accounting periods. For details, see the Federal Register, November 29, 2013 (78 FR 71498). Please be advised that the filing fee is deducted before the royalty payment is credited; thus the omission of the appropriate filing fee will result in an underpayment of royalty fees. Please remit the royalty fee and filing fee in **one EFT payment**. (SOA3 filing fee: \$725).*