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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY						
DATE RECEIVED	AMOUNT					
02/28/2018	\$ ALLOCATION NUMBER					

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:								
Accounting Period	2017/2								
Bowner	Instructions: Give the full legal name of the owner of the cable system. If the rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conduct If there were different owners during the accounting period, or a single statement of account and royalty fee payment covering the Check here if this is the system's first filing. If not, enter the LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SY RCN OF NEW ENGLAND	is the business of the cable systemly the owner on the last day of the entire accounting period system's ID number assigned but the system	em the accounting period should s y the Licensing Division.						
				040144 2017/2					
	650 COLLEGE RD E PRINCETON NJ 08540-6603								
С	INSTRUCTIONS: In line 1, give any business or trade name names already appear in space B. In line 2, give the mailing								
System	1 IDENTIFICATION OF CABLE SYSTEM:		g						
	MAILING ADDRESS OF CABLE SYSTEM:								
	2 (Number, street, rural route, apartment, or suite number)								
	(City, town, state, zip code)								
D	Instructions: For complete space D instructions, see page	1b. Identify only the frst comm	nunity served below and rel	ist on page 1b					
Area	with all communities.								
Served	CITY OR TOWN	STATE							
First Community	Allston	MA							
,	Below is a sample for reporting communities if you report r CITY OR TOWN (SAMPLE)	multiple channel line-ups in S STATE	pace G. CH LINE UP	SUB GRP#					
	Alda	MD	A	30B GRF#					
Sample	Alliance	MD	В	2					
	Gering	MD	В	3					
	-								

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

ACCOUNTING PERIOD: 2017/2 FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 040144 **RCN OF NEW ENGLAND** Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# **Allston** MA First **Arlington** MA Community **Auburndale** MA **Boston** MA **Brighton** MA **Brookline** MA See instructions for **Burlington** MA additional information on alphabetization. Cambridge MA Charlestown MA **Chestnut Hill** MA Dedham MA Add rows as necessary. **Framingham** MA **Hyde Park** MA Jamaica Plain MA Lexington MA Mattapan MA Medford MA Milton MA Natick MA Needham MA **Needham Heights** MA Newton MA **Newton Center** MA **Newton Highlands** MA **Newton Lower Falls** MA **Newton Upper Falls** MA Newtonville MA Quincy MA Roslindale MA Somerville MA **Stoneham** MA Waban MA Wakefield MA Waltham MA Watertown MA **West Newton** MA West Roxbury MA Westwood MA Woburn MA

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

RCN OF NEW ENGLAND

SYSTEM ID#

040144

Ε

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

Secondary Transmission Service: Subscribers and Rates **In General:** The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).

Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service).

Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.

Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. **Note:** Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)."

Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BLO	OCK 1			BLOCK 2			
CATECORY OF SERVICE	NO. OF		DATE		CATECODY OF SERVICE	NO. OF	DATE
CATEGORY OF SERVICE	SUBSCRIBERS		RATE	Н	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:							
 Service to first set 	46,500	\$	14.23				
 Service to additional set(s) 	1,394	\$	14.71				
 FM radio (if separate rate) 							
Motel, hotel	253	\$	9.45				
Commercial	501	\$	22.50				
Converter			••••••				
Residential			••••••				
Non-residential							
		,		1		1	T

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2				
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
Pay cable		Motel, hotel			
 Pay cable—add'l channel 		Commercial			
Fire protection		Pay cable			
 Burglar protection 		Pay cable-add'l channel			
Installation: Residential		Fire protection			
First set		Burglar protection			
 Additional set(s) 		Other services:			
 FM radio (if separate rate) 		Reconnect			
Converter		Disconnect			
		Outlet relocation	\$ 35.00		
		 Move to new address 			

RCN Of New England Page 2 - Section F- Block 2

Additional Services Other Than Secondary Transmissions:Rate

Service	Туре		ail Rate
Aapka Colors	International Premium	\$	14.95
ART-Arabic	International Premium	\$	12.95
CCTV4	International Premium	\$	9.95
CTI Zhong Tian	International Premium	\$	11.95
CCTV4/CTI Zhong Tian	International Premium	\$	11.95
GMA Life TV	International Premium	\$	9.95
The Filipino Channel (TFC)	International Premium	\$	11.95
GMA Pinoy/TFC	International Premium	\$	19.95
GMA Life/GMA Pinoy/TFC	International Premium	\$	29.95
GMA Pinoy/TFC/Filipino On Demand	International Premium	\$	29.95
GMA Life/GMA Pinoy/TFC/Filipino On Demand	International Premium	\$	35.95
GMA Pinoy TV	International Premium	\$	12.95
Antenna Satellite	International Premium	\$	14.95
Mega Cosmos	International Premium	\$	11.95
Antenna Satellite/Mega Cosmos	International Premium	\$	25.95
TV-5 Monde	International Premium	\$	9.95
RAITALIA	International Premium	\$	9.95
SONY	International Premium	\$	14.95
TVK24	International Premium	\$	12.95
MBC (Muhwa Broadcasting Corporation)	International Premium	\$	12.95
TVK24/MBC	International Premium	\$	19.95
MYX	International Premium	\$	4.95
TVN24	International Premium	\$	9.95
iTVN	International Premium	\$	14.95
TVN24/iTVN	International Premium	\$	19.95
RTPi	International Premium	\$	6.95
TV Globo	International Premium	\$	19.99
Record TV	International Premium	\$	15.95
PFC	International Premium	\$	19.95
TV Globo/PFC	International Premium	\$	29.95
TV Globo/Record	International Premium	\$	29.95
PFC/Record/TV Globo	International Premium	\$	39.95
RTVI	International Premium	\$	9.95
RTVI Plus	International Premium	۶ \$	9.95
RTVI/RTVI Plus			
•	International Premium	\$	14.95
Channel One Russia (C1R)	International Premium	\$	14.95
Russian Television Network (RTN)	International Premium	\$	15.95
NTV America	International Premium	\$	15.95
C1R/RTN/NTV America/RTVI/RTVI Plus	International Premium	\$	28.95
ITV Gold	International Premium	\$	9.95
Star India Gold	International Premium	\$	9.95
Life OK	International Premium	\$	9.95
Star India Plus	International Premium	\$	11.95
TV Asia	International Premium	\$	14.95
Zee TV	International Premium	\$	14.95
ITV/TV Asia	International Premium	\$	17.95
ITV/Zee TV/Aapka Colors	International Premium	\$	19.95

Service	Туре	Re	tail Rate
Star Gold/Life OK/Star Plus/Aapka Colors	International Premium	\$	21.95
TV Asia/Zee TV	International Premium	\$	24.95
Star Gold/Life OK/Star Plus/ITV	International Premium	\$	26.95
Star Gold/Life OK/Star Plus/TV Asia	International Premium	\$	27.95
Star Gold/Life OK/Star Plus/Zee TV/Aapla Colors	International Premium	\$	34.95
Star Gold/Life OK/Star Plus/ITV/Tv Asia/Zee TV/Aapka Colors	International Premium	\$	39.95
Aapka Colors/Bollywood Hits OD/Life OK/Sony/Star Gold/Star Plus/Zee TV	International Premium	\$	42.99
TV Japan	International Premium	\$	24.95
MiVision Lite	International Premium	\$	12.00
MiVision Plus	International Premium	\$	22.95
El Paqueton	International Premium	\$	17.50
Digital Tier (Premiere)	Digital Basic Tier	\$	16.95
Premiere Sports	Premiere Packages	\$	6.99
Premiere News & Information	Premiere Packages	\$	4.99
Premiere Children & Family	Premiere Packages	\$	4.99
Premiere Movies & Entertainment	Premiere Packages	\$	9.99
Premiere Total (includes all 4)	Premiere Packages	\$	16.95
НВО	Premium	\$	19.95
Showtime/The Movie Channel	Premium	\$	16.95
Cinemax	Premium	\$	8.95
Starz	Premium	\$	11.95
HD Tier	High Definition Package	\$	-
HD Expanded Tier	High Definition Package	\$	8.99
The Jewish Channel	Subscription VOD	\$	6.50
Bollywood Hits On Demand	Subscription VOD	\$	9.95
Filipino On Demand	Subscription VOD	\$	7.95
here! On Demand	Subscription VOD	\$	8.95
Anime Network On Demand	Subscription VOD	\$	6.99
Too Much for TV On Demand	Subscription VOD	\$	14.95
Disney Channel Video On Demand	Subscription VOD	\$	4.99
Fox Soccer Plus	Sports Premium	\$	14.95
MLB Extra Innings (Regular Season)	Sports Package	\$	164.99
MLB Extra Innings (Half Season)	Sports Package	\$	119.99
MLB Extra Innings (Pennant Race)	Sports Package	\$	37.49
MLS Direct Kick (Full Season)	Sports Package	\$	89.00
MLS Direct Kick (Half Season)	Sports Package	\$	59.00
NFL Redzone (Full Season)	Sports Package	\$	54.95
NHL Center Ice (Regular Season)	Sports Package	\$	139.56
NBA League Pass (Early Bird Season)	Sports Package	\$	189.00
NBA League Pass (Full Season)	Sports Package	\$	199.00
NBA League Pass (Holiday Offer)	Sports Package	\$	169.00
NBA League Pass (Half Season)	Sports Package	\$	99.00
NBA League Pass (Race to Playoffs)	Sports Package	\$	49.00

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 040144 **RCN OF NEW ENGLAND** PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE (If Distant) NUMBER STATION **WBIN** 50 No Derry, NH ı **WBPX** 61 No Boston, MA See instructions for additional information WBZ Ν 4 No Boston, MA on alphabetization. **WCVB** Ν No 5 Boston, MA **WFXT** 25 1 No Boston, MA **WGBH** 2 Ε No Boston, MA **WGBX** Ε 44 No Boston, MA WGN 9 ı Yes 0 Chicago, IL **WHDH** 7 Ν No Boston, MA WLVI 56 ı No Cambridge, MA **WMFP** 21 ı No Lawrence, MA **WNEU** 60 No Merrimack, NH ı **WSBK** 11 ı No Boston, MA WUNI 27 ı No Worcester, MA WUTF 66 ı No Marlborough, MA **WWDP** 46 I No Norwell, MA **WYDN** 48 Ε No Worcester, MA

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name		
RCN OF NEW E	ENGLAND				040144			
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON						
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 specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast),								
cable system carried the carried the distant stat		-		•	•			
For the retransmiss	ion of a distant	multicast stre	eam that is not s	subject to a royalty	payment because it is the subject stem or an association representing			
the cable system and	a primary trans	mitter or an a	ssociation repre	senting the primar	ry transmitter, enter the designa-			
explanation of these th	ree categories	, see page (v)	of the general i	instructions locate	ther basis, enter "O." For a further d in the paper SA3 form.			
				•	to which the station is licensed by the which the station is identifed.			
Note: If you are utilizing	ig multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.			
		CHANN	EL LINE-UP	AB				
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE				
	NUMBER	STATION		(If Distant)				
		<u> </u>						
		<u> </u>						
		<u> </u>						
		<u> </u>						
		<u> </u>						

FORM SA3E. PAGE 3.						•	
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
RCN OF NEW E	ENGLAND				040144	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	ON					
RRIMARY 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 specifc FCC rules, regulations, or authorizations: - Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. - List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. **Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). **Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. **Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for n							
tion "E" (exempt). For sexplanation of these the Column 6: Give the	simulcasts, also aree categories e location of ea Canadian statio	o enter "E". If , see page (v) ch station. Fo ns, if any, give	you carried the of the general in U.S. stations, the the name of the stations is the stations.	channel on any ot instructions locate list the community ne community with	ther basis, enter "O." For a further and in the paper SA3 form. If to which the station is licensed by the and which the station is identifed.		
		• •	EL LINE-UP				
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		
							
	†····			†			

FORM SA3E. PAGE 3.					Account	NGT EMOD. 2017/2	
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Nama	
RCN OF NEW E	ENGLAND				040144	Name	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
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 76.69(q)(2) and (4), 76.61 (e)(2) and (4), 76.63 (e)(2) and (4), 76.63 (e)(2) and (4)), 76.63 (effering 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 located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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), "T" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational in so su							
Note: If you are utilizing	ig multiple chai	•	•		спаппетше-ир.		
	1	CHANN	EL 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		

FORM SA3E. PAGE 3.						•	
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name	
RCN OF NEW E	ENGLAND				040144		
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
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), 0, 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 specife FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately, for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (
tion "E" (exempt). For sexplanation of these the Column 6: Give the	simulcasts, also aree categories e location of ea Canadian statio	o enter "E". If , see page (v) ch station. Fo ns, if any, giv	you carried the of the general in U.S. stations, the the name of the stations is the stations.	channel on any ot instructions locate list the community ne community with	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.		
		CHANN	EL 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		

FORM SA3E. PAGE 3.					Account	NGT EMOD. 2017/2	
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Nama	
RCN OF NEW E	ENGLAND				040144	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	DN .					
PRIMARY TRANSMITTERS: TELEVISION							
Note: If you are utilizing	ig multiple chai		•	•	Charmer inte-up.		
	T	CHANN	EL 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		
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		/STEM:				Name
RCN OF NEW E	NGLAND				040144	
PRIMARY TRANSMITTE In General: In space (carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s	ENGLAND ERS: TELEVISIO G, identify every system during the cons in effect or consin explaine consider	y television state accounting an June 24, 194, or 76.63 (red in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the state rining substitions are station account as teating substition as the station account of the station. Whether the station whether the station account of the local serves age (v) of the station account of the local serves in column and basis because multicast streem or before Jumitter or an associated as the station and contains the station or station and station account of the local serves in column and the station or before Jumitter or an associated as the station and contains the station or before Jumitter or an associated as the station and t	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations for izations: to the station was carried that basis station report origination cording to its own be reported in contact as assigned to sannel 4 in Wash station is a network etwork), "N-M" (I educational), one general instructive area, (i.e. "or general instructive area, (i.e. "or general instruction is a network of the sannel of the s	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the Special Statement of the Special	es". If not, enter "No". For an ex- e paper SA3 form. estating the basis on which your dering "LAC" if your cable system capacity. expanding the payment because it is the subject estem or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further	G Primary Transmitters: Television
tion "E" (exempt). For sexplanation of these the Column 6: Give the	simulcasts, also ree categories e location of ea	o enter "E". If , see page (v) ch station. Fo	you carried the) of the general in the U.S. stations,	channel on any ot instructions locate list the community	her basis, enter "O." For a further d in the paper SA3 form. r to which the station is licensed by the	
Note: If you are utilizin		nnel line-ups,		space G for each	which the station is identifed. channel line-up.	
1 CALL	2 P'CAST		1	5. BASIS OF	6 LOCATION OF STATION	l
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	CARRIAGE	6. LOCATION OF STATION	l
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FORM SA3E. PAGE 3.					Account	14G 1 EMOD. 2017/2
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Nama
RCN OF NEW E	ENGLAND				040144	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	G, identify even during the cons in effect on a fattons: With a carried the constant of the co	y television standard and accounting in June 24, 194, or 76.63 (in din the next) respect to any ations, or auth G—but do listitute basis. In the standard account in a station account in a station account in a station account in a station account in a station. Whether the station whether the station. Whether the station in commercial page (v) of the local service in column on during the count in a station in during the count in a station in during the count in a station. In the local service in column in during the count in a station in the station or before Jumitter or an account in the station. For example, whether the station is the station. For example, we have a station.	g period, except 81, permitting the ferring to 76.6 paragraph. If distant stations orizations: It it in space I (the fitting the ferring to 76.6 paragraph. If the fitting was carried the fitting was carried to the fitting was assigned to the fitting to the fitt	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on a program services the television statification, D.C. This work station, an indefor network multicar "E-M" (for noncontext of the television statification of the special properties of the station of the special properties of the station of the special properties of the special	s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing	ng multiple chai		•		спаппет ше-ир.	
	T	CHANN	EL 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	

FORM SA3E. PAGE 3.						•		
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name		
RCN OF NEW E	RCN OF NEW ENGLAND 040144							
PRIMARY TRANSMITTE	RS: TELEVISIO	ON						
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), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4)]; and (2) certain stations carried on a 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 (1) (the Special Statement and Program Log)—if the station was carried only on a substitute basis. **List the station here and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. **Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). **Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. **Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "F" (for independent), "I-M" (for independent multicast). Fe" (for nonc								
		CHANN	EL LINE-UP	Al				
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE				
	NUMBER	STATION		(If Distant)				

FORM SA3E. PAGE 3	<u>. </u>					
LEGAL NAME OF OV		YSTEM:			SYSTEM ID#	Name
RCN OF NEW	ENGLAND				040144	
PRIMARY TRANSMIT	TERS: TELEVISION	ON				
In General: In space carried by your cable FCC rules and regult 76.59(d)(2) and (4), substitute program be Substitute program be Substitute Basis basis under specific Do not list the station was carried. List the station here basis. For further in the paper SA3 Column 1: List endeath multicast stream as "WETA-simulcast). Column 2: Give to its community of lice on which your cable Column 3: Indicated and station, I (for independent multicast in the planation of the planation of local serection of local serection of the distant stream as "It the planation of local serection of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the substitute of the serection of these Column 6: Give the cable system 6: Give the cable site of the serection of these Column 6: Give the cable site of the serection of th	e G, identify ever e system during to ations in effect of 76.61(e)(2) and (basis, as explaines Stations: With FCC rules, regulation here in space and also in spaniformation conform. ach station's call massociated with FA-2". Simulcast the channel number in each case with the each case with the distant statication is outside ration on a part-tile sision of a distant entered into od a primary transor simulcasts, als three categories the location of each sistemed in the each case with the each categories the location of each system.	y television st he accounting in June 24, 199 (4), or 76.63 (red) in the next perspect to any ations, or auth G—but do listitute basis. ace I, if the stateming substitute sign. Do not red has tation acceptable with the station acceptable with the station. Whether the station. Whether the station. Whether the station. Whether the station are get (v) of the televal page (v) of the televal page (v) of the est in column on during the amount of the station or before Jumitter or an acceptable with the station. For each of the station.	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations to rizations: at it in space I (the ation was carried tute basis station report origination cording to its own be reported in the referring to an assigned to annel 4 in Wash station is a network, "N-M" (I educational), control of the general instructive area, (i.e. "or general instructive accounting period accounting peri	(1) stations carried to carriage of certal (e)(2) and (4))]; as carried by your of the Special Statement of both on a substitute, see page (v) on program service er-the-air designation of the television statistical or "E-M" (for noncontrol located in the stations of the stations located in the	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	Primary Transmitters: Television
Note: If you are utilize	zing multiple cha	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AJ		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
		<u> </u>				

FORM SA3E. PAGE 3.						•
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
RCN OF NEW E	ENGLAND				040144	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you had cable system carried the carried the distant stating for the retransmiss of a written agreement the cable system and a tion "E" (exempt). For stations or substitution of the column station "E" (exempt).	G, identify even displays the manner of the control	y television standard accounting on June 24, 194, or 76.63 (rd in the next) respect to any ations, or auth G—but do list titute basis. If the standard account is sign. Do not represent the FCC has a station account account of the station. Whether the station whether the station. Whether the station account is sign. Do not represent the FCC has a station. Whether the station. Whether the station. Whether the station account is a station account of the concommercial page (v) of the the local server age (v) of the case in column on during the case in multicast streen or before Jumitter or an account in the control of	period, except 81, permitting the referring to 76.6 paragraph. It is in space I (the stion was carried to the space I (the spa	(1) stations carried to carriage of certa- tile (2) and (4))]; as a carried by your of the Special Statement of both on a substitution, see page (v) on program service the television statistication, D.C. This work station, an indefor network multicution "E-M" (for noncontions located in the interest of the television statistical than the interest of the television statistical than the interest of the television statistical than the interest of the interest o	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your tering "LAC" if your cable system capacity. expaper your payment because it is the subject estem or an association representing ery transmitter, enter the designa- ether basis, enter "O." For a further	G Primary Transmitters: Television
explanation of these the	ree categories e location of ea	, see page (v) ch station. Fo	of the general in U.S. stations,	instructions locate list the community	d in the paper SA3 form. to which the station is licensed by the	
FCC. For Mexican or C Note: If you are utilizing				•	n which the station is identifed. channel line-up.	
		CHANN	EL 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	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
RCN OF NEW E	NGLAND				040144	
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
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), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4)]; and (2) certain stations carried on a 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 (1) (the Special Statement and Program Log)—if the station was carried only on a substitute basis. **List the station here and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. **Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). **Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. **Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "F" (for independent), "I-M" (for independent multicast). Fe" (for nonc						
		CHANN	EL LINE-UP	AL		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
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FORM SA3E. PAGE 3.						•
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
RCN OF NEW E	ENGLAND				040144	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
In General: In space C carried by your cable's FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specific FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the	G, identify every eystem during the consine effect on its and consist and as explained there in space only on a substantion concern. The consistency of the consisten	y television st he accounting in June 24, 194, or 76.63 (in d in the next respect to any attions, or auth G—but do lis- titute basis. ace I, if the sta- terning substiff sign. Do not r in a station acc streams must ber the FCC has been estation. Whether the stater "N" (for no concommercial page (v) of the the local servi	g period, except 81, permitting the referring to 76.6 paragraph. of distant stations orizations: to the referring to 76.6 paragraph. of distant stations orizations: to the report origination coording to its own be reported in origination as assigned to the reported in t	(1) stations carried to carriage of certariage of the television statistication, D.C. This bork station, an indefer network multice or "E-M" (for noncertions located in the television, p. carried or "Yes").	es". If not, enter "No". For an ex-	G Primary Transmitters: Television
Column 5: If you had cable system carried the distant state. For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these the Column 6: Give the FCC. For Mexican or Column of the cable system and the cable system	ave entered "Yne distant static ion on a part-tir ion of a distant entered into o a primary trans simulcasts, also tree categories e location of ea Canadian statio	es" in column on during the same basis beca multicast streen or before Jumitter or an aco enter "E". If , see page (v) ch station. Forns, if any, giv	4, you must cor accounting perion ause of lack of a earn that is not some 30, 2009, be association reprefugue acried the of the general in trus. Stations, the trus of the same of the sam	mplete column 5, sod. Indicate by entactivated channel of subject to a royalty etween a cable system and the primal channel on any of instructions locate list the community with	stating the basis on which your sering "LAC" if your cable system capacity. If payment because it is the subject stem or an association representing ry transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form. If to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing	ng multiple char		•	<u> </u>	channel line-up.	
		CHANN	EL 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	
		<u> </u>				
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FORM SA3E. PAGE 3.					ACCOUNT	NG PERIOD: 2017/2
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
RCN OF NEW E	NGLAND				040144	Nume
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
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 76.69(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 located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream sentley; 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 i						
FCC. For Mexican or C Note: If you are utilizing		. ,		•	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AN		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
	<u> </u>					

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

FORM SA3E. PAGE 3.						•	
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name	
RCN OF NEW E	NGLAND				040144		
PRIMARY TRANSMITTE	RS: TELEVISIO	ON					
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), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4)]; and (2) certain stations carried on a substitute Dasis 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 (1) (the Special Statement and Program Log)—if the station was carried only on a substitute basis. **List the station here and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. **Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). **Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in tis 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), "E" (for independent), "I-M" (for independent multicast), "E" (for nonc							
,	<u> </u>	•	EL LINE-UP	•			
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		
CICIV	NUMBER	STATION	, ,	(If Distant)			
	•						
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FORM SA3E. PAGE 3.						•
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
RCN OF NEW E	NGLAND				040144	
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
In General: In space G, identify every television station (including translator stations and low power television stations) carried only 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), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4)]; and (2) certain stations carried on a substitute Dasis 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 ((the Special Statement and Program Log)—if the station was carried only on a substitute basis. **List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. **Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). **Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. **Column 3: Indicate in each case whether the station is a network station, a nindependent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "F" (for independent), "I-M" (for independent multicast), "E" (for nonc						
,		CHANN	EL LINE-UP	ΔD	·	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION	
	NUMBER	STATION	, ,	(If Distant)		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	'STEM:			SYSTEM ID#	Name
RCN OF NEW E	ENGLAND				040144	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 Column 1: List ead each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement	G, identify every system during the consine effect or 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and also in spate only on a substant also in spate formation concern. The station's call associated with associated with associated with a consistent carried the in each case we entering the least), "E" (for not ese terms, see pate on is outside ce area, see parave entered "Ye ne distant static ion on a part-tirion of a distant entered into or	y television standard programment of the accounting of a standard programment of the s	period, except 81, permitting the referring to 76.6 paragraph. It is in space I (the tition was carried ute basis station eport origination coording to its own be reported in the assassigned to earnel 4 in Wash attion is a network), "N-M" (I educational), our egeneral instruct 4, you must coraccounting period assa to 1 lack of a sam that is not sine 30, 2009, be as a solution of the same as a same as a solution of the same as a same as	(1) stations carried the carriage of certain (1e)(2) and (4))]; as a carried by your content of the Special Statement of the Special	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing	G Primary Transmitters: Television
tion "E" (exempt). For sexplanation of these the Column 6: Give the	simulcasts, also aree categories e location of ea Canadian statio	o enter "E". If y , see page (v) ch station. Fo ns, if any, give nnel line-ups,	you carried the of the general in r U.S. stations, the name of the	channel on any ot instructions locate list the community ne community with space G for each	ry transmitter, enter the designa- ther basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.	
4.001	O DIOACT				C LOCATION OF STATION	
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
CICIT	NUMBER	STATION	(103 01 110)	(If Distant)		

FORM SA3E. PAGE 3.						•
LEGAL NAME OF OWN		'STEM:			SYSTEM ID#	Name
RCN OF NEW E	NGLAND				040144	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you the cable system carried the distant stating For the retransmiss of a written agreement the cable system and attion "E" (exempt). For sexplanation of these the Column 6: Give the	G, identify even ystem during the ons in effect or .61(e)(2) and (sis, as explaine tations: With record on a substant also in space only on a substant also in space on the cast of	y television structure by television structure 24, 194 4), or 76.63 (rd in the next prespect to any attions, or auth G—but do list titute basis. In the structure by the structu	g period, except 81, permitting the referring to 76.6 paragraph. It is a controlled to the second of	in (1) stations carried the carriage of certain (1e)(2) and (4))]; as a carried by your content of the Special Statement of the Special S	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further d in the paper SA3 form. y to which the station is licensed by the n which the station is identifed.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	AR		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		

FORM SA3E. PAGE 3.						•
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
RCN OF NEW E	NGLAND				040144	
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
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 located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast						
		CHANN	EL LINE-UP	AS		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	o. 200/men en en men	
	NUMBER	STATION	, ,	(If Distant)		
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FORM SA3E. PAGE 3.					OVOTELL ID		
RCN OF NEW E		YSTEM:			SYSTEM ID# 040144	Name	
PRIMARY TRANSMITTE		ON.			040144		
In General: In space (carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	G, identify every system during the ions in effect of 5.61(e)(2) and (sis, as explaine stations: With	y television st he accounting n June 24, 19 4), or 76.63 (i d in the next respect to any	g period, except 81, permitting the referring to 76.6 paragraph. distant stations	(1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program	G Primary Transmitters: Television	
 Do not list the station station was carried List the station here, 	here in space only on a subs and also in spa	G—but do lis titute basis. ace I, if the sta	t it in space I (thation was carried	d both on a substit	ent and Program Log)—if the ute basis and also on some other		
in the paper SA3 fo Column 1: List each each multicast stream cast stream as "WETA-Simulcast).	or further information concerning substitute basis stations, see page (v) of the general instructions located aper SA3 form. 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify east stream associated with a station according to its over-the-air designation. For example, report multinas "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example						
its community of licens on which your cable sy Column 3: Indicate	se. For example stem carried the in each case v	e, WRC is Chane station. whether the st	annel 4 in Wash	ington, D.C. This ork station, an inde	on for broadcasting over-the-air in may be different from the channel		
(for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you had cable system carried the	cast), "E" (for notes terms, see attion is outside ce area, see paye entered "Yone distant station	oncommercia page (v) of the the local servage (v) of the es" in column on during the	I educational), of general instructivice area, (i.e. "of general instruction, you must coraccounting period	or "E-M" (for nonco ctions located in the distant"), enter "Ye ions located in the mplete column 5, s od. Indicate by ent	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your eering "LAC" if your cable system		
of a written agreement the cable system and a tion "E" (exempt). For explanation of these th	ion of a distant entered into o a primary trans simulcasts, also aree categories	multicast street n or before Ju mitter or an a o enter "E". If , see page (v)	eam that is not s une 30, 2009, be ssociation repre you carried the) of the general i	subject to a royalty etween a cable system is esenting the priman channel on any ot instructions locate	capacity. It payment because it is the subject stem or an association representing ry transmitter, enter the designater basis, enter "O." For a further d in the paper SA3 form.		
	Canadian statio	ons, if any, giv nnel line-ups,	e the name of thuse a separate	ne community with space G for each	which the station is identifed.		
	1	CHANN	EL 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		
		1			<u> </u>		

FORM SA3E. PAGE 3.					Accoonti	14G 1 ENIOD: 2017/2
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Nama
RCN OF NEW E	ENGLAND				040144	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during the cons in effect or i.61(e)(2) and (sis, as explaine	ne accounting n June 24, 199 4), or 76.63 (r d in the next p	period, except 31, permitting the eferring to 76.6 paragraph.	(1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program	G Primary Transmitters: Television
basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and at tion "E" (exempt). For explanation of these th Column 6: Give the	CC rules, regular here in space only on a substand also in spatformation concern. In station's call associated with associated with a cash of the cash, "E" (for not see terms, see pation is outside the distant station on a part-time in on a part-time in on a primary trans simulcasts, also are categories a location of ea	ations, or auth G—but do list titute basis. Ince I, if the state erning substitute basis. Ince I, if the state erning substitute sign. Do not read a station accept the FCC has, WRC is Challe station. In whether the state "N" (for not oncommercial basis because (v) of the local server in column on during the same basis because multicates the order of the station. In the station of the station of the station of the station. In the station of the station. For the station. For the station is seen to the station. For the station is the station of the station.	orizations: it in space I (the tion was carried ute basis station eport origination cording to its own be reported in the tion was assigned to annel 4 in Wash ation is a network), "N-M" (I educational), or egeneral instructive area, (i.e. "or general instructive area, (i.e. "or general instructive area, or accounting period assigned to a sam that is not some 30, 2009, be association repression of the general in tructive of the general instructive area, or accounting period assigned to the special in the soft as a sam that is not some 30, 2009, be association repression or special in the soft as a same that is not some 30, 2009, be sociation repression or special in the soft as a same and the soft as a same and the social in the social	de Special Statement of both on a substitute, see page (v) of the program services er-the-air designal column 1 (list each the television statistington, D.C. This interpretation of the television statistington, D.C. This interpretation, an indefer network multicate for network multicater "E-M" (for noncoctions located in the interpretation of the properties of the program of the primary channel on any of the primary channel on the primary chan	ent and Program Log)—if the ute basis and also on some other if the general instructions located is such as HBO, ESPN, etc. Identify ition. For example, report multi- in stream separately; for example on for broadcasting over-the-air in imay be different from the channel inspendent station, or a noncommercial aast), "I" (for independent), "I-M" immercial educational multicast). In paper SA3 form. In paper	I elevision
Note: If you are utilizing	g multiple char		·	•	channel line-up.	
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	
	<u> </u>					

	STEM:			SYSTEM ID#	Name
				040144	
rs: TELEVISIO , identify every stem during the ons in effect or 61(e)(2) and (is, as explaine tations: With I C rules, regula- here in space only on a subs and also in spa- ormation cond m. In station's call associated with 2". Simulcast	y television standard programmer of the accounting of June 24, 194, or 76.63 (rd d in the next prespect to any ations, or auth G—but do list titute basis. In the standard programmer of the station account o	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: tit in space I (the attion was carried ute basis station eport origination cording to its ow- be reported in on as assigned to	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of both on a substitution, see page (v) on program services er-the-air designal column 1 (list each the television statistics).	and low power television stations) d only on a part-time basis under sin network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify ion. For example, report multi- instream separately; for example on for broadcasting over-the-air in	G Primary Transmitters: Television
in each case we netering the least), "E" (for no se terms, see parties area, see parties e area, see parties e area, see parties e distant static on on a part-tiron of a distant tentered into or primary transimulcasts, also ree categories location of ea anadian statio	whether the stater "N" (for no commercial page (v) of the the local servage (v) of the es" in column on during the ameliast streen or before Jumitter or an amount of the column the column the streen or before Jumitter or an amount of the column the colu	etwork), "N-M" (I educational), of a general instruct vice area, (i.e. "c general instruct 4, you must cor accounting pericause of lack of a seam that is not some 30, 2009, be association repression of the general in the control of the general in the general i	for network multic, or "E-M" (for nonco- ctions located in the distant"), enter "Ye ions located in the mplete column 5, so and. Indicate by entictivated channel coubject to a royalty stween a cable system and the primar channel on any of instructions locate list the community with the community w	ast), "I" (for independent), "I-M" mmercial educational multicast). ie paper SA3 form. s". If not, enter "No". For an expaper SA3 form. stating the basis on which your ering "LAC" if your cable system sapacity. payment because it is the subject stem or an association representing y transmitter, enter the designater basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
	CHANN	EL LINE-UP	AV		
2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
	RS: TELEVISIO , identify even ystem during the tons in effect or 61(e)(2) and (is, as explaine tations: With I C rules, regula here in space only on a subs and also in spa ormation cono m. In station's call associated with 2". Simulcast channel numb e. For example stem carried the in each case we entering the le ast), "E" (for no east), "E" (for no is outside the area, see pa ve entered "Y e distant static on on a part-tir on of a distant entered into or primary trans imulcasts, also ree categories location of ea anadian statio g multiple char 2. B'CAST CHANNEL	RS: TELEVISION , identify every television stream during the accounting ons in effect on June 24, 196 61(e)(2) and (4), or 76.63 (ris, as explained in the next plations: With respect to any C rules, regulations, or authories in space G—but do list only on a substitute basis. and also in space I, if the state ormation concerning substitute. In station's call sign. Do not reasonated with a station acc 2". Simulcast streams must channel number the FCC hastem carried the station. in each case whether the statentaring the letter "N" (for neast), "E" (for noncommercial set terms, see page (v) of the steen carried the local service area, see page (v) of the ve entered "Yes" in column the distant station during the set on of a distant multicast streentered into on or before Juprimary transmitter or an assimulcasts, also enter "E". If the categories, see page (v) location of each station. For an adimulcasts, also enter "E". If the categories, see page (v) location of each station. For an adimulcasts, also enter "E". If the categories, see page (v) location of each station. For an adimulcasts, also enter "E". If the categories, see page (v) location of each station. For an adimulcasts, also enter "E". If the categories, see page (v) location of each station. For an adian stations, if any, giving multiple channel line-ups, CHANNEL CHANNEL	RS: TELEVISION In, identify every television station (including yetem during the accounting period, except tons in effect on June 24, 1981, permitting the 61(e)(2) and (4), or 76.63 (referring to 76.6 is, as explained in the next paragraph. Itations: With respect to any distant stations: Crules, regulations, or authorizations: here in space G—but do list it in space I (thouly on a substitute basis. In also in space I, if the station was carried ormation concerning substitute basis station associated with a station according to its own 2". Simulcast streams must be reported in concerning the letter "N" (for network), "N-M" (for externing the letter "N" (for network), "N-M" (for externing the letter "N" (for network), "N-M" (for externing the letter "Yes" in column 4, you must concerned instruction is outside the local service area, (i.e. "Concerned "Yes" in column 4, you must concerned into on or before June 30, 2009, be primary transmitter or an association representation of each station. For U.S. stations, anadian stations, if any, give the name of the multiple channel line-ups, use a separate CHANNEL LINE-UP 2. B'CAST (Yes or No)	RS: TELEVISION , identify every television station (including translator stations ystem during the accounting period, except (1) stations carrier ons in effect on June 24, 1981, permitting the carriage of certa 61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; a sis, as explained in the next paragraph. Itations: With respect to any distant stations carried by your carried in space G—but do list it in space I (the Special Stateme only on a substitute basis. In also in space I, if the station was carried both on a substitute ormation concerning substitute basis stations, see page (v) of m. In station's call sign. Do not report origination program services associated with a station according to its over-the-air designat 2". Simulcast streams must be reported in column 1 (list each channel number the FCC has assigned to the television station. In each case whether the station is a network station, an independent of the station. In each case whether the station is a network station, an independent of the local service area, (i.e. "distant"), enter "Ye are area, see page (v) of the general instructions located in the station is outside the local service area, (i.e. "distant"), enter "Ye are area, see page (v) of the general instructions located in the continuous of the local service area, (i.e. "distant"), enter "Ye are area, see page (v) of the general instructions located in the continuous of the local service area (i.e. "distant"), enter "Ye are area, see page (v) of the general instructions located in the continuous of the local service area (i.e. "distant"), enter "Ye are area, see page (v) of the general instructions located in the continuous of the local service area (i.e. "distant"), enter "Ye are area, see page (v) of the general instructions located in the continuous of the service area (i.e. "distant") are area of the community of the general instructions located in the continuous of the service area of the community of the general instructions located in the continuous of the general inst	RS: TELEVISION I, identify every television station (including translator stations and low power television stations) ystem during the accounting period, except (1) stations carried only on a part-time basis under ones in effect on June 24, 1981, permitting the carriage of certain network programs [sections 61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a space sexplained in the next paragraph. Autions: With respect to any distant stations carried by your cable system on a substitute program to crules, regulations, or authorizations: here in space G—but do list it in space I (the Special Statement and Program Log)—if the only on a substitute basis. Indialso in space I, if the station was carried both on a substitute basis and also on some other ormation concerning substitute basis stations, see page (v) of the general instructions located m. In station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify associated with a station according to its over-the-air designation. For example, report multi-22. Simulcast streams must be reported in column 1 (list each stream separately; for example channel number the FCC has assigned to the television station for broadcasting over-the-air in e. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel stem carried the station. In each case whether the station is a network station, an independent station, or a noncommercial entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" ast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), see terms, see page (v) of the general instructions located in the paper SA3 form. See terms, see page (v) of the general instructions located in the paper SA3 form. See terms, see page (v) of the general instructions located in the paper SA3 form. The eventual multicast stream that is not subject to a royalty payment because it is the

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name
RCN OF NEW B	ENGLAND				040144	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program base Substitute Pasis Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA-Simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If your cable system carried the distant stat For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the Column 6: Give the	G, identify even by system during the ions in effect or 6.61(e)(2) and (6.51(e)(2) and (6.51(e	y television state he accounting in June 24, 194, or 76.63 (red in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the state erning substitions in a station account of the state of the station. Whether the state of the local server in column on during the ame basis becard multicast stream or before Jumitter or an associated of the station. For exage (v) of the station or during the ame basis becard multicast stream or before Jumitter or an associated of the station. For exage (v) of the station or before Jumitter or an associated of the station. For example, whether the station is the station.	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried the station was carried the station was carried to the station was carried to the station was carried to the period of the station was assigned to the station is a network, "N-M" (In educational), the station was assigned to the station was assigned to the station was assigned to the stational), the station was assigned to the stational was assigned to the sta	in (1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the Special Statement o	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AW		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
						
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ACCOUNTING PERIOD: 2017/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 040144 **RCN OF NEW ENGLAND** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.								FERIOD: 2017/
RCN OF NEW ENGLAI		ГЕМ:					SYSTEM ID#	Namo
RCN OF NEW ENGLAI	שא						040144	
In General: In space I, ident substitute basis during the acceptantion of the programm	ify every nor	nnetwork televis eriod, under spe	sion program broadcast by a	distant station	ations, or a	uthorizations	s. For a further	 Substitute
								Carriage:
 During the accounting per broadcast by a distant star 	iod, did you			s, any nonnet	twork telev	vision progra ☐Yes	m X No	Special Statement and
Note: If your answer is "No	", leave the	rest of this pag	ge blank. If your answer is	'Yes," you mu	ıst comple		· · · · · · · · · · · · · · · · · · ·	Program Log
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the prograr Column 3: Give the call Column 4: Give the broathe case of Mexican or Car Column 5: Give the mor first. Example: for May 7 gir Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progratice, please and of every no distant state gulations, oution. Do not a compare the state of the	am on a separa attach addition nnetwork telev ion and that your or authorization but use general of BA Basketball: dcast live, ente station broadca on's location (thons, if any, the when your system e substitute pro a program carri	al pages. ision program (substitute pour cable system substitute s. See page (vi) of the gencategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the stem carried the substitute program was carried by your ed by a system from 6:01:	rogram) that, d for the progeral instructio "basketball". lo." m. station is licer station is iden program. Use cable system. 15 p.m. to 6:2 mming that ye; enter the letters	during the ramming ons located List spec List spec nsed by the stiffied). numerals List the till 8:30 p.m. our system ter "P" if the	e accounting of another sta in the pape ific program he FCC or, in , with the mo mes accurate should be n was require he listed pro	ation r onth ely	
		TE PROGRAM	1	1 1	I CADDIACE ACCIDED I	7. REASON	-	
TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	5. MONTH 6. TIMES DELE		FOR DELETION	
	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM	<u>— то</u>		-
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ACCOUNTING PERIOD: 2017/2 FORM SA3E, PAGE 6. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 040144 **RCN OF NEW ENGLAND PART-TIME CARRIAGE LOG** J In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.- 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.-12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS HOURS** DATE **FROM** TO DATE **FROM** TO

	AL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	Nama			
RC	N OF NEW ENGLAND			040144				
Ins all a (as pag	tructions: The figure you give in this space determines the form you fle and the amount amounts (gross receipts) paid to your cable system by subscribers for the system's secondentifed in space E) during the accounting period. For a further explanation of how to de (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. PORTANT: You must complete a statement in space P concerning gross receipts.	ondary	y transmite this a	nission service	K Gross Receipts			
• Coi • Coi • If your fee • If you acco	COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.							
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b ${\sf ck}$ 3 below.	e ente	ered on	line 1 of				
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.	entere	ed on lin	e 2 in block				
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be	e entere	d on line				
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064							
	Enter the result here. This is your minimum fee.	\$		107,224.86				
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block. • Did your cable system carry any distant television stations during the accounting peri Yes—Complete the DSE schedule. No—Leave block 3 below blank and column 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or	nn 4, ; od?	you mu	st check , block 4.				
Block 3	4, or part 9, block A of the DSE schedule. If none, enter zero		\$	12,052.08				
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero			0.00				
	Line 3. Add lines 1 and 2 and enter here	\$		12,052.08				
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7		\$	107,224.86	Cable systems			
	(block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.	ſ		0.00	additional deposits under			
	Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)			0.00	Section 111(d)(7) should contact the Licensing			
	Line 4. FILING FEE		\$	725.00	additional fees. Division for the appropriate			
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$		107,949.86	form for submitting the additional fees.			
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See p	age (i)	of the				

Name	LEGAL NAME OF OWNE	R OF CABLE	SYSTEM:	SYSTEM ID#						
Name	RCN OF NEW EI	NGLAND		040144						
	CHANNELS									
M	Instructions: You	must give	(1) the number of channels on which the cable system carried television broadcast	st stations						
Ob	to its subscribers a	and (2) the	${\it cable system's total number of activated channels, during the accounting period.}\\$							
Channels	1 Enter the total n	umber of (channels on which the cable							
			roadcast stations] 17						
	2. Enter the total n									
		-	carried television broadcast stations	288						
	and nonbroadcas	st services								
N	INDIVIDUAL TO E	BE CONTA	ACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual							
Individual to	we can contact about this statement of account.)									
Be Contacted										
for Further	Name Jacqu	ıeline M	athis Telephone	609-751-9316						
Information										
	Address 650 C	ollege I	Road East, Suite 3100							
		eton, No n, state, zip)								
	Email	Jacqı	ueline.Mathis@rcn.net Fax (optional)							
_	CERTIFICATION (T	his statem	ent of account must be certifed and signed in accordance with Copyright Office re	gulations.						
O Certifcation	. I the undersigned	horoby oo	rtify that (Charle and hut any and of the haves)							
Certification	, the undersigned	, петеру се	rtify that (Check one, but only one, of the boxes.)							
	(Owner other th	an corpor	ation or partnership) I am the owner of the cable system as identifed in line 1 of space	ce B; or						
			in corporation or partnership) I am the duly authorized agent of the owner of the cab If that the owner is not a corporation or partnership; or	ole system as identified						
	in line i oi s	расе в апс	i triat the owner is not a corporation or partnership, or							
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.									
	iii iiile i oi s	pace b.								
			nt of account and hereby declare under penalty of law that all statements of fact contains to the best of my knowledge, information, and belief, and are made in good faith	ined 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)]									
		V								
		<u>X</u>	/s/ John Rusak							
			n electronic signature on the line above using an "/s/" signature to certify this statement.							
			/ John Smith). Before entering the first forward slash of the /s/ signature, place your curso tton, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lot							
		Гуреd	or printed name: John Rusak							
			Canian Vias President Cantan II-							
		Title:	Senior Vice President - Controller (Title of official position held in corporation or partnership)							
			· · · · · · · · · · · · · · · · · · ·							
		Date:	February 28, 2018							

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND	SYSTEM ID# 040144	Name
RCN OF NEW ENGLAND	040144	
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the service of providing secondary transmissions of primary broadcast transmitters, the system shall not independent and amounts collected from subscribers receiving secondary transmissions pursuant to section	basic clude sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions paper SA3 form.	in the	Concerning Gross Receipts Exclusion
During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmade by satellite carriers to satellite dish owners?	nissions	
X NO		
YES. Enter the total here and list the satellite carrier(s) below		
Name Name Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
INTEREST ASSESSMENTS	rn av m ant	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or under For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	рауттепт.	Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
x		
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-	
x	days	
Line 3 Multiply line 2 by the number of days late and enter the sum here		
x 0.00	274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,		
space L, (page 7)	charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assistan contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	ce please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offc please list below the owner, address, first community served, accounting period, and ID number as given in the filing.		
Owner		
Address		
First community served		
Accounting period		
ID number		

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

ACCOUNTING PERIOD: 2017/2

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that the character and a contract of the contract of the party of	

Note that local stations are not counted at all in computing DSEs.

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following:

- 1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
- 2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.
- 3) A station of the same type substituted for a carried network, non-commercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)] in effect on June 24, 1981.
- 4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.
- 5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

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

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

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

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

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

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

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

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

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

Each of the second, third, and fourth DSEs 0.701% of gross receipts The fifth and each additional DSE 0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

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

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

EXAMPLE:

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

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



	Distant Stations Carried		Identification o	f Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
nin	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
s	B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
)-	C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
	D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
	E (network)	0.25	Fairvale	Stations B, D, and E	120,000.00
	TOTAL DSFs	2 472		TOTAL GROSS RECEIPTS	\$600,000,00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

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

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94 In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

ACCOUNTING PERIOD: 2017/2

DSE SCHEDULE. PAG	E 11. (CONTINUED)												
4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			SY	STEM ID#							
1	RCN OF NEW ENGLAN	D				040144							
	SUM OF DSEs OF CATEGOR	RY "O" STATION	NS:										
	Add the DSEs of each station												
	Enter the sum here and in line	1 of part 5 of this	s schedule.		0.00								
	Instructions:												
2	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).												
Computation	In the column headed "DSE"			as "1.0"; for	each network or noncom-								
of DSEs for	mercial educational station, given	ve the DSE as "		IO. DOE-									
Category "O"	CALLOLON	DOE	CATEGORY "O" STATION		CALL CION	DOE							
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE							
Add rows as													
necessary.													
Remember to copy													
all formula into new													
rows.													
TOWS.													
						•							
						·····							

Name	RCN OF NEW E	ENGLAND					S	YSTEM ID# 040144		
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2: For figure should correct Column 3: For Column 4: Di be carried out at l Column 5: For give the type-valu Column 6: M	ne call sign of all distant or each station, give the respond with the information or each station, give the responding to the figure in coluple as to the third decinor each independent sue as ".25." ultiply the figure in coluple in coluple to the third decinor each independent sue as ".25."	the number of hours mation given in spath total number of himm 2 by the figure in all point. This is the station, give the "typlum 4 by the figure illum 4 by the figure illum 4 by the figure.	your cable systemed J. Calculate on ours that the station column 3, and good as "basis of carriagore-value" as "1.0."	n carried the sta ly one DSE for e on broadcast ov give the result in e value" for the s For each netwo give the result in	tion during the accountine each station. Ver the air during the accordecimals in column 4. The	counting period. this figure must acational station, less than the			
Capacity		С	ATEGORY LAC	STATIONS:	COMPUTATI	ION OF DSEs				
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	R 3. N JRS C ED BY S	UMBER F HOURS TATION N AIR	4. BASIS OF CARRIAG VALUE	5. TYPE		E		
						x				
						<u>x</u>				
						x x	<u>=</u>			
			÷	=		x	=			
			÷ ÷	=	·		<u>=</u>			
	Add the DSEs of e	CATEGORY LAC Seach station.		е,	= x = x = = = = x = = = = x = = = = x =					
Computation of DSEs for Substitute-Basis Stations	Was carried by tions in effect controls Broadcast one space I). Column 2: For at your option. This Column 3: Enter Column 4: Divi	your system in substion October 19, 1976 (a or more live, nonnetwore each station give the singure should correster the number of days de the figure in columns is the station's DSE of the station's	itution for a program as shown by the let ork programs during number of live, nor spond with the inform in the calendar years 2 by the figure in (For more informatical).	that your system er "P" in column in that optional carrimetwork programs mation in space I. In: 365, except in column 3, and given on rounding, see	was permitted to of space I); and age (as shown by a carried in substance a leap year. The the result in company to the page (viii) of the carried in substance page (viii) of the carried in company to the page (viii) of the carried in company to the page (viii) of the carried in substance in the carried in substance in the carried in substance in the carried in t	to delete under FCC rule d the word "Yes" in column titution for programs that blumn 4. Round to no les the general instructions in	2 of twere deleted as than the third	m).		
		SUI	BSTITUTE-BAS	IS STATIONS	S: COMPUTA	ATION OF DSEs	1	1		
	SIGN	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		
		÷		=		4	+	=		
		+				4		=		
		÷		=		+	<u> </u>	=		
		÷		=		-	÷	=		
	Add the DSEs of e	SUBSTITUTE-BASI each station. here and in line 3 of pa		e,		0.00				
5 Total Number of DSEs	number of DSEs ap	OF DSEs: Give the amplicable to your system SEs from part 2 ● SEs from part 3 ●		s in parts 2, 3, and	4 of this schedul	e and add them to provide	0.00 0.00			
	3. Number of DS	SEs from part 4 ●				-	0.00			
	TOTAL NUMBER C	DF DSEs				•	•	0.00		

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2017/2

RCN OF NEW		SYSTEM:					S	YSTEM ID# 040144	A 1			
Instructions: Bloc		nleted						070174				
In block A:		•	oort 6 and part	7 of the DSE cohe	adula blank a	ad complete pe	ort 9 (nago 16) of	tho	6			
If your answer if schedule.			•	7 OF THE DOE SCHE	edule blatik al	id complete pa	arto, (page 10) or	uie	0			
If your answer if	"No," complete blo			ELEVISION M.	ARKETS				Computation of			
Is the cable system		outside of all	major and sma	iller markets as de	efined under s	ection 76.5 of	FCC rules and re	gulations in	3.75 Fee			
·		schedule—[DO NOT COM	PLETE THE REMA	AINDER OF F	PART 6 AND 7						
X No—Comp	olete blocks B and	C below.										
		BLO	CK B: CARR	IAGE OF PERI	MITTED DS	SEs						
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. PERMITTED 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)] CARRIAGE 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)												
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 Noncommerical 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, 198′ 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:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on page	e 14 of				
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE				
								0.00				
		В	LOCK C: CO	MPUTATION OF	F 3.75 FEE							
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule								
Line 2: Enter the	sum of permitte	ed DSEs from	m block B ab	ove								
Line 3: Subtract (If zero, I				r of DSEs subjec 7 of this schedu		rate.	<u>.</u>					
Line 4: Enter gro	oss receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially			
Line 5: Multiply I	ine 4 by 0.0375	and enter si	um here				х		permited/ partially nonpermitted			
Line 6: Enter tota	al number of DS	Es from line	3				·		carriage? If yes, see part 9 instructions.			
Line 7: Multiply I	ine 6 by line 5 aı	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00				

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RCN OF NEW ENGLAND SYSTEM ID# 040144									
		BLOCK	A: TELEVIS	ION MARKET	S (CONTIN	UED)			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation of 3.75 Fee
								•••••	
								•••••	
					•••••				
					• • • • • • • • • • • • • • • • • • • •			••••••	
					• • • • • • • • • • • • • • • • • • • •			••••••	
					• • • • • • • • • • • • • • • • • • • •				

Name		RCN OF NEW ENGLAND SYSTEM ID#: 040144											
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the basis of carriage and which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS												
		PERMITT	ED DSE FOR STA	TIONS CARRI	ΞD	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS					
	1. CALL SIGN	2. PRIO		COUNTING ERIOD		4. BASIS OF CARRIAGE		RESENT DSE	6. P	ERMITTED DSE			
					••••								
					••••					•••••			
					····								
7 Computation of the	,	"Yes," comple	ete blocks B and C	•	pa	art 8 of the DSE sched	ule.						
Syndicated			BLOC	K A: MAJOR	TE	ELEVISION MARK	ET						
Exclusivity													
Surcharge	l <u>—</u> * · ·	•		or television mar	ke	t as defned by section 7		rules in effect J	une 24,	1981?			
	Yes—Complete	blocks B and	IC.			No—Proceed to	part 8						
		·	F/Grade B Contour		_	BLOCK	C: Compu	tation of Exem	pt DSE	3			
	Is any station listed in commercial VHF stati or in part, over the ca	ion that places				Was any station listed nity served by the cab to former FCC rule 76	le system p						
	Yes—List each s X No—Enter zero a		th its appropriate per part 8.	mitted DSE		Yes—List each st X No—Enter zero a			ate permi	tted DSE			
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	SN	DSE			
			-										
			-										
			-										
				<u> </u>									
							<u> </u>						
			TOTAL DSEs	0.00				TOTAL DS	SEs	0.00			

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND 04014		Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	00	7
Section 2	A. Enter the total DSEs from block B of part 7	00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7		of the Syndicated
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.		Exclusivity Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
30	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET	_	
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)		
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Nama	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#								
Name	I	RCN OF NEW ENGLAND	040144								
7 Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. A. Enter 0.00300 of gross receipts (the amount in section 1). B. Enter 0.00189 of gross receipts (the amount in section 1). C. Multiply line B by 3.000 and enter here. D. Enter 0.00089 of gross receipts (the amount in section 1). E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here. F. Multiply line D by line E and enter here. G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge. Instructions:									
Instructions: You must complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of 6 was checked "Yes," use the total number of DSEs from part 5. In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. If your answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B blank. What is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers were located within that station's local service area and others were located outside that area. For the definition of a station's "loservice area," see page (v) of the general instructions.											
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS									
	• Did v	our cable system retransmit the signals of any partially distant television stations during the accounting period?									
	_	Yes—Complete part 9 of this schedule. No—Complete the following sections.									
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE									
	Section										
	1	Enter the amount of gross receipts from space K (page 7)	_								
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.).									
	Section 3 If the figure in section 2 is 4.000 or less, compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1). B. Enter 0.00701 of gross receipts (the amount in section 1). C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here. D. Multiply line B by line C and enter here. E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)										
		Base Rate Fee	0.00								
		- μψ	<u></u> .								

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DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2017/2

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
RCN OF NEW ENGLAND	040144	
Section If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.		
A. Enter 0.01064 of gross receipts (the amount in section 1) **State		8
B. Enter 0.00701 of gross receipts (the amount in section 1)		Computation of
C. Multiply line B by 3.000 and enter here >		Base Rate Fee
D. Enter 0.00330 of gross receipts (the amount in section 1) ▶ \$		
E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here▶		
F. Multiply line D by line E and enter here \$		
G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)		
Base Rate Fee▶	0.00	
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television brown instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple ch	•	
Space G.		9
In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rareceipts from subscribers located within the station's local service area, from your system's total gross receipts. To ta		Computation of
exclusion, you must:		Base Rate Fee and
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are dist station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Deter DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	mine the number of ee for each group.	Syndicated Exclusivity Surcharge
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exemple also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and if your cable system is wholly located outside all major television markets, complete block A only.	pt in part 7, you must	for Partially Distant Stations, and
How to Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
Step 1: For each community served, determine the local service area of each wholly distant and each partially distant carried to that community.	it station you	Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers we outside the station's local service area. A subscriber located outside the local service area of a station is distant to the same token, the station is distant to the subscriber.)		
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are dis subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. No system will have only one subscriber group when the distant stations it carried have local service areas that coincide	ote that a cable	
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of you groups.	r system's subscriber	
In each section: • Identify the communities/areas represented by each subscriber group.		
 Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant subscribers in the group. 	to all of the	
• If:		
1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gat and 4 of this schedule; or,	e it in parts 2, 3,	
2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave part 6 of this schedule.	it in block B,	
• Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
• Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the gen in the paper SA3 form.	eral instructions	
• Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule or page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not	p (that is, the total	

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actual calculations on the form.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 040144 **RCN OF NEW ENGLAND** Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

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RCN OF NEW EN		LE SYSTEM:				S	YSTEM ID# 040144	Name
B	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EA	CH SUBSCRI	BER GROUP		
	FIRST	SUBSCRIBER GRO	JP		SECOND	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA	BOS			COMMUNITY/ ARE	A BOS			9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				WGN	1.00			Base Rate Fe
								and
								Syndicated
								Exclusivity
	<u></u>							Surcharge
	<u></u>							for
						_		Partially
	<u> </u>						<u>.</u>	Distant
								Stations
	 		···			-		
	 		···					
	···				·····	-		
	 		••••••••••					
	 		••••••••••					
Total DSEs		!!	0.00	Total DSEs		<u> </u>	1.00	
		. 0.04				. 44	-	
Gross Receipts First G	Group	\$ 8,944	I,810.00	Gross Receipts Se	cond Group	\$ 1,1	32,714.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Se	cond Group	\$	12,052.08	
	THIRD	SUBSCRIBER GRO	JP		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						_		
	<u></u>							
						_		
								
	 		···			-		
			"		-			
	···		<u> </u>					
	<u>-</u>		······································			H		
	···		<u> </u>		·····	H		
	<u> </u>		<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00			Gross Receipts For	Gross Receipts Fourth Group \$ 0.00				
Poor Poto For Third	Croun		0.00	Page Bate Fee Fee	urth Crown		0.00	
Base Rate Fee Third (σιυαμ	\$	0.00	Base Rate Fee For	лит Стоир	\$	0.00	
Base Rate Fee: Add t			criber group	as shown in the boxe	es above.		40.050.53	
Enter here and in bloc	k 3, line 1,	space L (page 7)				\$	12,052.08	

LEGAL NAME OF OWN		LE SYSTEM:				S	YSTEM ID# 040144	Name	
E		COMPUTATION O		ATE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	9	
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fee and	
		-						Syndicated	
				-				Exclusivity Surcharge	
								for	
	····							Partially Distant	
			-		····			Stations	
		-	<u></u>		·····	-	<u></u>		
	····					<u> </u>			
Total DSEs		Į Į	0.00	Total DSEs		Į.	0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First (\$	0.00	Base Rate Fee Sec		\$	0.00		
COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		SUBSCRIBER GRO	UP 0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-	<u></u>		·····	-	<u></u>		
	····		<u></u>		·····		<u></u>		
						-			
	····				·····				
				-		 			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00		
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxe	s above.	\$			

	EGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND 040144								
				ATE FEES FOR EAC	H SUBSCF	RIBER GROUP			
		SUBSCRIBER GRO		#		SUBSCRIBER GRO		9	
COMMUNITY/ AREA	٩		0	COMMUNITY/ AREA	Α		0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
O, ILL GIGIT	BOL	OALL SIGIY	DOL	GALLE GIGIT	502	O/ LEE OF OTT	502	Base Rate Fee	
								and	
								Syndicated	
				-				Exclusivity	
							····	Surcharge for	
		-						Partially	
								Distant	
								Stations	
	•••••					•			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
	ELEVENTH	SUBSCRIBER GRO	JP		TWELVTH	SUBSCRIBER GRO	UP		
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	A		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-							
						-	<u> </u>		
		-							
		-							
		-							
Total DSEs			0.00	Total DSEs		11	0.00		
	d Croup	¢	0.00		th Croup	<u> </u>	0.00		
Gross Receipts Third	u Group	\$	0.00	Gross Receipts Four	ar Group	\$	3.00		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$			

	EGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND O40144								
				ATE FEES FOR EAC					
		SUBSCRIBER GRO		TI .		SUBSCRIBER GROU		9	
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
	·····							Syndicated Exclusivity	
					••••		••••	Surcharge	
								for	
								Partially	
		-						Distant Stations	
						•		Stations	
Total DSEs		Į.	0.00	Total DSEs			0.00		
	Group	•	0.00	Gross Receipts Seco	and Group	\$	0.00		
Gross Receipts First Group \$ 0.00			<u> </u>	Cross receipts econ	ла Стоар		0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
		SUBSCRIBER GRO		iii —		SUBSCRIBER GROU	JP		
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	·····								
						-			
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$			

EGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
В	LOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
	NTEENTH	SUBSCRIBER GRO				SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
OALL GIOIN	DOL	OALL SIGIV	DOL	OALL GIGIT	DOL	OALL GIGIT	DOL	Base Rate Fee
						-		and
••••••••••								Syndicated
								Exclusivity
								Surcharge
								for
		_				<u> </u>		Partially
								Distant
						<u> </u>		Stations
							<u></u>	
		-					····	
	···		···					
						+		
Total DSEs			0.00	Total DSEs		11	0.00	
Gioss Receipis Filsi C	Gross Receipts First Group \$ 0.00			Gross Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First C	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
N	NTEENTH	SUBSCRIBER GRO)UP		TWENTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u> </u>		
						<u> </u>		
		-	<mark>.</mark>					
					······	<u> </u>	····	
	···						·····	
							····	
						-	<u> </u>	
						<u> </u>	····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			scriber group	as shown in the boxe	es above.	\$		

EGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND 040144								
		COMPUTATION OF SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
						-		Surcharge for
								Partially
								Distant Stations
								Otations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	TY-THIRD	SUBSCRIBER GRO		li		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		ļ				-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

EGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND 940144								Name
				ATE FEES FOR EAC				
		SUBSCRIBER GROU		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.22 0.011	302	07.122 0.011	202	07.122.01.01.1	202	0/122 0.0.1	302	Base Rate Fee
								and
								Syndicated
					<u></u>			Exclusivity
					<u></u>			Surcharge for
		-			<u></u>			Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
TWENT	Y-SEVENTH	SUBSCRIBER GROU	JP	TWEN	TY-EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
					<u></u>			
					<u></u>			
		-						
					<u></u>			
		-			<u></u>			
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND 040144								
				ATE FEES FOR EACH					
		SUBSCRIBER GROU		11		I SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
								Syndicated Exclusivity	
								Surcharge	
								for	
	<u></u>							Partially	
	<u></u>	-						Distant Stations	
								Stations	
					···				
Total DSEs			0.00	Total DSEs		H	0.00		
	Group	•	0.00	Gross Receipts Secon	nd Group	\$	0.00		
Gross receipts i list	Gross Receipts First Group \$ 0.00			Cross receipts eccor	па Стоар	<u>*</u>			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00		
		SUBSCRIBER GROU		III		SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
					···				
	<u></u>								
					•••				
	<u></u>								
	·····				···				
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00		
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourti	h Group	\$	0.00		
						-			
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$			

EGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								Name
				TE FEES FOR EACH				
THIF COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	THIRT COMMUNITY/ AREA	Y-FOURTH	I SUBSCRIBER GROU	JP 0	9
COMMUNITY AREA				COMMUNITY AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	····				. 			and Syndicated
								Exclusivity
					<u> </u>			Surcharge
					<mark></mark>			for Partially
	<u> </u>			· · · · · · · · · · · · · · · · · · ·	<u>-</u>			Distant
								Stations
					<u></u>			
	<u></u>				. 			
					<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
		SUBSCRIBER GROU		ii .	RTY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-			<u> </u>			
				-				
					<u></u>			
					. 			
					<u></u>			
				-	. 			
					<u> </u>			
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	n Group	\$	0.00	
	•				-			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourti	n Group	\$	0.00	
Base Rate Fee: Add Enter here and in block			riber group	as shown in the boxes	above.	\$		

EGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
В	LOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
	SEVENTH	SUBSCRIBER GRO		tt -		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O'TEE O'O'T	DOL	O/ILL GIGIT	DOL	OF ILLE GIGIT	BOL	OALL GIGIT	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
							·····	for
					·····	-		Partially Distant
	···				·····	-		Stations
			•••••••••••••••••••••••••••••••••••••••			+		Otations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G				Gross Receipts Sec				
0.000	Gross Receipts First Group \$ 0.00				oa	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THIR	TY-NINTH	SUBSCRIBER GRO	UP		FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
					·····		·····	
						-		
			<u></u>					
			<u></u>				<u></u>	
			<u></u>				····	
							····	
			•••			1		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Dece Data For Third	2		0.00	Bara Bata Fan Fann	-th- O		0.00	
Base Rate Fee Third	Jioup	\$	0.00	Base Rate Fee Fou	гит Стоир	\$	0.00	
Base Rate Fee: Add to Enter here and in bloc			criber group	as shown in the boxe	s above.	\$		

RCN OF NEW ENGLAND SYSTEM: SYSTEM ID# 040144								Name
				ATE FEES FOR EAC				
FO COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	11		SUBSCRIBER GRO	UP 0	9
COMMUNITY AREA	Α			COMMUNITY/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u> </u>	-				Base Rate Fee
			<u> </u>					and Syndicated
								Exclusivity
			<u></u>					Surcharge
		-	<u> </u>					for Partially
			<u> </u>					Distant
								Stations
			<u></u>					
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GRO		iii —		SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u> </u>					
			<u></u>					
			. 					
			<u>-</u>					
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
				ATE FEES FOR EACH				
		SUBSCRIBER GROU		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
	<u></u>							Syndicated Exclusivity
								Surcharge
								for
								Partially
	<u></u>	-						Distant
								Stations
	<u></u>				<u></u>			
								
Total DSEs			0.00	Total DSEs		11	0.00	
	Group	<u> </u>	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Gross Receipts First Group \$ 0.00				Cross resolpts coss	на отоар	<u>*</u>		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
		SUBSCRIBER GROU		II		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
	<u></u>							
								
	<u></u>							
	····							
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
			0.00					
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	n Group	\$	0.00	
	·		·		·			
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

EGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
				ATE FEES FOR EACH				
		SUBSCRIBER GROU				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					<u></u>			and
								Syndicated Exclusivity
					···			Surcharge
		-						for
		-						Partially
								Distant Stations
								Stations
	····							
Total DSEs		!	0.00	Total DSEs	· ·		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
	Gross Receipts First Group \$ 0.00							
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROU		II		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
		-						
					<u></u>			
								
		-						
					<u></u>			
								
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
				···				
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

EGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND 040144								
		COMPUTATION O SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u></u>			-		Base Rate Fee and
						-		Syndicated
						<u> </u>		Exclusivity Surcharge
								for
	<u>.</u>		<u></u>			-	<u></u>	Partially
	····					-		Distant Stations
	····					-		
			<u>.</u>					
Total DSEs			0.00	Total DSEs		Ц	0.00	
	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Gross Receipts First Group \$ 0.00					oa	<u>-</u>		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FI COMMUNITY/ AREA		SUBSCRIBER GRO)UP 0	COMMUNITY/ ARE		SUBSCRIBER GRO	UP 0	
COMMUNITY AREA				COMMUNITY/ ARE	Α			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u>.</u>		<u></u>				<u></u>	
			<u></u>			<u> </u>		
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
C. SOO MOOCIPIO TIMU	Jioup	· ·	<u> </u>	Signal Recorpts Fou	Отоир	*		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				11				
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
				ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
		SUBSCRIBER GROU		TT .		SUBSCRIBER GROU		9
COMMUNITY/ AREA	······································		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.22 0.011	302	07.122 0.011	202	07.22 0.0.1	302	07.22 0.0.1	302	Base Rate Fee
								and
								Syndicated
					<u> </u>			Exclusivity
		-			<u></u>			Surcharge for
		-						Partially
								Distant
								Stations
						•		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROU		<u> </u>		1 SUBSCRIBER GRO		
COMMUNITY/ AREA	······		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
	·····			-				
		-			<u></u>			
		-						
					<u></u>			
					<u></u>			
Total DSEs			0.00	Total DSEs		-11	0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
	r				- 1-			
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
				ATE FEES FOR EACH				
		SUBSCRIBER GROU		II		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
					···			Syndicated Exclusivity
								Surcharge
								for
								Partially Distant
		-						Stations
					<u></u>			
	····							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
SI	XTY-THIRD	SUBSCRIBER GROU	JP	SIXT	Y-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
					<u></u>			
								
								
					····			
Total DSEs			0.00	Total DSEs		П	0.00	
Gross Receipts Third	I Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
	-				•			
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
				TE FEES FOR EAC				
	TY-FIFTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				0.1.20				Base Rate Fee
								and
								Syndicated
								Exclusivity
	<u> </u>							Surcharge
						-		for
			<u></u>					Partially
						-		Distant Stations
	···	-	<u></u>		·····	-		Stations
	<u></u>		<u></u>		•••••			
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receints First G	iroun	¢	0.00	Gross Receipts Sec				
Gross Receipts First Group \$ 0.00				Cross receipts eee	ona Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SIXTY-	SEVENTH	SUBSCRIBER GRO	UP	SI	XTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u> </u>							
							···-	
						-		
	<u>. </u>		<u></u>		•••••	-		
	<mark></mark>							
					<u></u>			
	<mark> </mark>				<u>.</u>	-	<u> </u>	
	<mark></mark>		<u></u>		·····		<u> </u>	
					••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
			<u> </u>					
Base Rate Fee: Add the Enter here and in block			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
В	LOCK A: (COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	TY-NINTH	SUBSCRIBER GRO		tt -		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
OALL GIOIN	DOL	OALL SIGN	DOL	GALL SIGIV	DOL	CALL SIGIV	DOL	Base Rate Fee
						-		and
								Syndicated
								Exclusivity
								Surcharge
			<u></u>			-		for
			<u></u>					Partially Distant
			<u></u>			-	····	Stations
			····			-		Otations
			····			-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	0.00			
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVEN	ITY-FIRST	SUBSCRIBER GRO	DUP	SEVEN	TY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
			<u></u>				·····	
			<u></u>		·····	-		
			···					
			<u></u>		·····	-		
			<u></u>				<u></u>	
	···		<u></u>				<u></u>	
							···-	
						1		
Total DSEs	ı		0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
				ATE FEES FOR EAC			ID.	
COMMUNITY/ AREA		SUBSCRIBER GROU	0 P	COMMUNITY/ AREA		1 SUBSCRIBER GRO	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGIN	DOL	CALL SIGIN	DOL	Base Rate Fee
								and
								Syndicated
					<u></u>			Exclusivity Surcharge
								for
								Partially
								Distant
		-						Stations
					<u></u>			
					<u></u>			
						1	0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROU		iii .		SUBSCRIBER GROU	UP	
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
	·····							
		-			<u></u>			
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	:h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND O40144								
				TE FEES FOR EAC				
	SEVENTH	SUBSCRIBER GRO		li		SUBSCRIBER GROU	JP 0	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			U	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		<u> </u>						Base Rate Fee
		 						and
	·		<u>.</u>					Syndicated Exclusivity
								Surcharge
								for
			<u>.</u>					Partially
			.					Distant Stations
			·		····	-		Otations
			<u>-</u>			 		
Total DSEs	-		0.00	Total DSEs		!!	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	TY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-	<u> </u>		<u>.</u>			
			<u>-</u>					
					<u>.</u>			
			-					
			<u></u>					
					·····			
			·			 		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND O40144								
		COMPUTATION OF SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
		-			<u></u>			Surcharge for
								Partially
					<u></u>			Distant
								Stations
					····	<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
EIGH	TY-THIRD	SUBSCRIBER GRO	UP	EIGH	TY-FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			-		<u></u>			
					····	-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND O40144								
				ATE FEES FOR EAC				
		SUBSCRIBER GROU		11		SUBSCRIBER GRO		9
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
					····			Surcharge
								for
								Partially
		-						Distant
					····			Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	and Group	\$	0.00	
Sided reddipto i not	Согоцр			Cross reserve cost	па стоар			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROU		iii —		SUBSCRIBER GRO		
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
	·····							
					····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Raca Data Foo This	d Group	¢	0.00	Raco Pata Fao Facilia	th Group	¢	0.00	
Base Rate Fee Third	и Отоир	\$	0.00	Base Rate Fee Four	п отоир	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		
l								

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND O40144								
				ATE FEES FOR EACH				
		SUBSCRIBER GROU				I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
	····				···			Syndicated Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
	<u>.</u>				<u></u>			
	····				···			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
NIN	ETY-FIRST	SUBSCRIBER GROU	JP	NINET	Y-SECONE	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
								
	<u></u>							
	····				····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			riber group	as shown in the boxes	above.	\$		

RCN OF NEW ENGLAND SYSTEM ID# 040144								
				ATE FEES FOR EACH				
	TY-THIRD	SUBSCRIBER GROU		11	Y-FOURTH	I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
	···							Syndicated Exclusivity
								Surcharge
								for
								Partially
	<u></u>							Distant Stations
	···							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
NINE	TY-FIFTH	SUBSCRIBER GROU	JP	NIN	ETY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
	···							
	···				<u> </u>			
Total DSEs			0.00	Total DSEs		II	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add to Enter here and in bloc			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND O40144								
				ATE FEES FOR EACH	H SUBSCF	RIBER GROUP		
	SEVENTH	SUBSCRIBER GROU		TI .		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O, ILL GIGIT	DOL	O/ LEE GIGIT	BOL	Office of offi	502	OALL SIGIY	DOL	Base Rate Fee
		-						and
								Syndicated
				-		-		Exclusivity
					····		<u></u>	Surcharge for
		-			······································		····	Partially
								Distant
								Stations
	<u></u>	-						
					···			
					•••		•••••	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Secon		\$	0.00	
	TY-NINTH	SUBSCRIBER GROU		III		I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					···	-		
	···				···		<u></u>	
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	···				····		<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourtl	h Group	\$	0.00	
	11				- -	-		
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourti	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
				TE FEES FOR EAC				
		SUBSCRIBER GROU		ii		SUBSCRIBER GROU		9
COMMUNITY/ AREA	·············		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-			<u></u>			Syndicated Exclusivity
				-				Surcharge
								for
					<u></u>			Partially
		-			<u></u>			Distant
							<u></u>	Stations
					<u></u>			
				-	<u></u>			
Total DSEs			0.00	Total DSEs		Ш	0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	nd Group	\$	0.00	
·	·							
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROU		ii —		I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-			<u></u>			
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	····							
					<u></u>			
					<u></u>			
	····							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EACH		IBER GROUP SUBSCRIBER GROUI	0	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							<u> </u>	Base Rate Fee and
								Syndicated
							<u></u>	Exclusivity Surcharge
								for
							<u> </u>	Partially Distant
								Stations
							<u> </u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secon	a Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED S COMMUNITY/ AREA	EVENTH	SUBSCRIBER GROL	IP 0	ONE HUNDRE	D EIGHTH	SUBSCRIBER GROUI	0	
				COMMONT IT AIREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							<u> </u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
		_						
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144									
				ATE FEES FOR EAC					
		SUBSCRIBER GRO		11		SUBSCRIBER GRO		9	
COMMUNITY/ AREA	٠		0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
			·					Syndicated Exclusivity	
								Surcharge	
								for	
	·····							Partially Distant	
								Stations	
								ı	
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					····			ı	
								ı	
								ı	
Total DSEs			0.00	Total DSEs			0.00	ı	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	ı	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	1	
ONE HUNDRED	ELEVENTH	SUBSCRIBER GRO	UP	ONE HUNDREI	TWELVTH	SUBSCRIBER GRO	UP	ı	
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA	COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	ı	
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			-		····			ı	
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								ı	
								ı	
Total DSEs			0.00	Total DSEs		I	0.00	ı	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	ı	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	l	
Base Rate Fee: Add Enter here and in bld			criber group	as shown in the boxes	above.	\$		l	

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
				TE FEES FOR EAC				
ONE HUNDRED THI	RTEENTH	SUBSCRIBER GROU		li		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	<i></i>		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
07.122.01011	202	07.12 0.0.1	202	0/122 0:0:1	302	07.122.01.01.1	302	Base Rate Fee
								and
					<u></u>			Syndicated
								Exclusivity
								Surcharge for
		-	······································		····			Partially
								Distant
					<u></u>			Stations
		-			<u>.</u>			
	···							
						-		
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.0				Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FI	FTEENTH	SUBSCRIBER GROU	UP	ONE HUNDRED	SIXTEENTH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>					
			<u>.</u>				<u> </u>	
		-	······································		····			
		<u> </u>						
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	<u></u>		<u> </u>		<u></u>		<u></u>	
	···		<u>-</u>		••••			
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER GROUP	ID	
COMMUNITY/ AREA		SUBSCRIBER GROU	0	COMMUNITY/ AREA		1 SUBSCRIBER GROU	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
OALL GIGIT	DOL	OALL CICIT	DOL	O/ALL CIGIT	BOL	O'ALL GIGIT	DOL	Base Rate Fee
								and
								Syndicated
					<u></u>			Exclusivity Surcharge
					···			for
								Partially
		-						Distant
		-						Stations
					 			
T-+-I DOE-			0.00	T-4-1 DOE-		Ц	0.00	
Total DSEs	Croup	•	0.00	Total DSEs	nd Croun	•	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	па Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROU		II		SUBSCRIBER GROU	JP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-	····			
		-						
								
					···			
		-						
		-						
					···			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
	BLOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO		TI .		SUBSCRIBER GROUP		9
COMMUNITY/ AREA	٩		0	COMMUNITY/ AREA	······		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O, ILL GIGIT	BOL	CALL GIGIT	502	GALLE GIGIT	502	O' LEE O'O'T	502	Base Rate Fee
								and
								Syndicated
				-				Exclusivity
					·····			Surcharge for
					••••			Partially
								Distant
								Stations
					<u>.</u>			l
								l
	•••••					•		l
								l
								l
Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	ond Group	\$	0.00	İ
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
ONE HUNDRED TW	/ENTY-THIRD	SUBSCRIBER GROUF)	ONE HUNDRED TWEE	NTY-FOURTH	1 SUBSCRIBER GROUF)	İ
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	İ
					·····			l
								l
								l
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	·····				·····			l
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								l
					····			l
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								İ
Total DSEs			0.00	Total DSEs			0.00	1
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	1
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	1
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
				ATE FEES FOR EACH				
		SUBSCRIBER GROUP		H	ENTY-SIXTH	I SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
		-						for
	<mark></mark>		 					Partially
	····							Distant Stations
								Stations
		-						
	<u></u>							
Total DSEs	1		0.00	Total DSEs		<u> </u>	0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Secon	nd Group	\$	0.00	
Gloss Necelpts First Gloup				l cross rescapes escal	ia Group			
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
NE HUNDRED TWENT		SUBSCRIBER GROUP		ii .	ITY-EIGHTH	SUBSCRIBER GROUP	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>				<u> </u>			
				-				
	<mark></mark>	-	 					
	····							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourti	n Group	\$	0.00	
	•	•			•	-		
Base Rate Fee: Add Enter here and in bloo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
В	BLOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCF	RIBER GROUP		
	NTY-NINTH	SUBSCRIBER GROUP			THIRTIETH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
								Syndicated
				-				Exclusivity Surcharge
	<u></u>						•••••	for
								Partially
								Distant
								Stations
	<u></u>							
								
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED TH	IRTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED THIR	TY-SECONE	SUBSCRIBER GROUP	1	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>	-						
					<u> </u>			
	<u></u>	-						
	<u></u>	-						
								
	<u></u>							
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
					-			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
		COMPUTATION OF SUBSCRIBER GROUP		ATE FEES FOR EACH		RIBER GROUP H SUBSCRIBER GROUP		
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-				Base Rate Fee and
								Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
ONE HUNDRED T	HIRTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED TH	HIRTY-SIXTH	H SUBSCRIBER GROUP		
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

RCN OF NEW EN		LE SYSTEM:				S	YSTEM ID# 040144	Name
B	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED THIRT	Y-SEVENTH	SUBSCRIBER GROU	0	ONE HUNDRED TH	IIRTY-EIGHTH	SUBSCRIBER GROUP)	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u> </u>		·····		<u></u>	Base Rate Fe
			<u> </u>					Syndicated
••••••	<u></u>				••••			Exclusivity
								Surcharge
		-						for
	<u></u>		<u></u>					Partially Distant
			<u></u>					Stations
	···	-						
	<u></u>							
	<u></u>		. 		·····			
Total DSEs		I I	0.00	Total DSEs		!!	0.00	
iross Receipts First Group \$ 0.0			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED THI	RTY-NINTH	SUBSCRIBER GROUI	>	111		SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>		·····			
					•••••		••••	
			<u> </u>					
	<u></u>		<u></u>		<u>.</u>			
			<u> </u>					
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			<u></u>					
	<u></u>		<u></u>		<u>.</u>			
			<u> </u>					
	···		 	· · · · · · · · · · · · · · · · · · ·	•••••			
Total DSEs	,		0.00	Total DSEs	•		0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
•	-				•			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
				TE FEES FOR EACH				
		SUBSCRIBER GROUP		it .		SUBSCRIBER GROUP		9
COMMUNITY/ AREA	٩		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
		-						Partially
								Distant
								Stations
				·				
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED F	ORTY-THIRD	SUBSCRIBER GROUP	1	ONE HUNDRED FOR	RTY-FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
							·····	
					<u></u>			
								
	·····							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144								
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC				
	RTY-FIFTH	SUBSCRIBER GROUP				SUBSCRIBER GROUP)	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
						-		and
								Syndicated
								Exclusivity
								Surcharge
		-						for
		-			<u>.</u>			Partially
					····	-		Distant Stations
					····	-		Stations
					····			
		-				-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FORTY-	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FO	RTY-EIGHTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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		-			····	-		
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	 	-						
						-		
						-		
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN OF NEW ENGLAND SYSTEM ID# 040144									
	BLOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP			
		SUBSCRIBER GRO		ii		SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
								Syndicated	
					<u></u>			Exclusivity Surcharge	
								for	
								Partially	
								Distant	
								Stations	
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					<u></u>				
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
ONE HUNDRED F	IFTY-FIRST	SUBSCRIBER GRO	JP	ONE HUNDRED FIFT	Y-SECONE	SUBSCRIBER GRO	UP		
COMMUNITY/ AREA	·		0	COMMUNITY/ AREA	CALL SIGN DSE CALL SIGN DSE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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					<u></u>				
Total DSEs			0.00	Total DSEs		-	0.00		
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	:h Group	\$	0.00		
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	:h Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$			

RCN OF NEW ENG		LE SYSTEM:				S	YSTEM ID# 040144	Name
				TE FEES FOR EAC				
ONE HUNDRED FIF	TY-THIRD	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
	<u></u>		<u>.</u>				<u></u>	Syndicated Exclusivity
	·					-		Surcharge
								for
	<mark></mark>		<u>.</u>					Partially
						-		Distant Stations
	···				••••	-	····	Otations
	<u></u>							
			<u>.</u>					
	<u> </u>		<u>.</u>					
Total DSEs			0.00	Total DSEs		<u> </u>	0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO		Ħ		SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u> </u>	-	<u> </u>			-		
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	<u></u>							
	<u></u>		<u> </u>			-		
						-		
	<u> </u>		<u>-</u>			1		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				Ш				
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$		

RCN OF NEW ENG		LE SYSTEM:				S	YSTEM ID# 040144	Name
В	LOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED FIFTY	-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED F	IFTY-EIGHTH	SUBSCRIBER GROUP)	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	١		0	_
CALL SIGN	DSE	CALL SICN	DSE	CALL SICN	DSE	II CALL SIGN	DOE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
	<u>-</u>					-		and
		-						Syndicated
								Exclusivity
								Surcharge
								for
	<u> </u>							Partially
								Distant
	<u></u>							Stations
	<u>-</u>				····			
	·				••••			
Total DSEs	-		0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FI	FTY-NINTH	SUBSCRIBER GROUP		ONE HUNDR	RED SIXTIETH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	·		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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				· · · · · · · · · · · · · · · · · · ·		 		
Total DSEs	· ·		0.00	Total DSEs		-	0.00	
Gross Receipts Third 0	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	s above.	\$		

D							040144	
D				TE FEES FOR EAC			up.	
		SUBSCRIBER GRO	UP			SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA	BOS			COMMUNITY/ ARE	A BOS			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
OALL GIGIT	DOL	OALL SIGIN	DOL	OALL SIGIV	DOL	OALL SIGIV	DOL	Base Rate F
		H			•••••	+		and
••••••	·		<u></u>					Syndicated
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	*	H						Surcharge
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Name 9 Computation	YSTEM ID# 040144					LE SYSTEM:		RCN OF NEW ENG
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9 Computation	YSTEM ID# 040144					E SYSTEM:		RCN OF NEW ENG
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	JP 0	SUBSCRIBER GROU	/-FOURTH	SIXT'	JP 0	SUBSCRIBER GROU	TY-THIRD	SIX COMMUNITY/ AREA
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	JP 0	SUBSCRIBER GROU	/-FOURTH	SIXT'	JP 0	SUBSCRIBER GROU	TY-THIRD	SIX COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-FOURTH	SIXT'	JP 0	SUBSCRIBER GROU	TY-THIRD	SIX COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-FOURTH	SIXT'	JP 0	SUBSCRIBER GROU	TY-THIRD	COMMUNITY/ AREA
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4 Name	040144						GLAND	RCN OF NEW ENG
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	UP 0	SUBSCRIBER GROL	Y-EIGHTH	SIXT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	SIXTY-S
	UP 0	SUBSCRIBER GROL	Y-EIGHTH	SIXT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	SIXTY-S
	UP 0	SUBSCRIBER GROL	Y-EIGHTH	SIXT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	SIXTY-S
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NI	YSTEM ID# 040144	S`						RCN OF NEW EN
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	VENTIETH			SUBSCRIBER GROU	TY-NINTH	
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LEGAL NAME OF OWNER RCN OF NEW ENG		LE SYSTEM:				S	940144 040144	Name
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		e fees for each subsepace L (page 7)	criber group	as shown in the boxes	above.	\$		

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	JP 0	SUBSCRIBER GROU	IGHTIETH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-NINTH	SEVENT COMMUNITY/ AREA
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9 Computation	YSTEM ID# 040144							RCN OF NEW EN
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RCN OF NEW ENG		LE SYSTEM:				S	940144 040144	Name
BL	OCK A: (COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCE	RIBER GROUP		
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LEGAL NAME OF OWNER RCN OF NEW ENG		E SYSTEM:				S	YSTEM ID# 040144	Name
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Name	YSTEM ID# 040144	S				LE SYSTEM:		RCN OF NEW ENG	
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^		SUBSCRIBER GROUP	RTY-SIXTH	ONE HUNDRED FO		SUBSCRIBER GROUP	RTY-FIFTH	ONE HUNDRED FO	
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9 Computation		SUBSCRIBER GROU	FIFTIETH			SUBSCRIBER GRO	ΓY-NINTH	ONE HUNDRED FORT		
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	IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
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DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DSL	CALL SIGN
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Name	7STEM ID# 040144					LE SYSTEM:		RCN OF NEW ENG	
				TE FEES FOR EACH					
9 Computation		SUBSCRIBER GROUP	TY-EIGHTH			SUBSCRIBER GROUP	-SEVENTH	ONE HUNDRED FIFTY-	
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of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr	
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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name RCN OF NEW ENGLAND 040144 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name RCN OF NEW ENGLAND 040144 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name RCN OF NEW ENGLAND 040144 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. NINTH SUBSCRIBER GROUP TENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group **ELEVENTH SUBSCRIBER GROUP** TWELVTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name RCN OF NEW ENGLAND 040144 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. THIRTEENTH SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group FIFTEENTH SUBSCRIBER GROUP SIXTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name RCN OF NEW ENGLAND 040144 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. SEVENTEENTH SUBSCRIBER GROUP EIGHTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group NINEENTH SUBSCRIBER GROUP TWENTYTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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