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               |  |  |  |  |  |
| 08/28/2018                    | \$ 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     | 2018/1   |                          |                                |                 |  |  |  |  |  |
| Period         |  |                          |                                |                 |  |  |  |  |  |
| B<br>Owner     | Instructions:     Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo rate title of the subsidiary, not that of the parent corporation     List any other name or names under which the owner conducts the business of the cable system     If there were different owners during the accounting period, only the owner on the last day of the accounting period should submi a single statement of account and royalty fee payment covering the entire accounting perion  Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. |                          |                                |                 |  |  |  |  |  |
|                | LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM  |                          |                                |                 |  |  |  |  |  |
|                | Advanced Cable Communications, LLC   |                          |                                |                 |  |  |  |  |  |
|                |  |                          |                                |                 |  |  |  |  |  |
|                |  |                          | (                              | 0072192018/1    |  |  |  |  |  |
|                |  |                          |                                | 007219 2018/1   |  |  |  |  |  |
|                |  |                          |                                |                 |  |  |  |  |  |
|                | 12409 NW 35th Street   |                          |                                |                 |  |  |  |  |  |
|                | Coral Springs, FL 33065-2413   |                          |                                |                 |  |  |  |  |  |
| 0              | INSTRUCTIONS: In line 1, give any business or trade names used to id   | dentify the busines      | ss and operation of the system | em unless these |  |  |  |  |  |
| С              | names already appear in space B. In line 2, give the mailing address of  |                          |                                |                 |  |  |  |  |  |
| System         | 1 IDENTIFICATION OF CABLE SYSTEM:  |                          |                                |                 |  |  |  |  |  |
|                | 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 fret comp       | ounity convod bolow and rol    | ist on page 1h  |  |  |  |  |  |
| _              |  | offig the fist confi     | numity served below and ren    | ist on page 1b  |  |  |  |  |  |
| Area<br>Served | with all communities.  CITY OR TOWN  | STATE                    |                                |                 |  |  |  |  |  |
| First          | Coral Springs  | FL                       |                                |                 |  |  |  |  |  |
| Community      | Below is a sample for reporting communities if you report multiple cha   | l<br>Innel line-ups in S | pace G.                        |                 |  |  |  |  |  |
|                | CITY OR TOWN (SAMPLE)  | STATE                    | CH LINE UP                     | SUB GRP#        |  |  |  |  |  |
| Sample         | Alda   | MD                       | Α                              | 1               |  |  |  |  |  |
| Sample         | Alliance   | MD                       | В                              | 2               |  |  |  |  |  |
|                | Gering   | MD                       | В                              | 3               |  |  |  |  |  |

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on 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.

| -ORM SA3E. PAGE 10.  |                     |            |            |                         |  |  |  |  |  |
|--|---------------------|------------|------------|-------------------------|--|--|--|--|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:   |                     |            | SYSTEM ID# |                         |  |  |  |  |  |
| Advanced Cable Communications, LLC   |                     |            | 007219     |                         |  |  |  |  |  |
| Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. |                     |            |            |                         |  |  |  |  |  |
| Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses   |                     |            |            |                         |  |  |  |  |  |
| below the identified city or town.  If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).                      |                     |            |            |                         |  |  |  |  |  |
| When reporting the carriage of television broadcast stations on a community-by-common channel line-up designated by an alpha-letter(s) (based on your Space G reporting) are (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns  | nd a subscriber gro |            |            |                         |  |  |  |  |  |
| CITY OR TOWN   | STATE               | CH LINE UP | SUB GRP#   |                         |  |  |  |  |  |
| Coral Springs  | FL                  | Α          | 1          | First                   |  |  |  |  |  |
| Orai Opiniga   | I L                 |            | •          |                         |  |  |  |  |  |
|  |                     |            |            | Community               |  |  |  |  |  |
|  |                     |            |            |                         |  |  |  |  |  |
|  |                     |            |            |                         |  |  |  |  |  |
|  |                     |            |            |                         |  |  |  |  |  |
|  |                     |            |            | See instructions for    |  |  |  |  |  |
|  |                     |            |            | additional information  |  |  |  |  |  |
|  |                     | -          |            | on alphabetization.     |  |  |  |  |  |
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|  |                     |            |            | Add rows as necessary.  |  |  |  |  |  |
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| <br> | <br> |
|------|------|
|      |      |
|      |      |

Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:

Advanced Cable Communications, LLC

SYSTEM ID#

007219

## 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.

| BL   | OCK 1                 | BLOCK 2 |            |                                      |  |
|--|-----------------------|---------|------------|--------------------------------------|--|
| CATEGORY OF SERVICE                              | NO. OF<br>SUBSCRIBERS |         | RATE       | CATEGORY OF SERVICE SUBSCRIBERS RATE |  |
| Residential:                                     |                       |         |            |                                      |  |
| Service to first set                             | 16,365                | \$      | 28.00      |                                      |  |
| <ul> <li>Service to additional set(s)</li> </ul> |                       | ļ       |            |                                      |  |
| • FM radio (if separate rate)                    |                       | ļ       |            |                                      |  |
| Motel, hotel                                     | 1                     | \$      | 12.17      |                                      |  |
| Commercial                                       |                       |         |            |                                      |  |
| Converter  |                       | ļ       |            |                                      |  |
| Residential                                      | 3,136                 | 1.      | .99 - 3.32 |                                      |  |
| Non-residential                                  |                       |         |            |                                      |  |
|  |                       | 1       |            |                                      |  |

## 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           | CATEGORY OF SERVICE RATE |  |
| Continuing Services:                        |              | Installation: Non-residential |                          |  |
| • Pay cable                                 | \$ 19.95     | Motel, hotel                  |                          |  |
| <ul> <li>Pay cable—add'l channel</li> </ul> | \$ 13.00     | Commercial                    |                          |  |
| Fire protection                             |              | • Pay cable                   | \$<br>3.00               |  |
| <ul> <li>Burglar protection</li> </ul>      |              | Pay cable-add'l channel       |                          |  |
| Installation: Residential                   |              | Fire protection               |                          |  |
| First set                                   | 8.64 - 68.04 | Burglar protection            |                          |  |
| <ul> <li>Additional set(s)</li> </ul>       |              | Other services:               |                          |  |
| • FM radio (if separate rate)               |              | Reconnect                     | \$<br>15.28              |  |
| Converter                                   | 1.99-3.32    | Disconnect                    |                          |  |
|   |              | Outlet relocation             | \$<br>19.10              |  |
|   |              | Move to new address           | \$<br>20.00              |  |
|   |              |                               |                          |  |

| LEGAL NAME OF  | FOWNER OF CABLE S  | YSTEM:   |  |  | SYSTEM ID#  | Namo                                       |  |  |
|--|--|--|--|--|---|--|--|--|
| Advanced   | Cable Commun   | ications, L  | LC   |  | 007219  | Name                                       |  |  |
| PRIMARY TRANS  | MITTERS: TELEVISION  | ON   |  |  |   |  |  |  |
| carried by your ca   | able system during t   | he accounting  | period, except   | (1) stations carri   | s and low power television stations) ed only on a part-time basis under   | G  |  |  |
| 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  |  |  |  |  |   |  |  |  |
|  |  |  |  | s carried by your  | cable system on a substitute program  | Television                                 |  |  |
|  | ifc FCC rules, regula<br>tation here in space  |  |  | ne Special Statem  | ent and Program Log)—if the   |  |  |  |
|  | arried only on a subs  |  |  |  |   |  |  |  |
|  | · ·  |  |  |  | itute basis and also on some other  |  |  |  |
| in the paper S   |  | erning substi  | tute basis statio  | ns, see page (v) (   | of the general instructions located   |  |  |  |
|  |  | sign. Do not r   | report origination   | n program service  | es such as HBO, ESPN, etc. Identify   |  |  |  |
|  |  |  | •  | •  | ation. For example, report multi-   |  |  |  |
| ast stream as "v<br>VETA-simulcast)  |  | streams must   | be reported in   | column 1 (list eac   | ch stream separately; for example   |  |  |  |
|  |  | ber the FCC h  | nas assigned to  | the television stat  | tion for broadcasting over-the-air in   |  |  |  |
| •  | •  |  | annel 4 in Wash  | nington, D.C. This   | may be different from the channel   |  |  |  |
|  | ble system carried the   |  | tation is a netwo  | ork station, an ind  | ependent station, or a noncommercial  |  |  |  |
|  |  |  |  |  | cast), "I" (for independent), "I-M"   |  |  |  |
| •  | ,. ,   |  | , .  | ,  | ommercial educational multicast).   |  |  |  |
|  | of these terms, see  |  |  |  | he paper SA3 form.<br>es". If not, enter "No". For an ex-   |  |  |  |
|  | service area, see pa   |  |  |  |   |  |  |  |
| Column 5: If y   | you have entered "Y  | es" in column  | 4, you must co   | mplete column 5,   | stating the basis on which your   |  |  |  |
| •  |  | •  | ٠.   | •  | ntering "LAC" if your cable system  |  |  |  |
|  | it station on a part-tii<br>smission of a distant  |  |  |  | capacity. y payment because it is the subject   |  |  |  |
|  |  |  |  |  |   |  |  |  |
|  | anieni entereu into o  | ii oi peiole ac  | ine 30, 2009, be   | etween a cable sy  | stem or an association representing   |  |  |  |
| the cable system   | and a primary trans  | mitter or an a   | ssociation repre   | senting the prima  | ary transmitter, enter the designa-   |  |  |  |
| the cable system tion "E" (exempt).  | and a primary trans<br>. For simulcasts, als   | mitter or an a<br>o enter "E". If  | ssociation repre   | esenting the prima<br>channel on any o   | ary transmitter, enter the designa-<br>other basis, enter "O." For a further  |  |  |  |
| the cable system<br>tion "E" (exempt).<br>explanation of the   | and a primary trans<br>. For simulcasts, also<br>ese three categories  | mitter or an a<br>o enter "E". If<br>, see page (v)  | ssociation repre<br>you carried the<br>) of the general  | esenting the prima<br>channel on any o<br>instructions locate  | ary transmitter, enter the designa-   |  |  |  |
| the cable system<br>tion "E" (exempt).<br>explanation of the<br><b>Column 6:</b> Giv<br>FCC. For Mexica  | and a primary trans . For simulcasts, also ese three categories ve the location of ea n or Canadian static   | mitter or an a<br>o enter "E". If<br>, see page (v<br>ch station. Fo<br>ons, if any, giv   | ssociation repre<br>you carried the<br>) of the general<br>or U.S. stations,<br>e the name of the  | esenting the prima<br>channel on any o<br>instructions locate<br>list the communit<br>the community wit  | ary transmitter, enter the designa-<br>other basis, enter "O." For a further<br>ed in the paper SA3 form.<br>y to which the station is licensed by the<br>h which the station is identifed.   |  |  |  |
| he cable system ion "E" (exempt). explanation of the Column 6: Giver Column 6: | and a primary trans . For simulcasts, also ese three categories we the location of ea  | mitter or an a<br>o enter "E". If<br>, see page (v<br>ch station. Fo<br>ons, if any, giv   | ssociation repre<br>you carried the<br>) of the general<br>or U.S. stations,<br>e the name of the  | esenting the prima<br>channel on any o<br>instructions locate<br>list the communit<br>the community wit  | ary transmitter, enter the designa-<br>other basis, enter "O." For a further<br>ed in the paper SA3 form.<br>y to which the station is licensed by the<br>h which the station is identifed.   |  |  |  |
| he cable system ion "E" (exempt). explanation of the Column 6: Giver Column 6: | and a primary trans . For simulcasts, also ese three categories ve the location of ea n or Canadian static   | mitter or an a<br>o enter "E". If<br>, see page (v)<br>ch station. Fo<br>ons, if any, giv<br>nnel line-ups,  | ssociation repre<br>you carried the<br>) of the general<br>or U.S. stations,<br>e the name of the  | esenting the prima<br>channel on any of<br>instructions locate<br>list the communit<br>ne community with<br>space G for each                                   | ary transmitter, enter the designa-<br>other basis, enter "O." For a further<br>ed in the paper SA3 form.<br>y to which the station is licensed by the<br>h which the station is identifed.   |  |  |  |
| he cable system<br>ion "E" (exempt).<br>explanation of the<br>Column 6: Gir<br>FCC. For Mexica<br>Note: If you are u   | and a primary trans . For simulcasts, also ese three categories ve the location of ea n or Canadian static   | mitter or an a<br>o enter "E". If<br>, see page (v)<br>ch station. Fo<br>ons, if any, giv<br>nnel line-ups,  | ssociation repre<br>you carried the<br>) of the general<br>or U.S. stations,<br>the the name of the<br>use a separate  | esenting the prima<br>channel on any of<br>instructions locate<br>list the communit<br>ne community with<br>space G for each                                   | ary transmitter, enter the designa-<br>other basis, enter "O." For a further<br>ed in the paper SA3 form.<br>y to which the station is licensed by the<br>h which the station is identifed.   |  |  |  |
| he cable system<br>ion "E" (exempt).<br>explanation of the<br><b>Column 6:</b> Gir<br>FCC. For Mexica<br><b>Note:</b> If you are u   | and a primary trans . For simulcasts, alsese three categories ve the location of ea n or Canadian static utilizing multiple chai   | mitter or an a o enter "E". If , see page (v ch station. Fons, if any, givennel line-ups,  | ssociation repre<br>you carried the<br>) of the general<br>or U.S. stations,<br>e the name of the<br>use a separate  | esenting the prima<br>channel on any of<br>instructions locate<br>list the communit<br>he community with<br>space G for each                                   | ary transmitter, enter the designa-<br>other basis, enter "O." For a further<br>ed in the paper SA3 form.<br>by to which the station is licensed by the<br>h which the station is identifed.<br>In channel line-up.   |  |  |  |
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| FORM SA3E. PAGE 3.   |  |   |  |  |  |                                    |
|--|--|---|--|--|--|------------------------------------|
| LEGAL NAME OF OWN  | IER OF CABLE SY  | /STEM:  |  |  | SYSTEM ID#   | Name                               |
| Advanced Cab   | le Commun  | ications, L   | LC   |  | 007219   |                                    |
| PRIMARY TRANSMITTI   | RS: TELEVISIO  | N   |  |  |  |                                    |
| In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pa | G, identify even system during the consine effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2 | y television standard by television standard | period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: tit in space I (the stion was carried ute basis station eport origination coording to its own be reported in comparation in a network), "N-M" (I educational), on a general instructive area, (i.e. "cogeneral instructive area, (i.e. "cogeneral instructive area, (i.e. "cogeneral instructive area, or lack of a sam that is not some 30, 2009, be a sociation repression of the general in the of the general in the control of the general of the control of the general of t | (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 program services the television statification, D.C. This work station, an indefor network multicute of "E-M" (for noncontext of the service of the station of the st | es". If not, enter "No". For an ex-<br>e paper SA3 form.<br>stating the basis on which your<br>tering "LAC" if your cable system | G Primary Transmitters: Television |
| Note: If you are utilizing   |  | . ,   |  | •  | which the station is identifed.<br>channel line-up.  |                                    |
|  |  | CHANN   | EL LINE-UP   | AB   |  |                                    |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION  | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |                                    |
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| FORM SA3E. PAGE 3.  |  |   |  |  |   |                                    |
|---|--|---|--|--|---|------------------------------------|
| LEGAL NAME OF OWN   |  |   |  |  | SYSTEM ID#  | Name                               |
| Advanced Cab  | le Commun  | ications, L   | LC   |  | 007219  |                                    |
| 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 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 cable system carried the cable system and attion "E" (exempt). For explanation of these the Column 6: Give the | G, identify ever system during the consine effect on the consistency of the consistency o | y television structure by television structure 24, 194, or 76.63 (radio the next) respect to any ations, or auth G—but do list titute basis. ace I, if the state rang substitute basis. The station acceptance of the station acceptance whether the station. Whether the station whether the station. Whether the station acceptance (v) of the television on during the same basis becard multicast stream or before Jumitter or an acceptance of the station. Foons, if any, given a significant streams and content of the station. Foons, if any, given a significant streams are page (v) ch station. | g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried that the station was carried that the station was carried to the station was carried to the station was carried to the station was sation to the reported in containing the station is a network etwork), "N-M" (if I educational), one general instruction area, (i.e. "or general instruction area, (i.e. "or general instruction was especially of the station of the search that is not some 30, 2009, be sesociation repression of the general in true. Stations, if the the name of the stations of the stations, if the the name of the stations of the stations, if the the name of the stations of the stations, if the the name of the stations of the s | (1) stations carried e carriage of certa 1(e)(2) and (4))]; as a carried by your context of the carried by the carried b | es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your ering "LAC" if your cable system capacity. expaper says to be subject estem or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. et to which the station is licensed by the enter the station is identifed. | G Primary Transmitters: Television |
|   |  | CHANN   | EL LINE-UP   | AC   |   |                                    |
| 1. CALL<br>SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE OF STATION  | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION  |                                    |
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| FORM SA3E. PAGE 3.   |  |   |  |  |   |                                    |
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| LEGAL NAME OF OWN  | IER OF CABLE SY  | /STEM:  |  |  | SYSTEM ID#  | Name                               |
| Advanced Cab   | le Commun  | ications, L   | LC   |  | 007219  |                                    |
| PRIMARY TRANSMITTI   | ERS: TELEVISIO   | N   |  |  |   |                                    |
| In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pa | G, identify even system during the ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2 | y television standard by television standard | period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: tit in space I (the stion was carried ute basis station eport origination coording to its own be reported in comparation in a network), "N-M" (I educational), on a general instructive area, (i.e. "cogeneral instructive area, (i.e. "cogeneral instructive area, (i.e. "cogeneral instructive area, or lack of a sam that is not some 30, 2009, be a sociation repression of the general in the of the general in the control of the general of the control of the general of t | (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 program services the television statification, D.C. This work station, an indefor network multicute of "E-M" (for noncontext of the service of the station of the st | es". If not, enter "No". For an ex-<br>e paper SA3 form.<br>stating the basis on which your<br>ering "LAC" if your cable system | G Primary Transmitters: Television |
| Note: If you are utilizing   |  | . ,   |  | •  | which the station is identifed.<br>channel line-up.   |                                    |
|  |  | CHANN   | EL LINE-UP   | AD   |   |                                    |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION  | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION  |                                    |
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| FORM SA3E. PAGE 3.  |  |  |  |  |  |     |   |
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| LEGAL NAME OF OWN   | IER OF CABLE SY  | /STEM:   |  |  | SYSTEM   |     | Name  |
| Advanced Cab  | le Commun  | ications, L  | LC   |  | 007  | 219 |   |
| PRIMARY TRANSMITTE  | ERS: TELEVISIO   | DN .   |  | -  |  |     |   |
| In General: In space (carried by your cable set FCC rules and regulate 76.59(d)(2) and (4), 76 substitute program base Substitute Pasis Set basis 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 you hable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the | G, identify even system during the ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2 | y television standard page (v) of the local servage (v) of the local se | period, except period, except period, except period, except period, except period, permitting the eferring to 76.6 paragraph.  I distant stations orizations:  I tin space I (the stion was carried ute basis station eport origination coording to its own be reported in coording to its own be reported in wash ation is a network), "N-M" (I educational), or egeneral instruct and the stick period area, (i.e. "coording period area, (i.e. "coording period area, (i.e. "coording period area that is not some 30, 2009, be association repression of the general in the of the general in the period the of the general in the period the coordinates. | (1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the special Statement of both on a substitution, see page (v) on a program service er-the-air designation of the television statistication, D.C. This work station, an indefor network multicon "E-M" (for noncontrolled in the special program of the television statistication of the station, and indefor network multicon "E-M" (for noncontrolled in the special program of the station of the sta | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>stating the basis on which your<br>ering "LAC" if your cable system |     | G<br>Primary<br>Transmitters:<br>Television |
| FCC. For Mexican or 0   | Canadian statio  | ns, if any, giv  | e the name of th   | ne community with  | which the station is identifed.  |     |   |
| 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   | AE   |  |     |   |
| 1. CALL<br>SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |     |   |
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| FORM SA3E. PAGE 3.   |  |  |  |  |   |                                    |
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| LEGAL NAME OF OWN  | IER OF CABLE SY  | STEM:  |  |  | SYSTEM ID#  | Name                               |
| Advanced Cab   | le Commun  | ications, L  | LC   |  | 007219  |                                    |
| PRIMARY TRANSMITTE   | ERS: TELEVISIO   | ON   |  |  |   |                                    |
| In General: In space of carried by your cable is FCC rules and regulate 76.59(d)(2) and (4), 76 substitute program base Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pasis Substitute Pasis Pas | G, identify even system during the ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2 | y television standard page (v) of the station. whether the station. whether the station accommercial page (v) of the station accommendation accomme | period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: tit in space I (the stion was carried ute basis station eport origination coording to its own be reported in comparation in a network), "N-M" (I educational), on a general instructive area, (i.e. "cogeneral instructive area, (i.e. "cogeneral instructive area, (i.e. "cogeneral instructive area, or lack of a sam that is not some 30, 2009, be a sociation repression of the general in the of the general in the control of the general of the control of the general of t | (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 program services the television statification, D.C. This work station, an indefor network multicute "E-M" (for noncontext of the special part of the station of the special part of the speci | es". If not, enter "No". For an ex-<br>e paper SA3 form.<br>stating the basis on which your<br>ering "LAC" if your cable system | G Primary Transmitters: Television |
| Note: If you are utilizing   |  | . ,  |  | •  | which the station is identifed. channel line-up.  |                                    |
|  |  | CHANN  | EL LINE-UP   | AF   |   |                                    |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   |  | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION  |                                    |
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| FORM SA3E. PAGE 3.   |  |  |  |   |   |        |                                    |
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| LEGAL NAME OF OWN  | IER OF CABLE SY  | STEM:  |  |   |   | EM ID# | Name                               |
| Advanced Cab   | le Commun  | ications, L  | LC   |   | 0   | 07219  | Name                               |
| PRIMARY TRANSMITTI   | ERS: TELEVISIO   | ON   |  |   |   |        |                                    |
| In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bases as substitute program bases is 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-WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multice for the meaning of the Column 5: If you he cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For | G, identify even system during the ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2 | y television standard page (v) of the station. whether the station. whether "N" (for no concommercial page (v) of the ces" in column on during the came basis became the page (v) of the ces" in column on during the came basis became the came the | period, except period, except period, except period, except period, except period peri | (1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the Special Statement of the Special | s". If not, enter "No". For an expaper SA3 form. stating the basis on which your ering "LAC" if your cable system | al     | G Primary Transmitters: Television |
| Column 6: Give the   | e location of ea   | ch station. Fo   | r U.S. stations,   | list the community  | to which the station is licensed by the which the station is identified.  | the    |                                    |
| 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   | AG  |   |        |                                    |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION  |        |                                    |
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| FORM SA3E. PAGE 3.  |  |  |  |  |   |      |                                    |
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| LEGAL NAME OF OWN   | IER OF CABLE SY  | /STEM:   |  |  | SYSTEM  |      | Name                               |
| Advanced Cab  | le Commun  | ications, L  | LC   |  | 007   | 7219 |                                    |
| PRIMARY TRANSMITTE  | ERS: TELEVISIO   | ON   |  |  |   |      |                                    |
| In General: In space (carried by your cable set FCC rules and regulate 76.59(d)(2) and (4), 76 substitute program base Substitute Pasis Set basis 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 you hable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the | G, identify even system during the ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2 | y television standard page (v) of the local servage (v) of the local se | period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: tit in space I (the attion was carried ute basis station eport origination cording to its own be reported in comparation in a network of the stational of the stationa | (1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the special Statement of both on a substitution, see page (v) on a program service er-the-air designation of the television statistication, D.C. This work station, an indefor network multicon "E-M" (for noncontrolled in the special program of the television statistication of the station, and indefor network multicon "E-M" (for noncontrolled in the special program of the station of the sta | es". If not, enter "No". For an expaper SA3 form.  It stating the basis on which your ering "LAC" if your cable system capacity.  It payment because it is the subject stem or an association representing the your capacity.  It is the subject of the subject stem or an association representing the statement of the subject |      | G Primary Transmitters: Television |
| FCC. For Mexican or 0   | Canadian statio  | ns, if any, giv  | e the name of th   | ne community with  | to which the station is licensed by the which the station is identified.  |      |                                    |
| 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   | AH   |   |      |                                    |
| 1. CALL<br>SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION  |      |                                    |
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| FORM SA3E. PAGE 3.   |                                |  |                            |   |                        |      |  |
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| LEGAL NAME OF OWN  |                                |  |                            |   | SYSTEM ID#             | Name |  |
| Advanced Cab   | le Commun                      | ications, L                                  | LC                         |   | 007219                 |      |  |
| 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), 76.63 (e)(2) and (4), 07.61(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 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 sociated 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 l |                                |  |                            |   |                        |      |  |
|  |                                | CHANN  | EL LINE-UP                 | Al                                      |                        |      |  |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER | 3. TYPE OF STATION                           | 4. DISTANT?<br>(Yes or No) | 5. BASIS OF<br>CARRIAGE<br>(If Distant) | 6. LOCATION OF STATION |      |  |
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| FORM SA3E. PAGE 3.   |  |  |  |  |  |        |                                    |
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| LEGAL NAME OF OWN  | NER OF CABLE SY  | /STEM:   |  |  |  | EM ID# | Name                               |
| Advanced Cab   | le Commun  | ications, L  | LC   |  | 0  | 07219  | Nume                               |
| PRIMARY TRANSMITT  | ERS: TELEVISIO   | ON   |  |  |  |        |                                    |
| In General: In space carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis s basis under specifc FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give th its community of licens on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you cable system carried t carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these th | G, identify even system during the control of the c | y television standard page (v) of the local servage (v) of the local se | period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: tit in space I (the attion was carried ute basis station eport origination cording to its own be reported in comparation in a network of the stational of the stationa | (1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the special Statement of both on a substitution, see page (v) on a program service er-the-air designation of the television statistication, D.C. This work station, an indefor network multicon "E-M" (for noncontrolled in the special program of the television statistication of the station, and indefor network multicon "E-M" (for noncontrolled in the special program of the station of the sta | s". If not, enter "No". For an expaper SA3 form. Stating the basis on which your ering "LAC" if your cable system capacity.  payment because it is the subject stem or an association representing y transmitter, enter the designation in the paper SA3 form. | ıl     | G Primary Transmitters: Television |
| FCC. For Mexican or (  | Canadian statio  | ns, if any, giv  | e the name of th   | ne community with  | to which the station is licensed by the which the station is identified.   | ie     |                                    |
| 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   | AJ   |  |        |                                    |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |        |                                    |
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| FORM SA3E. PAGE 3.   |  |  |  |   |  |                                    |
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| LEGAL NAME OF OWN  | NER OF CABLE SY  | /STEM:   |  |   | SYSTEM ID  | Namo                               |
| Advanced Cab   | le Commun  | ications, L  | LC   |   | 00721  | 9                                  |
| PRIMARY TRANSMITTI   | ERS: TELEVISIO   | ON   |  |   |  |                                    |
| In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bases as substitute program bases 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 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 st planation of local serving Column 5: If you he cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For | G, identify even- system during ti- ions in effect or 6.61(e)(2) and ( sis, as explaine Stations: With a CC rules, regular here in space only on a subs and also in spa- information cond ions. ch station's call associated with A-2". Simulcast e channel numl se. For example system carried the in each case of entering the le cast), "E" (for no ese terms, see ation is outside ice area, see ation is outside ice area, see ice area, see ation on a part-til ision of a distant t entered into o a primary trans simulcasts, also | y television standard page (v) of the station. whether the station. whether "N" (for no concommercial page (v) of the ces" in column on during the came basis became the page (v) of the ces" in column on during the came basis became the came the | period, except period, except period, except period, except period, except period peri | (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 expaper SA3 form.  It stating the basis on which your ering "LAC" if your cable system capacity.  It payment because it is the subject stem or an association representing the your capital transmitter, enter the designation of the subject stem or an association representing the statement of the subject stem or an association representing the subject stem or as a subjec | G Primary Transmitters: Television |
| Column 6: Give the   | e location of ea<br>Canadian statio  | ch station. Fo   | r U.S. stations,<br>e the name of th   | list the community ne community with  | d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.  |                                    |
|  |  | CHANN  | EL LINE-UP   | AK  |  |                                    |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION   |                                    |
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| FORM SA3E. PAGE 3.   |                                |                          |                            |   |                        |      |  |
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| LEGAL NAME OF OWN  |                                |                          |                            |   | SYSTEM ID#             | Name |  |
| Advanced Cab   | le Commun                      | ications, L              | LC                         |   | 007219                 |      |  |
| 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 specifs 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), "" (for independent), "HM" (for rotewo |                                |                          |                            |   |                        |      |  |
|  |                                | CHANN                    | EL LINE-UP                 | ΔI                                      |                        |      |  |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER | 3. TYPE<br>OF<br>STATION | 4. DISTANT?<br>(Yes or No) | 5. BASIS OF<br>CARRIAGE<br>(If Distant) | 6. LOCATION OF STATION |      |  |
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| FORM SA3E. PAGE 3.  |  |  |  |  |  |  |
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| LEGAL NAME OF OWN   | IER OF CABLE SY  | /STEM:   |  |  | SYSTEM II  | Namo                                   |
| Advanced Cab  | le Commun  | ications, L  | LC   |  | 0072   | 19                                     |
| PRIMARY TRANSMITTI  | ERS: TELEVISIO   | DN .   |  | -  |  |  |
| In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base Substitute program base 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 eact 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 you h cable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the | G, identify even system during the ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2 | y television standard page (v) of the local servage (v) of the local se | period, except period, except period, except period, except period, except period, permitting the eferring to 76.6 paragraph.  I distant stations orizations:  I tin space I (the stion was carried ute basis station eport origination coording to its own be reported in coording to its own be reported in wash ation is a network), "N-M" (leducational), or egeneral instruct and the stion in the except period area, (i.e. "coording period area, (i.e. "coording period area, (i.e. "coording period area that is not some 30, 2009, be association repression of the general in the of the general in the period the coordinates. | (1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the special Statement of both on a substitution, see page (v) on program services the television statistically and the television statistically are the television statis | es". If not, enter "No". For an ex-<br>e paper SA3 form.<br>stating the basis on which your<br>dering "LAC" if your cable system | Primary<br>Transmitters:<br>Television |
| FCC. For Mexican or 0   | Canadian statio  | ns, if any, giv  | e the name of th   | ne community with  | which the station is identifed.  |  |
| 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   | AM   |  |  |
| 1. CALL<br>SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |  |
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| FORM SA3E. PAGE 3.   |  |  |   |   |   |     |   |
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| LEGAL NAME OF OWN  | IER OF CABLE SY  | /STEM:   |   |   | SYSTEM  |     | Name  |
| Advanced Cab   | le Commun  | ications, L  | LC  |   | 007   | 219 | Nume  |
| PRIMARY TRANSMITTI   | ERS: TELEVISIO   | ON   |   |   |   |     |   |
| In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bases as substitute program bases 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 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 st planation of local serving Column 5: If you he cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For | G, identify even system during the ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2 | y television standard page (v) of the station. whether the station. whether "N" (for no concommercial page (v) of the ces" in column on during the came basis became the page (v) of the ces" in column on during the came basis became the came the | period, except 81, permitting the referring to 76.6 paragraph. It is in space I (the tition was carried ute basis station eport origination cording to its own be reported in the tition is a network), "N-M" (I educational), one general instructive area, (i.e. "or general instructive area, (i.e. "or general instructive area, incompared to 19, you must contain that is not some 30, 2009, be association repression of 1900. | (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 expaper SA3 form.  It stating the basis on which your ering "LAC" if your cable system capacity.  It payment because it is the subject stem or an association representing the your capital transmitter, enter the designation of the subject of the subject stem or an association representing the subject of |     | G<br>Primary<br>transmitters:<br>Television |
| explanation of these the Column 6: Give the  | nree categories<br>e location of ea<br>Canadian statio   | , see page (v)<br>ch station. Fo<br>ns, if any, giv  | of the general in the stations, the the name of the   | instructions locate<br>list the community<br>ne community with  | d in the paper SA3 form. to which the station is licensed by the which the station is identifed.  |     |   |
|  |  | CHANN  | EL LINE-UP  | AN  |   |     |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION  |     |   |
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| LEGAL NAME OF OWN   |  |  |  |   | SYSTEM ID#   | Name  |
| Advanced Cab  | le Commun  | ications, L  | LC   |   | 007219   |   |
| PRIMARY TRANSMITTE  | ERS: TELEVISIO   | ON   |  |   |  |   |
| In General: In space (carried by your cable set FCC rules and regulation 76.59(d)(2) and (4), 76 substitute program base Substitute Basis Set basis under specific FC to Do not list the station station was carried to List the station here, basis. For further in in the paper SA3 of Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast).  Column 2: Give the its community of licens on which your cable sy | G, identify even<br>system during ti<br>ions in effect or<br>6.61(e)(2) and (<br>6.61(e)(2) and (<br>6.61( | 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 of the station account of the station.                            | period, except<br>81, permitting the<br>referring to 76.6<br>paragraph.<br>distant stations<br>orizations:<br>tit in space I (the<br>attion was carried<br>ute basis station<br>eport origination<br>coording to its own<br>be reported in or<br>as assigned to the<br>annel 4 in Wash   | (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 the television station, D.C. This ington, D.C. This  | 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 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 tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel  | G<br>Primary<br>Transmitters:<br>Television |
| educational station, by (for independent multion For the meaning of the Column 4: If the state planation of local servi Column 5: If you ha cable system carried the 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   | entering the lecast), "E" (for no ese terms, see ation is outside ce area, see properties of the distant station on a part-linion of a distant entered into of a primary transsimulcasts, also a primary trans elocation of ea Canadian station canadian station.  | etter "N" (for no<br>concommercial<br>page (v) of the<br>the local servage (v) of the<br>es" in column<br>on during the a<br>me basis beca<br>multicast streen<br>or before Ju<br>mitter or an au<br>column et "E". If<br>, see page (v)<br>ch station. Fo<br>ns, if any, give | etwork), "N-M" (in educational), of a general instructive area, (i.e. "or general instructive 4, you must conducted accounting periodause of lack of a geam that is not some 30, 2009, be association repressional accounting periodause of the general in the conducted accounting the conducted accoun | for network multic.  or "E-M" (for nonco- ctions located in the distant"), enter "Ye ions located in the mplete column 5, s od. Indicate by ent ictivated channel c multiple to a royalty ittween a cable sys senting the primar channel on any ot instructions locate list the community me community with | ast), "I" (for independent), "I-M" mmercial educational multicast). The paper SA3 form. The paper SA3 form |   |
|   |  | CHANN  | EL LINE-UP   | AO  |  |   |
| 1. CALL<br>SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION   |   |
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| FORM SA3E. PAGE 3.   |                                |                          |                            |   |                        |      |  |
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| LEGAL NAME OF OWN  | IER OF CABLE SY                | /STEM:                   |                            |   | SYSTEM ID#             | Name |  |
| Advanced Cab   | le Commun                      | ications, LI             | LC                         |   | 007219                 |      |  |
| PRIMARY TRANSMITTI   | 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 76.59(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 sociated 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 in |                                |                          |                            |   |                        |      |  |
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|  |                                | CHANN                    | EL LINE-UP                 | AP                                      |                        |      |  |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER | 3. TYPE<br>OF<br>STATION | 4. DISTANT?<br>(Yes or No) | 5. BASIS OF<br>CARRIAGE<br>(If Distant) | 6. LOCATION OF STATION |      |  |
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| FORM SA3E. PAGE 3.   |                                |                    |                            |   |                        |      |  |
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| LEGAL NAME OF OWN  |                                |                    |                            |   | SYSTEM ID#             | Name |  |
| Advanced Cab   | le Commun                      | ications, L        | LC                         |   | 007219                 |      |  |
| 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 76.59(d)(2) and (4), 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 subscitute with a station according to its over-the-air designation. For example, report multicast stream as reparately, 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 'Ni' for netw |                                |                    |                            |   |                        |      |  |
|  |                                | CHANN              | EL LINE-UP                 | AQ                                      |                        |      |  |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER | 3. TYPE OF STATION | 4. DISTANT?<br>(Yes or No) | 5. BASIS OF<br>CARRIAGE<br>(If Distant) | 6. LOCATION OF STATION |      |  |
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| FORM SA3E. PAGE 3.  |  |  |  |  |  |      |  |
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| LEGAL NAME OF OWN   | IER OF CABLE SY  | /STEM:   |  |  | SYSTE  |      | Name                                   |
| Advanced Cab  | le Commun  | ications, L  | LC   |  | 00   | 7219 | Hume                                   |
| PRIMARY TRANSMITTI  | ERS: TELEVISIO   | ON   |  |  |  |      |  |
| In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base Substitute program base 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 eact 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 you h cable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the | G, identify even system during the ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2 | y television standard page (v) of the local servage (v) of the local se | period, except period, except period, except period, except period, except period, permitting the eferring to 76.6 paragraph.  I distant stations orizations:  I tin space I (the stion was carried ute basis station eport origination coording to its own be reported in coording to its own be reported in wash ation is a network), "N-M" (leducational), or egeneral instruct and the stion in the except period area, (i.e. "coording period area, (i.e. "coording period area, (i.e. "coording period area that is not some 30, 2009, be association repression of the general in the of the general in the period the coordinates. | (1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the special Statement of both on a substitution, see page (v) on program services the television statistically and the television statistically are the television statis | es". If not, enter "No". For an expaper SA3 form.  It stating the basis on which your ering "LAC" if your cable system capacity.  It payment because it is the subject stem or an association representing the your transmitter, enter the designation the paper SA3 form. |      | Primary<br>Transmitters:<br>Television |
|   |  |  |  | •  | to which the station is licensed by th which the station is identifed.   | е    |  |
| 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   | AR   |  |      |  |
| 1. CALL<br>SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |      |  |
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| FORM SA3E. PAGE 3.   |  |  |   |   |   |     |                                    |
|--|--|--|---|---|---|-----|------------------------------------|
| LEGAL NAME OF OWN  | NER OF CABLE SY  | /STEM:   |   |   | SYSTEM  |     | Name                               |
| Advanced Cab   | le Commun  | ications, L  | LC  |   | 007   | 219 | Nume                               |
| PRIMARY TRANSMITT  | ERS: TELEVISIO   | ON   |   |   |   |     |                                    |
| In General: In space carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis s basis under specifc FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give th its community of licens on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you h cable system carried t carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For | G, identify even system during titions in effect on 3.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a subsand also in spanformation conditions. Ch station's call associated with A-2". Simulcast e channel numlese. For example ystem carried the in each case of entering the lecast), "E" (for nesse terms, see tation is outside ice area, see "Y he distant statiction on a part-titision of a distant tentered into o a primary trans simulcasts, also | y television standard page (v) of the station. whether the station. whether "N" (for no concommercial page (v) of the ces" in column on during the came basis became the page (v) of the ces" in column on during the came basis became the came the | period, except 81, permitting the referring to 76.6 paragraph. It is in space I (the tition was carried ute basis station eport origination cording to its own be reported in the tition is a network), "N-M" (I educational), one general instructive area, (i.e. "or general instructive area, (i.e. "or general instructive area, incompared to 19, you must contain that is not some 30, 2009, be association repression of 1900. | (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 expaper SA3 form.  It stating the basis on which your ering "LAC" if your cable system capacity.  It payment because it is the subject stem or an association representing the your capital transmitter, enter the designation of the subject of the subject stem or an association representing the subject of |     | G Primary Transmitters: Television |
| Column 6: Give the   | e location of ea<br>Canadian statio  | ch station. Fo   | r U.S. stations,<br>e the name of th  | list the community ne community with  | d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.   |     |                                    |
|  |  | CHANN  | EL LINE-UP  | AS  |   |     |                                    |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION  |     |                                    |
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| FORM SA3E. PAGE 3.   |   |   |  |  |  |   |  |
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| LEGAL NAME OF OWN  | IER OF CABLE SY   | STEM:   |  |  | SYSTEM ID#   | Name  |  |
| Advanced Cab   | le Commun   | ications, L   | LC   |  | 007219   | Name  |  |
| PRIMARY TRANSMITTE   | RS: TELEVISIO   | N   |  |  |  |   |  |
| In General: In space of carried by your cable is FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program bassubstitute Basis is basis 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 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   | G, identify even<br>system during the<br>cons in effect of<br>6.61(e)(2) and (<br>sis, as explaine<br>stations: With a<br>CC rules, regula<br>here in space<br>only on a subs<br>and also in spat<br>formation cond<br>rm.<br>h station's call<br>associated with<br>-2". Simulcast<br>e channel numbers<br>the conduction of the<br>in each case we<br>entering the le | y television strane accounting a June 24, 1944), or 76.63 (rd in the next) respect to any ations, or auth G—but do list titute basis. In the state of the station according to the station according to the station. Whether the station. | period, except 81, permitting the referring to 76.6 paragraph. It is in space I (the stion was carried ute basis station eport origination cording to its own be reported in coas assigned to be annel 4 in Wash ation is a netwoetwork), "N-M" ("N-M" ("N-M"))" ("N-M" ("N-M"))" ("N-M" ("N-M"))" ("N-M")" ("N-M" | (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 the television statifington, D.C. This lark station, an indefor network multical (e)(2) and (e)(2) and (e)(3) and (e)(4) and ( | 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 and Program Log)—if the aute basis and also on some other at the general instructions located as such as HBO, ESPN, etc. Identify a stream separately; for example and for broadcasting over-the-air in and be different from the channel appendent station, or a noncommercial ast), "I" (for independent), "I-M" | G<br>Primary<br>Transmitters:<br>Television |  |
| (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-upp. |   |   |  |  |  |   |  |
|  |   | CHANN   | EL LINE-UP   | ΔТ   |  |   |  |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION  | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |   |  |
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| FORM SA3E. PAGE 3.   |                                |                          |                            |   |                        |      |  |
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| LEGAL NAME OF OWN  | IER OF CABLE SY                | STEM:                    |                            |   | SYSTEM ID#             | Name |  |
| Advanced Cab   | le Commun                      | ications, L              | LC                         |   | 007219                 |      |  |
| 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 76.59(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 sosciated 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), "" (for independent), "L-M" (for ind |                                |                          |                            |   |                        |      |  |
| Note: If you are utilizing   |                                |                          |                            | •                                       |                        |      |  |
|  |                                | CHANN                    | EL LINE-UP                 | AU                                      |                        |      |  |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER | 3. TYPE<br>OF<br>STATION | 4. DISTANT?<br>(Yes or No) | 5. BASIS OF<br>CARRIAGE<br>(If Distant) | 6. LOCATION OF STATION |      |  |
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| FORM SA3E. PAGE 3.  |                                |                    |                            |   |                        |  |  |  |  |
|---|--------------------------------|--------------------|----------------------------|---|------------------------|--|--|--|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:  SYSTEM ID#  |                                |                    |                            |   |                        |  |  |  |  |
| Advanced Cab  | le Commun                      | ications, L        | LC                         |   | 007219                 |  |  |  |  |
| 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), 07.616(e)(2) and (4), or 76.63 (referring to 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 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), "E" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), |                                |                    |                            |   |                        |  |  |  |  |
|   |                                | CHANN              | EL LINE-UP                 | AV                                      |                        |  |  |  |  |
| 1. CALL<br>SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER | 3. TYPE OF STATION | 4. DISTANT?<br>(Yes or No) | 5. BASIS OF<br>CARRIAGE<br>(If Distant) | 6. LOCATION OF STATION |  |  |  |  |
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| FORM SA3E. PAGE 3.  |  |  |  |  |  |        |                                    |
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| LEGAL NAME OF OWN   | IER OF CABLE SY  | STEM:  |  |  |  | EM ID# | Name                               |
| Advanced Cab  | le Commun  | ications, L  | LC   |  | 0  | 07219  | Name                               |
| PRIMARY TRANSMITTE  | ERS: TELEVISIO   | ON   |  |  |  |        |                                    |
| In General: In space (carried by your cable set FCC rules and regulate 76.59(d)(2) and (4), 76 substitute program base Substitute Pasis Set basis 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 you hable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the | G, identify even system during the ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2 | y television standard page (v) of the local servage (v) of the local se | period, except period, except period, except period, except period, except period, permitting the eferring to 76.6 paragraph.  I distant stations orizations:  I tin space I (the stion was carried ute basis station eport origination coording to its own be reported in coording to its own be reported in wash ation is a network), "N-M" (leducational), or egeneral instruct and the stion in the except period area, (i.e. "coording period area, (i.e. "coording period area, (i.e. "coording period area that is not some 30, 2009, be association repression of the general in the of the general in the period the coordinates. | (1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the special Statement of both on a substitution, see page (v) on program services the television statistically and the television statistically are the television statis | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>stating the basis on which your<br>ering "LAC" if your cable system | al     | G Primary Transmitters: Television |
| FCC. For Mexican or 0   | Canadian statio  | ns, if any, giv  | e the name of th   | ne community with  | which the station is identifed.  |        |                                    |
| Note: If you are utilizing  | ng multiple chai   | •  | •  | •  | channel line-up.   |        |                                    |
|   | 1  | CHANN  | EL LINE-UP   | AW   |  |        |                                    |
| 1. CALL<br>SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |        |                                    |
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ACCOUNTING PERIOD: 2018/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007219 **Advanced Cable Communications, LLC** 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. ACCOUNTING PERIOD: 2   |                |                         |  |                 |                    |                 |              |      |  |  |  |  |
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| LEGAL NAME OF OWNER OF  |                |                         |  |                 |                    | S               | SYSTEM ID#   | Name |  |  |  |  |
| Advanced Cable Communications, LLC 007219   |                |                         |  |                 |                    |                 |              |      |  |  |  |  |
| SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG  |                |                         |  |                 |                    |                 |              |      |  |  |  |  |
| In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further |                |                         |  |                 |                    |                 |              |      |  |  |  |  |
| explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.   |                |                         |  |                 |                    |                 |              |      |  |  |  |  |
| 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE   |                |                         |  |                 |                    |                 |              |      |  |  |  |  |
| • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? YesXNo  |                |                         |  |                 |                    |                 |              |      |  |  |  |  |
| Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program   |                |                         |  |                 |                    |                 |              |      |  |  |  |  |
| log in block 2.   |                |                         |  |                 |                    |                 |              |      |  |  |  |  |
| 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is   |                |                         |  |                 |                    |                 |              |      |  |  |  |  |
| clear. If you need more spa   |                |                         |  |                 | alicentina ac Alac |                 |              |      |  |  |  |  |
| period, was broadcast by a  |                |                         | ision program (substitute p<br>our cable system substitute |                 |                    |                 | ion          |      |  |  |  |  |
| under certain FCC rules, re   | gulations, o   | r authorization         | s. See page (vi) of the gen                                | eral instructio | ns located         | d in the paper  |              |      |  |  |  |  |
| SA3 form for futher informatitles, for example, "I Love L   |                |                         |  | "basketball".   | List spec          | cific program   |              |      |  |  |  |  |
| Column 2: If the progran  | n was broad    | lcast live, ente        | r "Yes." Otherwise enter "N                                |                 |                    |                 |              |      |  |  |  |  |
|   |                |                         | sting the substitute programe community to which the       |                 | nsed by th         | ne FCC or in    |              |      |  |  |  |  |
| the case of Mexican or Can  | adian static   | ns, if any, the         | community with which the                                   | station is ider | ntified).          |                 |              |      |  |  |  |  |
| Column 5: Give the mon first. Example: for May 7 gives  |                | when your sys           | tem carried the substitute p                               | rogram. Use     | numerals           | s, with the mon | th           |      |  |  |  |  |
|   |                | substitute pro          | gram was carried by your o                                 | able system.    | List the ti        | mes accurately  | y            |      |  |  |  |  |
| to the nearest five minutes.  |                |                         |  |                 |                    |                 |              |      |  |  |  |  |
| stated as "6:00–6:30 p.m."  Column 7: Enter the letter  | er "R" if the  | listed program          | was substituted for progra                                 | mming that v    | our syster         | n was required  | 1            |      |  |  |  |  |
| to delete under FCC rules a   | and regulation | ons in effect du        | iring the accounting period                                | enter the let   | ter "P" if tl      | ne listed pro   |              |      |  |  |  |  |
| gram was substituted for prefect on October 19, 1976.   |                | that your syste         | em was permitted to delete                                 | under FCC r     | ules and r         | egulations in   |              |      |  |  |  |  |
| effect off October 19, 1976.  |                |                         |  | T               |                    |                 | _            |      |  |  |  |  |
|   | UDOTITUT       | E DDOODAN               |  |                 | EN SUBS            |                 | 7. REASON    |      |  |  |  |  |
|   | 2. LIVE?       | E PROGRAM  3. STATION'S |  | 5. MONTH        | T T                | CURRED TIMES    | FOR DELETION |      |  |  |  |  |
| TITLE OF PROGRAM  | Yes or No      | CALL SIGN               | 4. STATION'S LOCATION                                      | AND DAY         |                    | _ TO            | DELETION     |      |  |  |  |  |
|   |                |                         |  |                 |                    | _               |              |      |  |  |  |  |
|   |                |                         |  |                 |                    |                 |              |      |  |  |  |  |
|   |                |                         |  |                 |                    | _               |              |      |  |  |  |  |
|   |                |                         |  |                 |                    | _               |              |      |  |  |  |  |
|   |                |                         |  |                 |                    | _               |              |      |  |  |  |  |
|   |                |                         |  |                 |                    |                 |              |      |  |  |  |  |
|   | <del> </del>   |                         |  |                 | <b></b>            |                 |              |      |  |  |  |  |
|   | <b></b>        |                         |  |                 | <b></b>            |                 |              |      |  |  |  |  |
|   | <del> </del>   |                         |  |                 | <del> </del>       |                 |              |      |  |  |  |  |
|   |                |                         |  |                 | <b></b>            |                 |              |      |  |  |  |  |
|   |                |                         |  |                 |                    |                 |              |      |  |  |  |  |
|   |                |                         |  |                 |                    |                 |              |      |  |  |  |  |
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|   |                |                         |  |                 | ļ                  |                 |              |      |  |  |  |  |
|   |                |                         |  |                 | <u> </u>           |                 |              |      |  |  |  |  |
|   |                |                         |  |                 |                    | _               |              |      |  |  |  |  |
|   |                |                         |  |                 |                    |                 |              |      |  |  |  |  |
|   |                |                         |  |                 |                    | _               |              |      |  |  |  |  |
|   |                |                         |  |                 |                    | _               |              |      |  |  |  |  |
|   |                |                         |  |                 |                    |                 |              |      |  |  |  |  |
|   |                |                         |  |                 | <b></b>            |                 |              |      |  |  |  |  |

ACCOUNTING PERIOD: 2018/1 FORM SA3E. PAGE 6.

Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:
Advanced Cable Communications, LLC
SYSTEM ID#
007219

## J

### Part-Time Carriage Log

### PART-TIME CARRIAGE LOG

**In General:** This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time 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 column 5 of space G.

Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred 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."

| <u> </u>    |                          | DATES        | AND HOURS ( | OF P | ART-TIME CAF | RRIAGE |            |     |    |
|-------------|--------------------------|--------------|-------------|------|--------------|--------|------------|-----|----|
| CALL SIGN - | ALL SIGN WHEN CARRIAGE C |              |             |      | CALL SIGN    | WHEN   | CARRIAGE O |     |    |
|             | DATE                     | HOUR<br>FROM | TO          |      |              | DATE   | FROM       | OUR | TO |
|             |                          |              |             |      |              |        |            | _   |    |
|             |                          |              |             |      |              |        |            | _   |    |
|             |                          |              |             |      |              |        |            | _   |    |
|             |                          |              |             |      |              |        |            | _   |    |
|             |                          |              |             |      |              |        |            | _   |    |
|             |                          |              |             |      |              |        |            | _   |    |
|             |                          |              |             |      |              |        |            | _   |    |
|             |                          |              |             |      |              |        |            | _   |    |
|             |                          |              |             |      |              |        |            | _   |    |
|             |                          |              |             |      |              |        |            | _   |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          |              |             |      |              |        |            | _   |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          |              |             |      |              |        |            |     |    |
|             |                          | _            |             |      |              |        |            | _   |    |
|             |                          |              |             |      |              |        |            |     |    |

|   | AL NAME OF OWNER OF CABLE SYSTEM:  | SYSTEM ID#                 |  |  |  |  |  |  |  |  |
|---|--|----------------------------|--|--|--|--|--|--|--|--|
|   | vanced Cable Communications, LLC   | 007219                     | Name   |  |  |  |  |  |  |  |
| Ins<br>all a<br>(as<br>pag                  | GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s) during the accounting period.  IMPORTANT: You must complete a statement in space P concerning gross receipts.  (Amount of gross receipts) |                            |  |  |  |  |  |  |  |  |
| • Cor<br>• Cor<br>• If ye<br>fee<br>• If ye | YRIGHT ROYALTY FEE actions: Use the blocks in this space L to determine the royalty fee you owe: mplete block 1, showing your minimum fee. mplete block 2, showing whether your system carried any distant television stations. our system did not carry any distant television stations, leave block 3 blank. Enter the a from block 1 on line 1 of block 4, and calculate the total royalty fee. our system did carry any distant television stations, you must complete the applicable prompanying this form and attach the schedule to your statement of account.  |                            | L<br>Copyright<br>Royalty Fee                  |  |  |  |  |  |  |  |
|   | art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should back 3 below.  | pe entered on line 1 of    |  |  |  |  |  |  |  |  |
| -   | art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.   | entered on line 2 in block |  |  |  |  |  |  |  |  |
|   | art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho<br>block 4 below.  | ould be entered on line    |  |  |  |  |  |  |  |  |
| Block<br>1                                  | MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or mor least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period.   | e is 1.064 percent of the  |  |  |  |  |  |  |  |  |
|   | 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.  | \$ 845,136.00              |  |  |  |  |  |  |  |  |
|   | This is your minimum fee.  | \$ 8,992.25                |  |  |  |  |  |  |  |  |
| Block<br>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 colui "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting per Yes—Complete the DSE schedule.  | mn 4, you must check       |  |  |  |  |  |  |  |  |
| Block                                       | Line 1. <b>BASE RATE FEE:</b> Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero  | \$ -                       |  |  |  |  |  |  |  |  |
|   | Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero   | 0.00                       |  |  |  |  |  |  |  |  |
|   | Line 3. Add lines 1 and 2 and enter here   | \$ -                       |  |  |  |  |  |  |  |  |
| Block<br>4                                  | Line 1. <b>BASE RATE FEE/3.75 FEE or MINIMUM FEE</b> : Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger  | \$ 8,992.25                | Cable systems                                  |  |  |  |  |  |  |  |
|   | Line 2. <b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.  |                            | submitting<br>additional<br>deposits under     |  |  |  |  |  |  |  |
|   | Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9  (Interest Worksheet)   | 0.00                       | Section 111(d)(7) should contact 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   | \$ 9,717.25                | form for submitting the additional fees.       |  |  |  |  |  |  |  |
|   |  |                            |  |  |  |  |  |  |  |  |

| Name                     | LEGAL NAME OF OWNER OF   | CABLE SY  | STEM:  | SYSTEM ID#                |  |  |  |  |  |  |
|--------------------------|--|---|--|---------------------------|--|--|--|--|--|--|
| Name                     | Advanced Cable Co  | ommun   | ications, LLC  | 007219                    |  |  |  |  |  |  |
|                          | CHANNELS   |   |  |                           |  |  |  |  |  |  |
| M                        | Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations |   |  |                           |  |  |  |  |  |  |
|                          | to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.        |   |  |                           |  |  |  |  |  |  |
| Channels                 | 1 Enter the total numb   | har of ah   | pannels on which the cable   |                           |  |  |  |  |  |  |
|                          |  | 1. Enter the total number of channels on which the cable system carried television broadcast stations |  |                           |  |  |  |  |  |  |
|                          | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,  |   |  |                           |  |  |  |  |  |  |
|                          | 2. Enter the total numb  | ber of ac   | ctivated channels  |                           |  |  |  |  |  |  |
|                          | •  | •   | arried television broadcast stations   | 74                        |  |  |  |  |  |  |
|                          | and nonbroadcast ser   | ervices .   |  |                           |  |  |  |  |  |  |
| N                        | INDIVIDUAL TO BE C   | CONTAC  | CTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual   |                           |  |  |  |  |  |  |
| IN                       | we can contact about the   |   | · · · · · · · · · · · · · · · · · · ·  |                           |  |  |  |  |  |  |
| Individual to            |  |   |  |                           |  |  |  |  |  |  |
| Be Contacted for Further | Name Candice   | Soed  | <b>er</b> Telephone  | 954-752-7244 x243         |  |  |  |  |  |  |
| Information              | Name Canalco   | Oocu  | Тобрия   | , 304-102-1244 8240       |  |  |  |  |  |  |
|                          | Address 12409 NV   | W 35tl  | n Street   |                           |  |  |  |  |  |  |
|                          |  |   | ute, apartment, or suite number)   |                           |  |  |  |  |  |  |
|                          |  |   | FL 33065   |                           |  |  |  |  |  |  |
|                          | (City, town, stat  | ate, zip)   |  |                           |  |  |  |  |  |  |
|                          | Email C  | csoede  | er@mybluestream.com Fax (optional)   |                           |  |  |  |  |  |  |
|                          |  |   |  |                           |  |  |  |  |  |  |
|                          | CERTIFICATION (This s  | stateme   | nt of account must be certifed and signed in accordance with Copyright Office re   | egulations.               |  |  |  |  |  |  |
| 0                        |  |   |  |                           |  |  |  |  |  |  |
| Certifcation             | • I, the undersigned, here   | reby cert   | ify that (Check one, but only one, of the boxes.)  |                           |  |  |  |  |  |  |
|                          | (Owner other than c  | cornora   | tion or partnership) I am the owner of the cable system as identifed in line 1 of spa  | ce B· or                  |  |  |  |  |  |  |
|                          | (Owner other than c  | corpora   | tion of partiership) I am the owner of the cable system as identified in line 1 of spar  | ce b, or                  |  |  |  |  |  |  |
|                          | (Agent of owner oth  | her than  | corporation or partnership) I am the duly authorized agent of the owner of the call  | ble system as identified  |  |  |  |  |  |  |
|                          | in line 1 of space   | e B and   | that the owner is not a corporation or partnership; or   |                           |  |  |  |  |  |  |
|                          | (Officer or partner)   | ) I am ar   | officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as  | owner of the cable system |  |  |  |  |  |  |
|                          | in line 1 of space   | e B.  |  |                           |  |  |  |  |  |  |
|                          | I have examined the sta  | tatemen   | t of account and hereby declare under penalty of law that all statements of fact conta   | ined herein               |  |  |  |  |  |  |
|                          | are true, complete, and ([18 U.S.C., Section 1007  |   | to the best of my knowledge, information, and belief, and are made in good faith.  |                           |  |  |  |  |  |  |
|                          | <b>,</b>   | ( ),  | •  |                           |  |  |  |  |  |  |
|                          |  |   |  |                           |  |  |  |  |  |  |
|                          |  | [   |  |                           |  |  |  |  |  |  |
|                          |  | X   | /s/ Joseph Canavan   |                           |  |  |  |  |  |  |
|                          |  | Enter an  | electronic signature on the line above using an "/s/" signature to certify this statement.   |                           |  |  |  |  |  |  |
|                          | (€   | (e.g., /s/  | John Smith). Before entering the first forward slash of the /s/ signature, place your curson, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lot |                           |  |  |  |  |  |  |
|                          |  |   |  | as companient, cominge.   |  |  |  |  |  |  |
|                          | Т  | Typed o   | r printed name: /s/Joseph Canavan  |                           |  |  |  |  |  |  |
|                          |  |   |  |                           |  |  |  |  |  |  |
|                          |  |   |  |                           |  |  |  |  |  |  |
|                          | Т  | Title:  | COO (Title of official position held in corporation or partnership)  |                           |  |  |  |  |  |  |
|                          |  |   | Company Common room of Society of Paragraphy   |                           |  |  |  |  |  |  |
|                          | D  | Date:   | August 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

U.S. Copyright Office

| LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#  | Name  |
|--|---|
| Advanced Cable Communications, LLC 007219  |   |
| SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."  For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. | Special<br>Statement<br>Concerning<br>Gross Receipts<br>Exclusion |
| During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?   |   |
| X NO   |   |
| YES. Enter the total here and list the satellite carrier(s) below  |   |
| Name Mailing Address Mailing Address Mailing Address   |   |
| INTEREST ASSESSMENTS   |   |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.   | Q   |
| Line 1 Enter the amount of late payment or underpayment  | Interest<br>Assessment  |
| Line 2 Multiply line 1 by the interest rate* and enter the sum here  |   |
| Line 3 Multiply line 2 by the number of days late and enter the sum here   |   |
| Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)   |   |
| (interest charge)  |   |
| * To view the interest rate chart click on <a href="www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a> . For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.  |   |
| ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.   |   |
| NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.   |   |
| Owner Address  |   |
| First community served 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: 2018/1

# 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 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 of 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

**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  $\varepsilon$  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:

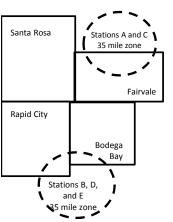
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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 | of Subscriber Groups   |                  |
|----|--------------------------|-------|------------------|------------------------|------------------|
|    | STATION                  | DSE   | CITY             | OUTSIDE LOCAL          | GROSS RECEIPTS   |
| in | A (independent)          | 1.0   |                  | SERVICE AREA OF        | FROM SUBSCRIBERS |
| 6  | 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

| 40,00                        |              |                             |              |                             |              |  |  |  |  |  |
|------------------------------|--------------|-----------------------------|--------------|-----------------------------|--------------|--|--|--|--|--|
| 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: 2018/1** 

| DSE SCHEDULE. PAG    | Ī  |                      |           |         |           |  |  |  |  |  |
|----------------------|--|----------------------|-----------|---------|-----------|--|--|--|--|--|
| 1                    | LEGAL NAME OF OWNER OF CABL  | SYSTEM ID#<br>007219 |           |         |           |  |  |  |  |  |
| •                    | Advanced Cable Communications, LLC   |                      |           |         |           |  |  |  |  |  |
|                      | SUM OF DSEs OF CATEGORY "O" STATIONS:  |                      |           |         |           |  |  |  |  |  |
|                      | <ul> <li>Add the DSEs of each station</li> </ul>   |                      |           |         |           |  |  |  |  |  |
|                      | Enter the sum here and in line   |                      | 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             |                      |           |         |           |  |  |  |  |  |
| Computation          | of space G (page 3).  In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom- |                      |           |         |           |  |  |  |  |  |
| of DSEs for          | mercial educational station, give the DSE as ".25."  |                      |           |         |           |  |  |  |  |  |
| Category "O"         | CATEGORY "O" STATIONS: DSEs  |                      |           |         |           |  |  |  |  |  |
| Stations             | CALL SIGN  | DSE                  | CALL SIGN | DSE     | CALL SIGN | DSE  |  |  |  |  |
|                      |  |                      |           |         |           |  |  |  |  |  |
|                      |  |                      |           |         |           |  |  |  |  |  |
|                      |  |                      |           |         |           |  |  |  |  |  |
|                      |  |                      |           |         |           |  |  |  |  |  |
|                      |  |                      |           |         |           | (  |  |  |  |  |
| Add rows as          |  |                      |           |         |           | {<br>  |  |  |  |  |
| necessary.           |  |                      |           |         |           |  |  |  |  |  |
| Remember to copy     |  |                      |           |         |           |  |  |  |  |  |
| all formula into new |  |                      |           |         |           |  |  |  |  |  |
| rows.                |  |                      |           |         |           |  |  |  |  |  |
|                      |  |                      |           |         |           |  |  |  |  |  |
|                      |  |                      |           |         |           |  |  |  |  |  |
|                      |  |                      |           |         |           | <br>   |  |  |  |  |
|                      |  |                      |           |         |           | <u></u>                                      |  |  |  |  |
|                      |  |                      |           |         |           | <u> </u>                                     |  |  |  |  |
|                      |  |                      |           |         |           |  |  |  |  |  |
|                      |  |                      |           |         |           |  |  |  |  |  |
|                      |  |                      |           |         |           |  |  |  |  |  |
|                      |  |                      |           |         |           |  |  |  |  |  |
|                      |  |                      |           |         |           |  |  |  |  |  |
|                      |  |                      |           |         |           |  |  |  |  |  |
|                      |  |                      |           |         |           |  |  |  |  |  |
|                      |  |                      |           |         |           | <u> </u>                                     |  |  |  |  |
|                      |  |                      |           |         |           | <u>                                     </u> |  |  |  |  |
|                      |  |                      |           |         |           | <u>                                     </u> |  |  |  |  |
|                      |  |                      |           |         |           | <u>                                     </u> |  |  |  |  |
|                      |  |                      |           |         |           | <u> </u>                                     |  |  |  |  |
|                      |  |                      |           |         |           | <u> </u><br>                                 |  |  |  |  |
|                      |  |                      |           |         |           |  |  |  |  |  |
|                      |  |                      |           |         |           | <u> </u>                                     |  |  |  |  |
|                      |  |                      |           |         |           | <br>   |  |  |  |  |
|                      |  |                      |           |         |           |  |  |  |  |  |
|                      |  |                      |           |         |           |  |  |  |  |  |
|                      |  |                      |           |         |           | <u> </u>                                     |  |  |  |  |
|                      |  |                      |           |         |           | <u> </u>                                     |  |  |  |  |
|                      |  |                      |           |         |           | <u> </u>                                     |  |  |  |  |
|                      |  |                      |           |         |           | <u> </u>                                     |  |  |  |  |
|                      |  |                      |           |         |           | <u> </u>                                     |  |  |  |  |
|                      |  |                      |           |         |           | <b></b>                                      |  |  |  |  |
|                      |  |                      |           |         |           | <b></b>                                      |  |  |  |  |
|                      |  | ]                    |           | <b></b> |           |  |  |  |  |  |

| Name  |  | WNER OF CABLE SYSTEM: ble Communication   | ns, LLC   |  |  |  |  | 3YSTEM ID#<br>007219 |  |  |
|---|--|---|---|--|--|--|--|----------------------|--|--|
| Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel | Column 2: figure should or Column 3: Column 4: be carried out a Column 5: give the type-va Column 6:           | the call sign of all dista<br>For each station, give the prespond with the information. For each station, give the Divide the figure in column that least to the third decir For each independent statue as ".25."  Multiply the figure in co | he number of hormation given in she total number of the total number of the figure of | urs your cable syste pace J. Calculate or of hours that the starre in column 3, and the "basis of carriag type-value" as "1.0." ure in column 5, and | m carried the stanly one DSE for tion broadcast or give the result in ge value" for the "For each netword give the result the point of the standard give the result give the standard give th | ation during the accounti<br>each station.<br>ver the air during the acc<br>decimals in column 4. T  | counting period. This figure must ucational station, |                      |  |  |
| Capacity  |  | С   | ATEGORY L   | AC STATIONS:   | COMPUTAT   | ION OF DSEs  |  |                      |  |  |
|   | 1. CALL<br>SIGN  | SIGN OF HOURS OF HOURS CARRIAGE VALUE CARRIED BY STATION VALUE SYSTEM ON AIR  |   |  |  |  |  |                      |  |  |
|   |  |   | ÷   |  | =  | x  | <u>-</u>   |                      |  |  |
|   |  |   | <del>-</del>  |  | =<br>=   | x<br>x   |  | ······               |  |  |
|   |  |   | ÷   |  | =  | x  | =  |                      |  |  |
|   |  |   | ÷   |  | =  | x  |  |                      |  |  |
|   |  |   |   |  | =<br>  | <u>x</u>   |  |                      |  |  |
|   |  |   | ÷<br>÷  |  | =<br>=   | x  | =  |                      |  |  |
|   | Add the DSEs of  | OF CATEGORY LAC S<br>f each station.<br>n here and in line 2 of pa  |   | dule,  |  | 0.00   | <u>)</u>   |                      |  |  |
| Computation of DSEs for Substitute-Basis Stations                                   | Was carried I tions in effect Broadcast on space I).     Column 2: F at your option. T Column 3: E Column 4: D | by your system in substat on October 19, 1976 (<br>te or more live, nonnetwood each station give the<br>his figure should correst<br>nter the number of days<br>ivide the figure in columnia.   | itution for a progras shown by the ork programs durinumber of live, respond with the institution to be the calendar in 2 by the figure  | ram that your system letter "P" in column ng that optional carr nonnetwork program formation in space I year: 365, except in in column 3, and gi     | n was permitted<br>7 of space I); an<br>riage (as shown b<br>as carried in subs<br>a leap year.<br>ve the result in c  | Programs) if that station: to delete under FCC rule id y the word "Yes" in column stitution for programs that column 4. Round to no lethe general instructions | a 2 of<br>at were deleted<br>as than the third       | rm).                 |  |  |
|   |  | SU  | BSTITUTE-B  | ASIS STATION   | S: COMPUTA   | ATION OF DSEs  |  |                      |  |  |
|   | 1. CALL<br>SIGN  | 2. NUMBER<br>OF<br>PROGRAMS   | 3. NUMBER<br>OF DAYS<br>IN YEAR   |  | 1. CALL<br>SIGN  | 2. NUMBER<br>OF<br>PROGRAMS  | 3. NUMBER<br>OF DAYS<br>IN YEAR                      | 4. DSE               |  |  |
|   |  | ÷   |   | =  |  |  | ÷  | =                    |  |  |
|   |  | ÷   |   | =  |  |  | ÷  |                      |  |  |
|   |  | +   |   | =  |  |  | ÷  |                      |  |  |
|   |  | ÷   |   | =  |  |  | ÷  | =                    |  |  |
|   |  | ÷   |   | =  |  |  | ÷  | =                    |  |  |
|   | Add the DSEs of  | OF SUBSTITUTE-BASI<br>f each station.<br>n here and in line 3 of pa   |   | dule,  | ▶  | 0.00   | <u>)</u>   |                      |  |  |
| <b>5</b> Total Number of DSEs   | number of DSEs  1. Number of 2. Number of  | R OF DSEs: Give the am applicable to your system DSEs from part 2 ● DSEs from part 3 ● DSEs from part 4 ●   |   | xes in parts 2, 3, and   | d 4 of this schedu   | le and add them to provid  | 0.00<br>0.00<br>0.00                                 |                      |  |  |
|   | TOTAL NUMBER   | R OF DSEs   |   |  |  |  | •  | 0.00                 |  |  |

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2018/1

| LEGAL NAME OF C  |  |  | С  |   |  |   | S'  | YSTEM ID#<br>007219 | Name   |
|--|--|--|--|---|--|---|---|---------------------|--|
| Instructions: Blod<br>In block A: • If your answer if<br>schedule. • If your answer if | "Yes," leave the re  | emainder of p  |  | 7 of the DSE sche   | edule blank aı   | nd complete pa  | art 8, (page 16) of                                 | the                 | 6  |
|  |  |  | BLOCK A: 1   | ELEVISION M   | ARKETS   |   |   |                     | Computation of                                   |
| <u></u>  |  | schedule—[   | ,  |   |  |   | ·   | gulations in        | 3.75 Fee   |
|  |  | BLOC   | CK B: CARR   | IAGE OF PERI  | MITTED DS  | SEs   |   |                     |  |
| Column 1:<br>CALL SIGN   | under FCC rules  | and regulation<br>ne DSE Sche  | ons prior to Jui<br>dule. (Note: Tl  | part 2, 3, and 4 o<br>ne 25, 1981. For fu<br>ne letter M below r<br>Act of 2010.)   | urther explana   | ation of permitt  | ed stations, see the                                | he                  |  |
| Column 2:<br>BASIS OF<br>PERMITTED<br>CARRIAGE   | (Note the FCC rt. A Stations carrivation of the Stations carrivation of the Station of the Stati | ules and regued pursuant to as defined all educations of station (76.) or DSE sched ant to individuationally carries JHF station w | lations cited be to the FCC madd in 76.5(kk) (7al station [76.565) (see paragulule).  Lual waiver of Fed on a part-ting grade-Botton in the station of the s | 76.59(d)(1), 76.61(9(c), 76.61(d), 76.<br>graph regarding su<br>CC rules (76.7)<br>ne or substitute ba<br>contour, [76.59(d)( | ose in effect of 76.57, 76.59(b) (e)(1), 76.63(a) (e)(3) referring the stitution of goods asis prior to June 20.50 (e) | n June 24, 198  ), 76.61(b)(c),  a) referring to 7  g to 76.61(d)  randfathered s | 76.63(a) referring<br>76.61(e)(1<br>stations in the |                     |  |
| Column 3:  |  | e stations ide   | ntified by the I   | n parts 2, 3, and 4<br>etter "F" in column  |  |   | vorksheet on page                                   | e 14 of             |  |
| 1. CALL<br>SIGN  | 2. PERMITTED<br>BASIS  | 3. DSE   | 1. CALL<br>SIGN  | 2. PERMITTED<br>BASIS   | 3. DSE   | 1. CALL<br>SIGN   | 2. PERMITTED<br>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  |  |   | •   | <del>-</del>        |  |
| Line 2: Enter the  | sum of permitte  | ed DSEs from   | m block B ab   | ove   |  |   | T   | -                   |  |
| Line 3: Subtract<br>(If zero, I  | line 2 from line 1<br>eave lines 4–7 b   |  |  | •   |  | rate.   | <u>,                                    </u>        | 0.00                |  |
| Line 4: Enter gro  | oss receipts from  | space K (p   | age 7)   |   |  |   | x 0.03  | 375                 | Do any of the<br>DSEs represent<br>partially     |
| Line 5: Multiply li  | ine 4 by 0.0375  | and enter su   | ım here  |   |  |   | x   |                     | permited/<br>partially<br>nonpermitted           |
| Line 6: Enter tota   | al number of DS  | Es from line   | 3  |   |  |   |   | <u>-</u>            | carriage?<br>If yes, see part<br>9 instructions. |
| Line 7: Multiply li  | ine 6 by line 5 ar   | nd enter her   | e and on line  | 2, block 3, spac  | e L (page 7)   |   |   | 0.00                |  |

|                 | OF OWNER OF CABLE  Cable Communic |          | _C              |                    |           |                 | S,                    | YSTEM ID#<br>007219 | Name                    |
|-----------------|-----------------------------------|----------|-----------------|--------------------|-----------|-----------------|-----------------------|---------------------|-------------------------|
|                 | ı                                 | BLOCK    | A: TELEVI       | SION MARKETS       | S (CONTIN | UED)            | ı                     | T                   | _                       |
| 1. CALL<br>SIGN | 2. PERMITTED<br>BASIS             | 3. DSE   | 1. CALL<br>SIGN | 2. PERMITTED BASIS | 3. DSE    | 1. CALL<br>SIGN | 2. PERMITTED<br>BASIS | 3. DSE              | 6                       |
|                 |                                   |          |                 |                    |           |                 |                       |                     | Computation of 3.75 Fee |
| ·····           |                                   |          |                 |                    |           |                 |                       |                     | 3.731 ee                |
| ••••            |                                   |          |                 |                    |           |                 |                       |                     |                         |
|                 |                                   |          |                 |                    |           |                 |                       |                     |                         |
| ····            |                                   |          |                 |                    |           |                 |                       |                     |                         |
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|                 |                                   |          |                 |                    |           |                 |                       | •••••               |                         |
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|                 |                                   | <u> </u> |                 |                    | <u> </u>  |                 |                       |                     |                         |
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|                 |                                   |          |                 |                    |           |                 |                       |                     |                         |
|                 |                                   |          |                 |                    |           |                 |                       |                     |                         |
|                 |                                   |          |                 |                    |           | <u> </u>        |                       |                     | -                       |

| Name  | Advanced Cabl  | dvanced Cable Communications, LLC 007219   |   |  |  |  |  |   |                               |                  |   |  |  |
|---|--|--|---|--|--|--|--|---|-------------------------------|------------------|---|--|--|
| Worksheet for<br>Computating<br>the DSE<br>Schedule for<br>Permitted<br>Part-Time and<br>Substitute<br>Carriage | stations carried pric Column 1: List the of Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the Fr A—Part-time sp 76.59( B—Late-night pr 76.61( S—Substitute ca genera Column 5: Indicate Column 6: Compare in block | or to June 25, call sign for eather DSE for the DSE for the accounting the basis of CC rules and cecialty program (d)(1),76.61(e), rogramming: (e)(3)). arriage under all instructions the station's Ee the DSE figure B, column 3 certain information you call infor | 1981, under former ach distant station nis station for a sing period and year arriage on which the regulations cited the mining: Carriage, (1), or 76.63 (refectoriage under FC certain FCC rules in the paper SA3 OSE for the current uses listed in columns of part 6 for this stou give in columns | er FCC rules govidentifed by the agle accounting in which the car he station was of the station was of the station was of the station as part-time be the station on a part-time be the station of the st | /er<br>let<br>per<br>ria<br>arritho<br>asi<br>(1)<br>s 7<br>aurio<br>lis | entifed by the letter "F" ning part-time and subter "F" in column 2 of price of particles and DSE occurred ge and DSE occurred ge and DSE occurred side by listing one of the see in effect on June 24 is, of specialty program (a).  16.59(d)(3), 76.61(e)(3) thorizations. For further das computed in parts at the smaller of the two see accurate and is subject to the subsection of the subsecti | estitute carricant 6 of the n January 1 (e.g., 1981), e following 4, 1981, and under explanation 2, 3, and 4 of figures he | age. DSE schedule, 1978 and Jun (1) letters  r FCC rules, se referring to on, see page (v of this schedule. This figure | ections  vi) of the should be | 981<br>De entere |   |  |  |
|   |  | PERMITT  | ED DSE FOR STA  | ATIONS CARRII  | ΕD   | ON A PART-TIME AN  | ND SUBSTI  | TUTE BASIS  |                               |                  | _ |  |  |
|   | 1. CALL  | 2. PRIC  |   | COUNTING   |  | 4. BASIS OF  |  | RESENT  | 6. P                          | PERMITTED        |   |  |  |
|   | SIGN   | DSE  | F   | PERIOD   |  | CARRIAGE   | ]  | OSE   |                               | DSE              |   |  |  |
|   |  |  |   |  |  |  |  |   |                               |                  |   |  |  |
|   |  |  |   |  |  |  |  |   |                               |                  |   |  |  |
|   |  |  |   |  |  |  | <b></b>  |   |                               |                  |   |  |  |
|   |  |  |   |  | ••••   |  |  |   |                               |                  |   |  |  |
|   |  |  |   |  |  |  |  |   |                               |                  |   |  |  |
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|   |  |  |   |  |  |  |  |   |                               |                  |   |  |  |
|   |  |  |   |  |  |  |  |   |                               |                  |   |  |  |
|   |  |  |   |  |  |  |  |   |                               |                  | _ |  |  |
| 7   | Instructions: Block A  | 1 must be com  | npleted.  |  |  |  |  |   |                               |                  |   |  |  |
| Computation   | In block A:  | "Yes " comple  | ete blocks B and C  | : helow  |  |  |  |   |                               |                  |   |  |  |
| of the  | ,  |  |   |  | pa   | art 8 of the DSE sched   | ule.   |   |                               |                  |   |  |  |
| Syndicated  |  |  | BLOC  | K A: MAJOR   | TI   | ELEVISION MARK   | ET   |   |                               |                  |   |  |  |
| Exclusivity   |  |  |   |  |  |  |  |   |                               |                  |   |  |  |
| Surcharge   | Is any portion of the or   | cable system w   | vithin a top 100 ma   | or television mar  | ke   | t as defned by section 7   | 6.5 of FCC   | rules in effect J   | une 24,                       | 1981?            |   |  |  |
|   | X Yes—Complete   | blocks B and   | IC.   |  |  | No—Proceed to  | part 8   |   |                               |                  |   |  |  |
|   | BLOCK B: Ca  | arriage of VHI   | -/Grade B Contou  | r Stations   |  | BLOCK  | C: Compu   | itation of Exem   | pt DSE                        | s                |   |  |  |
|   | Is any station listed in   | ı block B of pa  | art 6 the primary st  | ream of a  | 1  | Was any station listed   | I in block B   | of part 7 carrie  | d in any                      | commu-           |   |  |  |
|   | commercial VHF stati or in part, over the ca   | -  | s a grade B conto   | ır, in whole   |  | nity served by the cab<br>to former FCC rule 76  |  | orior to March 3  | 31, 1972                      | :? (refe         |   |  |  |
|   | l'   | •  | th its appropriate pe   | rmitted DSE  |  | Yes—List each st   | ,  | with its appropri   | ate permi                     | itted DSE        |   |  |  |
|   | X No—Enter zero a  | and proceed to   | part 8.   |  |  | X No—Enter zero a  | nd proceed t   | o part 8.   |                               |                  |   |  |  |
|   | CALL SIGN  | DSE  | CALL SIGN   | DSE  |  | CALL SIGN  | DSE  | CALL SIG  | SN                            | DSE              |   |  |  |
|   |  |  |   |  |  |  |  |   |                               |                  | l |  |  |
|   |  |  |   |  |  |  |  |   |                               |                  | l |  |  |
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|   |  | ļ  |   | <u></u>  |  |  |  |   |                               | }                | l |  |  |
|   |  |  |   |  |  |  |  |   |                               | <br>             | l |  |  |
|   |  |  |   |  |  |  |  |   |                               |                  |   |  |  |
|   |  | 1  | TOTAL DSEs  | 0.00   |  |  | <u> </u>   | TOTAL DS  | Es                            | 0.00             | l |  |  |
|   | 1  |  |   |  | - 1  |  |  |   |                               |                  |   |  |  |

| LEGAL NA      | ME OF OWNER OF CABLE SYSTEM:  Advanced Cable Communications, LLC  | SYSTEM ID#<br>007219 | Name                      |
|---------------|---|----------------------|---------------------------|
|               | BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE  |                      |                           |
| Section<br>1  | Enter the amount of gross receipts from space K (page 7)  | 845,136.00           | 7                         |
| Section<br>2  | A. Enter the total DSEs from block B of part 7  | 0.00                 | Computation of the        |
|               | B. Enter the total number of exempt DSEs from block C of part 7   | 0.00                 | Syndicated<br>Exclusivity |
|               | C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.   | 0.00                 | Surcharge                 |
| • Is an       | y portion of the cable system within a top 50 television market as defined by the FCC?  Yes—Complete section 3 below.  X No—Complete section 4 below.   |                      |                           |
|               | SECTION 3: TOP 50 TELEVISION MARKET   |                      |                           |
| Section<br>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 DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.  | SE                   |                           |
|               | A. Enter 0.00599 of gross receipts (the amount in section1)   |                      |                           |
|               | B. Enter 0.00377 of gross receipts (the amount in section 1)  |                      |                           |
|               | C. Subtract 1.000 from total permitted DSEs (the figure on  |                      |                           |
|               | line C in section 2) and enter here   | _                    |                           |
|               | D. Multiply line B by line C and enter here   |                      |                           |
|               | E. Add lines A and D. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge  |                      |                           |
| Section<br>3b | If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.  |                      |                           |
|               | A. Enter 0.00599 of gross receipts (the amount in section 1)  |                      |                           |
|               | B. Enter 0.00377 of gross receipts (the amount in section 1)  |                      |                           |
|               | C. Multiply line B by 3.000 and enter here  |                      |                           |
|               | D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$   |                      |                           |
|               | E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here   |                      |                           |
|               | F. Multiply line D by line E and enter here   |                      |                           |
|               | G. Add lines A, C, and F. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge  |                      |                           |
|               | CECTION ALCECOND TO TELEVICION MADVET   |                      |                           |
|               | SECTION 4: SECOND 50 TELEVISION MARKET  |                      |                           |
| Section<br>4a | Did your cable system retransmit the signals of any partially distant television stations during the accounting period?  X Yes—Complete part 9 of this schedule.  No—Complete the applicable section below.   |                      |                           |
|               | If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.  A. Enter 0.00300 of gross receipts (the amount in section 1) | SE                   |                           |
|               | B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$   |                      |                           |
|               | C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here  |                      |                           |
|               | D. Multiply line B by line C and enter here   |                      |                           |
|               | E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge   |                      |                           |

| Name                      |   | ME OF OWNER OF CABLE SYSTEM:   | SYSTEM ID# |  |  |  |  |  |  |  |
|---------------------------|---|--|------------|--|--|--|--|--|--|--|
|                           | 4   | Advanced Cable Communications, LLC   | 007219     |  |  |  |  |  |  |  |
| 7                         | Section<br>4b                                   | If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.   |            |  |  |  |  |  |  |  |
| Computation of the        |   | A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$  |            |  |  |  |  |  |  |  |
| Syndicated<br>Exclusivity |   | B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$  |            |  |  |  |  |  |  |  |
| Surcharge                 |   | 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.  | <u></u> .  |  |  |  |  |  |  |  |
|                           | <u> </u>  |  |            |  |  |  |  |  |  |  |
| 0                         |   | ctions:<br>ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of p   | art        |  |  |  |  |  |  |  |
| 8                         |   | checked "Yes," use the total number of DSEs from part 5.   |            |  |  |  |  |  |  |  |
| Computation               |   | ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.<br>Ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.  |            |  |  |  |  |  |  |  |
| of                        | ,   | ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B be  | low        |  |  |  |  |  |  |  |
| Base Rate Fee             | blank   |  |            |  |  |  |  |  |  |  |
|                           |   | is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers<br>ocated within that station's local service area and others were located outside that area. For the definition of a station's "loc | al         |  |  |  |  |  |  |  |
|                           |   | e area," see page (v) of the general instructions.   | di         |  |  |  |  |  |  |  |
|                           |   |  |            |  |  |  |  |  |  |  |
|                           | BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS |  |            |  |  |  |  |  |  |  |
|                           | • Did y   | our cable system retransmit the signals of any partially distant television stations during the accounting period?   |            |  |  |  |  |  |  |  |
|                           |   | X Yes—Complete part 9 of this schedule. No—Complete the following sections.  |            |  |  |  |  |  |  |  |
|                           |   | BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE  |            |  |  |  |  |  |  |  |
|                           | Section<br>1                                    | Enter the amount of gross receipts from space K (page 7) ▶ _\$   |            |  |  |  |  |  |  |  |
|                           | Section   | Enter the total number of permitted DSEs from block B, part 6 of this schedule.  |            |  |  |  |  |  |  |  |
|                           | 2   | (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)  |            |  |  |  |  |  |  |  |
|                           | Section   | add the total number of Belle nem part of p  |            |  |  |  |  |  |  |  |
|                           | 3   | If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.                                 |            |  |  |  |  |  |  |  |
|                           |   | A. Enter 0.01064 of gross receipts  (the amount in section 1) ▶ \$   |            |  |  |  |  |  |  |  |
|                           |   | B. Enter 0.00701 of gross receipts   |            |  |  |  |  |  |  |  |
|                           |   | (the amount in section 1)  |            |  |  |  |  |  |  |  |
|                           |   | C. Subtract 1.000 from total DSEs  (the figure in section 2) and enter here  |            |  |  |  |  |  |  |  |
|                           |   | D. Multiply line B by line C and enter here.   |            |  |  |  |  |  |  |  |
|                           |   | E. Add lines A, and D. This is your base rate fee. Enter here  |            |  |  |  |  |  |  |  |
|                           |   | and in block 3, line 1, space L (page 7)   | 0.00       |  |  |  |  |  |  |  |
|                           |   | Base Rate Fee  | 0.00       |  |  |  |  |  |  |  |

| LEGAL N         | AME OF OWNER OF CABLE SYSTEM:  | SYSTEM ID#       | Nama                        |
|-----------------|--|------------------|-----------------------------|
| Adva            | nced Cable Communications, LLC   | 007219           | Name                        |
| Section         | If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.  |                  |                             |
| 4               |  |                  | 8                           |
|                 | A. Enter 0.01064 of gross receipts  (the amount in section 1)  ▶\$   |                  | •                           |
|                 |  | _                |                             |
|                 | B. Enter 0.00701 of gross receipts (the amount in section 1)   |                  | Computation of              |
|                 |  |                  | Base Rate Fee               |
|                 |  | _                |                             |
|                 | D. Enter 0.00330 of gross receipts  (the amount in section 1)  **State of the image |                  |                             |
|                 |  |                  |                             |
|                 | 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 <b>\$</b>  |                  |                             |
|                 | 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             |                             |
| IMPOR           | TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca  | et cianale chall |                             |
| instead         | be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel  |                  | 9                           |
| Space<br>In Gen | ப்.<br>Bral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee  | to exclude       |                             |
| receipt         | s from subscribers located within the station's local service area, from your system's total gross receipts. To take ac  |                  | Computation of              |
|                 | on, you must:  |                  | Base Rate Fee<br>and        |
|                 | Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to<br>or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine  |                  | Syndicated                  |
| DSEs a          | and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for   |                  | Exclusivity<br>Surcharge    |
|                 | : Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.  If any portion of your cable system is located within the top 100 television market and the station is not exempt in p   | art 7 vou must   | for<br>Partially            |
| also co         | mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B be   |                  | Distant                     |
|                 | cable system is wholly located outside all major television markets, complete block A only.  |                  | Stations, and for Partially |
|                 | Identify a Subscriber Group for Partially Distant Stations  For each community served, determine the local service area of each wholly distant and each partially distant stat   | ion vou          | Permitted                   |
| carried         | to that community.   |                  | Stations                    |
| outside         | For each wholly distant and each partially distant station you carried, determine which of your subscribers were located station's local service area. A subscriber located outside the local service area of a station is distant to that state token, the station is distant to the subscriber.)   |                  |                             |
|                 | Divide your subscribers into subscriber groups according to the complement of stations to which they are distant.  |                  |                             |
|                 | ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the<br>will have only one subscriber group when the distant stations it carried have local service areas that coincide.  | it a cable       |                             |
| Compu<br>groups | iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your syst   | em's subscriber  |                             |
| -               | section:   |                  |                             |
|                 | y the communities/areas represented by each subscriber group.  |                  |                             |
|                 | he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all bers in the group.   | of the           |                             |
| • If:           |  |                  |                             |
|                 | system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it ir f this schedule; or,  | 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 it in b 6 of this schedule.  | ock B,           |                             |
| • Add tl        | ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.   |                  |                             |
|                 | late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general ir paper SA3 form.   | structions       |                             |
| page.<br>DSEs f | ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the p<br>n making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the<br>or that group's complement of stations and total gross receipts from the subscribers in that group). You do not nee<br>calculations on the form.  | at is, the total |                             |

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007219 **Advanced Cable Communications, LLC** Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

| LEGAL NAME OF OWNE  Advanced Cable C           |          |                                   |             |                       |            | S  | YSTEM ID#<br>007219 | Name             |
|--|----------|-----------------------------------|-------------|-----------------------|------------|--|---------------------|------------------|
| В  | FIRST    | COMPUTATION OF<br>SUBSCRIBER GROU |             | TE FEES FOR EAC       |            | IBER GROUP<br>SUBSCRIBER GRO                 | UP                  | 0                |
| COMMUNITY/ AREA                                | Coral S  | prings                            |             | COMMUNITY/ ARE        | Α          |  | 0                   | 9<br>Computation |
| CALL SIGN                                      | DSE      | CALL SIGN                         | DSE         | CALL SIGN             | DSE        | CALL SIGN                                    | DSE                 | of               |
|  |          |                                   |             | -                     |            |  |                     | Base Rate Fe     |
|  |          |                                   | <b>-</b>    |                       |            | <u> </u>                                     |                     | Syndicated       |
|  |          |                                   |             |                       |            |  |                     | Exclusivity      |
|  |          |                                   | <b>_</b>    |                       |            |  |                     | Surcharge        |
|  |          |                                   | <b></b>     |                       | ·····      |  |                     | for<br>Partially |
|  |          |                                   |             |                       |            |  |                     | Distant          |
|  |          |                                   | <b>_</b>    |                       |            |  |                     | Stations         |
|  |          |                                   | <b>1</b>    | ·                     |            | -  |                     |                  |
|  |          | -                                 | <u> </u>    |                       |            |  |                     |                  |
|  |          |                                   |             |                       |            |  |                     |                  |
|  |          |                                   | <b></b>     |                       |            |  |                     |                  |
| Total DSEs                                     | -        |                                   | 0.00        | Total DSEs            |            | ļ.ļ  | 0.00                |                  |
| Gross Receipts First G                         | roun     | s 845                             | ,136.00     | Gross Receipts Sec    | ond Group  | \$   | 0.00                |                  |
|  | Toup     | <u> </u>                          |             | l cross resorpts ess  | ona Group  |  |                     |                  |
| Base Rate Fee First G                          | roup     | \$                                | 0.00        | Base Rate Fee Sec     | ond Group  | \$   | 0.00                |                  |
|  | THIRD    | SUBSCRIBER GROU                   |             |                       |            | SUBSCRIBER GRO                               | UP<br>-             |                  |
| COMMUNITY/ AREA                                |          |                                   | 0           | COMMUNITY/ ARE        | Α          |  | 0                   |                  |
| CALL SIGN                                      | DSE      | CALL SIGN                         | DSE         | CALL SIGN             | DSE        | CALL SIGN                                    | DSE                 |                  |
|  |          |                                   | <b>_</b>    |                       |            |  |                     |                  |
|  |          |                                   | <b></b>     |                       |            | <u> </u>                                     |                     |                  |
|  |          |                                   | <b>†</b>    |                       |            |  |                     |                  |
|  |          |                                   |             |                       |            |  |                     |                  |
|  |          | -                                 | <b></b>     |                       |            |  |                     |                  |
|  |          |                                   | <b></b>     |                       |            | <u>-                                    </u> |                     |                  |
|  |          |                                   |             |                       |            |  |                     |                  |
|  |          |                                   | <b>_</b>    |                       |            |  |                     |                  |
|  |          |                                   | <b></b>     |                       | ·····      |  |                     |                  |
|  |          | -                                 | <u> </u>    |                       |            |  |                     |                  |
|  | <u>.</u> |                                   | <b>_</b>    |                       |            |  |                     |                  |
| Total DSEs                                     |          |                                   | 0.00        | Total DSEs            |            |  | 0.00                |                  |
| Gross Receipts Third G                         | Group    | \$                                | 0.00        | Gross Receipts Fou    | ırth Group | \$   | 0.00                |                  |
|  | F        | ·                                 |             |                       | <b></b>    | <u>·</u>                                     |                     |                  |
| Base Rate Fee Third G                          | Group    | \$                                | 0.00        | Base Rate Fee Fou     | rth Group  | \$   | 0.00                |                  |
|  |          |                                   |             |                       |            |  |                     |                  |
| Base Rate Fee: Add the Enter here and in block |          |                                   | riber group | as shown in the boxes | s above.   | \$   | 0.00                |                  |

| LEGAL NAME OF OWN Advanced Cable                               |                     |                       |             |                    |           | S               | YSTEM ID#<br>007219 | Name                      |
|--|---------------------|-----------------------|-------------|--------------------|-----------|-----------------|---------------------|---------------------------|
| E  |                     |                       |             | TE FEES FOR EAC    | CH SUBSCF | RIBER GROUP     |                     |                           |
|  |                     | 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                        |
|  |                     |                       |             |                    |           |                 |                     | Base Rate Fe              |
|  |                     |                       |             |                    |           |                 |                     | and                       |
|  |                     |                       | <del></del> | ·                  |           |                 |                     | Syndicated<br>Exclusivity |
|  |                     |                       |             |                    |           |                 |                     | Surcharge                 |
|  |                     | -                     |             |                    |           |                 |                     | for                       |
|  |                     |                       |             |                    |           |                 |                     | Partially                 |
|  |                     |                       | <u></u>     |                    |           |                 |                     | Distant                   |
|  |                     |                       | <del></del> |                    |           |                 |                     | Stations                  |
|  |                     |                       | ···         | 1                  |           |                 |                     |                           |
|  |                     |                       |             |                    |           |                 |                     |                           |
|  |                     |                       |             |                    |           |                 |                     |                           |
|  |                     |                       |             |                    |           |                 |                     |                           |
|  |                     |                       |             |                    |           |                 |                     |                           |
| 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 (  | Group               | \$                    | 0.00        | Base Rate Fee Sec  | ond Group | \$              | 0.00                |                           |
|  | SEVENTH             | SUBSCRIBER GRO        | UP          |                    | EIGHTH    | SUBSCRIBER GROU | JP                  |                           |
| COMMUNITY/ AREA  |                     |                       | 0           | COMMUNITY/ ARE     | Α         |                 | 0                   |                           |
| CALL SIGN  | DSE                 | CALL SIGN             | DSE         | CALL SIGN          | DSE       | CALL SIGN       | DSE                 |                           |
|  |                     |                       | <u></u>     |                    |           |                 |                     |                           |
|  | <del></del>         |                       | <u></u>     | ·                  |           |                 |                     |                           |
|  |                     |                       |             |                    |           |                 |                     |                           |
|  |                     |                       |             |                    |           |                 |                     |                           |
|  |                     |                       |             |                    |           |                 |                     |                           |
|  | <u></u>             |                       | <u></u>     |                    |           |                 |                     |                           |
|  |                     |                       | ···         | 1                  |           |                 |                     |                           |
|  | ••••                | -                     |             |                    |           |                 |                     |                           |
|  |                     |                       |             |                    |           |                 |                     |                           |
|  | <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 Third  Base Rate Fee: Add Enter here and in bloc | the <b>base rat</b> | re fees for each subs |             |                    |           | \$              | 0.00                |                           |

|                        |      |                |              |                      |          | ications, LLC  | ER OF CABL    | Advanced Cable C   |
|------------------------|------|----------------|--------------|----------------------|----------|----------------|---------------|--|
|                        |      | IBER GROUP     | I SUBSCR     | TE FEES FOR EACH     | BASE RA  | COMPUTATION O  | LOCK A: (     | Bl   |
| <u> </u>               |      | SUBSCRIBER GRO |              |                      |          | SUBSCRIBER GRO | NINTH         |  |
| 0 Computation          | 0    |                |              | COMMUNITY/ AREA      | 0        |                |               | COMMUNITY/ AREA  |
|                        | DSE  | CALL SIGN      | DSE          | CALL SIGN            | DSE      | CALL SIGN      | DSE           | CALL SIGN  |
| Base Rate F            |      |                |              |                      |          |                |               |  |
| and                    |      |                | <u></u>      |                      | <u>.</u> |                | <mark></mark> |  |
| Syndicated Exclusivity |      |                | <u> </u>     |                      | <b>.</b> |                | <mark></mark> |  |
| Surcharge              |      |                | <del>-</del> |                      | <u>-</u> |                |               |  |
| for                    |      |                |              |                      |          | -              |               |  |
| Partially              |      |                | <u></u>      |                      | <u> </u> |                | <u></u>       |  |
| Distant Stations       |      |                | <u></u>      |                      | <u>.</u> |                | <del></del>   |  |
|                        |      | H              | <del> </del> |                      | ·        |                | <u>-</u>      |  |
|                        |      |                |              |                      |          | -              |               |  |
|                        |      |                |              |                      |          | -              |               |  |
|                        |      |                | <u></u>      |                      | <u>.</u> |                | <mark></mark> |  |
|                        |      |                | <u>-</u>     |                      | <b>.</b> |                | <u></u>       |  |
| 00                     | 0.00 |                | •            | Total DSEs           | 0.00     | •              | •             | Total DSEs   |
| 00                     | 0.00 | \$             | nd Group     | Gross Receipts Secon | 0.00     | \$             | iroun         | Gross Receipts First G                                   |
| <del></del>            |      |                | іа Огоар     | Cross rescipts essen |          |                | лоар          | Cross resourts rilet C                                   |
| 00                     | 0.00 | \$             | nd Group     | Base Rate Fee Secon  | 0.00     | \$             | roup          | Base Rate Fee First G                                    |
|                        | OUP  | SUBSCRIBER GRO | TWELVTH      |                      |          | SUBSCRIBER GRO | LEVENTH       |  |
| 0                      | 0    |                |              |                      | 0        |                |               | COMMUNITY/ AREA  |
|                        |      |                |              | COMMUNITY/ AREA      |          |                |               |  |
| SE                     | DSE  | CALL SIGN      | DSE          | CALL SIGN            | DSE      | CALL SIGN      | DSE           | CALL SIGN  |
| SE                     | DSE  | CALL SIGN      | DSE          |                      |          | CALL SIGN      | DSE           | CALL SIGN  |
| SE                     | DSE  | CALL SIGN      | DSE          |                      |          | CALL SIGN      | DSE           | CALL SIGN  |
| SE                     | DSE  | CALL SIGN      | DSE          |                      |          | CALL SIGN      | DSE           | CALL SIGN  |
| SE                     | DSE  | CALL SIGN      | DSE          |                      |          | CALL SIGN      | DSE           | CALL SIGN  |
| SE                     | DSE  | CALL SIGN      | DSE          |                      |          | CALL SIGN      | DSE           | CALL SIGN  |
| SE                     | DSE  | CALL SIGN      | DSE          |                      |          | CALL SIGN      | DSE           | CALL SIGN  |
| SE                     | DSE  | CALL SIGN      | DSE          |                      |          | CALL SIGN      | DSE           | CALL SIGN  |
| SE                     | DSE  | CALL SIGN      | DSE          |                      |          | CALL SIGN      | DSE           | CALL SIGN  |
| SE                     | DSE  | CALL SIGN      | DSE          |                      |          | CALL SIGN      | DSE           | CALL SIGN  |
| SE                     | DSE  | CALL SIGN      | DSE          |                      |          | CALL SIGN      | DSE           | CALL SIGN  |
| SE                     | DSE  | CALL SIGN      | DSE          |                      |          | CALL SIGN      | DSE           | CALL SIGN  |
| SE                     | DSE  | CALL SIGN      | DSE          |                      |          | CALL SIGN      | DSE           | CALL SIGN  |
|                        | DSE  | CALL SIGN      | DSE          |                      |          | CALL SIGN      | DSE           |  |
| 00                     |      | CALL SIGN      |              | CALL SIGN            | DSE      | CALL SIGN      |               | Total DSEs   |
| 00                     | 0.00 |                |              | Total DSEs           | DSE      |                |               | CALL SIGN  CALL SIGN  Total DSEs  Gross Receipts Third G |

| CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Ba   | <b>9</b><br>Computatio<br>of<br>ase Rate Fe |
|--|---|
| COMMUNITY/ AREA  O COMMUNITY/ AREA  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  Ba  S  S  S  S  S  S  S  S  S  S  S  S  S  | Computation<br>of<br>ase Rate Fe            |
| CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  Ba  SIGN DSE CALL SIGN DSE CA | Computation<br>of<br>ase Rate Fe            |
| CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Ba   | of<br>ase Rate Fe                           |
|  |   |
|  | and   |
|  | Cundinatas                                  |
|  | Syndicated<br>Exclusivity                   |
|  | Surcharge                                   |
|  | for   |
|  | Partially                                   |
|  | Distant                                     |
|  | Stations                                    |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
| Total DSEs Total DSEs  |   |
| Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00   |   |
| Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00   |   |
| FIFTEENTH SUBSCRIBER GROUP SIXTEENTH SUBSCRIBER GROUP  |   |
| COMMUNITY/ AREA 0 COMMUNITY/ AREA 0  |   |
| CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
| Total DSEs 0.00 Total DSEs 0.00  |   |
| Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00   |   |
|  |   |
| Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00   |   |

| LEGAL NAME OF OWN Advanced Cable |             |                |              |                      |           | S                 | YSTEM ID#<br>007219 | Name                     |
|----------------------------------|-------------|----------------|--------------|----------------------|-----------|-------------------|---------------------|--------------------------|
| Е                                | SLOCK A: (  | COMPUTATION O  | F BASE RA    | TE FEES FOR EAC      | CH SUBSCF | RIBER GROUP       |                     |                          |
|                                  | NTEENTH     | SUBSCRIBER GRO |              | 1                    |           | SUBSCRIBER GROU   |                     | 9                        |
| COMMUNITY/ AREA                  |             |                | 0            | COMMUNITY/ ARE       | Α         |                   | 0                   | Computation              |
| CALL SIGN                        | DSE         | CALL SIGN      | DSE          | CALL SIGN            | DSE       | CALL SIGN         | DSE                 | of                       |
|                                  |             |                |              |                      |           |                   |                     | Base Rate Fe             |
|                                  |             |                |              |                      |           |                   |                     | and                      |
|                                  |             |                |              |                      |           |                   |                     | Syndicated               |
|                                  | <del></del> |                |              | ·                    |           |                   |                     | Exclusivity<br>Surcharge |
|                                  |             |                |              |                      |           |                   |                     | for                      |
|                                  |             |                |              |                      |           |                   |                     | Partially                |
|                                  |             |                |              |                      |           |                   |                     | Distant                  |
|                                  |             |                |              |                      |           |                   |                     | Stations                 |
|                                  | ···         |                | ···          | ·                    |           |                   |                     |                          |
|                                  |             | -              |              |                      |           |                   |                     |                          |
|                                  |             |                |              |                      |           |                   |                     |                          |
|                                  |             |                |              |                      |           |                   |                     |                          |
|                                  |             |                |              |                      |           |                   |                     |                          |
| 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 (            | Group       | \$             | 0.00         | Base Rate Fee Sec    | ond Group | \$                | 0.00                |                          |
| N                                | NTEENTH     | SUBSCRIBER GRO | UP           |                      | TWENTIETH | I SUBSCRIBER GROU | JP                  |                          |
| COMMUNITY/ AREA                  |             |                | 0            | COMMUNITY/ ARE       | Α         |                   | 0                   |                          |
| CALL SIGN                        | DSE         | CALL SIGN      | DSE          | CALL SIGN            | DSE       | CALL SIGN         | DSE                 |                          |
|                                  |             |                |              |                      |           |                   |                     |                          |
|                                  | <del></del> |                | ···          |                      |           |                   |                     |                          |
|                                  |             |                |              |                      |           |                   |                     |                          |
|                                  |             |                |              |                      |           |                   |                     |                          |
|                                  |             |                |              |                      |           |                   |                     |                          |
|                                  | <u></u>     |                |              |                      |           |                   |                     |                          |
|                                  | ···         |                | <u></u>      |                      |           |                   |                     |                          |
|                                  |             |                |              |                      |           |                   |                     |                          |
|                                  |             |                |              |                      |           |                   |                     |                          |
|                                  |             |                |              |                      |           |                   |                     |                          |
|                                  | ···         |                |              |                      |           |                   |                     |                          |
|                                  | <del></del> |                | <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             |             |                | criber group | as shown in the boxe | es above. | \$                |                     |                          |

| Advanced Cable                              |         |                                   |             |                       |             | S                             | YSTEM ID#<br>007219 | Name                     |
|---|---------|-----------------------------------|-------------|-----------------------|-------------|-------------------------------|---------------------|--------------------------|
|   |         | COMPUTATION OF<br>SUBSCRIBER GROU |             | ATE FEES FOR EACH     |             | RIBER GROUP<br>SUBSCRIBER GRO | UP                  | •                        |
| COMMUNITY/ AREA                             | A       |                                   | 0           | COMMUNITY/ AREA       |             |                               | 0                   | 9<br>Computation         |
| CALL SIGN                                   | DSE     | CALL SIGN                         | DSE         | CALL SIGN             | DSE         | CALL SIGN                     | DSE                 | of                       |
|   |         |                                   |             |                       |             |                               |                     | Base Rate Fee and        |
|   |         |                                   |             |                       |             |                               |                     | Syndicated               |
|   |         |                                   |             |                       |             |                               |                     | Exclusivity<br>Surcharge |
|   |         |                                   |             |                       |             |                               |                     | for                      |
|   |         |                                   |             |                       | <del></del> |                               |                     | Partially<br>Distant     |
|   |         |                                   |             |                       |             |                               |                     | Stations                 |
|   |         |                                   |             |                       | <del></del> |                               |                     |                          |
|   |         |                                   |             |                       |             |                               |                     |                          |
|   |         |                                   |             |                       |             |                               |                     |                          |
|   |         |                                   |             |                       |             |                               |                     |                          |
| Total DSEs                                  |         |                                   | 0.00        | Total DSEs            |             |                               | 0.00                |                          |
| Gross Receipts First                        | Group   | \$                                | 0.00        | Gross Receipts Secon  | nd Group    | \$                            | 0.00                |                          |
| Base Rate Fee First                         | Group   | \$                                | 0.00        | Base Rate Fee Secon   | nd Group    | \$                            | 0.00                |                          |
|   |         | SUBSCRIBER GROU                   |             | ii —                  |             | I SUBSCRIBER GRO              |                     |                          |
| COMMUNITY/ AREA                             |         |                                   | 0           | COMMUNITY/ AREA       |             |                               | 0                   |                          |
| CALL SIGN                                   | DSE     | CALL SIGN                         | DSE         | CALL SIGN             | DSE         | CALL SIGN                     | DSE                 |                          |
|   |         |                                   |             |                       |             |                               |                     |                          |
|   |         |                                   |             |                       |             |                               |                     |                          |
|   |         |                                   |             |                       |             |                               |                     |                          |
|   |         |                                   |             |                       |             |                               |                     |                          |
|   |         |                                   |             |                       |             |                               |                     |                          |
|   | ····    |                                   |             |                       |             |                               |                     |                          |
|   |         |                                   |             |                       |             |                               |                     |                          |
|   |         |                                   |             |                       |             |                               |                     |                          |
|   |         |                                   |             |                       |             |                               |                     |                          |
|   |         |                                   |             |                       |             |                               |                     |                          |
| Total DSEs                                  |         |                                   | 0.00        | Total DSEs            |             |                               | 0.00                |                          |
| Gross Receipts Third                        | ı Group | \$                                | 0.00        | Gross Receipts Fourt  | п Group     | \$                            | 0.00                |                          |
| Base Rate Fee Third                         | l Group | \$                                | 0.00        | Base Rate Fee Fourt   | h Group     | \$                            | 0.00                |                          |
| Base Rate Fee: Add<br>Enter here and in blo |         |                                   | riber group | as shown in the boxes | above.      | \$                            |                     |                          |

| LEGAL NAME OF OWN Advanced Cable                               |              |                       |             |                    |            | S                 | YSTEM ID#<br>007219 | Name                     |
|--|--------------|-----------------------|-------------|--------------------|------------|-------------------|---------------------|--------------------------|
| E  | BLOCK A: (   | COMPUTATION O         | F BASE RA   | TE FEES FOR EAC    | CH SUBSCF  | RIBER GROUP       |                     |                          |
|  |              | SUBSCRIBER GRO        |             | 1                  |            | I SUBSCRIBER GROU |                     | 9                        |
| COMMUNITY/ AREA  |              |                       | 0           | COMMUNITY/ ARE     | Α          |                   | 0                   | Computation              |
| CALL SIGN  | DSE          | CALL SIGN             | DSE         | CALL SIGN          | DSE        | CALL SIGN         | DSE                 | of                       |
|  |              |                       |             |                    |            |                   |                     | Base Rate Fe             |
|  |              |                       |             |                    |            |                   |                     | and                      |
|  |              |                       |             |                    |            |                   |                     | Syndicated               |
|  | ····         |                       | <u></u>     |                    |            |                   | <u></u>             | Exclusivity<br>Surcharge |
|  |              |                       | <del></del> | 1                  |            |                   |                     | for                      |
|  |              |                       |             |                    |            |                   |                     | Partially                |
|  |              |                       |             |                    |            |                   |                     | Distant                  |
|  |              | -                     |             |                    |            |                   |                     | Stations                 |
|  |              | <u> </u>              | <u></u>     |                    |            |                   |                     |                          |
|  |              | ļ                     | <del></del> |                    |            |                   |                     |                          |
|  |              |                       | <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 (  | Group        | \$                    | 0.00        | Base Rate Fee Sec  | ond Group  | \$                | 0.00                |                          |
| TWENTY   | -SEVENTH     | SUBSCRIBER GRO        | UP          | TWE                | NTY-EIGHTH | I SUBSCRIBER GRO  | UP                  |                          |
| COMMUNITY/ AREA  |              |                       | 0           | COMMUNITY/ ARE     | Α          |                   | 0                   |                          |
| CALL SIGN  | DSE          | CALL SIGN             | DSE         | CALL SIGN          | DSE        | CALL SIGN         | DSE                 |                          |
|  |              |                       | <u></u>     |                    |            |                   |                     |                          |
|  | ····         |                       | <del></del> |                    | ·····      |                   | <del></del>         |                          |
|  |              |                       | <u></u>     |                    |            |                   |                     |                          |
|  |              |                       |             |                    |            |                   |                     |                          |
|  |              | ļ                     |             |                    |            |                   |                     |                          |
|  |              |                       | <u></u>     |                    |            |                   |                     |                          |
|  |              |                       |             |                    |            |                   |                     |                          |
|  |              |                       |             |                    |            |                   |                     |                          |
|  |              |                       |             |                    |            |                   |                     |                          |
|  |              |                       |             |                    |            |                   |                     |                          |
|  |              |                       | <u></u>     |                    |            |                   |                     |                          |
|  |              |                       | <del></del> |                    |            |                   |                     |                          |
| 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 Third  Base Rate Fee: Add Enter here and in bloc | the base rat | te fees for each subs |             |                    |            | \$                | 0.00                |                          |

| LEGAL NAME OF OWN Advanced Cable            |       |                |               |                      |           | S              | YSTEM ID#<br>007219 | Name                      |
|---|-------|----------------|---------------|----------------------|-----------|----------------|---------------------|---------------------------|
|   |       |                |               | TE FEES FOR EAC      |           |                |                     |                           |
|   |       | SUBSCRIBER GRO |               |                      |           | SUBSCRIBER GRO |                     | 9                         |
| COMMUNITY/ AREA                             |       |                | 0             | COMMUNITY/ ARE       | Α         |                | 0                   | Computation               |
| CALL SIGN                                   | DSE   | CALL SIGN      | DSE           | CALL SIGN            | DSE       | CALL SIGN      | DSE                 | of                        |
|   |       |                |               |                      |           |                |                     | Base Rate Fe              |
|   |       |                |               |                      |           |                |                     | and                       |
|   |       | -              | <u></u>       |                      |           |                |                     | Syndicated<br>Exclusivity |
|   |       |                |               | 1                    |           |                |                     | Surcharge                 |
|   |       |                |               |                      |           |                |                     | for                       |
|   |       |                |               |                      |           |                |                     | Partially                 |
|   |       |                |               |                      |           |                |                     | Distant                   |
|   | ····· | -              | <del></del>   | ·                    |           |                |                     | Stations                  |
|   |       |                |               |                      |           |                |                     |                           |
|   |       |                |               |                      |           |                |                     |                           |
|   |       |                | <u></u>       |                      |           |                |                     |                           |
|   |       |                |               |                      |           |                |                     |                           |
| Total DSEs                                  |       |                | 0.00          | Total DSFa           |           | Щ              | 0.00                |                           |
|   | _     |                |               | Total DSEs           |           |                | -                   |                           |
| Gross Receipts First                        | Group | \$             | 0.00          | Gross Receipts Sec   | ond Group | \$             | 0.00                |                           |
| Base Rate Fee First                         | Group | \$             | 0.00          | Base Rate Fee Sec    | ond Group | \$             | 0.00                |                           |
|   |       | SUBSCRIBER GRO |               | ii .                 |           | SUBSCRIBER GRO | UP                  |                           |
| COMMUNITY/ AREA                             |       |                | 0             | COMMUNITY/ ARE       | A         |                | 0                   |                           |
| CALL SIGN                                   | DSE   | CALL SIGN      | DSE           | CALL SIGN            | DSE       | CALL SIGN      | DSE                 |                           |
|   |       |                |               |                      |           |                |                     |                           |
|   |       |                | ···           |                      |           |                |                     |                           |
|   |       |                |               |                      |           |                |                     |                           |
|   |       |                |               |                      |           |                |                     |                           |
|   |       |                |               |                      |           |                |                     |                           |
|   | ····· | -              | <del></del>   | ·                    |           |                |                     |                           |
|   |       |                |               |                      |           |                |                     |                           |
|   |       |                |               |                      |           |                |                     |                           |
|   |       |                | <u></u>       |                      |           |                |                     |                           |
|   | ····· |                | <del></del>   |                      |           |                | <u></u>             |                           |
|   |       |                |               |                      |           |                |                     |                           |
|   |       |                |               |                      |           |                |                     |                           |
| Total DSEs                                  |       |                | 0.00          | Total DSEs           |           |                | 0.00                |                           |
| Gross Receipts Third                        | Group | \$             | 0.00          | Gross Receipts Fou   | rth Group | \$             | 0.00                |                           |
|   |       |                |               |                      |           |                | <del></del>         |                           |
| Base Rate Fee Third                         | Group | \$             | 0.00          | Base Rate Fee Fou    | rth Group | \$             | 0.00                |                           |
| Base Rate Fee: Add<br>Enter here and in blo |       |                | scriber group | as shown in the boxe | es above. | \$             |                     |                           |

| Company Description   CALL SIGN   DE  | 9                    |
|---|----------------------|
| COMMUNITY/ AREA   | 9                    |
| CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base  Syntax  Syntax  Exc  Sun  Pa  Di  | 9                    |
| CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base  Syntax  Sur  Pa  Di | nputatio             |
| Base Syn Exc Sur Pa   | of                   |
| Synce Exc Sun Pa  | e Rate F             |
| Exc. Sur  | and                  |
| Sur Pa  | ndicated             |
| Pa<br>Di  | clusivity<br>rcharge |
| Pa<br>Di  | for                  |
|   | artially             |
| Sta   | Distant              |
|   | tations              |
|   |                      |
|   |                      |
|   |                      |
|   |                      |
|   |                      |
| Total DSEs Total DSEs   |                      |
| Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00            |                      |
|   |                      |
| Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00              |                      |
| THIRTY-FIFTH SUBSCRIBER GROUP THIRTY-SIXTH SUBSCRIBER GROUP                       |                      |
| COMMUNITY/ AREA 0 COMMUNITY/ AREA 0   |                      |
| CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE   |                      |
|   |                      |
|   |                      |
|   |                      |
|   |                      |
|   |                      |
|   |                      |
|   |                      |
|   |                      |
|   |                      |
|   |                      |
|   |                      |
|   |                      |
| Total DSEs 0.00 Total DSEs 0.00   |                      |
| Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00            |                      |
|   |                      |
| Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00              |                      |

|  | BLE SYSTEM:<br>nications, LLC |             |                    |           | S               | YSTEM ID#<br>007219 | Name                 |
|--|-------------------------------|-------------|--------------------|-----------|-----------------|---------------------|----------------------|
|  | COMPUTATION O                 |             | TE FEES FOR EAC    | CH SUBSCR | RIBER GROUP     | _                   |                      |
|  | H 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                   |
|  |                               |             |                    |           |                 |                     | Base Rate Fe         |
|  |                               |             |                    |           |                 |                     | and                  |
|  |                               |             |                    |           |                 |                     | Syndicated           |
|  |                               |             |                    |           |                 |                     | Exclusivity          |
|  |                               |             |                    |           |                 | <u>.</u>            | Surcharge            |
|  |                               |             |                    |           |                 |                     | for                  |
|  |                               |             |                    |           |                 |                     | Partially<br>Distant |
|  |                               | <del></del> |                    |           |                 |                     | Stations             |
|  |                               |             |                    |           |                 |                     | Otations             |
|  |                               |             |                    |           |                 |                     |                      |
|  |                               |             |                    |           |                 |                     |                      |
|  |                               |             |                    |           |                 |                     |                      |
|  |                               |             |                    |           |                 |                     |                      |
|  |                               |             |                    |           |                 |                     |                      |
| Total DSEs                             |                               | 0.00        | Total DSEs         |           |                 | 0.00                |                      |
| Gross Receipts First Group             | \$                            | 0.00        | Gross Receipts Sec | and Group | \$              | 0.00                |                      |
| Sioss Neceipts First Group             | Ψ                             | 0.00        | Gross Neceipts Sec | ona Group | <b>3</b>        | 0.00                |                      |
| Base Rate Fee First Group              | \$                            | 0.00        | Base Rate Fee Sec  | ond Group | \$              | 0.00                |                      |
| THIRTY-NINT                            | H 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                 |                      |
|  |                               |             |                    |           |                 |                     |                      |
|  |                               |             |                    |           |                 | ···-                |                      |
|  |                               |             |                    |           |                 |                     |                      |
|  |                               |             |                    |           |                 |                     |                      |
|  |                               | <del></del> | 1                  |           |                 |                     |                      |
|  |                               | ···         |                    |           |                 |                     |                      |
|  |                               |             |                    |           |                 |                     |                      |
|  |                               |             |                    |           |                 |                     |                      |
|  |                               |             |                    |           |                 |                     |                      |
|  |                               |             |                    |           |                 |                     |                      |
|  |                               |             |                    |           |                 |                     |                      |
|  |                               |             |                    |           |                 |                     |                      |
|  |                               |             |                    |           |                 |                     |                      |
| T. I. D. D. D.                         |                               | 0.00        | Total DSEs         |           |                 | 0.00                |                      |
| Lotal DSEs                             |                               |             |                    | rth Croup | •               | 0.00                |                      |
|  | œ.                            |             | Gross Receipts Fou | rai Group | \$              | 0.00                |                      |
| Total DSEs  Gross Receipts Third Group | \$                            | 0.00        |                    |           |                 |                     |                      |

| LEGAL NAME OF OWI<br>Advanced Cable         |           |                |               |                      |            | S               | YSTEM ID#<br>007219 | Name              |
|---|-----------|----------------|---------------|----------------------|------------|-----------------|---------------------|-------------------|
|   |           |                |               | TE FEES FOR EAC      |            |                 |                     |                   |
|   |           | SUBSCRIBER GRO | DUP           |                      |            | SUBSCRIBER GROU | UP                  | 9                 |
| COMMUNITY/ AREA                             |           |                | 0             | COMMUNITY/ ARE       |            |                 | 0                   | Computation       |
| CALL SIGN                                   | DSE       | CALL SIGN      | DSE           | CALL SIGN            | DSE        | CALL SIGN       | DSE                 | of                |
|   |           |                |               |                      |            |                 |                     | Base Rate Fe      |
|   | ·····     |                | ····          |                      | ·····      |                 |                     | and<br>Syndicated |
|   | ·····     | <b>-</b>       | ····          |                      |            |                 |                     | Exclusivity       |
|   |           |                |               |                      |            |                 |                     | Surcharge         |
|   |           |                |               |                      |            |                 |                     | for               |
|   |           |                |               |                      |            |                 |                     | Partially         |
|   |           |                |               |                      |            |                 |                     | Distant           |
|   | ····      |                | ····          | ·                    |            |                 | ·····               | Stations          |
|   | ····      |                | ····          |                      |            |                 | ····                |                   |
|   |           |                |               |                      |            |                 |                     |                   |
|   |           |                |               |                      |            |                 |                     |                   |
|   |           |                |               |                      |            |                 |                     |                   |
|   |           |                |               |                      |            |                 |                     |                   |
| 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                         | Group     | \$             | 0.00          | Base Rate Fee Sec    | ond Group  | \$              | 0.00                |                   |
| FO  | RTY-THIRD | SUBSCRIBER GRO | OUP           | FOF                  | RTY-FOURTH | SUBSCRIBER GROU | UP                  |                   |
| COMMUNITY/ AREA                             |           |                | 0             | COMMUNITY/ ARE       | Α          |                 | 0                   |                   |
| CALL SIGN                                   | DSE       | CALL SIGN      | DSE           | CALL SIGN            | DSE        | CALL SIGN       | DSE                 |                   |
|   | <u></u>   |                |               |                      |            |                 |                     |                   |
|   |           |                | ····          |                      |            |                 |                     |                   |
|   |           | -              |               |                      |            |                 |                     |                   |
|   |           |                |               |                      |            |                 |                     |                   |
|   |           |                |               |                      |            |                 |                     |                   |
|   |           |                |               |                      |            |                 |                     |                   |
|   | ·····     |                | ····          | ·                    |            |                 |                     |                   |
|   | ····      | <b>-</b>       | ····          |                      |            |                 |                     |                   |
|   |           |                |               |                      |            |                 |                     |                   |
|   |           |                |               |                      |            |                 |                     |                   |
|   | <u></u>   |                |               |                      |            |                 |                     |                   |
|   |           |                |               |                      |            |                 |                     |                   |
| Total DSEs                                  |           |                | 0.00          | Total DSEs           |            |                 | 0.00                |                   |
| Gross Receipts Third                        | l Group   | \$             | 0.00          | Gross Receipts Fou   | rth Group  | \$              | 0.00                |                   |
|   |           |                |               |                      |            |                 |                     |                   |
| Base Rate Fee Third                         | l Group   | \$             | 0.00          | Base Rate Fee Fou    | rth Group  | \$              | 0.00                |                   |
| Base Rate Fee: Add<br>Enter here and in blo |           |                | scriber group | as shown in the boxe | es above.  | \$              |                     |                   |

| LEGAL NAME OF OWN Advanced Cable |             |                |              |                      |            | S               | YSTEM ID#<br>007219 | Name                      |
|----------------------------------|-------------|----------------|--------------|----------------------|------------|-----------------|---------------------|---------------------------|
| E                                | BLOCK A: (  | COMPUTATION O  | F BASE RA    | TE FEES FOR EAC      | CH SUBSCF  | RIBER GROUP     |                     |                           |
|                                  | RTY-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                        |
|                                  |             |                |              |                      |            |                 |                     | Base Rate Fe              |
|                                  |             |                |              |                      |            |                 |                     | and                       |
|                                  | <u></u>     |                |              |                      | ·····      |                 |                     | Syndicated<br>Exclusivity |
|                                  |             |                |              |                      |            |                 |                     | Surcharge                 |
|                                  |             |                |              |                      |            |                 |                     | for                       |
|                                  |             |                |              |                      |            |                 |                     | Partially                 |
|                                  |             |                |              |                      |            |                 |                     | Distant                   |
|                                  | <del></del> |                | ····         |                      |            |                 |                     | Stations                  |
|                                  |             |                |              |                      |            |                 |                     |                           |
|                                  |             |                |              |                      |            |                 |                     |                           |
|                                  |             |                |              |                      |            |                 |                     |                           |
|                                  | <u></u>     |                |              |                      |            |                 |                     |                           |
| T DOF                            |             |                | 0.00         | T / LD05             |            | 1               | 0.00                |                           |
| 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 0            | Group       | \$             | 0.00         | Base Rate Fee Sec    | ond Group  | \$              | 0.00                |                           |
| FORTY                            | -SEVENTH    | SUBSCRIBER GRO | UP           | FOI                  | RTY-EIGHTH | SUBSCRIBER GROU | JP                  |                           |
| COMMUNITY/ AREA                  |             |                | 0            | COMMUNITY/ ARE       | Α          |                 | 0                   |                           |
| CALL SIGN                        | DSE         | CALL SIGN      | DSE          | CALL SIGN            | DSE        | CALL SIGN       | DSE                 |                           |
|                                  |             |                |              |                      |            |                 |                     |                           |
|                                  | <del></del> |                | <del></del>  |                      |            |                 |                     |                           |
|                                  |             |                |              |                      |            |                 |                     |                           |
|                                  |             |                |              |                      |            |                 |                     |                           |
|                                  |             |                |              |                      |            |                 |                     |                           |
|                                  | <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 t             |             |                | criber group | as shown in the boxe | s above.   | \$              |                     |                           |

| LEGAL NAME OF OW Advanced Cable             |         |                                   |             |                       |          | S               | YSTEM ID#<br>007219 | Name                      |
|---|---------|-----------------------------------|-------------|-----------------------|----------|-----------------|---------------------|---------------------------|
|   |         | COMPUTATION OF<br>SUBSCRIBER GROU |             | ATE FEES FOR EACH     |          | RIBER GROUP     | JP                  |                           |
| COMMUNITY/ AREA                             | Α       |                                   | 0           | COMMUNITY/ AREA       |          |                 | 0                   | 9<br>Computation          |
| CALL SIGN                                   | DSE     | CALL SIGN                         | DSE         | CALL SIGN             | DSE      | CALL SIGN       | DSE                 | of                        |
|   |         |                                   |             |                       |          |                 |                     | Base Rate Fee and         |
|   |         |                                   |             |                       |          |                 |                     | Syndicated<br>Exclusivity |
|   |         |                                   |             |                       |          |                 |                     | Surcharge                 |
|   |         |                                   |             |                       |          |                 |                     | for<br>Partially          |
|   |         |                                   |             |                       |          |                 |                     | Distant                   |
|   |         |                                   |             |                       |          |                 |                     | Stations                  |
|   |         |                                   |             |                       |          |                 |                     | İ                         |
|   |         |                                   |             |                       |          |                 |                     | İ                         |
|   |         |                                   |             |                       |          |                 |                     | İ                         |
| Total DSEs                                  |         |                                   | 0.00        | Total DSEs            |          |                 | 0.00                | l                         |
| Gross Receipts First                        | t Group | \$                                | 0.00        | Gross Receipts Seco   | nd Group | \$              | 0.00                | 1                         |
|   |         |                                   |             |                       |          |                 |                     | 1                         |
| Base Rate Fee First                         |         | \$                                | 0.00        | Base Rate Fee Secon   |          | \$              | 0.00                | 1                         |
| COMMUNITY/ AREA                             |         | SUBSCRIBER GROU                   | <u> 0</u>   | COMMUNITY/ AREA       |          | SUBSCRIBER GROU | JP <b>0</b>         | İ                         |
|   |         |                                   |             |                       |          |                 |                     | 1                         |
| CALL SIGN                                   | DSE     | CALL SIGN                         | DSE         | CALL SIGN             | DSE      | CALL SIGN       | DSE                 | 1                         |
|   |         |                                   |             |                       |          |                 |                     | 1                         |
|   |         |                                   |             |                       |          |                 |                     | İ                         |
|   |         |                                   |             |                       |          |                 |                     | 1                         |
|   |         |                                   |             |                       |          |                 |                     | İ                         |
|   |         |                                   |             |                       | <u></u>  |                 |                     | İ                         |
|   |         |                                   |             |                       |          |                 |                     | 1                         |
|   |         |                                   |             |                       |          |                 |                     | İ                         |
|   |         | -                                 |             |                       |          |                 |                     | 1                         |
|   |         |                                   |             |                       |          |                 |                     | 1                         |
| Total DSEs                                  |         |                                   | 0.00        | Total DSEs            | •        |                 | 0.00                | 1                         |
| Gross Receipts Third                        | d Group | \$                                | 0.00        | Gross Receipts Fourt  | h Group  | \$              | 0.00                | 1                         |
| Base Rate Fee Third                         | d Group | \$                                | 0.00        | Base Rate Fee Fourt   | h Group  | \$              | 0.00                | 1                         |
| Base Rate Fee: Add<br>Enter here and in blo |         |                                   | riber group | as shown in the boxes | above.   | \$              |                     |                           |

| LEGAL NAME OF OWI<br>Advanced Cable         |            |                |               |                      |             | S               | YSTEM ID#<br>007219 | Name                |
|---|------------|----------------|---------------|----------------------|-------------|-----------------|---------------------|---------------------|
|   |            |                |               | TE FEES FOR EAC      |             |                 |                     |                     |
|   |            | SUBSCRIBER GRO |               | ii e                 |             | SUBSCRIBER GROU |                     | 9                   |
| COMMUNITY/ AREA                             |            |                | 0             | COMMUNITY/ ARE       | A           |                 | 0                   | Computation         |
| CALL SIGN                                   | DSE        | CALL SIGN      | DSE           | CALL SIGN            | DSE         | CALL SIGN       | DSE                 | of                  |
|   |            |                |               |                      | <u> </u>    |                 |                     | Base Rate F         |
| ,   | ·····      |                |               |                      | ·····       |                 | <u> </u>            | and<br>Syndicated   |
|   |            | <del> </del>   |               | ·                    |             | •               |                     | Exclusivity         |
|   |            |                |               |                      |             |                 |                     | Surcharge           |
|   |            |                |               |                      |             |                 |                     | for                 |
|   |            | <b></b>        |               |                      |             |                 |                     | Partially           |
|   |            | H              |               |                      |             |                 |                     | Distant<br>Stations |
|   | ·····      | <del> </del>   |               |                      |             | •               |                     | Otations            |
|   |            |                |               |                      |             |                 |                     |                     |
|   |            |                |               |                      |             |                 |                     |                     |
|   |            |                |               |                      |             |                 | ····                |                     |
|   |            |                |               | ·                    |             |                 |                     |                     |
| otal DSEs                                   |            | Ц              | 0.00          | Total DSEs           |             |                 | 0.00                |                     |
|   | Craun      | •              |               |                      | and Craun   | •               | _                   |                     |
| Gross Receipts First                        | Group      | \$             | 0.00          | Gross Receipts Sec   | cona Group  | \$              | 0.00                |                     |
| Base Rate Fee First                         | Group      | \$             | 0.00          | Base Rate Fee Sec    | ond Group   | \$              | 0.00                |                     |
| F   | IFTY-FIFTH | SUBSCRIBER GRO | OUP           |                      | FIFTY-SIXTH | 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>       |               |                      |             |                 |                     |                     |
|   |            | <del> </del>   |               | ·                    |             |                 |                     |                     |
|   |            |                |               |                      |             |                 |                     |                     |
|   |            |                |               |                      |             |                 |                     |                     |
|   |            |                |               |                      |             |                 |                     |                     |
|   | ·····      | <u> </u>       |               |                      | ·····       |                 | <u> </u>            |                     |
|   |            | <del> </del>   |               | 1                    |             | •               |                     |                     |
|   |            |                |               |                      |             |                 |                     |                     |
| otal DSEs                                   |            |                | 0.00          | Total DSEs           |             |                 | 0.00                |                     |
| Gross Receipts Third                        | Group      | \$             | 0.00          | Gross Receipts Fou   | ırth Group  | \$              | 0.00                |                     |
| Base Rate Fee Third                         | Group      | \$             | 0.00          | Base Rate Fee Fou    | ırth Group  | \$              | 0.00                |                     |
|   |            | [4             | 0.00          |                      |             |                 | 0.00                |                     |
| Base Rate Fee: Add<br>Enter here and in blo |            |                | scriber group | as shown in the boxe | es above.   | \$              |                     |                     |

| LEGAL NAME OF OWN Advanced Cable            |         |                                   |             |                       |          | S               | YSTEM ID#<br>007219 | Name                 |
|---|---------|-----------------------------------|-------------|-----------------------|----------|-----------------|---------------------|----------------------|
|   |         | COMPUTATION OF<br>SUBSCRIBER GROU |             | ATE FEES FOR EACI     |          | RIBER GROUP     | JP                  | _                    |
| COMMUNITY/ AREA                             |         |                                   | 0           | COMMUNITY/ AREA       |          |                 | 0                   | 9<br>Computation     |
| CALL SIGN                                   | DSE     | CALL SIGN                         | DSE         | CALL SIGN             | DSE      | CALL SIGN       | DSE                 | of                   |
|   |         |                                   |             | -                     |          |                 |                     | Base Rate Fee<br>and |
|   |         |                                   |             |                       |          |                 |                     | Syndicated           |
|   |         |                                   |             |                       |          |                 |                     | Exclusivity          |
|   |         |                                   |             |                       | <u></u>  |                 |                     | Surcharge<br>for     |
|   |         |                                   |             |                       |          |                 |                     | Partially            |
|   |         |                                   |             |                       |          |                 |                     | Distant<br>Stations  |
|   |         |                                   |             |                       |          |                 |                     | 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                   |             |                       |          | SUBSCRIBER GROU |                     |                      |
| COMMUNITY/ AREA                             |         |                                   | 0           | COMMUNITY/ AREA       |          |                 | 0                   |                      |
| CALL SIGN                                   | DSE     | CALL SIGN                         | DSE         | CALL SIGN             | DSE      | CALL SIGN       | DSE                 |                      |
|   |         | <br>                              |             |                       | <u></u>  |                 |                     |                      |
|   |         |                                   |             |                       |          |                 |                     |                      |
|   |         |                                   |             |                       |          |                 |                     |                      |
|   |         |                                   |             |                       |          |                 |                     |                      |
|   |         | -                                 |             |                       |          |                 |                     |                      |
|   |         |                                   |             |                       |          |                 |                     |                      |
|   |         |                                   |             |                       |          |                 |                     |                      |
|   |         |                                   |             |                       |          |                 |                     |                      |
|   |         |                                   |             |                       |          |                 |                     |                      |
|   |         |                                   |             |                       |          |                 |                     |                      |
|   |         |                                   |             |                       |          |                 |                     |                      |
| Total DSEs                                  |         |                                   | 0.00        | Total DSEs            |          |                 | 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<br>Enter here and in blo |         |                                   | riber group | as shown in the boxes | above.   | \$              |                     |                      |

| LEGAL NAME OF OWN Advanced Cable                      |           |                |                |                      |           | S               | YSTEM ID#<br>007219 | Name             |
|---|-----------|----------------|----------------|----------------------|-----------|-----------------|---------------------|------------------|
|   |           |                |                | TE FEES FOR EAC      |           |                 |                     |                  |
|   | KTY-FIRST | SUBSCRIBER GRO |                | tt -                 |           | SUBSCRIBER GROU |                     | 9                |
| COMMUNITY/ AREA                                       |           |                | 0              | COMMUNITY/ ARE       | Α         |                 | 0                   | Computation      |
| CALL SIGN   | DSE       | CALL SIGN      | DSE            | CALL SIGN            | DSE       | CALL SIGN       | DSE                 | of               |
| 07.22 0.0.1   | 302       | 07.122 0.011   | 302            | 37.EE 373.T          | 202       | 07.122.01.01.1  | 302                 | Base Rate Fee    |
|   |           |                |                |                      |           |                 |                     | and              |
|   |           |                |                |                      |           |                 |                     | Syndicated       |
|   |           |                |                |                      |           |                 |                     | Exclusivity      |
|   |           |                | <mark>.</mark> |                      |           | -               |                     | Surcharge        |
|   | ···       |                | <del></del>    |                      |           | -               |                     | for<br>Partially |
|   | ···       |                | ···            |                      |           |                 |                     | Distant          |
|   |           | -              | ···            |                      |           | -               |                     | Stations         |
|   |           |                |                |                      |           |                 |                     |                  |
|   |           |                |                |                      |           |                 |                     |                  |
|   |           |                |                |                      |           |                 |                     |                  |
|   |           |                |                |                      |           |                 |                     |                  |
|   |           |                |                |                      |           |                 |                     |                  |
|   |           |                |                |                      |           |                 |                     |                  |
| 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 C                                 | Group     | \$             | 0.00           | Base Rate Fee Sec    | ond Group | \$              | 0.00                |                  |
| SIX   | TY-THIRD  | SUBSCRIBER GRO | UP             | SIX                  | TY-FOURTH | SUBSCRIBER GROU | JP                  |                  |
| COMMUNITY/ AREA                                       |           |                | 0              | COMMUNITY/ ARE       | Α         |                 | 0                   |                  |
| CALL SIGN   | DSE       | CALL SIGN      | DSE            | CALL SIGN            | DSE       | CALL SIGN       | DSE                 |                  |
|   |           | _              |                |                      |           |                 |                     |                  |
|   | <u></u>   |                |                |                      |           |                 |                     |                  |
|   |           |                |                |                      |           |                 |                     |                  |
|   | ···       |                | <del></del>    |                      |           | -               |                     |                  |
|   |           |                | <del></del>    |                      |           | <del> </del>    | ·····               |                  |
|   |           |                |                |                      |           | -               |                     |                  |
|   |           |                |                |                      |           |                 |                     |                  |
|   |           |                |                |                      |           |                 |                     |                  |
|   |           |                |                |                      |           |                 |                     |                  |
|   |           |                |                |                      |           |                 |                     |                  |
|   |           |                | <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                |                  |
| <b>Base Rate Fee:</b> Add t<br>Enter here and in bloc |           |                | scriber group  | as shown in the boxe | es above. | \$              |                     |                  |

| CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE         Base           Sy         Sy         St  | 9 omputation of se Rate F and syndicated exclusivity for Partially Distant Stations |
|---|---|
| COMMUNITY   AREA   0  | omputation of se Rate Fand syndicated exclusivity Gurcharge for Partially Distant   |
| CALL SIGN   DSE   CALL SIGN   DSE   CALL SIGN   DSE   CALL SIGN   DSE   Sast   Style  | omputation of se Rate Fand syndicated exclusivity Gurcharge for Partially Distant   |
| CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE SAN DSE CALL SIGN DSE SAN DSE | of se Rate F and yndicated exclusivity ourcharge for Partially Distant              |
| Sy   Ex   St   St   St   St   St   St   St   S  | and yndicated exclusivity Surcharge for Partially Distant                           |
| Ex   St   St   St   St   St   St   St   S   | yndicated<br>exclusivity<br>Gurcharge<br>for<br>Partially<br>Distant                |
| Ex   St   St   St   St   St   St   St   S   | exclusivity Curcharge for Partially Distant   |
| Total DSEs  Gross Receipts First Group  Base Rate Fee First Group  \$ 0.00  SIXTY-SEVENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  0 COMMUNITY/ AREA   | for<br>For<br>Partially<br>Distant  |
|   | for<br>Partially<br>Distant   |
| S   S   S   S   S   S   S   S   S   S   | Distant   |
| Total DSEs  |   |
| Total DSEs 0.00 Total DSEs 0.00 Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 SIXTY-SEVENTH SUBSCRIBER GROUP SIXTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0   | Stations  |
| Gross Receipts First Group \$ 0.00  Base Rate Fee First Group \$ 0.00  SIXTY-SEVENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  0 COMMUNITY/ AREA  0 COMMUNITY/ AREA  |   |
| Gross Receipts First Group \$ 0.00  Base Rate Fee First Group \$ 0.00  SIXTY-SEVENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  0 COMMUNITY/ AREA  0 COMMUNITY/ AREA  |   |
| Gross Receipts First Group \$ 0.00  Base Rate Fee First Group \$ 0.00  SIXTY-SEVENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  0 COMMUNITY/ AREA  0 COMMUNITY/ AREA  |   |
| Gross Receipts First Group \$ 0.00  Base Rate Fee First Group \$ 0.00  Base Rate Fee Second Group \$ 0.00  SIXTY-SEVENTH SUBSCRIBER GROUP  COMMUNITY/ AREA 0 COMMUNITY/ AREA 0  |   |
| Gross Receipts First Group \$ 0.00  Base Rate Fee First Group \$ 0.00  SIXTY-SEVENTH SUBSCRIBER GROUP  COMMUNITY/ AREA 0 COMMUNITY/ AREA 0  |   |
| Gross Receipts First Group \$ 0.00  Base Rate Fee First Group \$ 0.00  Base Rate Fee Second Group \$ 0.00  SIXTY-SEVENTH SUBSCRIBER GROUP  COMMUNITY/ AREA 0 COMMUNITY/ AREA 0  |   |
| Base Rate Fee First Group \$ 0.00  SIXTY-SEVENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  0  COMMUNITY/ AREA  0   |   |
| SIXTY-SEVENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O   |   |
| COMMUNITY/ AREA 0 COMMUNITY/ AREA 0   |   |
|   |   |
| CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE   |   |
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|   |   |
| Total DSEs 0.00 Total DSEs 0.00   |   |
| Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00  |   |
|   |   |
| Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00  |   |

| ed Cable Communications, LLC 007219                                 | Name                     |
|---|--------------------------|
| BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP    |                          |
| SIXTY-NINTH SUBSCRIBER GROUP SEVENTIETH SUBSCRIBER GROUP            | 9                        |
| IITY/ AREA  | Computation              |
| IGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE                   | of                       |
|   | Base Rate Fe             |
|   | and                      |
| <u> </u>  | Syndicated               |
|   | Exclusivity<br>Surcharge |
|   | for                      |
|   | Partially                |
|   | Distant                  |
|   | Stations                 |
|   |                          |
|   |                          |
|   |                          |
|   |                          |
|   |                          |
| Total DSEs 0.00 Total DSEs  |                          |
| ceipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00      |                          |
|   |                          |
| e Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00        |                          |
| SEVENTY-FIRST SUBSCRIBER GROUP SEVENTY-SECOND SUBSCRIBER GROUP      |                          |
| IITY/ AREA 0 COMMUNITY/ AREA 0                                      |                          |
| IGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE                   |                          |
|   |                          |
|   |                          |
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|   |                          |
|   |                          |
|   |                          |
| Es 0.00 Total DSEs 0.00   |                          |
|   |                          |
| ceipts Third Group \$ 0.00 Il Gross Receipts Fourth Group \$ 0.00 I |                          |
| ceipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00      |                          |

| LEGAL NAME OF OWN Advanced Cable             |             |                |               |                      |           | S               | YSTEM ID#<br>007219 | Name                 |
|--|-------------|----------------|---------------|----------------------|-----------|-----------------|---------------------|----------------------|
|  |             |                |               | TE FEES FOR EAC      |           |                 |                     |                      |
|  |             | SUBSCRIBER GRO | UP            |                      |           | SUBSCRIBER GROU | JP                  | 9                    |
| COMMUNITY/ AREA                              |             |                | 0             | COMMUNITY/ AREA0     |           |                 |                     | Computation          |
| CALL SIGN                                    | DSE         | CALL SIGN      | DSE           | CALL SIGN            | DSE       | CALL SIGN       | DSE                 | of                   |
|  | <u></u>     |                | <del></del>   |                      |           |                 |                     | Base Rate Fe and     |
|  | ····        | -              | <del></del>   |                      |           |                 |                     | Syndicated           |
| ••••••                                       | ····        | <del>-</del>   | <u></u>       |                      | ••••      |                 |                     | Exclusivity          |
|  |             |                |               |                      |           |                 |                     | Surcharge            |
|  |             | -              |               |                      |           |                 |                     | for                  |
|  |             |                | <mark></mark> |                      | ·····     |                 |                     | Partially<br>Distant |
|  |             |                |               | ·                    |           |                 |                     | Stations             |
|  |             |                |               |                      |           |                 |                     |                      |
|  |             |                |               |                      |           |                 |                     |                      |
|  |             |                |               |                      |           |                 |                     |                      |
|  |             |                | <mark></mark> |                      |           |                 |                     |                      |
|  |             |                |               | ·                    |           |                 |                     |                      |
| 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                          | Group       | \$             | 0.00          | Base Rate Fee Sec    | ond Group | \$              | 0.00                |                      |
|  |             | SUBSCRIBER GRO |               | ii .                 |           | SUBSCRIBER GROU | JP                  |                      |
| COMMUNITY/ AREA                              |             |                | 0             | COMMUNITY/ AREA 0    |           |                 |                     |                      |
| CALL SIGN                                    | DSE         | CALL SIGN      | DSE           | CALL SIGN            | DSE       | CALL SIGN       | DSE                 |                      |
|  |             |                |               |                      |           |                 |                     |                      |
|  | <del></del> |                | <del></del>   | ·                    |           |                 | ····                |                      |
| ••••••                                       |             | -              |               |                      |           |                 |                     |                      |
|  |             |                |               |                      |           |                 |                     |                      |
|  |             |                |               |                      |           |                 |                     |                      |
|  |             | -              | <mark></mark> |                      |           |                 |                     |                      |
|  | ····        |                | ···           |                      | ••••      |                 |                     |                      |
|  |             |                |               |                      |           |                 |                     |                      |
|  |             |                |               |                      |           |                 |                     |                      |
|  | <u></u>     |                | <u>.</u>      |                      |           |                 |                     |                      |
|  |             |                | <del></del>   |                      | ····      |                 |                     |                      |
|  |             |                | ···           |                      |           |                 |                     |                      |
| Total DSEs                                   |             |                | 0.00          | Total DSEs           | 1         |                 | 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<br>Enter here and in bloo |             |                | scriber group | as shown in the boxe | s above.  | \$              |                     |                      |

| LEGAL NAME OF OWN Advanced Cable               |                                   |                |                    |                               |           | S               | YSTEM ID#<br>007219 | Name                 |
|--|-----------------------------------|----------------|--------------------|-------------------------------|-----------|-----------------|---------------------|----------------------|
| 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                | _         |                 |                     |                      |
| CALL SIGN                                      | DSE                               | CALL SIGN      | DSE                | CALL SIGN                     | DSE       | CALL SIGN       | DSE                 | Computation of       |
| O'TEE GIGIT                                    | BOL                               | OALL GIGIT     | DOL                | ONEE GIGIT                    | BOL       | OALL GIGIT      | DOL                 | Base Rate Fee        |
|  |                                   |                |                    |                               |           |                 |                     | and                  |
|  |                                   |                |                    |                               |           |                 |                     | Syndicated           |
|  |                                   |                |                    |                               |           |                 |                     | Exclusivity          |
|  |                                   |                |                    |                               |           |                 |                     | Surcharge            |
|  |                                   |                | <del></del>        |                               |           |                 |                     | for                  |
|  | ···                               |                | <del></del>        |                               |           |                 |                     | Partially<br>Distant |
|  |                                   | H              |                    |                               |           | +               |                     | Stations             |
|  |                                   | =              |                    |                               |           |                 |                     |                      |
|  |                                   |                |                    |                               |           |                 |                     |                      |
|  |                                   |                |                    |                               |           |                 |                     |                      |
|  |                                   |                |                    |                               |           |                 |                     |                      |
|  |                                   |                |                    |                               |           |                 |                     |                      |
|  |                                   |                |                    |                               |           |                 |                     |                      |
| Total DSEs                                     |                                   |                | 0.00               | Total DSEs                    |           |                 | 0.00                |                      |
| Gross Receipts First 0                         | Group                             | \$             | 0.00               | Gross Receipts Sec            | ond Group | \$              | 0.00                |                      |
| Base Rate Fee First 0                          | Group                             | \$             | 0.00               | Base Rate Fee Sec             | ond Group | \$              | 0.00                |                      |
| SEVEN  | ITY-NINTH                         | SUBSCRIBER GRO | UP                 |                               | EIGHTIETH | SUBSCRIBER GROU | JP                  |                      |
| COMMUNITY/ AREA                                |                                   |                | 0                  | COMMUNITY/ ARE                |           |                 |                     |                      |
| CALL SIGN                                      | DSE                               | CALL SIGN      | DSE                | CALL SIGN                     | DSE       | CALL SIGN       | DSE                 |                      |
|  |                                   |                |                    |                               |           |                 |                     |                      |
|  |                                   |                |                    |                               |           |                 |                     |                      |
|  |                                   |                |                    |                               |           | -               |                     |                      |
|  |                                   |                |                    |                               |           | -               |                     |                      |
|  |                                   | L              |                    |                               |           | <del>-</del>    |                     |                      |
|  |                                   | =              |                    |                               |           |                 |                     |                      |
|  |                                   |                |                    |                               |           |                 |                     |                      |
|  |                                   | _              |                    |                               |           |                 |                     |                      |
|  |                                   |                |                    |                               |           |                 |                     |                      |
|  | <u> </u>                          |                | <u></u>            |                               |           |                 |                     |                      |
|  |                                   |                |                    |                               |           |                 |                     |                      |
|  |                                   |                |                    |                               |           |                 |                     |                      |
|  |                                   | -              |                    |                               |           | 1               |                     |                      |
| Total DSEs                                     |                                   |                | 0.00               | Total DSEs                    |           |                 | 0.00                |                      |
| Gross Receipts Third Group \$ 0.00             |                                   | 0.00           | Gross Receipts Fou | rth Group                     | \$        | 0.00            |                     |                      |
| Base Rate Fee Third                            | sase Rate Fee Third Group \$ 0.00 |                | 0.00               | Base Rate Fee Fourth Group \$ |           | \$              | 0.00                |                      |
| Base Rate Fee: Add t<br>Enter here and in bloo |                                   |                | scriber group      | as shown in the boxe          | es above. | \$              |                     |                      |

|   | EGAL NAME OF OWNER OF CABLE SYSTEM: Advanced Cable Communications, LLC  007219 |                                   |             |                       |  |                                |      |                          |  |  |
|---|--|-----------------------------------|-------------|-----------------------|--|--------------------------------|------|--------------------------|--|--|
|   |  | COMPUTATION OF<br>SUBSCRIBER GROU |             | ATE FEES FOR EACH     |  | RIBER GROUP<br>SUBSCRIBER GROU | JP   |                          |  |  |
| COMMUNITY/ AREA                             |  |                                   |             |                       |  | 9<br>Computation               |      |                          |  |  |
| CALL SIGN                                   | DSE  | CALL SIGN                         | DSE         | CALL SIGN             | DSE  | CALL SIGN                      | DSE  | of                       |  |  |
|   |  |                                   |             |                       |  |                                |      | Base Rate Fee and        |  |  |
|   |  |                                   |             |                       |  |                                |      | Syndicated               |  |  |
|   |  |                                   |             |                       |  |                                |      | Exclusivity<br>Surcharge |  |  |
|   |  | -                                 |             |                       |  |                                |      | for                      |  |  |
|   |  |                                   |             |                       |  |                                |      | Partially<br>Distant     |  |  |
|   |  | -                                 |             |                       |  |                                |      | Stations                 |  |  |
|   |  |                                   |             |                       |  |                                |      | 1                        |  |  |
|   |  |                                   |             |                       |  |                                |      | 1                        |  |  |
|   |  |                                   |             |                       |  |                                |      | 1                        |  |  |
|   |  |                                   |             |                       |  |                                |      | İ                        |  |  |
| Total DSEs                                  |  |                                   | 0.00        | Total DSEs            |  |                                | 0.00 | İ                        |  |  |
| Gross Receipts First Group \$ 0.00          |  |                                   | 0.00        | Gross Receipts Secon  | nd Group                                     | \$                             | 0.00 | 1                        |  |  |
| Base Rate Fee First                         | Group  | \$                                | 0.00        | Base Rate Fee Secon   | nd Group                                     | \$                             | 0.00 |                          |  |  |
|   |  | SUBSCRIBER GROU                   |             | ii —                  |  | I SUBSCRIBER GROU              | JP   | İ                        |  |  |
| COMMUNITY/ AREA                             | <i></i>  |                                   | 0           | COMMUNITY/ AREA       | 1  |                                |      |                          |  |  |
| CALL SIGN                                   | DSE  | CALL SIGN                         | DSE         | CALL SIGN             | DSE  | CALL SIGN                      | DSE  | İ                        |  |  |
|   |  |                                   |             |                       | <u>.                                    </u> |                                |      | İ                        |  |  |
|   |  |                                   |             |                       |  |                                |      | İ                        |  |  |
|   |  |                                   |             |                       |  |                                |      | 1                        |  |  |
|   |  |                                   |             |                       |  |                                |      | 1                        |  |  |
|   |  |                                   |             |                       |  |                                |      | 1                        |  |  |
|   |  | -                                 |             |                       |  |                                |      | İ                        |  |  |
|   |  |                                   |             |                       |  |                                |      | 1                        |  |  |
|   |  | -                                 |             |                       |  |                                |      | 1                        |  |  |
|   |  |                                   |             |                       |  |                                |      | 1                        |  |  |
|   |  |                                   |             |                       |  |                                |      | İ                        |  |  |
| Total DSEs                                  |  |                                   | 0.00        | Total DSEs            |  |                                | 0.00 | İ                        |  |  |
| Gross Receipts Third                        | d Group  | \$                                | 0.00        | Gross Receipts Fourth | า Group                                      | \$                             | 0.00 | 1                        |  |  |
| Base Rate Fee Third                         | Sase Rate Fee Third Group \$ 0.00  |                                   | 0.00        | Base Rate Fee Fourth  | า Group                                      | \$                             | 0.00 | l                        |  |  |
| Base Rate Fee: Add<br>Enter here and in blo |  |                                   | riber group | as shown in the boxes | above.                                       | \$                             |      |                          |  |  |

| F OF OWNER OF CABLE SYSTEM: SYSTEM ID# Cable Communications, LLC 007219 | Name             |
|---|------------------|
| BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP        |                  |
| EIGHTY-FIFTH SUBSCRIBER GROUP EIGHTY-SIXTH SUBSCRIBER GROUP             | 9                |
| Y/ AREAO COMMUNITY/ AREAO   | Computatio       |
| N DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE                         | of               |
|   | Base Rate F      |
|   | and              |
|   | Syndicated       |
|   | Exclusivity      |
|   | Surcharge<br>for |
|   | Partially        |
|   | Distant          |
|   | Stations         |
|   |                  |
|   |                  |
|   |                  |
|   |                  |
|   |                  |
| <b>0.00</b> Total DSEs <b>0.00</b>                                      |                  |
| pts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00             |                  |
|   |                  |
| Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00              |                  |
| EIGHTY-SEVENTH SUBSCRIBER GROUP EIGHTY-EIGHTH SUBSCRIBER GROUP          |                  |
| Y/ AREAO COMMUNITY/ AREAO   |                  |
| N DSE CALL SIGN DSE CALL SIGN DSE                                       |                  |
|   |                  |
|   |                  |
|   |                  |
|   |                  |
|   |                  |
|   |                  |
|   |                  |
|   |                  |
|   |                  |
|   |                  |
|   |                  |
|   |                  |
| 0.00 Total DSEs 0.00  |                  |
| 0.00   Total DSEs   |                  |
|   |                  |
| pts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00             |                  |

|  | EGAL NAME OF OWNER OF CABLE SYSTEM: Advanced Cable Communications, LLC  007219 |                |               |                      |           |                 |      |                          |  |  |
|--|--|----------------|---------------|----------------------|-----------|-----------------|------|--------------------------|--|--|
|  |  |                |               | ATE FEES FOR EAC     | CH SUBSCF | RIBER GROUP     |      |                          |  |  |
|  |  | SUBSCRIBER GRO |               | <u> </u>             |           | 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 Fe             |  |  |
|  |  |                |               |                      |           |                 |      | and                      |  |  |
|  |  |                | <u></u>       |                      |           |                 |      | Syndicated               |  |  |
|  |  |                | <del></del>   |                      |           |                 |      | Exclusivity<br>Surcharge |  |  |
|  |  | <b>-</b>       | ···           |                      |           |                 |      | for                      |  |  |
|  |  |                |               |                      |           |                 |      | Partially                |  |  |
|  |  |                |               |                      |           |                 |      | Distant                  |  |  |
|  |  | -              |               |                      |           |                 |      | Stations                 |  |  |
|  |  | <u> </u>       | <u></u>       |                      |           |                 |      |                          |  |  |
|  | ····   |                | <del></del>   |                      |           |                 |      |                          |  |  |
|  |  | <b>-</b>       | <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                          | Group  | \$             | 0.00          | Base Rate Fee Sec    | ond Group | \$              | 0.00 |                          |  |  |
| NIN  | ETY-FIRST  | SUBSCRIBER GRO | UP            | NINE                 | TY-SECONE | SUBSCRIBER GRO  | JP   |                          |  |  |
| COMMUNITY/ AREA                              |  |                | 0             | COMMUNITY/ AREA 0    |           |                 |      |                          |  |  |
| CALL SIGN                                    | DSE  | CALL SIGN      | DSE           | CALL SIGN            | DSE       | CALL SIGN       | DSE  |                          |  |  |
|  |  |                |               |                      |           |                 |      |                          |  |  |
|  |  |                |               |                      |           |                 |      |                          |  |  |
|  | ···  |                | <del></del>   |                      | ••••      |                 |      |                          |  |  |
|  |  |                |               |                      |           |                 |      |                          |  |  |
|  |  |                |               |                      |           |                 |      |                          |  |  |
|  |  |                | <u></u>       |                      |           |                 |      |                          |  |  |
|  |  |                | <del></del>   |                      | ·····     |                 |      |                          |  |  |
|  | ····   | -              | <del></del>   |                      | ••••      |                 |      |                          |  |  |
|  |  | -              |               |                      |           |                 |      |                          |  |  |
|  |  |                |               |                      |           |                 |      |                          |  |  |
|  |  |                |               |                      |           |                 |      |                          |  |  |
|  |  |                | <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<br>Enter here and in bloo |  |                | scriber group | as shown in the boxe | s above.  | \$              |      |                          |  |  |

| LEGAL NAME OF OWI<br>Advanced Cable         |                |                |               |   |             | S               | YSTEM ID#<br>007219 | Name                     |
|---|----------------|----------------|---------------|---|-------------|-----------------|---------------------|--------------------------|
|   |                |                |               | TE FEES FOR EAC                                   |             |                 |                     |                          |
|   |                | SUBSCRIBER GRO |               | <del>                                      </del> |             | 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 Fe             |
|   |                | <u> </u>       |               |   |             |                 |                     | and                      |
|   |                |                |               |   |             |                 |                     | Syndicated               |
|   |                |                |               |   |             |                 | <u></u>             | Exclusivity<br>Surcharge |
|   |                | <b>-</b>       |               |   |             |                 |                     | for                      |
|   |                |                |               |   |             |                 |                     | Partially                |
|   |                |                |               |   |             |                 |                     | Distant                  |
|   |                | -              |               |   |             |                 |                     | Stations                 |
|   | <u></u>        |                |               |   |             |                 |                     |                          |
|   | ····           | <b>-</b>       |               |   | ·····       |                 |                     |                          |
|   |                | <b></b>        |               |   |             |                 | ·····               |                          |
|   |                |                |               |   |             |                 |                     |                          |
|   |                |                |               |   |             |                 |                     |                          |
| 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                         | Group          | \$             | 0.00          | Base Rate Fee Sec                                 | ond Group   | \$              | 0.00                |                          |
| NIN   | NETY-FIFTH     | SUBSCRIBER GRO | OUP           | N   | INETY-SIXTH | SUBSCRIBER GROU | UP                  |                          |
| COMMUNITY/ AREA                             | ١              |                | 0             | COMMUNITY/ AREA 0                                 |             |                 |                     |                          |
| CALL SIGN                                   | DSE            | CALL SIGN      | DSE           | CALL SIGN   | DSE         | CALL SIGN       | DSE                 |                          |
|   |                | -              |               |   |             |                 |                     |                          |
|   |                |                |               |   | ·····       |                 | <u> </u>            |                          |
|   |                | <b>-</b>       |               |   |             |                 |                     |                          |
|   |                |                |               |   |             |                 |                     |                          |
|   |                |                |               |   |             |                 |                     |                          |
|   |                | <u> </u>       |               |   |             |                 |                     |                          |
|   |                | -              |               |   |             |                 |                     |                          |
|   |                | <b></b>        |               |   |             |                 |                     |                          |
|   |                |                |               |   |             |                 | ····                |                          |
|   |                |                |               |   |             |                 |                     |                          |
|   |                |                |               |   |             |                 |                     |                          |
|   | <u></u>        |                |               |   |             |                 |                     |                          |
|   |                |                |               |   |             |                 |                     |                          |
| Total DSEs                                  | otal DSEs 0.00 |                |               | Total DSEs  |             |                 | 0.00                |                          |
| Gross Receipts Third                        | l Group        | \$             | 0.00          | Gross Receipts Fou                                | rth Group   | \$              | 0.00                |                          |
|   |                |                |               |   |             |                 | <del></del>         |                          |
| Base Rate Fee Third                         | l Group        | \$             | 0.00          | Base Rate Fee Fou                                 | rth Group   | \$              | 0.00                |                          |
| Base Rate Fee: Add<br>Enter here and in blo |                |                | scriber group | as shown in the boxe                              | es above.   | \$              |                     |                          |

| LEGAL NAME OF OWNI<br>Advanced Cable (         |                                   |                |              |                       |             | S               | YSTEM ID#<br>007219 | Name             |
|--|-----------------------------------|----------------|--------------|-----------------------|-------------|-----------------|---------------------|------------------|
| В  | LOCK A: (                         | COMPUTATION OF | BASE RA      | TE FEES FOR EAC       | H SUBSCR    | IBER GROUP      |                     |                  |
|  | SEVENTH                           | SUBSCRIBER GRO |              | li                    |             | 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              |
|  |                                   |                |              |                       |             | <br>            |                     | Syndicated       |
|  |                                   |                | <u> </u>     |                       | <del></del> |                 |                     | Exclusivity      |
|  | ···                               |                | <u>.</u>     |                       | ····        |                 |                     | Surcharge<br>for |
|  |                                   | -              |              |                       |             |                 |                     | Partially        |
|  |                                   |                |              |                       |             |                 |                     | Distant          |
|  |                                   | <u> </u>       |              |                       |             |                 |                     | Stations         |
|  |                                   |                |              |                       |             |                 |                     |                  |
|  | ···                               |                | <u>.</u>     |                       | <del></del> |                 |                     |                  |
|  |                                   |                | <b> </b>     |                       |             | <u> </u>        |                     |                  |
|  |                                   |                |              |                       |             |                 |                     |                  |
|  |                                   |                |              |                       |             |                 |                     |                  |
| Total DSEs                                     |                                   |                | 0.00         | Total DSEs            |             |                 | 0.00                |                  |
| Gross Receipts First G                         | Group                             | \$             | 0.00         | Gross Receipts Seco   | and Group   | \$              | 0.00                |                  |
| Base Rate Fee First G                          | Group                             | \$             | 0.00         | Base Rate Fee Seco    | ond Group   | \$              | 0.00                |                  |
| NINE   | TY-NINTH                          | SUBSCRIBER GRO | UP           | ONE H                 | UNDREDTH    | SUBSCRIBER GROU | JP                  |                  |
| COMMUNITY/ AREA                                |                                   |                | 0            | COMMUNITY/ AREA       |             |                 |                     |                  |
| CALL SIGN                                      | DSE                               | CALL SIGN      | DSE          | CALL SIGN             | DSE         | CALL SIGN       | DSE                 |                  |
|  |                                   |                | <u>.</u>     |                       |             |                 |                     |                  |
|  |                                   |                |              |                       |             |                 |                     |                  |
|  | ···                               |                | <u>.</u>     |                       | ····        | -               |                     |                  |
|  |                                   |                |              |                       |             |                 |                     |                  |
|  |                                   |                |              |                       |             |                 |                     |                  |
|  |                                   |                | <b></b>      |                       |             |                 |                     |                  |
|  | ···                               |                | <del> </del> |                       |             |                 |                     |                  |
|  |                                   |                | <u> </u>     |                       |             |                 |                     |                  |
|  |                                   |                |              |                       |             |                 |                     |                  |
|  |                                   |                | ļ            |                       |             |                 |                     |                  |
|  |                                   |                | <b></b>      |                       |             |                 |                     |                  |
|  |                                   |                |              |                       | ····        |                 |                     |                  |
| 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 (                          | sase Rate Fee Third Group \$ 0.00 |                | 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.    | \$              |                     |                  |

|  | Advanced Cable Communications, LLC SYSTEM ID# |                                   |                |                       |           |                                |                |                          |  |  |
|--|---|-----------------------------------|----------------|-----------------------|-----------|--------------------------------|----------------|--------------------------|--|--|
|  |   | COMPUTATION OF<br>SUBSCRIBER GROU |                | ATE FEES FOR EACH     |           | RIBER GROUP<br>SUBSCRIBER GROU | JP             | •                        |  |  |
| COMMUNITY/ AREA                                |   |                                   | 0              | COMMUNITY/ AREA       |           |                                | 0              | 9<br>Computation         |  |  |
| CALL SIGN                                      | DSE   | CALL SIGN                         | DSE            | CALL SIGN             | DSE       | CALL SIGN                      | DSE            | of                       |  |  |
|  |   |                                   |                |                       |           |                                |                | Base Rate Fee and        |  |  |
|  |   |                                   |                |                       |           |                                |                | Syndicated               |  |  |
|  |   |                                   |                | -                     |           |                                |                | Exclusivity<br>Surcharge |  |  |
|  |   |                                   |                |                       |           |                                |                | for                      |  |  |
|  |   |                                   |                |                       |           |                                |                | Partially                |  |  |
|  |   |                                   |                |                       |           |                                |                | Distant<br>Stations      |  |  |
|  |   |                                   |                |                       |           |                                |                | İ                        |  |  |
|  |   |                                   |                |                       |           |                                |                | İ                        |  |  |
|  |   |                                   |                |                       |           |                                |                | İ                        |  |  |
|  |   |                                   |                |                       |           |                                |                | 1                        |  |  |
| Total DSEs                                     |   |                                   | 0.00           | Total DSEs            |           | Ц                              | 0.00           | İ                        |  |  |
| Gross Receipts First Group \$ 0.00             |   |                                   |                | Gross Receipts Secon  | nd Group  | \$                             | 0.00           | 1                        |  |  |
|  |   |                                   |                |                       | . а Отоар |                                |                | 1                        |  |  |
| Base Rate Fee First G                          | Base Rate Fee First Group \$ 0.00             |                                   |                | Base Rate Fee Secon   | nd Group  | \$                             | 0.00           |                          |  |  |
|  | ED THIRD                                      | SUBSCRIBER GROL                   | JP<br><b>0</b> | ii .                  | D FOURTH  | I SUBSCRIBER GROU              | JP<br><b>0</b> | İ                        |  |  |
| COMMUNITY/ AREA                                |   |                                   |                | COMMUNITY/ AREA       | İ         |                                |                |                          |  |  |
| CALL SIGN                                      | DSE   | CALL SIGN                         | DSE            | CALL SIGN             | DSE       | CALL SIGN                      | DSE            | İ                        |  |  |
|  |   |                                   |                |                       |           |                                |                | 1                        |  |  |
|  |   |                                   |                |                       |           |                                |                | İ                        |  |  |
|  |   |                                   |                |                       |           |                                |                | İ                        |  |  |
|  |   |                                   |                |                       |           |                                |                | İ                        |  |  |
|  |   |                                   |                |                       |           |                                |                | İ                        |  |  |
|  |   |                                   |                |                       |           |                                |                | İ                        |  |  |
|  |   |                                   |                |                       |           |                                |                | İ                        |  |  |
|  |   |                                   |                |                       |           |                                |                | İ                        |  |  |
|  |   |                                   |                |                       |           |                                |                | İ                        |  |  |
|  |   |                                   |                |                       |           |                                |                | İ                        |  |  |
| Total DCCa                                     |   |                                   | 0.00           | Total DCTo            |           |                                | 0.00           | 1                        |  |  |
| Total DSEs  Gross Receipts Third               | Group   | ¢                                 | 0.00           | Total DSEs            | . Group   | •                              | 0.00           | 1                        |  |  |
| Gross Receipts Third                           | эгоир   | <u>\$</u>                         | 0.00           | Gross Receipts Fourth | гогоир    | \$                             | 0.00           | 1                        |  |  |
| Base Rate Fee Third (                          | Group   | \$                                | 0.00           | Base Rate Fee Fourth  | n Group   | \$                             | 0.00           | 1                        |  |  |
| Base Rate Fee: Add the Enter here and in block |   |                                   | riber group    | as shown in the boxes | above.    | \$                             |                |                          |  |  |

| LEGAL NAME OF OWNE Advanced Cable (            |  |                |                     |                      |           | S               | YSTEM ID#<br>007219 | Name                |
|--|--|----------------|---------------------|----------------------|-----------|-----------------|---------------------|---------------------|
| В  | LOCK A: (                              | COMPUTATION O  | F BASE RA           | TE FEES FOR EAC      | CH SUBSCR | RIBER GROUP     |                     |                     |
|  | ED FIFTH                               | 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                  |
|  |  |                | <u> </u>            |                      |           |                 |                     | Base Rate Fe        |
|  | ···                                    |                | <u> </u>            |                      | ·····     |                 |                     | and<br>Syndicated   |
|  | ······································ |                | <u></u>             | ·                    | ••••      |                 |                     | Exclusivity         |
|  |  |                | •                   |                      |           |                 | •••••               | Surcharge           |
|  |  |                |                     |                      |           |                 |                     | for                 |
|  |  |                | <u></u>             |                      |           |                 |                     | Partially           |
|  | ···                                    |                | <u> </u>            |                      | ····      |                 |                     | Distant<br>Stations |
|  |  |                | <del> </del>        |                      | ••••      |                 | ····                | Otations            |
|  |  |                |                     |                      |           |                 |                     |                     |
|  |  |                |                     |                      |           |                 |                     |                     |
|  |  |                |                     |                      |           |                 |                     |                     |
|  |  |                | <del></del>         |                      | ····      |                 |                     |                     |
| Total DSEs                                     |  | ·              | 0.00                | Total DSEs           |           | !!              | 0.00                |                     |
|  | roup                                   | •              | 0.00                |                      |           |                 |                     |                     |
| Gross Receipts First G                         | Toup                                   | \$             | 0.00                | Gross Receipts Sec   | ona Group | \$              | 0.00                |                     |
| <b>Base Rate Fee</b> First G                   | roup                                   | \$             | 0.00                | Base Rate Fee Sec    | ond Group | \$              | 0.00                |                     |
| ONE HUNDRED                                    | SEVENTH                                | SUBSCRIBER GRO | UP                  | 11                   |           | 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>            |                      |           |                 |                     |                     |
|  |  |                | <del> </del>        |                      | •••••     |                 |                     |                     |
|  |  |                |                     |                      |           |                 |                     |                     |
| Total DSEs                                     |  |                | 0.00                | Total DSEs           |           |                 | 0.00                |                     |
| Gross Receipts Third (                         | Group                                  | \$             | 0.00                | Gross Receipts Fou   | rth Group | \$              | 0.00                |                     |
|  |  |                |                     |                      |           |                 | <del></del>         |                     |
| Base Rate Fee Third (                          | Group                                  | \$             | 0.00                | Base Rate Fee Fou    | 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 OWNE Advanced Cable (            |               |                |              |                      |           | S               | YSTEM ID#<br>007219 | Name              |
|--|---------------|----------------|--------------|----------------------|-----------|-----------------|---------------------|-------------------|
| В  | LOCK A: (     | COMPUTATION O  | F BASE RA    | ATE FEES FOR EAC     | CH SUBSCF | RIBER GROUP     |                     |                   |
|  | ED NINTH      | SUBSCRIBER GRO | UP           |                      |           | SUBSCRIBER GROU | UP                  | 9                 |
| COMMUNITY/ AREA                                |               |                | 0            |                      |           |                 |                     | Computation       |
| CALL SIGN                                      | DSE           | CALL SIGN      | DSE          | CALL SIGN            | DSE       | CALL SIGN       | DSE                 | of                |
|  | <u></u>       |                | <u></u>      |                      | <u></u>   |                 |                     | Base Rate Fee     |
|  | <mark></mark> |                | <u></u>      | -                    | ·····     |                 |                     | and<br>Syndicated |
|  | ···           |                | <del></del>  | ·                    | ·····     |                 |                     | Exclusivity       |
|  |               |                |              |                      |           |                 |                     | Surcharge         |
|  |               |                |              |                      |           |                 |                     | for               |
|  |               |                |              |                      |           |                 |                     | Partially         |
|  |               |                | <u> </u>     |                      |           |                 |                     | Distant           |
|  | <u> </u>      |                | <del></del>  |                      |           |                 | ·····               | Stations          |
|  | ···           |                | <u>-</u>     |                      | ••••      |                 | ·····               |                   |
|  |               |                |              |                      |           |                 |                     |                   |
|  |               |                |              |                      |           |                 |                     |                   |
|  |               |                |              |                      |           |                 |                     |                   |
|  |               |                |              |                      |           |                 |                     |                   |
| Total DSEs                                     |               |                | 0.00         | Total DSEs           |           |                 | 0.00                |                   |
| Gross Receipts First G                         | Group         | \$             | 0.00         | Gross Receipts Sec   | ond Group | \$              | 0.00                |                   |
| Base Rate Fee First G                          | iroup         | \$             | 0.00         | Base Rate Fee Sec    | ond Group | \$              | 0.00                |                   |
| ONE HUNDRED E                                  | LEVENTH       | SUBSCRIBER GRO | UP           | ONE HUNDRE           | D TWELVTH | SUBSCRIBER GROU | UP                  |                   |
| COMMUNITY/ AREA                                |               |                | 0            | COMMUNITY/ AREA 0    |           |                 |                     |                   |
| CALL SIGN                                      | DSE           | CALL SIGN      | DSE          | CALL SIGN            | DSE       | CALL SIGN       | DSE                 |                   |
|  |               |                | <u> </u>     |                      |           |                 |                     |                   |
|  |               |                | <u>-</u>     |                      |           | -               | <del></del>         |                   |
|  | <u></u>       |                | <u>-</u>     |                      | ••••      |                 |                     |                   |
|  |               |                |              |                      |           |                 |                     |                   |
|  |               | -              | <u> </u>     |                      |           |                 |                     |                   |
|  | <mark></mark> |                | <u></u>      |                      | <u>.</u>  |                 |                     |                   |
|  |               |                | <u> </u>     |                      |           |                 |                     |                   |
|  |               |                | <u>-</u>     |                      |           |                 |                     |                   |
|  |               |                |              |                      |           |                 |                     |                   |
|  |               |                |              |                      |           |                 |                     |                   |
|  |               |                |              |                      |           |                 |                     |                   |
|  | <mark></mark> |                | <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 Foun   | 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:  Advanced Cable Communications, LLC  007219 |             |                                   |                |  |          |                                  |                | Name                     |
|--|-------------|-----------------------------------|----------------|--|----------|----------------------------------|----------------|--------------------------|
|  |             | COMPUTATION OF<br>SUBSCRIBER GROU |                | ATE FEES FOR EACH  |          | RIBER GROUP<br>I SUBSCRIBER GROU | JP             |                          |
| COMMUNITY/ AREA  |             |                                   | 0              | COMMUNITY/ AREA  |          |                                  | 0              | 9<br>Computation         |
| CALL SIGN  | DSE         | CALL SIGN                         | DSE            | CALL SIGN  | DSE      | CALL SIGN                        | DSE            | of                       |
|  |             |                                   |                |  |          |                                  |                | Base Rate Fee and        |
|  |             |                                   |                |  |          |                                  |                | Syndicated               |
|  | <del></del> |                                   |                |  |          |                                  |                | Exclusivity<br>Surcharge |
|  |             |                                   |                |  |          |                                  |                | for                      |
|  | <u></u>     |                                   |                |  |          |                                  |                | Partially<br>Distant     |
|  |             |                                   |                |  |          |                                  |                | Stations                 |
|  |             |                                   |                |  |          |                                  |                |                          |
|  |             |                                   |                |  |          |                                  | <u></u>        |                          |
|  |             |                                   |                |  |          |                                  |                |                          |
|  |             |                                   |                |  |          |                                  |                |                          |
| 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  |             | \$                                | 0.00           | Base Rate Fee Secon  |          | \$                               | 0.00           |                          |
| ONE HUNDRED F  |             | SUBSCRIBER GROU                   | JP<br><b>0</b> | ONE HUNDRED S  |          | I SUBSCRIBER GROU                | JP<br><b>0</b> |                          |
|  |             |                                   |                | COMMON TO THE CO |          |                                  |                |                          |
| CALL SIGN  | DSE         | CALL SIGN                         | DSE            | CALL SIGN  | DSE      | CALL SIGN                        | DSE            |                          |
|  |             |                                   |                |  |          |                                  | <u></u>        |                          |
|  |             |                                   |                |  |          |                                  |                |                          |
|  | <u></u>     |                                   |                |  |          |                                  |                |                          |
|  |             |                                   |                |  |          |                                  |                |                          |
|  | <b></b>     |                                   |                |  |          |                                  |                |                          |
|  |             |                                   |                |  |          |                                  |                |                          |
|  |             |                                   |                |  |          |                                  |                |                          |
|  | ····        |                                   |                |  |          |                                  |                |                          |
|  |             |                                   |                |  |          |                                  |                |                          |
|  | ····        |                                   |                |  |          |                                  |                |                          |
| Total DSEs   |             |                                   | 0.00           | Total DSEs   |          | 11                               | 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<br>Enter here and in blo                                      |             |                                   | riber group    | as shown in the boxes  | above.   | \$                               |                |                          |

| LEGAL NAME OF OWNE Advanced Cable C              |          |                |              |                       |           | S                 | YSTEM ID#<br>007219 | Name                     |
|--|----------|----------------|--------------|-----------------------|-----------|-------------------|---------------------|--------------------------|
| BL   | OCK A: ( | COMPUTATION OF | BASE RA      | TE FEES FOR EAC       | H SUBSCF  | RIBER GROUP       |                     |                          |
| ONE HUNDRED SEVEN                                | NTEENTH  | SUBSCRIBER GRO |              |                       |           | I SUBSCRIBER GROU |                     | 9                        |
| COMMUNITY/ AREA                                  |          |                | 0            | COMMUNITY/ AREA       | ٩         |                   | 0                   | Computation              |
| CALL SIGN  | DSE      | CALL SIGN      | DSE          | CALL SIGN             | DSE       | CALL SIGN         | DSE                 | of                       |
|  |          |                |              |                       |           |                   |                     | Base Rate Fee            |
|  |          |                |              |                       |           | -                 |                     | and                      |
|  |          |                |              |                       |           |                   |                     | Syndicated               |
|  |          |                |              |                       |           |                   |                     | Exclusivity<br>Surcharge |
|  |          |                |              |                       |           |                   |                     | for                      |
|  |          |                |              |                       |           |                   |                     | Partially                |
|  |          |                |              |                       |           |                   |                     | Distant                  |
|  |          | -              |              |                       |           |                   |                     | Stations                 |
|  |          |                |              |                       |           |                   |                     |                          |
|  |          | -              |              |                       |           |                   |                     |                          |
|  |          |                |              |                       |           |                   |                     |                          |
|  |          |                |              |                       |           |                   |                     |                          |
|  |          |                |              |                       |           |                   |                     |                          |
| 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                |                          |
| ONE HUNDRED NIN                                  | NTEENTH  | SUBSCRIBER GRO | JP           | ONE HUNDRED           | TWENTIETH | SUBSCRIBER GROU   | JP                  |                          |
| COMMUNITY/ AREA                                  |          |                | 0            | COMMUNITY/ AREA       | ٩         |                   | 0                   |                          |
| CALL SIGN  | DSE      | CALL SIGN      | DSE          | CALL SIGN             | DSE       | CALL SIGN         | DSE                 |                          |
|  |          |                |              |                       |           |                   |                     |                          |
|  |          |                |              |                       |           |                   |                     |                          |
|  |          | -              |              | ·                     |           |                   |                     |                          |
|  |          | -              |              |                       |           |                   |                     |                          |
|  |          |                |              |                       |           |                   |                     |                          |
|  |          |                |              |                       |           |                   |                     |                          |
|  |          |                |              |                       |           |                   |                     |                          |
|  |          | -              |              |                       |           |                   |                     |                          |
|  |          |                |              |                       | ••••      |                   | ····                |                          |
|  |          |                |              |                       |           |                   |                     |                          |
|  |          |                |              |                       |           |                   |                     |                          |
|  |          |                |              |                       |           |                   |                     |                          |
|  |          |                |              |                       |           |                   |                     |                          |
| Total DSEs                                       |          |                | 0.00         | Total DSEs            |           |                   | 0.00                |                          |
| Gross Receipts Third G                           | Group    | \$             | 0.00         | Gross Receipts Four   | rth Group | \$                | 0.00                |                          |
|  |          |                |              |                       |           |                   |                     |                          |
| Base Rate Fee Third G                            | Froup    | \$             | 0.00         | Base Rate Fee Four    | th Group  | \$                | 0.00                |                          |
| Base Rate Fee: Add th<br>Enter here and in block |          |                | criber group | as shown in the boxes | s above.  | \$                |                     |                          |

| LEGAL NAME OF OW Advanced Cable             |            |                  |             |                       |               | S                  | YSTEM ID#<br>007219 | Name                     |
|---|------------|------------------|-------------|-----------------------|---------------|--------------------|---------------------|--------------------------|
|   |            |                  |             | TE FEES FOR EACH      | H SUBSCF      | RIBER GROUP        |                     |                          |
|   |            | SUBSCRIBER GROU  |             | H                     |               | 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                      |
|   |            |                  |             |                       | <mark></mark> |                    |                     | Syndicated               |
|   |            |                  |             |                       |               |                    |                     | Exclusivity<br>Surcharge |
|   |            |                  |             |                       |               |                    |                     | for                      |
|   |            |                  |             |                       |               |                    |                     | Partially                |
|   |            |                  |             |                       |               |                    |                     | Distant                  |
|   |            |                  |             |                       |               |                    |                     | Stations                 |
|   | ·····      |                  |             |                       |               |                    |                     |                          |
|   |            |                  |             |                       | <del></del>   |                    |                     |                          |
|   |            |                  |             |                       |               |                    |                     |                          |
|   |            |                  |             |                       |               |                    |                     |                          |
|   |            |                  |             |                       |               |                    |                     |                          |
| 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 Secon   | nd Group      | \$                 | 0.00                |                          |
| ONE HUNDRED TW                              | ENTY-THIRD | SUBSCRIBER GROUP |             | ONE HUNDRED TWEN      | ITY-FOURTH    | I SUBSCRIBER GROUP | )                   |                          |
| COMMUNITY/ ARE                              | Α          |                  | 0           | COMMUNITY/ AREA       |               |                    | 0                   |                          |
| CALL SIGN                                   | DSE        | CALL SIGN        | DSE         | CALL SIGN             | DSE           | CALL SIGN          | DSE                 |                          |
| <br>  |            |                  |             |                       | <mark></mark> |                    |                     |                          |
|   |            |                  |             |                       |               |                    |                     |                          |
|   |            | -                |             |                       |               |                    |                     |                          |
|   |            |                  |             |                       |               |                    |                     |                          |
|   |            |                  |             |                       |               |                    |                     |                          |
|   |            |                  |             |                       | <mark></mark> |                    |                     |                          |
|   |            |                  |             |                       |               |                    |                     |                          |
|   |            |                  |             |                       |               |                    |                     |                          |
|   |            |                  |             |                       |               |                    |                     |                          |
|   |            |                  |             |                       | <u></u>       |                    |                     |                          |
|   | ·····      |                  |             |                       | <mark></mark> |                    |                     |                          |
|   |            |                  |             |                       | ···           |                    |                     |                          |
| 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<br>Enter here and in blo |            |                  | riber group | as shown in the boxes | above.        | \$                 |                     |                          |

| LEGAL NAME OF OWN Advanced Cable               |             |                 |                |                      |             | S                  | YSTEM ID#<br>007219 | Name                      |
|--|-------------|-----------------|----------------|----------------------|-------------|--------------------|---------------------|---------------------------|
| В  | SLOCK A: (  | COMPUTATION O   | F BASE RA      | ATE FEES FOR EAC     | CH SUBSCF   | RIBER GROUP        |                     |                           |
|  | NTY-FIFTH   | SUBSCRIBER GROU |                | ††                   |             | I SUBSCRIBER GROUP |                     | 9                         |
| COMMUNITY/ AREA                                |             |                 | 0              | COMMUNITY/ ARE       | Α           |                    | 0                   | Computation               |
| CALL SIGN                                      | DSE         | CALL SIGN       | DSE            | CALL SIGN            | DSE         | CALL SIGN          | DSE                 | of                        |
|  |             | ļ               |                |                      |             |                    |                     | Base Rate Fe              |
|  |             | <u> </u>        |                |                      |             |                    |                     | and                       |
|  | <del></del> |                 | <del>.  </del> |                      | ·····       |                    |                     | Syndicated<br>Exclusivity |
|  |             |                 |                |                      |             |                    |                     | Surcharge                 |
|  |             |                 |                |                      |             |                    |                     | for                       |
|  |             |                 | <u></u>        |                      |             |                    |                     | Partially                 |
|  |             | <b></b>         | <u> </u>       |                      |             |                    |                     | Distant<br>Stations       |
|  | ···         | <b>-</b>        | <u>-</u>       |                      |             |                    |                     | Guarono                   |
|  |             |                 |                |                      |             |                    |                     |                           |
|  |             |                 |                |                      |             |                    |                     |                           |
|  | <u></u>     |                 | <u></u>        |                      |             |                    | <u> </u>            |                           |
|  | ···         |                 | <del>.  </del> |                      |             |                    |                     |                           |
| Total DSEs                                     |             |                 | 0.00           | Total DSEs           | <u>.</u>    |                    | 0.00                |                           |
| Gross Receipts First 0                         | -roup       | \$              | 0.00           | Gross Receipts Sec   | and Group   | \$                 | 0.00                |                           |
| Gloss Receipts Filst C                         | этоир       | 4               | 0.00           | Gross Necelpts Sec   | ona Group   | <b>4</b>           | 0.00                |                           |
| Base Rate Fee First G                          | Group       | \$              | 0.00           | Base Rate Fee Sec    | ond Group   | \$                 | 0.00                |                           |
| NE HUNDRED TWENTY                              | /-SEVENTH   | SUBSCRIBER GROU | P              | ONE HUNDRED TWI      | ENTY-EIGHTH | I SUBSCRIBER GROUP | )                   |                           |
| COMMUNITY/ AREA                                |             |                 | 0              | COMMUNITY/ ARE.      | Α           |                    | 0                   |                           |
| CALL SIGN                                      | DSE         | CALL SIGN       | DSE            | CALL SIGN            | DSE         | CALL SIGN          | DSE                 |                           |
|  | <u></u>     | <b>-</b>        | <u></u>        |                      |             |                    |                     |                           |
|  |             | <u> </u>        |                |                      |             |                    |                     |                           |
|  |             |                 |                |                      |             |                    |                     |                           |
|  |             |                 |                |                      |             |                    |                     |                           |
|  | <del></del> |                 | <u> </u>       |                      | ····        |                    |                     |                           |
|  |             | <b>-</b>        |                |                      |             |                    |                     |                           |
|  |             |                 |                |                      |             |                    |                     |                           |
|  |             |                 |                |                      |             |                    |                     |                           |
|  |             | <u> </u>        | <u></u>        |                      |             |                    |                     |                           |
|  | ···         | -               | <del>.  </del> |                      |             |                    |                     |                           |
|  |             |                 |                |                      |             |                    |                     |                           |
|  |             |                 |                |                      |             |                    |                     |                           |
| Total DSEs                                     |             |                 | 0.00           | Total DSEs           |             | -                  | 0.00                |                           |
| Gross Receipts Third                           | Group       | \$              | 0.00           | Gross Receipts Fou   | rth Group   | \$                 | 0.00                |                           |
|  |             |                 |                |                      |             |                    | <del></del>         |                           |
| Base Rate Fee Third                            | Group       | \$              | 0.00           | Base Rate Fee Fou    | rth Group   | \$                 | 0.00                |                           |
| Base Rate Fee: Add t<br>Enter here and in bloc |             |                 | criber group   | as shown in the boxe | s above.    | \$                 |                     |                           |

| LEGAL NAME OF OWN Advanced Cable |            |                 |              |                      |            | S                | YSTEM ID#<br>007219 | Name                     |
|----------------------------------|------------|-----------------|--------------|----------------------|------------|------------------|---------------------|--------------------------|
| E                                | BLOCK A: ( | COMPUTATION O   | F BASE RA    | ATE FEES FOR EAC     | CH SUBSCF  | RIBER GROUP      |                     |                          |
| ONE HUNDRED TWE                  |            | SUBSCRIBER GROU |              | П                    |            | SUBSCRIBER GROUP |                     | 9                        |
| COMMUNITY/ AREA                  |            |                 | 0            | COMMUNITY/ ARE       | Α          |                  | 0                   | Computation              |
| CALL SIGN                        | DSE        | CALL SIGN       | DSE          | CALL SIGN            | DSE        | CALL SIGN        | DSE                 | of                       |
|                                  |            |                 |              |                      |            |                  |                     | Base Rate Fee            |
|                                  |            |                 |              |                      |            |                  |                     | and                      |
|                                  |            |                 |              |                      |            |                  |                     | Syndicated               |
|                                  |            |                 |              |                      |            |                  |                     | Exclusivity<br>Surcharge |
|                                  |            | -               |              |                      |            |                  |                     | for                      |
|                                  |            |                 |              |                      |            |                  |                     | Partially                |
|                                  |            |                 |              |                      |            |                  |                     | Distant                  |
|                                  |            | -               |              |                      |            |                  |                     | Stations                 |
|                                  |            |                 |              |                      |            |                  |                     |                          |
|                                  |            |                 |              |                      |            |                  |                     |                          |
|                                  |            | <b></b>         |              |                      |            |                  |                     |                          |
|                                  |            |                 |              |                      |            |                  |                     |                          |
|                                  |            |                 |              |                      |            |                  |                     |                          |
| Total DSEs                       |            |                 | 0.00         | Total DSEs           |            |                  | 0.00                |                          |
| Gross Receipts First (           | Group      | \$              | 0.00         | Gross Receipts Sec   | ond Group  | \$               | 0.00                |                          |
|                                  |            | <u>-</u>        |              |                      |            | ·*               |                     |                          |
| Base Rate Fee First 0            | Group      | \$              | 0.00         | Base Rate Fee Sec    | ond Group  | \$               | 0.00                |                          |
| ONE HUNDRED TH                   | IRTY-FIRST | SUBSCRIBER GROU | Р            | ONE HUNDRED THI      | RTY-SECONE | SUBSCRIBER GROUP | 1                   |                          |
| COMMUNITY/ AREA                  |            |                 | 0            | COMMUNITY/ ARE       | Α          |                  | 0                   |                          |
| CALL SIGN                        | DSE        | CALL SIGN       | DSE          | CALL SIGN            | DSE        | CALL SIGN        | DSE                 |                          |
|                                  |            | <b>-</b>        |              |                      |            |                  |                     |                          |
|                                  |            |                 |              |                      |            |                  |                     |                          |
|                                  |            | <b></b>         |              |                      |            |                  |                     |                          |
|                                  |            |                 |              |                      |            |                  |                     |                          |
|                                  |            |                 |              |                      |            |                  |                     |                          |
|                                  |            | -               |              |                      |            |                  |                     |                          |
|                                  |            |                 |              |                      | ·····      |                  |                     |                          |
|                                  | ····       | -               |              |                      |            |                  |                     |                          |
|                                  |            |                 |              |                      |            |                  |                     |                          |
|                                  |            |                 |              |                      |            |                  |                     |                          |
|                                  |            |                 |              |                      |            |                  |                     |                          |
|                                  |            |                 |              |                      |            |                  |                     |                          |
| Total DSEs                       |            |                 | 0.00         | Total DSEs           |            | I                | 0.00                |                          |
| Gross Receipts Third             | Group      | \$              | 0.00         | Gross Receipts Fou   | rth Group  | \$               | 0.00                |                          |
| p                                | - 1        |                 |              |                      |            |                  |                     |                          |
| Base Rate Fee Third              | Group      | \$              | 0.00         | Base Rate Fee Fou    | rth Group  | \$               | 0.00                |                          |
| Base Rate Fee: Add t             |            |                 | criber group | as shown in the boxe | s above.   | \$               |                     |                          |

| LEGAL NAME OF OWN Advanced Cable          |             |                 |               |                      |              | S                  | YSTEM ID#<br>007219 | Name                      |
|---|-------------|-----------------|---------------|----------------------|--------------|--------------------|---------------------|---------------------------|
| E   | BLOCK A: (  | COMPUTATION O   | F BASE RA     | TE FEES FOR EAC      | CH SUBSCF    | RIBER GROUP        |                     |                           |
|   | IRTY-THIRD  | SUBSCRIBER GROU |               | 1                    |              | SUBSCRIBER GROUP   |                     | 9                         |
| COMMUNITY/ AREA                           |             |                 | 0             | COMMUNITY/ ARE       |              |                    | 0                   | Computation               |
| CALL SIGN                                 | DSE         | CALL SIGN       | DSE           | CALL SIGN            | DSE          | CALL SIGN          | DSE                 | of                        |
|   |             |                 |               |                      |              |                    |                     | Base Rate Fe              |
|   | <del></del> |                 | <u></u>       |                      |              |                    |                     | and                       |
|   | <del></del> | ļ               | <del></del>   |                      | ·····        |                    |                     | Syndicated<br>Exclusivity |
|   |             |                 |               |                      |              |                    |                     | Surcharge                 |
|   |             |                 |               |                      |              |                    |                     | for                       |
|   |             |                 |               |                      |              |                    |                     | Partially                 |
|   |             | -               |               |                      |              |                    |                     | Distant                   |
|   |             |                 | <u></u>       |                      |              |                    |                     | Stations                  |
|   | ···         | <u> </u>        | <del></del>   |                      |              |                    |                     |                           |
|   | ···         |                 | <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 (                     | Group       | \$              | 0.00          | Base Rate Fee Sec    | ond Group    | \$                 | 0.00                |                           |
| ONE HUNDRED TH                            | IRTY-FIFTH  | SUBSCRIBER GROU | Р             | ONE HUNDRED          | THIRTY-SIXTH | H SUBSCRIBER GROUP | )                   |                           |
| COMMUNITY/ AREA                           |             |                 | 0             | COMMUNITY/ ARE       | Α            |                    | 0                   |                           |
| CALL SIGN                                 | DSE         | CALL SIGN       | DSE           | CALL SIGN            | DSE          | CALL SIGN          | DSE                 |                           |
|   |             | -               | <u></u>       |                      |              |                    |                     |                           |
|   |             |                 |               |                      |              |                    |                     |                           |
|   |             |                 |               | ·                    |              |                    |                     |                           |
|   |             |                 |               |                      |              |                    |                     |                           |
|   |             |                 |               |                      |              |                    |                     |                           |
|   |             | -               |               |                      |              |                    |                     |                           |
|   | <del></del> | <u> </u>        | <u></u>       |                      |              |                    |                     |                           |
|   | <del></del> |                 | <del></del>   |                      | ·····        |                    |                     |                           |
|   | <del></del> |                 | <del> </del>  |                      |              |                    |                     |                           |
|   |             |                 |               |                      |              |                    |                     |                           |
|   |             |                 |               |                      |              |                    |                     |                           |
|   |             |                 |               |                      |              |                    |                     |                           |
|   |             |                 |               |                      |              |                    |                     |                           |
| Total DSEs                                |             |                 | 0.00          | Total DSEs           |              |                    | 0.00                |                           |
| Gross Receipts Third                      | Group       | \$              | 0.00          | Gross Receipts Fou   | rth Group    | \$                 | 0.00                |                           |
|   |             |                 |               |                      |              |                    | <del></del>         |                           |
| Base Rate Fee Third                       | Group       | \$              | 0.00          | Base Rate Fee Fou    | rth Group    | \$                 | 0.00                |                           |
| Base Rate Fee: Add Enter here and in bloo |             |                 | scriber group | as shown in the boxe | es above.    | \$                 |                     |                           |

| LEGAL NAME OF OWN Advanced Cable               |             |                 |               |                      |              | S                  | YSTEM ID#<br>007219 | Name                     |
|--|-------------|-----------------|---------------|----------------------|--------------|--------------------|---------------------|--------------------------|
| B  | LOCK A:     | COMPUTATION O   | F BASE RA     | TE FEES FOR EAC      | CH SUBSCR    | RIBER GROUP        |                     |                          |
| ONE HUNDRED THIRT                              | Y-SEVENTH   | SUBSCRIBER GROU | Р             | ONE HUNDRED TH       | HIRTY-EIGHTH | I SUBSCRIBER GROUP | )                   | ٥                        |
| COMMUNITY/ AREA                                |             |                 | 0             | COMMUNITY/ ARE       | Α            |                    | 0                   | 9<br>Computation         |
| CALL SIGN                                      | DSE         | CALL SIGN       | DSE           | CALL SIGN            | DSE          | CALL SIGN          | DSE                 | of                       |
|  |             |                 |               |                      |              |                    |                     | Base Rate Fee            |
|  |             |                 |               |                      |              |                    |                     | and                      |
|  |             |                 |               |                      |              | -                  |                     | Syndicated               |
|  | <del></del> |                 | <del></del>   |                      |              |                    | ·····               | Exclusivity<br>Surcharge |
|  | ···         |                 | <u></u>       |                      |              |                    |                     | for                      |
|  |             |                 |               |                      |              |                    |                     | Partially                |
|  |             |                 |               |                      |              |                    |                     | Distant                  |
|  | <u></u>     |                 |               |                      |              | -                  |                     | Stations                 |
|  |             |                 | <del></del>   |                      |              |                    |                     |                          |
|  |             |                 | <del></del>   |                      |              | -                  |                     |                          |
|  |             |                 |               |                      |              |                    |                     |                          |
|  |             |                 |               |                      |              |                    |                     |                          |
|  |             |                 |               |                      |              |                    |                     |                          |
| Total DSEs                                     |             |                 | 0.00          | Total DSEs           |              |                    | 0.00                |                          |
| Gross Receipts First C                         | Group       | \$              | 0.00          | Gross Receipts Sec   | ond Group    | \$                 | 0.00                |                          |
| Base Rate Fee First 0                          | Group       | \$              | 0.00          | Base Rate Fee Sec    | ond Group    | \$                 | 0.00                |                          |
| ONE HUNDRED THI                                | RTY-NINTH   | SUBSCRIBER GROU | Р             | ONE HUNDRE           | D FORTIETH   | SUBSCRIBER GROU    | JP                  |                          |
| COMMUNITY/ AREA                                |             |                 | 0             | COMMUNITY/ ARE       | Α            |                    | 0                   |                          |
| CALL SIGN                                      | DSE         | CALL SIGN       | DSE           | CALL SIGN            | DSE          | CALL SIGN          | DSE                 |                          |
|  |             |                 |               |                      |              |                    |                     |                          |
|  | <del></del> |                 | <u></u>       |                      |              |                    | <u></u>             |                          |
|  | ···         |                 | <del></del>   |                      |              | -                  |                     |                          |
|  |             |                 |               |                      |              |                    |                     |                          |
|  |             |                 |               |                      |              |                    |                     |                          |
|  |             |                 |               |                      |              |                    |                     |                          |
|  | <u></u>     |                 | <u></u>       |                      |              |                    |                     |                          |
|  | ···         |                 | <del></del>   |                      |              | -                  |                     |                          |
|  |             |                 |               |                      |              |                    |                     |                          |
|  |             |                 |               |                      |              |                    |                     |                          |
|  |             |                 |               |                      |              |                    |                     |                          |
|  |             |                 | <del></del>   |                      |              |                    |                     |                          |
| 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<br>Enter here and in bloo |             |                 | scriber group | as shown in the boxe | es above.    | \$                 |                     |                          |

| LEGAL NAME OF OWN Advanced Cable            |            |                     |               |                      |           | S                  | YSTEM ID#<br>007219 | Name          |
|---|------------|---------------------|---------------|----------------------|-----------|--------------------|---------------------|---------------|
|   | BLOCK A: ( | COMPUTATION O       | F BASE RA     | TE FEES FOR EAC      | CH SUBSCR | IBER GROUP         |                     |               |
|   |            | SUBSCRIBER GROU     |               | H                    |           | SUBSCRIBER GROUP   | )                   | 9             |
| COMMUNITY/ AREA                             |            |                     | 0             | COMMUNITY/ ARE       | Α         |                    | 0                   | Computation   |
| CALL SIGN                                   | DSE        | CALL SIGN           | DSE           | CALL SIGN            | DSE       | CALL SIGN          | DSE                 | of            |
|   |            |                     |               |                      |           |                    |                     | Base Rate Fee |
|   |            |                     |               |                      |           |                    |                     | and           |
|   |            | <b></b>             |               |                      |           |                    |                     | Syndicated    |
|   |            |                     |               |                      |           |                    |                     | Exclusivity   |
|   |            |                     |               |                      |           |                    |                     | Surcharge     |
|   |            | -                   |               |                      |           |                    |                     | for           |
|   |            |                     |               |                      |           |                    |                     | Partially     |
|   |            |                     |               |                      |           |                    | <u> </u>            | Distant       |
|   |            |                     | <del></del>   |                      |           | -                  | <u> </u>            | Stations      |
|   |            |                     |               |                      |           |                    |                     |               |
|   |            |                     |               |                      |           | <del> </del>       |                     |               |
|   |            |                     |               |                      |           | -                  |                     |               |
|   |            |                     |               |                      |           | 1                  |                     |               |
|   | •••••      |                     | ···           |                      | •••••     | 1                  |                     |               |
| Total DSEs                                  |            |                     | 0.00          | Total DSEs           |           | !!                 | 0.00                |               |
| Gross Receipts First                        | Group      | \$                  | 0.00          | Gross Receipts Sec   | ond Group | \$                 | 0.00                |               |
| <b></b>                                     |            |                     | 0.00          |                      |           |                    | 0.00                |               |
| Base Rate Fee First                         |            | \$ CLIDSCOUDED COOL | 0.00          | Base Rate Fee Sec    |           | \$ CURCOURER CROUE | 0.00                |               |
|   |            | SUBSCRIBER GROU     |               | ii –                 |           | SUBSCRIBER GROUP   | 0                   |               |
| COMMUNITY/ AREA                             |            |                     | 0             | COMMUNITY/ ARE       | Α         |                    |                     |               |
| CALL SIGN                                   | DSE        | CALL SIGN           | DSE           | CALL SIGN            | DSE       | CALL SIGN          | DSE                 |               |
|   |            |                     |               |                      |           |                    |                     |               |
|   |            |                     |               |                      |           |                    |                     |               |
|   |            | -                   |               |                      |           |                    |                     |               |
|   |            |                     |               |                      |           |                    |                     |               |
|   |            |                     | <u></u>       |                      | ·····     | -                  |                     |               |
|   | •••••      |                     |               |                      |           | <b>-</b>           |                     |               |
|   |            |                     | ···           |                      |           | -                  |                     |               |
|   |            |                     |               |                      |           | H                  |                     |               |
|   |            |                     |               |                      |           |                    |                     |               |
|   |            |                     |               |                      |           |                    |                     |               |
|   |            |                     |               |                      |           |                    |                     |               |
|   |            |                     |               |                      |           |                    |                     |               |
|   |            |                     |               |                      |           |                    |                     |               |
|   |            |                     |               |                      |           |                    |                     |               |
| 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<br>Enter here and in blo |            |                     | scriber group | as shown in the boxe | es above. | \$                 |                     |               |

| LEGAL NAME OF OWN Advanced Cable             |            |                 |               |                      |             | S                                     | YSTEM ID#<br>007219 | Name                     |
|--|------------|-----------------|---------------|----------------------|-------------|---------------------------------------|---------------------|--------------------------|
| [  | BLOCK A: ( | COMPUTATION O   | F BASE RA     | TE FEES FOR EAC      | CH SUBSCR   | RIBER GROUP                           |                     |                          |
| ONE HUNDRED F                                | ORTY-FIFTH | SUBSCRIBER GROU | Р             | ONE HUNDRED          | FORTY-SIXTH | I SUBSCRIBER GROUP                    | )                   | 0                        |
| COMMUNITY/ AREA                              |            |                 | 0             | COMMUNITY/ ARE       | Α           |                                       | 0                   | 9<br>Computation         |
| CALL SIGN                                    | DSE        | CALL SIGN       | DSE           | CALL SIGN            | DSE         | CALL SIGN                             | DSE                 | of                       |
|  | <u></u>    |                 |               |                      |             |                                       |                     | Base Rate Fee            |
|  |            |                 |               |                      |             |                                       |                     | and                      |
|  |            |                 |               |                      |             |                                       |                     | Syndicated               |
|  |            |                 | <u></u>       |                      | ·····       |                                       | <u></u>             | Exclusivity<br>Surcharge |
|  | ····       |                 | <del></del>   |                      |             | -                                     |                     | for                      |
|  | ••••       |                 | <u></u>       |                      |             |                                       |                     | Partially                |
|  |            |                 |               |                      |             |                                       |                     | Distant                  |
|  |            |                 |               |                      |             |                                       |                     | Stations                 |
|  |            |                 |               |                      |             |                                       |                     |                          |
|  |            |                 |               |                      |             |                                       |                     |                          |
|  |            |                 |               |                      |             |                                       |                     |                          |
|  |            |                 |               |                      |             |                                       |                     |                          |
|  | ••••       |                 | <del></del>   |                      | ·····       | <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                          |            | \$              | 0.00          | Base Rate Fee Sec    |             | \$                                    | 0.00                |                          |
| ONE HUNDRED FORT                             |            | SUBSCRIBER GROU |               | 11                   |             | I SUBSCRIBER GROUP                    |                     |                          |
| COMMUNITY/ AREA                              |            |                 | 0             | COMMUNITY/ ARE       | Α           |                                       | 0                   |                          |
| CALL SIGN                                    | DSE        | CALL SIGN       | DSE           | CALL SIGN            | DSE         | CALL SIGN                             | DSE                 |                          |
|  |            |                 |               |                      |             |                                       |                     |                          |
|  |            |                 | <u></u>       |                      |             |                                       |                     |                          |
|  | ····       |                 | <u></u>       |                      |             | -                                     |                     |                          |
|  |            |                 | <del> </del>  |                      |             | -                                     |                     |                          |
|  |            |                 | <del></del>   |                      | ·····       | <del> </del>                          | ·····               |                          |
|  |            |                 |               |                      |             |                                       |                     |                          |
|  |            |                 |               |                      |             |                                       |                     |                          |
|  |            |                 |               |                      |             |                                       |                     |                          |
|  | <u></u>    |                 | <u></u>       |                      |             |                                       |                     |                          |
|  |            |                 |               |                      |             |                                       |                     |                          |
|  | ····       |                 | <del> </del>  |                      |             | -                                     |                     |                          |
|  | ····       |                 |               |                      |             |                                       |                     |                          |
|  |            | •               |               |                      |             | · · · · · · · · · · · · · · · · · · · |                     |                          |
| 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<br>Enter here and in bloo |            |                 | scriber group | as shown in the boxe | es above.   | \$                                    |                     |                          |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  Advanced Cable Communications, LLC  007219 |       |                 |             |                       |          |                 |      |                      |
|--|-------|-----------------|-------------|-----------------------|----------|-----------------|------|----------------------|
| E<br>ONE HUNDRED FOR   |       |                 |             | ATE FEES FOR EACH     |          | RIBER GROUP     | JP   |                      |
| COMMUNITY/ AREA  |       |                 | 0           | COMMUNITY/ AREA       |          |                 | 0    | <b>9</b> Computation |
| CALL SIGN  | DSE   | CALL SIGN       | DSE         | CALL SIGN             | DSE      | CALL SIGN       | DSE  | of                   |
|  |       |                 |             |                       |          | -               |      | Base Rate Fee        |
|  | ····  |                 |             |                       |          |                 |      | and<br>Syndicated    |
|  |       |                 |             |                       |          |                 |      | Exclusivity          |
|  |       | -               |             |                       |          |                 |      | Surcharge<br>for     |
|  |       | -               |             |                       |          |                 |      | Partially            |
|  |       |                 |             |                       | <u></u>  |                 |      | Distant              |
|  |       |                 |             |                       |          |                 |      | Stations             |
|  |       |                 |             |                       |          |                 |      |                      |
|  | ····  |                 |             |                       |          | -               |      |                      |
|  |       |                 |             |                       |          |                 |      |                      |
|  |       |                 |             |                       |          |                 |      |                      |
| Total DSEs   |       |                 | 0.00        | Total DSEs            |          |                 | 0.00 |                      |
| Gross Receipts First (   | Group | \$              | 0.00        | Gross Receipts Secon  | nd Group | \$              | 0.00 |                      |
| Base Rate Fee First (  | Group | \$              | 0.00        | Base Rate Fee Secon   | nd Group | \$              | 0.00 |                      |
|  |       | SUBSCRIBER GROU |             | ONE HUNDRED FIFT      | Y-SECOND | 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 Fourth | 1 Group  | \$              | 0.00 |                      |
| Base Rate Fee Third  | Group | \$              | 0.00        | Base Rate Fee Fourth  | า Group  | \$              | 0.00 |                      |
| Base Rate Fee: Add<br>Enter here and in bloo                                     |       |                 | riber group | as shown in the boxes | above.   | \$              |      |                      |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  Advanced Cable Communications, LLC  007219 |       |                                |             |                       |  |                   |                |                          |
|--|-------|--------------------------------|-------------|-----------------------|--|-------------------|----------------|--------------------------|
|  |       | COMPUTATION OF SUBSCRIBER GROU |             | ATE FEES FOR EACH     |  |                   | JP             |                          |
| COMMUNITY/ AREA  |       |                                | 0           | COMMUNITY/ AREA       |  |                   | 0              | 9<br>Computation         |
| CALL SIGN  | DSE   | CALL SIGN                      | DSE         | CALL SIGN             | DSE  | CALL SIGN         | DSE            | of                       |
|  |       |                                |             |                       |  |                   |                | Base Rate Fee<br>and     |
|  |       |                                |             |                       |  |                   |                | Syndicated               |
|  |       |                                |             |                       | <u>.                                    </u> |                   |                | Exclusivity<br>Surcharge |
|  |       |                                |             |                       |  |                   |                | for                      |
|  |       |                                |             |                       |  |                   |                | Partially<br>Distant     |
|  |       |                                |             |                       |  |                   |                | Stations                 |
|  |       |                                |             |                       |  |                   |                |                          |
|  |       |                                |             |                       |  |                   |                |                          |
|  |       |                                |             |                       |  |                   |                |                          |
|  |       |                                |             |                       |  |                   |                |                          |
| Total DSEs   |       |                                | 0.00        | Total DSEs            |  |                   | 0.00           |                          |
| Gross Receipts First (   | Group | \$                             | 0.00        | Gross Receipts Secon  | nd Group                                     | \$                | 0.00           |                          |
| Base Rate Fee First (  | Group | \$                             | 0.00        | Base Rate Fee Secon   | nd Group                                     | \$                | 0.00           |                          |
|  |       | SUBSCRIBER GROU                | JP <b>0</b> | ii .                  |  | I SUBSCRIBER GROU | JP<br><b>0</b> |                          |
| COMMUNITY/ AREA  |       |                                | u           | 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   | Group | \$                             | 0.00        | Gross Receipts Fourth | i Group                                      | \$                | 0.00           |                          |
| Base Rate Fee Third  | Group | \$                             | 0.00        | Base Rate Fee Fourth  | ı Group                                      | \$                | 0.00           |                          |
| Base Rate Fee: Add the Enter here and in blood                                   |       |                                | riber group | as shown in the boxes | above.                                       | \$                |                |                          |

| LEGAL NAME OF OWN Advanced Cable               |             |                 |               |                      |              | S                | YSTEM ID#<br>007219 | Name                |
|--|-------------|-----------------|---------------|----------------------|--------------|------------------|---------------------|---------------------|
| E  | BLOCK A: (  | COMPUTATION O   | F BASE RA     | TE FEES FOR EAC      | H SUBSCF     | RIBER GROUP      |                     |                     |
| ONE HUNDRED FIFT                               | Y-SEVENTH   | SUBSCRIBER GROU |               | Ħ                    |              | SUBSCRIBER GROUP |                     | 9                   |
| COMMUNITY/ AREA                                |             |                 | 0             | COMMUNITY/ ARE       |              |                  | 0                   | Computation         |
| CALL SIGN                                      | DSE         | CALL SIGN       | DSE           | CALL SIGN            | DSE          | CALL SIGN        | DSE                 | of                  |
|  |             |                 |               |                      |              |                  |                     | Base Rate Fe        |
|  | <u></u>     |                 |               |                      |              |                  |                     | and<br>Syndicated   |
|  | ···         |                 |               |                      |              |                  |                     | Exclusivity         |
|  |             |                 |               |                      |              |                  |                     | Surcharge           |
|  |             |                 |               |                      |              |                  |                     | for                 |
|  |             |                 |               |                      |              |                  |                     | Partially           |
|  | <u></u>     |                 | <del></del>   |                      | ·····        |                  |                     | Distant<br>Stations |
|  | <del></del> |                 | ···           |                      | ·····        |                  |                     | 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 0                          | Group       | \$              | 0.00          | Base Rate Fee Sec    | ond Group    | \$               | 0.00                |                     |
| ONE HUNDRED F                                  | IFTY-NINTH  | SUBSCRIBER GROU | Р             | ONE HUNDE            | RED SIXTIETH | SUBSCRIBER GROUP | )                   |                     |
| COMMUNITY/ AREA                                |             |                 | 0             | COMMUNITY/ ARE       | Α            |                  | 0                   |                     |
| CALL SIGN                                      | DSE         | CALL SIGN       | DSE           | CALL SIGN            | DSE          | CALL SIGN        | DSE                 |                     |
|  | <u></u>     |                 |               |                      |              |                  |                     |                     |
|  |             |                 |               | 1                    | •••••        |                  |                     |                     |
|  |             |                 |               |                      |              |                  |                     |                     |
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|  |             | -               |               |                      |              |                  |                     |                     |
|  | <u></u>     |                 | <del></del>   |                      | ·····        |                  |                     |                     |
|  | ···         |                 |               | ·                    |              |                  |                     |                     |
|  | <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                |                     |
|  |             |                 |               |                      |              |                  |                     |                     |
| Base Rate Fee Third                            | Group       | \$              | 0.00          | Base Rate Fee Foun   | rth Group    | \$               | 0.00                |                     |
| Base Rate Fee: Add t<br>Enter here and in bloc |             |                 | scriber group | as shown in the boxe | s above.     | \$               |                     |                     |

| LEGAL NAME OF OWNE  Advanced Cable (           |                |                |                |                      |           | S              | YSTEM ID#<br>007219 | Name             |
|--|----------------|----------------|----------------|----------------------|-----------|----------------|---------------------|------------------|
| BI   | LOCK A:        | COMPUTATION O  | BASE RA        | TE FEES FOR EAC      | H SUBSCR  | IBER GROUP     |                     |                  |
|  |                | SUBSCRIBER GRO | UP             |                      | SECOND    | SUBSCRIBER GRO | UP                  | 0                |
| COMMUNITY/ AREA                                |                |                |                | COMMUNITY/ AREA      |           |                | DSE DSE             | 9<br>Computatio  |
| CALL SIGN                                      | DSE            | CALL SIGN      | DSE            | CALL SIGN            | DSE       | CALL SIGN      | DSE                 | of               |
|  |                |                |                |                      |           |                |                     | Base Rate Fe     |
|  |                |                | <u> </u>       |                      |           | _              |                     | and              |
|  |                |                |                |                      |           |                |                     | Syndicated       |
|  | <mark>.</mark> |                | <u></u>        |                      |           |                |                     | Exclusivity      |
|  |                |                | <u></u>        |                      |           |                | <u></u>             | Surcharge        |
|  |                |                | <del>.  </del> |                      |           |                | <u></u>             | for<br>Partially |
|  |                |                | <del>.  </del> |                      |           | -              | ••••                | Distant          |
|  |                |                |                |                      |           |                |                     | Stations         |
|  |                |                |                |                      |           |                |                     |                  |
|  |                |                |                |                      |           |                |                     |                  |
|  |                |                |                |                      |           |                |                     |                  |
|  | <mark>.</mark> |                | <mark></mark>  |                      |           |                |                     |                  |
|  |                |                | <u> </u>       |                      |           |                |                     |                  |
|  |                |                |                |                      |           |                |                     |                  |
| Total DSEs                                     |                |                | 0.00           | Total DSEs           |           |                | 0.00                |                  |
| Gross Receipts First G                         | roup           | \$ 845         | 5,136.00       | Gross Receipts Sec   | ond Group | \$             | 0.00                |                  |
| Base Rate Fee First G                          | roup           | \$             | 0.00           | Base Rate Fee Seco   | ond Group | \$             | 0.00                |                  |
|  | THIRD          | SUBSCRIBER GRO | UP             |                      | 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>       |                      |           |                |                     |                  |
|  |                |                | <u></u>        |                      |           |                | <u></u>             |                  |
|  |                |                | <del></del>    |                      |           |                |                     |                  |
|  | <u> </u>       |                | <del></del>    |                      |           |                | ····                |                  |
|  |                |                |                |                      |           |                |                     |                  |
|  |                |                |                |                      |           |                |                     |                  |
|  |                |                |                |                      |           |                |                     |                  |
|  |                |                |                |                      |           |                |                     |                  |
|  | <mark>.</mark> |                | <mark></mark>  |                      |           |                |                     |                  |
|  |                |                | <u> </u>       |                      | <u></u>   |                | <u></u>             |                  |
|  |                |                |                |                      |           |                | <u></u>             |                  |
| Total DSEs                                     |                |                | 0.00           | Total DSEs           |           |                | 0.00                |                  |
| Gross Receipts Third C                         | Group          | \$             | 0.00           | Gross Receipts Four  | th Group  | \$             | 0.00                |                  |
| Base Rate Fee Third G                          | 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.  | \$             | 0.00                |                  |

| Name                      | YSTEM ID#<br>007219 | S'              |         |                                  | •              |                |          | LEGAL NAME OF OWNE  Advanced Cable C |
|---------------------------|---------------------|-----------------|---------|----------------------------------|----------------|----------------|----------|--------------------------------------|
|                           |                     |                 |         | TE FEES FOR EACH                 |                |                |          | Bl                                   |
| 9                         |                     | SUBSCRIBER GROU | SIXTH   | COMMUNITY ADDA                   |                | SUBSCRIBER GRO | FIFTH    | COMMUNITY ADDA                       |
| Computation               | DSE                 |                 |         | COMMUNITY/ AREA                  | 0              |                |          | COMMUNITY/ AREA                      |
| of                        | DSE                 | CALL SIGN       | DSE     | CALL SIGN                        | DSE            | CALL SIGN      | DSE      | CALL SIGN                            |
| Base Rate Fe              |                     |                 |         |                                  |                | ļ              |          |                                      |
| and                       |                     |                 |         |                                  |                |                |          |                                      |
| Syndicated<br>Exclusivity | ····                | -               |         |                                  |                | <b>-</b>       | <u>-</u> |                                      |
| Surcharge                 |                     |                 |         |                                  |                |                |          |                                      |
| for                       |                     |                 |         |                                  |                |                |          |                                      |
| Partially                 |                     |                 |         |                                  |                |                |          |                                      |
| Distant<br>Stations       |                     |                 |         |                                  |                |                |          |                                      |
| Otations                  |                     |                 |         |                                  |                | <b></b>        | ·        |                                      |
|                           |                     |                 |         |                                  |                |                |          |                                      |
|                           |                     |                 |         |                                  |                |                |          |                                      |
|                           |                     |                 |         |                                  |                |                |          |                                      |
|                           |                     |                 |         |                                  |                |                |          |                                      |
|                           | 0.00                | П               |         | Total DSEs                       | 0.00           |                |          | Total DSEs                           |
|                           | _                   | _               |         |                                  |                | _              |          |                                      |
|                           | 0.00                | \$              | d Group | Gross Receipts Secon             | 0.00           | \$             | roup     | Gross Receipts First G               |
|                           | 0.00                | \$              | d Group | Base Rate Fee Secon              | 0.00           | \$             | roup     | <b>3ase Rate Fee</b> First G         |
|                           | IP                  | SUBSCRIBER GROU | EIGHTH  |                                  | JP             | SUBSCRIBER GRO | SEVENTH  | 5                                    |
|                           | 0                   |                 |         | COMMUNITY/ AREA                  | 0              |                |          | COMMUNITY/ AREA                      |
|                           | DSE                 | CALL SIGN       | DSE     | CALL SIGN                        | DSE            | CALL SIGN      | DSE      | CALL SIGN                            |
|                           |                     |                 |         |                                  |                |                |          |                                      |
|                           | <u></u>             |                 |         |                                  |                |                | <u>-</u> |                                      |
|                           |                     | -               |         |                                  |                | <b>-</b>       |          |                                      |
|                           |                     |                 |         |                                  |                |                |          |                                      |
|                           |                     | -               |         |                                  |                |                |          |                                      |
|                           | <u></u>             |                 |         |                                  |                |                |          |                                      |
|                           |                     | -               |         |                                  |                |                |          |                                      |
|                           |                     |                 |         |                                  |                |                |          |                                      |
|                           | ····                |                 |         |                                  |                |                |          |                                      |
|                           |                     |                 |         |                                  | <mark>-</mark> |                | ··       |                                      |
|                           |                     |                 |         |                                  |                |                |          |                                      |
|                           |                     |                 |         |                                  |                |                |          |                                      |
|                           |                     |                 |         |                                  |                |                |          |                                      |
|                           | 0.00                |                 |         | Total DSEs                       | 0.00           |                |          | Total DSEs                           |
|                           | 0.00                | \$              | Group   | Total DSEs Gross Receipts Fourth | 0.00           | \$             | Group    | Total DSEs<br>Gross Receipts Third G |

| LEGAL NAME OF OWNER  Advanced Cable C |   |                |      |                       |                | S              | YSTEM ID#<br>007219 | Name                 |
|---------------------------------------|---|----------------|------|-----------------------|----------------|----------------|---------------------|----------------------|
| BL                                    |   |                |      | TE FEES FOR EACH      |                |                |                     |                      |
|                                       | NINTH                                   | SUBSCRIBER GRO |      |                       | TENTH          | SUBSCRIBER GRO |                     | 9                    |
| COMMUNITY/ AREA                       |   |                | 0    | COMMUNITY/ AREA       |                |                | 0                   | Computation          |
| CALL SIGN                             | DSE                                     | CALL SIGN      | DSE  | CALL SIGN             | DSE            | CALL SIGN      | DSE                 | of                   |
| O'TEE O'O'T                           | DOL                                     | O' LE GIGIT    | DOL  | CALL GIOIV            | DOL            | OALL GIGIT     | DOL                 | Base Rate Fee        |
|                                       |   |                |      |                       |                |                |                     | and                  |
|                                       |   |                |      |                       |                |                |                     | Syndicated           |
|                                       |   |                |      |                       |                |                |                     | Exclusivity          |
|                                       |   |                |      |                       | <u> </u>       |                |                     | Surcharge            |
|                                       |   |                |      |                       | <u></u>        |                |                     | for                  |
|                                       |   |                |      |                       | <u></u>        |                | ·····               | Partially<br>Distant |
|                                       |   |                | ·    |                       | <del></del>    |                |                     | Stations             |
|                                       |   |                | •    |                       | <u>-</u>       |                |                     | Gtations             |
|                                       |   |                |      |                       |                |                |                     |                      |
|                                       | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                |      |                       |                |                |                     |                      |
|                                       |   |                |      |                       |                |                |                     |                      |
|                                       |   |                |      |                       | <u> </u>       |                | <u></u>             |                      |
|                                       |   |                |      |                       |                |                |                     |                      |
| Total DSEs                            |   |                | 0.00 | Total DSEs            |                |                | 0.00                |                      |
| Gross Receipts First Gr               | oup                                     | \$             | 0.00 | Gross Receipts Secor  | nd Group       | \$             | 0.00                |                      |
| Base Rate Fee First Gr                | oup                                     | \$             | 0.00 | Base Rate Fee Secon   | nd Group       | \$             | 0.00                |                      |
| EL                                    | EVENTH                                  | SUBSCRIBER GRO | UP   |                       | TWELVTH        | SUBSCRIBER GRO | UP                  |                      |
| COMMUNITY/ AREA                       |   |                | 0    | COMMUNITY/ AREA       |                |                | 0                   |                      |
| CALL SIGN                             | DSE                                     | CALL SIGN      | DSE  | CALL SIGN             | DSE            | CALL SIGN      | DSE                 |                      |
|                                       |   |                |      |                       | <u> </u>       |                |                     |                      |
|                                       |   |                |      |                       |                | <u> </u>       |                     |                      |
|                                       |   |                |      |                       | <u></u>        |                |                     |                      |
|                                       |   |                |      |                       | <del>.  </del> |                | ····                |                      |
|                                       |   |                | -    |                       |                | <del> </del>   | <del></del>         |                      |
|                                       |   |                | •    |                       | <u></u>        |                |                     |                      |
|                                       |   |                |      |                       |                |                |                     |                      |
|                                       |   |                |      |                       |                |                |                     |                      |
|                                       |   |                |      |                       |                |                |                     |                      |
|                                       |   |                |      |                       | <u> </u>       |                | <u></u>             |                      |
|                                       |   |                |      |                       | <u></u>        | <u> </u>       | <u></u>             |                      |
|                                       |   |                |      |                       | <u>.  </u>     |                | <u> </u>            |                      |
|                                       |   |                |      |                       | <u>-</u>       |                |                     |                      |
| Total DSCs                            | ]                                       |                | 0.00 | Total DOC-            |                | П              | 0.00                |                      |
| Total DSEs                            |   |                | 0.00 | Total DSEs            |                | -              | 0.00                |                      |
| Gross Receipts Third G                | roup                                    | \$             | 0.00 | Gross Receipts Fourth | h Group        | \$             | 0.00                |                      |
| Base Rate Fee Third G                 | roup                                    | \$             | 0.00 | Base Rate Fee Fourth  | n Group        | \$             | 0.00                |                      |
|                                       |   |                |      |                       |                |                |                     |                      |

|  | COMPUTATION O    | F BASE RA   | TE EEEO EOD EA                |           |                  |      |                         |
|--|------------------|-------------|-------------------------------|-----------|------------------|------|-------------------------|
|  |                  |             | TT .                          |           |                  |      |                         |
| COMMUNITY/ AREA                        | H SUBSCRIBER GRO |             | 11                            |           | H SUBSCRIBER GRO |      | 9                       |
|  |                  | 0           | COMMUNITY/ ARE                | Α         |                  | 0    | Computation             |
| CALL SIGN DSE                          | CALL SIGN        | DSE         | CALL SIGN                     | DSE       | CALL SIGN        | DSE  | of                      |
|  |                  |             |                               |           |                  |      | Base Rate F             |
|  |                  |             |                               |           |                  |      | and                     |
|  |                  |             |                               |           |                  |      | Syndicate               |
| <u></u>                                |                  |             | -                             | ·····     |                  |      | Exclusivit<br>Surcharge |
|  |                  | <u></u>     |                               |           |                  |      | for                     |
|  |                  |             |                               |           |                  |      | Partially               |
|  |                  |             |                               |           |                  |      | Distant                 |
| ······································ |                  | <u></u>     |                               |           |                  |      | Stations                |
|  |                  | <del></del> |                               |           |                  |      |                         |
|  |                  |             |                               |           |                  |      |                         |
|  |                  |             |                               |           |                  |      |                         |
|  |                  |             |                               |           |                  |      |                         |
| Total DSEs                             |                  | 0.00        | Total DCTo                    |           |                  | 0.00 |                         |
| Gross Receipts First Group             | <b>\$</b>        | 0.00        | Total DSEs Gross Receipts Sec | and Group | <b>\$</b>        | 0.00 |                         |
| Gross Neceipls First Group             | <b>4</b>         | 0.00        | Gloss Neceipts Sec            | ond Group | <b>4</b>         | 0.00 |                         |
| Base Rate Fee First Group              | \$               | 0.00        | Base Rate Fee Sec             | ond Group | \$               | 0.00 |                         |
| FIFTEENT                               | H SUBSCRIBER GRO | UP          |                               | SIXTEENTH | H SUBSCRIBER GRO | UP   |                         |
| COMMUNITY/ AREA                        |                  | 0           | COMMUNITY/ ARE                | Α         |                  | 0    |                         |
| CALL SIGN DSE                          | CALL SIGN        | DSE         | CALL SIGN                     | DSE       | CALL SIGN        | DSE  |                         |
|  |                  |             |                               |           |                  |      |                         |
| <u> </u>                               |                  |             | -                             |           |                  |      |                         |
|  |                  | <u></u>     |                               |           |                  |      |                         |
|  |                  |             |                               |           |                  |      |                         |
|  |                  |             |                               |           |                  |      |                         |
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| ······································ |                  | <del></del> |                               |           |                  |      |                         |
|  |                  | <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 |                         |
| ,                                      | ·                |             |                               | ·r        | -                |      |                         |
| Base Rate Fee Third Group              | \$               | 0.00        | Base Rate Fee Fou             | rth Group | \$               | 0.00 |                         |

| CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE GALL SIGN DSE Base Rate and Syndical Exclusion Syndical Exclusion Surchard for  |                           |                   |      |                    |           |                 | 007219 |            |
|---|---------------------------|-------------------|------|--------------------|-----------|-----------------|--------|------------|
| COMMUNITY/ AREA   D   COMMUNITY/ AREA   D   COMPUT   CALL SIGN   DSE   CALL SIGN        |                           |                   |      |                    |           |                 | LID    |            |
| CALL SIGN   DSE   CALL SIGN   DSE   CALL SIGN   DSE   CALL SIGN   DSE   CALL SIGN   DSE   CALL SIGN   DSE   CALL SIGN   CALL      |                           | 1 JOBSONIBER GRO  |      | li                 |           | CODOCINIDER GRO |        | 9          |
| Base Rate Fee First Group \$ 0.00   Total DSEs   0.00   Sase Rate Fee Second Group \$ 0.00   Sase Rate Fee First Group \$ 0.00   COMMUNITY/ AREA   0   COMMUN |                           |                   |      |                    |           |                 |        | Computat   |
| and Syndic Surch Surch Sourch of Fort and Dista Statio  Total DSEs 0.00 Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 COMMUNITY/AREA 0 COM  | CALL SIGN DSE             | CALL SIGN         | DSE  | CALL SIGN          | DSE       | CALL SIGN       | DSE    |            |
| Syndic. Surchase Surc    |                           |                   |      |                    |           |                 |        |            |
| Exclus Surcha for Partial Dista Station  Total DSEs  Gross Receipts First Group  Sase Rate Fee First Group  NINTEENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  CALL SIGN  DSE  CALL     |                           |                   | ···· |                    |           | -               |        | Syndicate  |
| Surchar for Partial Dista Statio  Total DSEs  Total DS    |                           |                   | ···· |                    | ••••      | -               |        | Exclusivit |
| Partia Dista Statio  otal DSEs  o    |                           |                   |      |                    |           |                 |        | Surcharg   |
| Otal DSEs   |                           |                   |      |                    |           |                 |        | for        |
| Statio    |                           |                   |      |                    |           |                 |        | Partially  |
| otal DSEs one pross Receipts First Group s one Rate Fee First Group s one Rate Fee First Group s one Rate Fee First Group s one Rate Fee First Group s one Rate Fee First Group s one Rate Fee First Group s one Rate Fee Second Group TWENTIETH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL S    |                           |                   |      |                    |           |                 |        |            |
| ross Receipts First Group  ase Rate Fee First Group  NINTEENTH SUBSCRIBER GROUP  OMMUNITY/ AREA  O  CALL SIGN  DSE  CALL SIGN     |                           |                   | ···· |                    |           | -               |        | Stations   |
| Siross Receipts First Group  Siross Receipts Second Group  Siross     |                           | ·                 | ···· |                    | ••••      | -               |        |            |
| Tross Receipts First Group  S  O.00  Base Rate Fee Second Group  NINTEENTH SUBSCRIBER GROUP  OMMUNITY/ AREA  O  CALL SIGN  DSE    |                           |                   |      |                    |           |                 |        |            |
| Siross Receipts First Group  Siross Receipts Second Group  Siross     |                           |                   |      |                    |           |                 |        |            |
| Stross Receipts First Group  Sase Rate Fee First Group  Sase Rate Fee First Group  Sase Rate Fee Second Group  NINTEENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  O  CALL SIGN  DSE     |                           |                   |      |                    |           |                 |        |            |
| Stross Receipts First Group  Sase Rate Fee First Group  Sase Rate Fee First Group  Sase Rate Fee Second Group  NINTEENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  O  CALL SIGN  DSE     |                           |                   |      |                    |           |                 |        |            |
| Asse Rate Fee First Group  NINTEENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  O  CALL SIGN  DSE  CAL    | otal DSEs                 |                   | 0.00 | Total DSEs         |           |                 | 0.00   |            |
| NINTEENTH SUBSCRIBER GROUP  OMMUNITY/ AREA  O COMMUNITY/ AREA  O CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  DSE  DSE  DSE  DSE  DSE  DSE  DS   | ross Receipts First Group | \$                | 0.00 | Gross Receipts Sec | ond Group | \$              | 0.00   |            |
| NINTEENTH SUBSCRIBER GROUP  OMMUNITY/ AREA  O COMMUNITY/ AREA  O CALL SIGN  DSE CALL SIGN  DSE CALL SIGN  DSE     |                           |                   |      |                    |           |                 | 1      |            |
| OMMUNITY/ AREA 0 COMMUNITY/ AREA 0  CALL SIGN DSE CALL SIG    | ase Rate Fee First Group  | \$                | 0.00 | Base Rate Fee Sec  | ond Group | \$              | 0.00   |            |
| CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE  CALL SIGN     | NINTEENTH                 | L CLIDCODIDED CDC |      |                    |           |                 |        |            |
| otal DSEs Total DSEs 0.00   |                           | 1 SUBSCRIBER GRU  | OUP  |                    | TWENTIETH | SUBSCRIBER GRO  |        |            |
|   |                           | 1 SUBSCRIBER GRO  |      | Ti .               |           | SUBSCRIBER GRO  |        |            |
|   | COMMUNITY/ AREA           |                   | 0    | COMMUNITY/ AREA    | Α         |                 | 0      |            |
|   | OMMUNITY/ AREA            |                   | 0    | COMMUNITY/ AREA    | Α         |                 | 0      |            |
|   | OMMUNITY/ AREA            |                   | 0    | COMMUNITY/ AREA    | Α         |                 | 0      |            |
|   | OMMUNITY/ AREA            |                   | 0    | COMMUNITY/ AREA    | Α         |                 | 0      |            |
|   | OMMUNITY/ AREA            |                   | 0    | COMMUNITY/ AREA    | Α         |                 | 0      |            |
|   | OMMUNITY/ AREA            |                   | 0    | COMMUNITY/ AREA    | Α         |                 | 0      |            |
|   | OMMUNITY/ AREA            |                   | 0    | COMMUNITY/ AREA    | Α         |                 | 0      |            |
|   | OMMUNITY/ AREA            |                   | 0    | COMMUNITY/ AREA    | Α         |                 | 0      |            |
|   | OMMUNITY/ AREA            |                   | 0    | COMMUNITY/ AREA    | Α         |                 | 0      |            |
|   | COMMUNITY/ AREA           |                   | 0    | COMMUNITY/ AREA    | Α         |                 | 0      |            |
|   | COMMUNITY/ AREA           |                   | 0    | COMMUNITY/ AREA    | Α         |                 | 0      |            |
|   | COMMUNITY/ AREA           |                   | 0    | COMMUNITY/ AREA    | Α         |                 | 0      |            |
|   | OMMUNITY/ AREA            |                   | 0    | COMMUNITY/ AREA    | Α         |                 | 0      |            |
| Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00  | OMMUNITY/ AREA            |                   | 0    | COMMUNITY/ AREA    | Α         |                 | 0      |            |
|   | CALL SIGN DSE             |                   | DSE  | CALL SIGN          | Α         |                 | DSE    |            |
|   | CALL SIGN DSE             | CALL SIGN         | 0.00 | COMMUNITY/ AREA    | DSE       | CALL SIGN       | DSE    |            |
| Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00  | CALL SIGN DSE             | CALL SIGN         | 0.00 | COMMUNITY/ AREA    | DSE       | CALL SIGN       | DSE    |            |

| Name                      | 007219               | J                  |         |   |   | ications, LLC      |              | Advanced Cable C                                       |
|---------------------------|----------------------|--------------------|---------|---|---|--------------------|--------------|--|
|                           |                      |                    |         | TE FEES FOR EACH                                      |   |                    |              |  |
| 9                         |                      | SUBSCRIBER GROU    | -SECOND |   |   | SUBSCRIBER GROU    | Y-FIRST      |  |
| Computation               | 0.00<br>0.00<br>0.00 |                    |         | COMMUNITY/ AREA                                       | 0                                       |                    |              | COMMUNITY/ AREA  |
| of                        | DSE                  | CALL SIGN          | DSE     | CALL SIGN   | DSE                                     | CALL SIGN          | DSE          | CALL SIGN  |
| Base Rate F               |                      |                    |         |   |   |                    |              |  |
| and                       |                      |                    |         |   |   | -                  |              |  |
| Syndicated<br>Exclusivity | <u></u>              | -                  |         |   |   |                    |              |  |
| Surcharge                 |                      |                    |         |   |   |                    |              |  |
| for                       |                      |                    |         |   |   |                    |              |  |
| Partially<br>Distant      |                      |                    |         |   |   |                    |              |  |
| Stations                  | <u></u>              |                    |         |   |   |                    |              |  |
|                           |                      |                    |         |   |   |                    |              |  |
|                           |                      |                    |         |   |   |                    |              |  |
|                           |                      |                    |         |   |   |                    |              |  |
|                           |                      |                    |         | •••••••   |   |                    |              | •••••••••••  |
|                           |                      |                    |         |   |   |                    |              |  |
|                           | 0.00                 |                    |         | Total DSEs  | 0.00                                    |                    |              | Total DSEs   |
|                           |                      |                    |         | Gross Receipts Secon                                  | 0.00                                    | \$                 | oup          | Gross Receipts First Gr                                |
|                           | 0.00                 | \$                 | d Group | Horosa Mecelpia decon                                 |   |                    |              |  |
|                           | 0.00                 | \$                 | d Group | Gross Neceipts Gecom                                  |   |                    |              |  |
|                           |                      | \$                 |         | Base Rate Fee Secon                                   | 0.00                                    | \$                 | oup          | Base Rate Fee First Gr                                 |
|                           | 0.00                 |                    | d Group | Base Rate Fee Secon                                   | JP                                      | \$ SUBSCRIBER GROU |              | TWENT  |
|                           | 0.00                 | \$                 | d Group | Base Rate Fee Secon                                   |   |                    |              | TWENT  |
|                           | 0.00                 | \$                 | d Group | Base Rate Fee Secon                                   | JP                                      |                    |              | Base Rate Fee First Gr TWENT COMMUNITY/ AREA CALL SIGN |
|                           | 0.00<br>JP<br>0      | \$ SUBSCRIBER GROU | d Group | Base Rate Fee Secon TWENTY COMMUNITY/ AREA            | JP <b>0</b>                             | SUBSCRIBER GROU    | Y-THIRD      | TWENT  |
|                           | 0.00<br>JP<br>0      | \$ SUBSCRIBER GROU | d Group | Base Rate Fee Secon TWENTY COMMUNITY/ AREA            | JP <b>0</b>                             | SUBSCRIBER GROU    | Y-THIRD      | TWENT  |
|                           | 0.00<br>JP 0         | \$ SUBSCRIBER GROU | d Group | Base Rate Fee Secon TWENTY COMMUNITY/ AREA            | JP <b>0</b>                             | SUBSCRIBER GROU    | Y-THIRD      | TWENT  |
|                           | 0.00<br>JP 0         | \$ SUBSCRIBER GROU | d Group | Base Rate Fee Secon TWENTY COMMUNITY/ AREA            | JP <b>0</b>                             | SUBSCRIBER GROU    | Y-THIRD      | TWENT  |
|                           | 0.00<br>JP 0         | \$ SUBSCRIBER GROU | d Group | Base Rate Fee Secon TWENTY COMMUNITY/ AREA            | JP <b>0</b>                             | SUBSCRIBER GROU    | Y-THIRD      | TWENT  |
|                           | 0.00<br>JP 0         | \$ SUBSCRIBER GROU | d Group | Base Rate Fee Secon TWENTY COMMUNITY/ AREA            | JP <b>0</b>                             | SUBSCRIBER GROU    | Y-THIRD      | TWENT  |
|                           | 0.00<br>JP 0         | \$ SUBSCRIBER GROU | d Group | Base Rate Fee Secon TWENTY COMMUNITY/ AREA            | JP <b>0</b>                             | SUBSCRIBER GROU    | Y-THIRD      | TWENT  |
|                           | 0.00<br>JP 0         | \$ SUBSCRIBER GROU | d Group | Base Rate Fee Secon TWENTY COMMUNITY/ AREA            | JP <b>0</b>                             | SUBSCRIBER GROU    | Y-THIRD      | TWENT  |
|                           | 0.00<br>JP 0         | \$ SUBSCRIBER GROU | d Group | Base Rate Fee Secon TWENTY COMMUNITY/ AREA            | JP <b>0</b>                             | SUBSCRIBER GROU    | Y-THIRD      | TWENT  |
|                           | 0.00<br>JP 0         | \$ SUBSCRIBER GROU | d Group | Base Rate Fee Secon TWENTY COMMUNITY/ AREA            | JP <b>0</b>                             | SUBSCRIBER GROU    | Y-THIRD      | TWENT  |
|                           | 0.00<br>JP 0         | \$ SUBSCRIBER GROU | d Group | Base Rate Fee Secon TWENTY COMMUNITY/ AREA            | JP <b>0</b>                             | SUBSCRIBER GROU    | Y-THIRD      | TWENT  |
|                           | 0.00<br>JP 0         | \$ SUBSCRIBER GROU | d Group | Base Rate Fee Secon TWENTY COMMUNITY/ AREA            | JP <b>0</b>                             | SUBSCRIBER GROU    | Y-THIRD      | TWENT  |
|                           | 0.00<br>JP 0         | \$ SUBSCRIBER GROU | d Group | Base Rate Fee Secon TWENTY COMMUNITY/ AREA            | JP <b>0</b>                             | SUBSCRIBER GROU    | Y-THIRD      | TWENT COMMUNITY/ AREA  CALL SIGN                       |
|                           | DSE                  | \$ SUBSCRIBER GROU | d Group | TWENTY COMMUNITY/ AREA  CALL SIGN  Total DSEs         | DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE | SUBSCRIBER GROU    | Y-THIRD  DSE | TWENT COMMUNITY/ AREA  CALL SIGN  Total DSEs           |
|                           | 0.00  JP             | SUBSCRIBER GROU    | d Group | Base Rate Fee Secon TWENTY COMMUNITY/ AREA  CALL SIGN | JP 0                                    | CALL SIGN          | Y-THIRD  DSE | TWENT  |

|                  | YSTEM ID#<br>007219 | S               |           |                      |          |                | R OF CABL        | Advanced Cable C       |
|------------------|---------------------|-----------------|-----------|----------------------|----------|----------------|------------------|------------------------|
|                  |                     |                 |           | TE FEES FOR EACH     |          |                |                  |                        |
| 9                |                     | SUBSCRIBER GROU | NTY-SIXTH |                      |          | SUBSCRIBER GRO | TY-FIFTH         |                        |
| Computation      | 0                   |                 |           | COMMUNITY/ AREA      | 0        |                |                  | COMMUNITY/ AREA        |
| of               | DSE                 | CALL SIGN       | DSE       | CALL SIGN            | DSE      | CALL SIGN      | DSE              | CALL SIGN              |
| Base Rate Fe     |                     |                 |           |                      |          |                |                  |                        |
| and              |                     |                 |           |                      |          |                |                  |                        |
| Syndicated       |                     |                 |           |                      |          |                | <mark></mark>    |                        |
| Exclusivity      | ····                |                 | <b></b>   |                      | -        |                |                  |                        |
| Surcharge<br>for |                     | <b>-</b>        | <b>.</b>  |                      |          |                |                  |                        |
| Partially        |                     | +               |           |                      |          |                |                  |                        |
| Distant          |                     |                 |           |                      |          |                |                  |                        |
| Stations         |                     |                 |           |                      |          |                |                  |                        |
|                  |                     |                 |           |                      |          |                |                  |                        |
|                  |                     |                 |           |                      |          |                |                  |                        |
|                  |                     |                 | <b>.</b>  |                      | ļ        |                |                  |                        |
|                  |                     |                 | <b></b>   |                      | <b></b>  |                | . <mark> </mark> |                        |
|                  |                     |                 | <b>.</b>  |                      | <b> </b> |                |                  |                        |
|                  |                     | ļļ.             |           |                      |          |                |                  |                        |
|                  | 0.00                |                 |           | Total DSEs           | 0.00     |                |                  | Total DSEs             |
|                  | 0.00                | \$              | d Group   | Gross Receipts Secon | 0.00     | \$             | roup             | Gross Receipts First G |
|                  | 0.00                | \$              | d Group   | Base Rate Fee Secon  | 0.00     | \$             | roup             | Base Rate Fee First G  |
|                  | JP                  | SUBSCRIBER GROU | Y-EIGHTH  | TWENT                | UP       | SUBSCRIBER GRO | SEVENTH          | TWENTY-S               |
|                  | 0                   |                 |           | COMMUNITY/ AREA      | 0        |                |                  | COMMUNITY/ AREA        |
|                  | •••••               |                 |           | COMMUNITY AREA       | •••••    |                |                  |                        |
|                  | DSE                 | CALL SIGN       | DSE       | CALL SIGN            | DSE      | CALL SIGN      | DSE              | CALL SIGN              |
|                  | DSE                 | CALL SIGN       | DSE       |                      | DSE      | CALL SIGN      | DSE              | CALL SIGN              |
|                  | DSE                 | CALL SIGN       | DSE       |                      | DSE      | CALL SIGN      | DSE              | CALL SIGN              |
|                  | DSE                 | CALL SIGN       | DSE       |                      | DSE      | CALL SIGN      | DSE              | CALL SIGN              |
|                  | DSE                 | CALL SIGN       | DSE       |                      | DSE      | CALL SIGN      | DSE              | CALL SIGN              |
|                  | DSE                 | CALL SIGN       | DSE       |                      | DSE      | CALL SIGN      | DSE              | CALL SIGN              |
|                  | DSE                 | CALL SIGN       | DSE       |                      | DSE      | CALL SIGN      | DSE              | CALL SIGN              |
|                  | DSE                 | CALL SIGN       | DSE       |                      | DSE      | CALL SIGN      | DSE              | CALL SIGN              |
|                  | DSE                 | CALL SIGN       | DSE       |                      | DSE      | CALL SIGN      | DSE              | CALL SIGN              |
|                  | DSE                 | CALL SIGN       | DSE       |                      | DSE      | CALL SIGN      | DSE              | CALL SIGN              |
|                  | DSE                 | CALL SIGN       | DSE       |                      | DSE      | CALL SIGN      | DSE              | CALL SIGN              |
|                  | DSE                 | CALL SIGN       | DSE       |                      | DSE      | CALL SIGN      | DSE              | CALL SIGN              |
|                  | DSE                 | CALL SIGN       | DSE       |                      | DSE      | CALL SIGN      | DSE              | CALL SIGN              |
|                  | DSE                 | CALL SIGN       | DSE       |                      | DSE      | CALL SIGN      | DSE              | CALL SIGN              |
|                  |                     | CALL SIGN       | DSE       | CALL SIGN            |          | CALL SIGN      | DSE              |                        |
|                  | DSE                 | CALL SIGN       | DSE       |                      | DSE      | CALL SIGN      | DSE              | CALL SIGN  Total DSEs  |
|                  |                     | CALL SIGN       |           | CALL SIGN            |          | CALL SIGN      |                  |                        |

| Name                     | YSTEM ID#<br>007219 | S'              |          |                                  |  | LE SYSTEM:<br>ications, LLC |                | Advanced Cable C                  |
|--------------------------|---------------------|-----------------|----------|----------------------------------|--|-----------------------------|----------------|-----------------------------------|
|                          |                     |                 |          | TE FEES FOR EACH                 |  |                             |                |                                   |
| 9                        |                     | SUBSCRIBER GROU | HIRTIETH |                                  |  | SUBSCRIBER GRO              | TY-NINTH       |                                   |
| Computation              | 0                   |                 |          | COMMUNITY/ AREA                  | 0  |                             |                | COMMUNITY/ AREA                   |
| of                       | DSE                 | CALL SIGN       | DSE      | CALL SIGN                        | DSE  | CALL SIGN                   | DSE            | CALL SIGN                         |
| Base Rate Fe             |                     | -               |          |                                  |  |                             |                |                                   |
| and                      |                     |                 |          |                                  |  |                             |                |                                   |
| Syndicated               |                     |                 |          |                                  |  |                             |                |                                   |
| Exclusivity<br>Surcharge |                     |                 |          |                                  | <u>.                                    </u> |                             | <del>.  </del> |                                   |
| for                      |                     |                 |          |                                  | <u></u>                                      |                             | ·              |                                   |
| Partially                |                     |                 |          |                                  |  |                             |                |                                   |
| Distant                  |                     |                 |          |                                  |  |                             |                |                                   |
| Stations                 |                     |                 |          |                                  |  | <b> </b>                    |                |                                   |
|                          |                     |                 |          |                                  |  |                             |                |                                   |
|                          |                     |                 |          |                                  |  |                             |                |                                   |
|                          |                     | -               |          |                                  | -  |                             |                |                                   |
|                          |                     |                 |          |                                  |  |                             |                |                                   |
|                          |                     |                 |          |                                  |  |                             |                |                                   |
|                          | 0.00                |                 |          | Total DSEs                       | 0.00   |                             |                | Total DSEs                        |
|                          | 0.00                | \$              | d Group  | Gross Receipts Secon             | 0.00   | \$                          | roup           | Gross Receipts First G            |
|                          | 0.00                | \$              | d Group  | Base Rate Fee Secon              | 0.00   | \$                          | roup           | <b>3ase Rate Fee</b> First G      |
|                          | JP                  | SUBSCRIBER GROU | '-SECOND | THIRTY                           | UP   | SUBSCRIBER GRO              | TY-FIRST       | THIR                              |
|                          | 0                   |                 |          | COMMUNITY/ AREA                  | 0  |                             |                | COMMUNITY/ AREA                   |
|                          | DSE                 | CALL SIGN       | DSE      | CALL SIGN                        | DSE  | CALL SIGN                   | DSE            | CALL SIGN                         |
|                          |                     |                 |          |                                  |  |                             |                |                                   |
|                          |                     |                 |          |                                  | <u>.                                    </u> | H                           |                |                                   |
|                          |                     |                 |          |                                  |  |                             |                |                                   |
|                          |                     |                 |          | t I                              |  |                             |                |                                   |
|                          |                     |                 |          |                                  |  | H                           |                |                                   |
|                          |                     |                 |          |                                  |  |                             |                |                                   |
|                          |                     |                 |          |                                  |  |                             |                |                                   |
|                          |                     |                 |          |                                  |  |                             |                |                                   |
|                          |                     |                 |          |                                  |  |                             |                |                                   |
|                          |                     |                 |          |                                  |  |                             |                |                                   |
|                          |                     |                 |          |                                  |  |                             |                |                                   |
|                          |                     |                 |          |                                  |  |                             |                |                                   |
|                          |                     |                 |          |                                  |  |                             |                |                                   |
|                          |                     |                 |          |                                  |  |                             |                |                                   |
|                          | 0.00                |                 |          | Total DSEs                       | 0.00   |                             |                | Total DSEs                        |
|                          | 0.00                | \$              | Group    | Total DSEs Gross Receipts Fourth | 0.00   | \$                          | Group          | Total DSEs Gross Receipts Third G |

| Name                   | YSTEM ID#<br>007219 |                      |          |   |             |                    |          | LEGAL NAME OF OWNE  Advanced Cable C |
|------------------------|---------------------|----------------------|----------|---|-------------|--------------------|----------|--------------------------------------|
|                        |                     |                      |          | TE FEES FOR EACH                                  |             |                    |          |                                      |
| 9                      |                     | SUBSCRIBER GROU      | /-FOURTH |   |             | SUBSCRIBER GROU    | Y-THIRD  |                                      |
| Computat               | 0                   |                      |          | COMMUNITY/ AREA                                   | 0           |                    |          | COMMUNITY/ AREA                      |
| of                     | DSE                 | CALL SIGN            | DSE      | CALL SIGN   | DSE         | CALL SIGN          | DSE      | CALL SIGN                            |
| Base Rate              |                     |                      |          |   |             |                    |          |                                      |
| and                    |                     | -                    |          |   |             | -                  |          |                                      |
| Syndicate<br>Exclusivi |                     |                      |          |   |             | -                  | ····     |                                      |
| Surcharg               |                     | -                    |          |   |             |                    |          |                                      |
| for                    |                     |                      |          |   |             |                    |          |                                      |
| Partially              |                     |                      |          |   |             |                    |          |                                      |
| Distant                |                     | -                    |          |   |             | -                  |          |                                      |
| Stations               |                     | -                    |          |   |             | -                  | ····     |                                      |
|                        |                     |                      |          |   |             |                    |          |                                      |
|                        |                     |                      |          |   |             | -                  |          |                                      |
|                        |                     |                      |          |   |             |                    |          |                                      |
|                        |                     |                      |          |   |             |                    |          |                                      |
|                        |                     |                      |          |   |             |                    |          |                                      |
|                        | 0.00                |                      |          | Total DSEs  | 0.00        |                    |          | Total DSEs                           |
|                        |                     |                      |          |   | 0.00        | \$                 | oup      | Gross Receipts First G               |
|                        | 0.00                | \$                   | d Group  | Gross Receipts Secon                              |             | · *                |          |                                      |
|                        | _                   | \$                   | d Group  | Gross Receipts Secon                              |             |                    |          |                                      |
|                        | _                   | \$                   |          | Base Rate Fee Secon                               | 0.00        | \$                 |          | <b>3ase Rate Fee</b> First Gr        |
|                        | 0.00<br>0.00        |                      | d Group  | Base Rate Fee Secon                               | JP          |                    | oup      | THIR                                 |
|                        | 0.00                | \$                   | d Group  | Base Rate Fee Secon                               | _           | \$                 | oup      | THIR                                 |
|                        | 0.00<br>0.00        | \$                   | d Group  | Base Rate Fee Secon                               | JP          | \$                 | oup      | THIR                                 |
|                        | 0.00<br>0.00        | \$ I SUBSCRIBER GROU | d Group  | Base Rate Fee Secon THI COMMUNITY/ AREA           | JP <b>0</b> | \$ SUBSCRIBER GROU | TY-FIFTH | THIR'                                |
|                        | 0.00<br>0.00        | \$ I SUBSCRIBER GROU | d Group  | Base Rate Fee Secon THI COMMUNITY/ AREA           | JP <b>0</b> | \$ SUBSCRIBER GROU | TY-FIFTH | THIR                                 |
|                        | 0.00<br>0.00        | \$ I SUBSCRIBER GROU | d Group  | Base Rate Fee Secon THI COMMUNITY/ AREA           | JP <b>0</b> | \$ SUBSCRIBER GROU | TY-FIFTH | THIR'                                |
|                        | 0.00<br>0.00        | \$ I SUBSCRIBER GROU | d Group  | Base Rate Fee Secon THI COMMUNITY/ AREA           | JP <b>0</b> | \$ SUBSCRIBER GROU | TY-FIFTH | THIR'                                |
|                        | 0.00<br>0.00        | \$ I SUBSCRIBER GROU | d Group  | Base Rate Fee Secon THI COMMUNITY/ AREA           | JP <b>0</b> | \$ SUBSCRIBER GROU | TY-FIFTH | THIR'                                |
|                        | 0.00<br>0.00        | \$ I SUBSCRIBER GROU | d Group  | Base Rate Fee Secon THI COMMUNITY/ AREA           | JP <b>0</b> | \$ SUBSCRIBER GROU | TY-FIFTH | THIR'                                |
|                        | 0.00<br>0.00        | \$ I SUBSCRIBER GROU | d Group  | Base Rate Fee Secon THI COMMUNITY/ AREA           | JP <b>0</b> | \$ SUBSCRIBER GROU | TY-FIFTH | THIR'                                |
|                        | 0.00<br>0.00        | \$ I SUBSCRIBER GROU | d Group  | Base Rate Fee Secon THI COMMUNITY/ AREA           | JP <b>0</b> | \$ SUBSCRIBER GROU | TY-FIFTH | THIR'                                |
|                        | 0.00<br>0.00        | \$ I SUBSCRIBER GROU | d Group  | Base Rate Fee Secon THI COMMUNITY/ AREA           | JP <b>0</b> | \$ SUBSCRIBER GROU | TY-FIFTH | THIR'                                |
|                        | 0.00<br>0.00        | \$ I SUBSCRIBER GROU | d Group  | Base Rate Fee Secon THI COMMUNITY/ AREA           | JP <b>0</b> | \$ SUBSCRIBER GROU | TY-FIFTH | THIR'                                |
|                        | 0.00<br>0.00        | \$ I SUBSCRIBER GROU | d Group  | Base Rate Fee Secon THI COMMUNITY/ AREA           | JP <b>0</b> | \$ SUBSCRIBER GROU | TY-FIFTH | COMMUNITY/ AREA                      |
|                        | 0.00<br>0.00        | \$ I SUBSCRIBER GROU | d Group  | Base Rate Fee Secon THI COMMUNITY/ AREA           | JP <b>0</b> | \$ SUBSCRIBER GROU | TY-FIFTH | THIR'                                |
|                        | 0.00  0.00  DSE     | \$ I SUBSCRIBER GROU | d Group  | Base Rate Fee Secon THI COMMUNITY/ AREA CALL SIGN | JP 0        | \$ SUBSCRIBER GROU | TY-FIFTH | THIR'                                |
|                        | 0.00<br>0.00        | \$ I SUBSCRIBER GROU | d Group  | Base Rate Fee Secon THI COMMUNITY/ AREA           | JP <b>0</b> | \$ SUBSCRIBER GROU | TY-FIFTH | THIR'                                |
|                        | 0.00  0.00  DSE     | \$ I SUBSCRIBER GROU | d Group  | Base Rate Fee Secon THI COMMUNITY/ AREA CALL SIGN | JP 0        | \$ SUBSCRIBER GROU | DSE      | THIR COMMUNITY/ AREA  CALL SIGN      |

| Name          | YSTEM ID#<br>007219 | S               |          |                       | ·    |                 |          | LEGAL NAME OF OWNEI  Advanced Cable C |
|---------------|---------------------|-----------------|----------|-----------------------|------|-----------------|----------|---------------------------------------|
|               |                     |                 |          | TE FEES FOR EACH      |      |                 |          |                                       |
| 9             |                     | SUBSCRIBER GROU | Y-EIGHTH |                       |      | SUBSCRIBER GROU | SEVENTH  |                                       |
| Computation   | 0                   |                 |          | COMMUNITY/ AREA       | 0    |                 |          | COMMUNITY/ AREA                       |
| of            | DSE                 | CALL SIGN       | DSE      | CALL SIGN             | DSE  | CALL SIGN       | DSE      | CALL SIGN                             |
| Base Rate Fe  |                     |                 |          |                       |      |                 |          |                                       |
| and           |                     |                 |          |                       |      |                 |          |                                       |
| Syndicated    |                     |                 |          |                       |      |                 |          |                                       |
| Exclusivity   |                     | -               |          |                       |      |                 |          |                                       |
| Surcharge for |                     | -               |          |                       |      |                 |          |                                       |
| Partially     |                     | -               |          |                       |      |                 |          |                                       |
| Distant       |                     |                 |          |                       |      |                 |          |                                       |
| Stations      |                     |                 |          |                       |      |                 |          |                                       |
| <u>.</u>      |                     |                 |          |                       |      |                 |          |                                       |
|               |                     |                 |          |                       |      |                 | <u> </u> |                                       |
|               |                     |                 |          |                       | ļ    |                 | <b> </b> |                                       |
|               | <u></u>             |                 |          |                       | ļ    |                 | <b> </b> |                                       |
|               |                     |                 |          |                       |      |                 | <b> </b> |                                       |
| _             |                     | <u> </u>        |          |                       |      |                 | <u> </u> |                                       |
|               | 0.00                |                 |          | Total DSEs            | 0.00 |                 |          | Total DSEs                            |
|               | 0.00                | \$              | d Group  | Gross Receipts Secon  | 0.00 | \$              | oup      | Gross Receipts First Gr               |
|               | 0.00                | \$              | d Group  | Base Rate Fee Secon   | 0.00 | \$              | oup      | Base Rate Fee First Gr                |
|               | JP                  | SUBSCRIBER GROU | ORTIETH  |                       | JP   | SUBSCRIBER GROU | Y-NINTH  | THIRT                                 |
|               | 0                   |                 |          | COMMUNITY/ AREA       | 0    |                 |          | COMMUNITY/ AREA                       |
| +             | DSE                 | CALL SIGN       | DSE      | CALL SIGN             | DSE  | CALL SIGN       | DSE      | CALL SIGN                             |
| 7             |                     |                 |          |                       |      |                 |          |                                       |
|               |                     |                 |          |                       |      |                 |          |                                       |
|               |                     |                 |          |                       |      |                 |          |                                       |
|               |                     |                 |          |                       |      |                 |          |                                       |
|               |                     |                 |          |                       | ļ    |                 | ļ        |                                       |
|               |                     |                 |          |                       | ļ    |                 |          |                                       |
| -             | <u> </u>            |                 |          |                       |      |                 | <b> </b> |                                       |
| •             |                     |                 |          |                       |      |                 | <b> </b> |                                       |
| "             |                     |                 |          |                       |      |                 |          | •••••                                 |
|               |                     |                 |          |                       |      |                 |          |                                       |
|               |                     |                 |          |                       |      |                 |          |                                       |
|               | <u></u>             |                 |          |                       |      |                 | <b> </b> |                                       |
|               | <u></u>             |                 |          |                       |      |                 | ļ        |                                       |
| -             | 0.00                |                 | 1        | Total DSEs            | 0.00 |                 | 1        | Total DSEs                            |
|               |                     |                 |          |                       |      | <u> </u>        |          |                                       |
|               | 0.00                | \$              | Group    | Gross Receipts Fourth | 0.00 | \$              | roup     | Gross Receipts Third G                |
|               | _                   | \$              | Group    | Gross Receipts Fourth | 0.00 | \$              | roup     | Gross Receipts Third G                |

| LEGAL NAME OF OWNER  Advanced Cable C         |         |                 | po   |                       |              | S                 | O07219       | Name           |
|---|---------|-----------------|------|-----------------------|--------------|-------------------|--------------|----------------|
|   |         |                 |      | TE FEES FOR EACH      |              |                   |              |                |
|   | Y-FIRST | SUBSCRIBER GROU |      |                       | /-SECOND     | SUBSCRIBER GROU   |              | 9              |
| COMMUNITY/ AREA                               |         |                 | 0    | COMMUNITY/ AREA       |              |                   | 0            | _              |
| CALL SIGN                                     | DSE     | CALL SIGN       | DSE  | CALL SIGN             | DSE          | CALL SIGN         | DSE          | Computation of |
| CALL SIGN                                     | DSL     | CALL SIGN       | DOL  | CALL SIGN             | DOL          | CALL SIGN         | DOL          | Base Rate Fee  |
|   |         |                 |      |                       |              |                   |              | and            |
|   |         |                 |      |                       |              |                   |              | Syndicated     |
|   |         |                 |      |                       |              |                   |              | Exclusivity    |
|   |         | -               |      |                       |              |                   |              | Surcharge      |
|   |         |                 |      |                       | <u>.</u>     |                   |              | for            |
|   |         |                 |      |                       |              |                   |              | Partially      |
|   |         |                 |      |                       |              |                   |              | Distant        |
|   |         | -               |      |                       | <b>.</b>     |                   | <u></u>      | Stations       |
|   |         |                 |      |                       | <del> </del> |                   | -            |                |
|   |         |                 |      |                       |              |                   | <del>-</del> |                |
|   |         |                 |      |                       | ·····        |                   |              |                |
|   |         |                 |      |                       |              |                   |              |                |
|   |         |                 |      |                       | <u> </u>     |                   |              |                |
| Total DSEs                                    |         |                 | 0.00 | Total DSEs            | •            | -                 | 0.00         |                |
| Gross Receipts First Gr                       | oup     | \$              | 0.00 | Gross Receipts Secon  | d Group      | \$                | 0.00         |                |
| <b>Base Rate Fee</b> First Gr                 | oup     | \$              | 0.00 | Base Rate Fee Second  | d Group      | \$                | 0.00         |                |
| FORT  | Y-THIRD | SUBSCRIBER GROU | JP   | FORT)                 | Y-FOURTH     | I SUBSCRIBER GROU | P            |                |
| COMMUNITY/ AREA                               |         |                 | 0    | COMMUNITY/ AREA       |              |                   | 0            |                |
| CALL SIGN                                     | DSE     | CALL SIGN       | DSE  | CALL SIGN             | DSE          | CALL SIGN         | DSE          |                |
|   |         | -               |      |                       |              |                   |              |                |
|   |         | -               |      |                       |              |                   |              |                |
|   |         | -               |      |                       | <b>.</b>     |                   |              |                |
|   |         |                 |      |                       | <b>.</b>     |                   | <u></u>      |                |
|   |         |                 |      |                       |              |                   |              |                |
|   |         |                 |      |                       |              |                   | <del></del>  |                |
|   |         |                 |      |                       | ·····        | -                 |              |                |
|   |         | -               |      |                       |              |                   |              |                |
|   |         |                 |      |                       |              |                   |              |                |
|   |         |                 |      |                       |              |                   |              |                |
|   |         |                 |      |                       | <b></b>      |                   |              |                |
|   |         |                 |      |                       | <u> </u>     |                   | <u> </u>     |                |
|   |         |                 |      |                       |              |                   | <u> </u>     |                |
| Total DSEs                                    |         |                 | 0.00 | Total DSEs            |              |                   | 0.00         |                |
| I Oldi DOLO                                   |         |                 |      |                       | _            |                   |              |                |
|   |         | c c             | 0.00 | Gross Receipts Fourth | Group        | \$                | 0.00         |                |
| Gross Receipts Third G                        | roup    | \$              | 0.00 |                       |              |                   |              |                |
| Gross Receipts Third G  Base Rate Fee Third G | ·       | \$              | 0.00 | Base Rate Fee Fourth  | Group        | \$                | 0.00         |                |

|                          | YSTEM ID#<br>007219 |  |           |                      |             |                 |           | LEGAL NAME OF OWNE  Advanced Cable ( |
|--------------------------|---------------------|--|-----------|----------------------|-------------|-----------------|-----------|--------------------------------------|
|                          |                     |  |           | TE FEES FOR EACH     |             |                 |           |                                      |
| 9                        |                     | SUBSCRIBER GROU                              | RTY-SIXTH |                      |             | SUBSCRIBER GROU |           |                                      |
| Computation              | 0                   |  |           | COMMUNITY/ AREA      | 0           |                 |           | COMMUNITY/ AREA                      |
| of                       | DSE                 | CALL SIGN                                    | DSE       | CALL SIGN            | DSE         | CALL SIGN       | DSE       | CALL SIGN                            |
| Base Rate Fe             |                     |  |           |                      |             | -               |           |                                      |
| and                      |                     | -  |           |                      |             | -               |           |                                      |
| Syndicated               |                     |  |           |                      |             |                 |           |                                      |
| Exclusivity<br>Surcharge |                     | -  |           |                      | -           |                 |           |                                      |
| for                      | <u> </u>            | -  |           |                      |             | -               |           |                                      |
| Partially                | ····                |  |           |                      |             |                 |           |                                      |
| Distant                  |                     |  |           |                      |             | -               |           |                                      |
| Stations                 |                     |  |           |                      |             |                 |           |                                      |
|                          |                     |  |           |                      |             |                 |           |                                      |
|                          |                     |  |           |                      |             |                 |           |                                      |
|                          |                     |  |           |                      |             |                 |           |                                      |
|                          |                     |  | <u> </u>  |                      |             |                 |           |                                      |
|                          |                     |  | <u>.</u>  |                      |             |                 |           |                                      |
|                          |                     | <u> </u>                                     |           |                      |             |                 |           |                                      |
|                          | 0.00                |  |           | Total DSEs           | 0.00        |                 |           | Total DSEs                           |
|                          | 0.00                | \$   | d Group   | Gross Receipts Secon | 0.00        | \$              | Group     | Gross Receipts First G               |
|                          | 0.00                | \$   | d Group   | Base Rate Fee Secon  | 0.00        | \$              | Group     | <b>Base Rate Fee</b> First G         |
|                          |                     | <u>.                                    </u> | •         |                      |             | '               |           |                                      |
|                          |                     |  |           |                      |             |                 |           |                                      |
|                          | UP                  | SUBSCRIBER GROU                              | Y-EIGHTH  |                      |             | SUBSCRIBER GROU | '-SEVENTH | FORTY-                               |
|                          | UP <b>0</b>         | SUBSCRIBER GROU                              | Y-EIGHTH  | FORT                 | UP <b>0</b> | SUBSCRIBER GROU |           | FORTY-(<br>COMMUNITY/ AREA           |
|                          |                     | SUBSCRIBER GROU                              | Y-EIGHTH  |                      |             | SUBSCRIBER GROU |           |                                      |
|                          | 0                   |  |           | COMMUNITY/ AREA      | 0           |                 |           | COMMUNITY/ AREA                      |
|                          | 0                   |  |           | COMMUNITY/ AREA      | 0           |                 |           | COMMUNITY/ AREA                      |
|                          | 0                   |  |           | COMMUNITY/ AREA      | 0           |                 |           | COMMUNITY/ AREA                      |
|                          | 0                   |  |           | COMMUNITY/ AREA      | 0           |                 |           | COMMUNITY/ AREA                      |
|                          | 0                   |  |           | COMMUNITY/ AREA      | 0           |                 |           | COMMUNITY/ AREA                      |
|                          | 0                   |  |           | COMMUNITY/ AREA      | 0           |                 |           | COMMUNITY/ AREA                      |
|                          | 0                   |  |           | COMMUNITY/ AREA      | 0           |                 |           | COMMUNITY/ AREA                      |
|                          | 0                   |  |           | COMMUNITY/ AREA      | 0           |                 |           | COMMUNITY/ AREA                      |
|                          | 0                   |  |           | COMMUNITY/ AREA      | 0           |                 |           | COMMUNITY/ AREA                      |
|                          | 0                   |  |           | COMMUNITY/ AREA      | 0           |                 |           | COMMUNITY/ AREA                      |
|                          | 0                   |  |           | COMMUNITY/ AREA      | 0           |                 |           | COMMUNITY/ AREA                      |
|                          | 0                   |  |           | COMMUNITY/ AREA      | 0           |                 |           | COMMUNITY/ AREA                      |
|                          | 0                   |  |           | COMMUNITY/ AREA      | 0           |                 |           | COMMUNITY/ AREA                      |
|                          | 0                   |  |           | COMMUNITY/ AREA      | 0           |                 |           | COMMUNITY/ AREA                      |
|                          | 0                   |  |           | COMMUNITY/ AREA      | 0           |                 |           | CALL SIGN                            |
|                          | DSE                 |  | DSE       | CALL SIGN            | DSE         |                 | DSE       | COMMUNITY/ AREA                      |

| Name                      | YSTEM ID#<br>007219 | S               |          |                                  |                              |                |          | LEGAL NAME OF OWNE  Advanced Cable C    |
|---------------------------|---------------------|-----------------|----------|----------------------------------|------------------------------|----------------|----------|---|
|                           |                     |                 |          | TE FEES FOR EACH                 |                              |                |          |   |
| 9                         |                     | SUBSCRIBER GROU | FIFTIETH | 00141411277777                   |                              | SUBSCRIBER GRO | ΓΥ-NINTH |   |
| Computation               | 0                   |                 |          | COMMUNITY/ AREA                  | 0                            |                |          | COMMUNITY/ AREA                         |
| of                        | DSE                 | CALL SIGN       | DSE      | CALL SIGN                        | DSE                          | CALL SIGN      | DSE      | CALL SIGN                               |
| Base Rate Fe              |                     |                 |          |                                  |                              |                |          |   |
| and                       |                     |                 |          |                                  |                              |                |          |   |
| Syndicated<br>Exclusivity |                     |                 |          |                                  |                              |                |          |   |
| Surcharge                 |                     |                 |          |                                  |                              |                | -        |   |
| for                       |                     |                 |          |                                  |                              |                |          |   |
| Partially                 |                     |                 |          |                                  |                              |                |          |   |
| Distant                   |                     |                 |          |                                  |                              |                |          |   |
| Stations                  |                     |                 |          |                                  |                              |                | ·        |   |
|                           |                     |                 |          | ••••                             |                              |                |          |   |
|                           |                     |                 |          |                                  |                              |                |          |   |
|                           |                     |                 |          |                                  |                              |                | <u> </u> |   |
|                           |                     |                 |          |                                  |                              |                | <u> </u> |   |
|                           |                     |                 |          |                                  |                              |                |          |   |
|                           | 0.00                |                 |          | Total DSEs                       |                              | 0.00           |          | otal DSEs<br>Gross Receipts First Group |
|                           | 0.00                | \$              | d Group  | Gross Receipts Secon             | 0.00                         | \$             | roup     | Gross Receipts First Gr                 |
|                           | 0.00                | \$              | d Group  | Base Rate Fee Second             | 0.00                         | \$             | roup     | <b>Base Rate Fee</b> First Gr           |
|                           | JP                  | SUBSCRIBER GROU | -SECOND  | FIFTY                            | FIFTY-FIRST SUBSCRIBER GROUP |                |          |   |
|                           | 0                   |                 |          | COMMUNITY/ AREA                  | 0                            |                |          | COMMUNITY/ AREA                         |
|                           | DSE                 | CALL SIGN       | DSE      | CALL SIGN                        | DSE                          | CALL SIGN      | DSE      | CALL SIGN                               |
|                           |                     |                 |          |                                  |                              |                |          |   |
|                           |                     |                 |          |                                  |                              |                | -        |   |
|                           |                     |                 |          |                                  |                              |                |          |   |
|                           |                     |                 |          |                                  |                              |                |          |   |
|                           |                     |                 |          |                                  |                              |                |          |   |
|                           |                     |                 |          |                                  |                              |                |          |   |
|                           |                     |                 |          |                                  |                              |                |          |   |
|                           |                     |                 |          |                                  |                              |                |          |   |
|                           |                     |                 |          |                                  |                              |                |          |   |
|                           |                     |                 |          |                                  |                              |                |          |   |
|                           |                     |                 | ļ        |                                  |                              |                | <b></b>  |   |
|                           |                     | i i             | i        |                                  | ļ                            |                |          |   |
|                           | <u> </u>            |                 |          |                                  |                              |                |          |   |
|                           | 0.00                |                 |          | Total DSEs                       | 0.00                         |                |          | Total DSEs                              |
|                           | 0.00                | \$              | Group    | Total DSEs Gross Receipts Fourth | 0.00                         | \$             | Group    | Total DSEs<br>Gross Receipts Third G    |

| Name             | YSTEM ID#<br>007219 | S'              |            |                                     | •    |                |   | LEGAL NAME OF OWNE<br>Advanced Cable C |
|------------------|---------------------|-----------------|------------|-------------------------------------|------|----------------|---|--|
|                  |                     |                 |            | TE FEES FOR EACH                    |      |                |   |  |
| 9                |                     | SUBSCRIBER GROU | -FOURTH    |                                     |      | SUBSCRIBER GRO | ry-third                                |  |
| Computation      | 0                   |                 |            | COMMUNITY/ AREA                     | 0    |                |   | COMMUNITY/ AREA                        |
| of               | DSE                 | CALL SIGN       | DSE        | CALL SIGN                           | DSE  | CALL SIGN      | DSE                                     | CALL SIGN                              |
| Base Rate Fe     |                     |                 |            |                                     |      |                |   |  |
| and              |                     | -               |            |                                     |      |                |   |  |
| Syndicated       |                     |                 |            |                                     |      |                |   |  |
| Exclusivity      |                     |                 |            |                                     |      |                |   |  |
| Surcharge<br>for |                     |                 |            |                                     |      | <b>-</b>       |   |  |
| Partially        |                     | -               |            |                                     |      |                |   |  |
| Distant          |                     |                 |            |                                     |      |                |   |  |
| Stations         |                     |                 |            |                                     |      |                |   |  |
|                  |                     |                 |            |                                     |      |                |   |  |
|                  | <u></u>             |                 |            |                                     |      |                |   |  |
|                  | <u></u>             |                 |            |                                     |      |                |   |  |
|                  |                     |                 |            |                                     |      |                | <b> </b>                                |  |
| •                |                     |                 |            |                                     |      |                |   |  |
| =                | 0.00                | []              |            | Total DCCs                          | 0.00 |                |   | Total DCC                              |
|                  | 0.00                |                 | Total DSEs |                                     | 0.00 |                | otal DSEs<br>Bross Receipts First Group |  |
|                  | 0.00                | \$              | d Group    | Gross Receipts Secon                | 0.00 | \$             | roup                                    | Gross Receipts First Gr                |
|                  | 0.00                | \$              | d Group    | Base Rate Fee Secon                 | 0.00 | \$             | roup                                    | <b>3ase Rate Fee</b> First Gr          |
|                  | JP                  | SUBSCRIBER GROU | TY-SIXTH   | FII                                 | JP   | SUBSCRIBER GRO | TY-FIFTH                                | FIFT                                   |
|                  | 0                   |                 |            | COMMUNITY/ AREA                     | 0    |                |   | COMMUNITY/ AREA                        |
| _                | DSE                 | CALL SIGN       | DSE        | CALL SIGN                           | DSE  | CALL SIGN      | DSE                                     | CALL SIGN                              |
|                  |                     |                 |            |                                     |      |                |   |  |
|                  |                     |                 |            |                                     |      |                |   |  |
|                  |                     |                 |            |                                     |      | -              |   |  |
|                  |                     |                 |            |                                     |      |                |   |  |
|                  |                     |                 |            |                                     |      |                |   |  |
|                  | <u> </u>            |                 |            |                                     |      |                |   |  |
| 1                |                     |                 |            |                                     |      | <b>-</b>       |   |  |
|                  |                     |                 |            |                                     |      |                |   |  |
|                  |                     |                 |            |                                     |      |                |   |  |
|                  |                     |                 |            |                                     |      |                |   |  |
| •                | <u></u>             |                 |            |                                     |      |                | .                                       |  |
| •                | <u></u>             |                 |            |                                     |      |                | ·                                       |  |
|                  |                     | <b>+</b>        |            |                                     |      |                |   |  |
| -                |                     |                 |            |                                     |      |                |   |  |
|                  | 0.00                |                 |            | Total DSEs                          | 0.00 | -              |   | Total DSEs                             |
|                  | 0.00                | \$              | Group      | Total DSEs<br>Gross Receipts Fourth | 0.00 | \$             | Group                                   | Total DSEs<br>Gross Receipts Third G   |

## **Nonpermitted 3.75 Stations**

| s, LLC 007219 Name                                 | SYSTE<br>00       |          |                       |      |                              |               | LEGAL NAME OF OWNE  Advanced Cable C |  |
|--|-------------------|----------|-----------------------|------|------------------------------|---------------|--------------------------------------|--|
| TATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP |                   |          |                       |      |                              |               |                                      |  |
| <u> </u>   | SUBSCRIBER GROUP  | Y-EIGHTH |                       |      | SUBSCRIBER GROU              | SEVENTH       |                                      |  |
| O COMMUNITY/ AREA Computation                      |                   |          | COMMUNITY/ AREA       | 0    |                              |               | COMMUNITY/ AREA                      |  |
|  | CALL SIGN I       | 1        |                       | DSE  | CALL SIGN                    | DSE           | CALL SIGN                            |  |
| Base Rate F  |                   |          |                       |      |                              |               |                                      |  |
| and  |                   |          |                       |      |                              |               |                                      |  |
| Syndicated   |                   |          |                       |      | <b>-</b>                     |               |                                      |  |
| Exclusivity  |                   |          |                       |      |                              |               |                                      |  |
| Surcharge  |                   |          |                       |      | -                            |               |                                      |  |
| for Postelly.                                      |                   |          |                       |      |                              |               |                                      |  |
| Partially Distant                                  |                   |          |                       |      |                              |               |                                      |  |
| Stations   |                   |          |                       |      | -                            |               |                                      |  |
|  |                   |          |                       |      |                              |               |                                      |  |
|  |                   |          |                       |      |                              |               |                                      |  |
|  |                   |          |                       |      |                              |               |                                      |  |
|  |                   |          |                       |      |                              |               |                                      |  |
|  |                   |          |                       |      |                              |               |                                      |  |
|  |                   |          |                       |      |                              |               |                                      |  |
| 0.00 Total DSEs                                    |                   |          | Total DSEs            | 0.00 |                              |               | Total DSEs                           |  |
| 0.00 Gross Receipts Second Group \$ 0.00           | \$                | d Group  | Gross Receipts Secon  | 0.00 | \$                           | roup          | Gross Receipts First G               |  |
|  |                   | ·        | ·                     |      |                              | •             | ·                                    |  |
| 0.00 Base Rate Fee Second Group \$ 0.00            | \$ (              | d Group  | Base Rate Fee Second  | 0.00 | \$                           | oup           | Base Rate Fee First Gr               |  |
| RIBER GROUP SIXTIETH SUBSCRIBER GROUP              | SUBSCRIBER GROUP  | SIXTIETH |                       | JP   | FIFTY-NINTH SUBSCRIBER GROUP |               |                                      |  |
| O COMMUNITY/ AREA O                                | COMMUNITY/ AREA 0 |          |                       | 0    |                              | MMUNITY/ AREA |                                      |  |
| SIGN DSE CALL SIGN DSE CALL SIGN DSE               | CALL SIGN I       | DSE      | CALL SIGN             | DSE  | CALL SIGN                    | DSE           | CALL SIGN                            |  |
|  |                   |          |                       |      |                              |               |                                      |  |
|  |                   |          |                       |      |                              |               |                                      |  |
| ······································             |                   |          |                       |      |                              |               |                                      |  |
|  |                   |          |                       |      | <b></b>                      |               |                                      |  |
|  |                   |          |                       |      |                              |               |                                      |  |
|  |                   |          |                       |      | -                            |               |                                      |  |
|  |                   |          |                       |      |                              |               |                                      |  |
|  |                   |          |                       |      |                              |               |                                      |  |
|  |                   |          |                       |      |                              |               |                                      |  |
|  |                   | ļ        |                       | ļ    |                              | ļ             |                                      |  |
|  |                   |          |                       | ļ    |                              |               |                                      |  |
|  |                   |          |                       |      |                              |               |                                      |  |
|  |                   |          |                       |      |                              |               |                                      |  |
| 0.00 Total DSEs                                    | (                 | l l      | Total DSEs            | 0.00 |                              |               | Total DSEs                           |  |
|  | s                 | Group    | Gross Receipts Fourth | 0.00 | \$                           | roup          | Gross Receipts Third G               |  |
| 0.00 Gross Receipts Fourth Group \$ 0.00           | <u>*</u>          |          |                       |      |                              |               |                                      |  |

| Name             | YSTEM ID#<br>007219 | S               |                             |                                  | •       |                |  | LEGAL NAME OF OWNE  Advanced Cable C |
|------------------|---------------------|-----------------|-----------------------------|----------------------------------|---------|----------------|--|--------------------------------------|
|                  |                     |                 |                             | TE FEES FOR EACH                 |         |                |  |                                      |
| 9                |                     | SUBSCRIBER GROU | '-SECOND                    |                                  |         | SUBSCRIBER GRO | TY-FIRST                               |                                      |
| Computation      | 0                   |                 |                             | COMMUNITY/ AREA                  | 0       |                |  | COMMUNITY/ AREA                      |
| of               | DSE                 | CALL SIGN       | DSE                         | CALL SIGN                        | DSE     | CALL SIGN      | DSE                                    | CALL SIGN                            |
| Base Rate Fe     |                     |                 |                             |                                  |         |                |  |                                      |
| and              |                     |                 |                             |                                  |         |                |  |                                      |
| Syndicated       |                     |                 |                             |                                  |         |                |  |                                      |
| Exclusivity      |                     |                 |                             |                                  |         |                | ·                                      |                                      |
| Surcharge<br>for |                     |                 |                             |                                  |         |                |  |                                      |
| Partially        | <u></u>             | -               |                             |                                  |         |                |  |                                      |
| Distant          |                     |                 |                             |                                  |         |                |  | •••••                                |
| Stations         |                     |                 |                             |                                  |         |                |  |                                      |
|                  |                     |                 |                             |                                  |         |                |  |                                      |
|                  |                     |                 |                             |                                  |         |                |  |                                      |
|                  |                     |                 |                             |                                  |         |                |  |                                      |
|                  |                     |                 |                             |                                  |         |                | -                                      |                                      |
|                  |                     |                 |                             |                                  |         |                | ·                                      |                                      |
|                  | 0.00                | Ц               |                             | Total DSEs                       | 0.00    |                |  | Total DSEs                           |
|                  |                     | •               | Gross Receipts Second Group |                                  | \$ 0.00 |                | otal DSEs<br>ross Receipts First Group |                                      |
|                  | 0.00                | \$              | a Group                     | Gross Receipts Secon             | 0.00    | \$             | roup                                   | Gross Receipts First Gr              |
|                  | 0.00                | \$              | d Group                     | Base Rate Fee Second             | 0.00    | \$             | roup                                   | Base Rate Fee First Gr               |
|                  | JP                  | SUBSCRIBER GROU | /-FOURTH                    | SIXT                             | JP      | SUBSCRIBER GRO | TY-THIRD                               | SIXT                                 |
|                  | 0                   |                 |                             | COMMUNITY/ AREA                  | 0       |                |  | COMMUNITY/ AREA                      |
|                  | DSE                 | CALL SIGN       | DSE                         | CALL SIGN                        | DSE     | CALL SIGN      | DSE                                    | CALL SIGN                            |
|                  |                     |                 |                             |                                  |         | <b>-</b>       |  |                                      |
|                  |                     |                 |                             |                                  |         |                |  |                                      |
|                  |                     |                 |                             |                                  |         |                |  |                                      |
|                  |                     |                 |                             |                                  |         |                | ·                                      |                                      |
|                  | <u></u>             |                 |                             |                                  |         |                | ···                                    |                                      |
|                  | <u></u>             | -               |                             |                                  |         |                |  |                                      |
|                  |                     |                 |                             |                                  |         |                |  |                                      |
|                  |                     |                 |                             |                                  |         |                |  |                                      |
|                  |                     |                 |                             |                                  |         |                |  |                                      |
|                  |                     |                 |                             |                                  |         |                |  |                                      |
|                  |                     | Ц               | <u> </u>                    |                                  | ļ       |                |  |                                      |
|                  | ····                |                 |                             |                                  |         |                |  |                                      |
|                  |                     |                 |                             |                                  |         |                |  |                                      |
|                  |                     |                 |                             |                                  |         |                |  |                                      |
|                  | 0.00                |                 |                             | Total DSEs                       | 0.00    |                |  | Total DSEs                           |
|                  | 0.00                | \$              | Group                       | Total DSEs Gross Receipts Fourth | 0.00    | \$             | Group                                  | Total DSEs<br>Gross Receipts Third G |

## **Nonpermitted 3.75 Stations**

| LEGAL NAME OF OWNER  Advanced Cable C          |          |                |              |                       |                | S                 | YSTEM ID#<br>007219 | Name             |
|--|----------|----------------|--------------|-----------------------|----------------|-------------------|---------------------|------------------|
| BL   | OCK A: 0 | COMPUTATION O  | F BASE RA    | TE FEES FOR EACH      | SUBSCR         | RIBER GROUP       |                     |                  |
|  | Y-FIFTH  | SUBSCRIBER GRO |              |                       | KTY-SIXTH      | I SUBSCRIBER GROU | JP                  | 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              |
|  |          |                |              |                       | <b></b>        |                   |                     | Syndicated       |
|  |          |                |              |                       |                | -                 |                     | Exclusivity      |
|  |          |                | <u></u>      |                       |                |                   | <u></u>             | Surcharge<br>for |
|  |          |                | <u></u>      |                       |                |                   | ····                | Partially        |
|  |          |                | <del>-</del> |                       | ·              |                   | ····                | Distant          |
|  |          | -              | <u></u>      |                       |                |                   | ····                | Stations         |
|  |          |                | <u> </u>     |                       |                |                   |                     |                  |
|  |          |                |              |                       |                |                   |                     |                  |
|  |          |                |              |                       |                |                   |                     |                  |
|  |          |                |              |                       |                |                   |                     |                  |
|  |          |                | <u></u>      |                       |                |                   |                     |                  |
|  |          |                |              |                       |                |                   |                     |                  |
| Total DSEs                                     |          |                | Total DSEs   |                       |                |                   |                     |                  |
| Gross Receipts First Gr                        | oup      | \$             | 0.00         | Gross Receipts Secon  | d Group        | \$                | 0.00                |                  |
| Base Rate Fee First Gr                         | oup      | \$             | 0.00         | Base Rate Fee Secon   | d Group        | \$                | 0.00                |                  |
| SIXTY-S  | EVENTH   | SUBSCRIBER GRO | UP           | SIXT                  | Y-EIGHTH       | I SUBSCRIBER GROU | JP                  |                  |
| COMMUNITY/ AREA                                |          |                | 0            | COMMUNITY/ AREA       | MMUNITY/ AREA0 |                   |                     |                  |
| CALL SIGN                                      | DSE      | CALL SIGN      | DSE          | CALL SIGN             | DSE            | CALL SIGN         | DSE                 |                  |
|  |          |                |              |                       |                |                   |                     |                  |
|  |          |                |              |                       |                |                   |                     |                  |
|  |          |                |              |                       |                |                   |                     |                  |
|  |          | -              | <u></u>      |                       |                |                   |                     |                  |
|  |          |                |              |                       |                | -                 |                     |                  |
|  |          | -              | <u></u>      |                       | <u>.</u>       |                   | <u></u>             |                  |
|  |          |                | <u> </u>     |                       | <b>-</b>       |                   | <del></del>         |                  |
|  |          |                |              |                       | ······         | -                 |                     |                  |
|  |          |                | <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 |          |                | criber group | as shown in the boxes | above.         | \$                |                     |                  |

## **Nonpermitted 3.75 Stations**

| Name                                | O07219   | S                 |            |                                  | •    |                |          | LEGAL NAME OF OWNE  Advanced Cable C |  |  |
|-------------------------------------|----------|-------------------|------------|----------------------------------|------|----------------|----------|--------------------------------------|--|--|
|                                     |          |                   |            | TE FEES FOR EACH                 |      |                |          |                                      |  |  |
| 9                                   |          | SUBSCRIBER GROU   | /ENTIETH   |                                  |      | SUBSCRIBER GRO | TY-NINTH |                                      |  |  |
| Computation                         | 0        |                   |            | COMMUNITY/ AREA                  | 0    |                |          | COMMUNITY/ AREA                      |  |  |
| of                                  | DSE      | CALL SIGN         | DSE        | CALL SIGN                        | DSE  | CALL SIGN      | DSE      | CALL SIGN                            |  |  |
| of<br>Base Rate<br>and<br>Syndicate |          |                   |            |                                  |      |                |          |                                      |  |  |
| and                                 |          |                   |            |                                  |      |                |          |                                      |  |  |
| Syndicate                           |          |                   |            |                                  |      |                |          |                                      |  |  |
| Exclusivit                          |          |                   |            |                                  |      |                |          |                                      |  |  |
|                                     |          |                   |            |                                  |      |                |          |                                      |  |  |
|                                     |          |                   |            |                                  |      |                |          |                                      |  |  |
| _                                   | ···      |                   |            |                                  |      |                |          |                                      |  |  |
|                                     | ····     |                   |            |                                  |      |                |          |                                      |  |  |
|                                     |          |                   |            |                                  |      |                |          | ,                                    |  |  |
|                                     |          |                   |            |                                  |      |                |          |                                      |  |  |
|                                     |          |                   |            |                                  |      | -              |          |                                      |  |  |
|                                     |          |                   |            |                                  |      |                |          |                                      |  |  |
|                                     |          |                   |            |                                  |      |                |          |                                      |  |  |
|                                     |          |                   |            |                                  |      |                |          |                                      |  |  |
|                                     | 0.00     |                   | Total DSEs |                                  |      | 0.00           |          | Total DSEs                           |  |  |
|                                     | 0.00     | \$                | d Group    | Gross Receipts Secon             | 0.00 | \$             | roup     | Gross Receipts First G               |  |  |
|                                     | 0.00     | \$                | d Group    | Base Rate Fee Second             | 0.00 | \$             | roup     | <b>3ase Rate Fee</b> First G         |  |  |
|                                     | IP       | SUBSCRIBER GROU   | -SECOND    | SEVENTY                          | JP   | SUBSCRIBER GRO | TY-FIRST | SEVEN <sup>®</sup>                   |  |  |
|                                     | 0        | COMMUNITY/ AREA 0 |            |                                  |      | 0              |          | COMMUNITY/ AREA                      |  |  |
|                                     | DSE      | CALL SIGN         | DSE        | CALL SIGN                        | DSE  | CALL SIGN      | DSE      | CALL SIGN                            |  |  |
|                                     |          |                   |            |                                  |      |                |          |                                      |  |  |
|                                     | <u></u>  |                   |            |                                  |      |                |          |                                      |  |  |
|                                     | <u></u>  |                   |            |                                  |      | -              |          |                                      |  |  |
|                                     | <u></u>  |                   |            | •••••                            |      |                |          |                                      |  |  |
|                                     |          |                   |            |                                  |      |                | ···      |                                      |  |  |
|                                     |          |                   |            |                                  |      | -              |          |                                      |  |  |
|                                     |          |                   |            |                                  |      |                |          |                                      |  |  |
|                                     |          |                   |            |                                  |      |                |          |                                      |  |  |
|                                     | <u></u>  |                   |            |                                  |      |                |          |                                      |  |  |
|                                     | <u></u>  |                   |            |                                  |      |                |          |                                      |  |  |
|                                     |          |                   |            |                                  |      |                |          |                                      |  |  |
|                                     | <u> </u> |                   |            |                                  | ļ    |                | ··       |                                      |  |  |
|                                     |          |                   |            | L                                | ļ    |                |          |                                      |  |  |
|                                     |          |                   |            |                                  |      |                |          |                                      |  |  |
|                                     | 0.00     |                   |            | Total DSEs                       | 0.00 |                |          | Fotal DSEs                           |  |  |
|                                     | 0.00     | <u>\$</u>         | Group      | Total DSEs Gross Receipts Fourth | 0.00 | <u> </u>       | Group    | Total DSEs<br>Gross Receipts Third G |  |  |

| LEGAL NAME OF OWNER  Advanced Cable C |                                |                |                |                       |                | S               | YSTEM ID#<br>007219 | Name             |
|---------------------------------------|--------------------------------|----------------|----------------|-----------------------|----------------|-----------------|---------------------|------------------|
|                                       |                                |                |                | TE FEES FOR EACH      |                |                 |                     |                  |
| SEVENT                                | Y-THIRD                        | SUBSCRIBER GRO | UP             | SEVENT                | Y-FOURTH       | SUBSCRIBER GROU | JP                  | 0                |
| COMMUNITY/ AREA                       |                                |                | 0              | COMMUNITY/ AREA       |                |                 | 0                   | 9<br>Computation |
| CALL SIGN                             | DSE                            | CALL SIGN      | DSE            | CALL SIGN             | DSE            | CALL SIGN       | DSE                 | of               |
|                                       |                                |                |                |                       |                |                 |                     | Base Rate Fee    |
|                                       |                                |                |                |                       |                |                 |                     | and              |
|                                       |                                |                |                |                       | <u> </u>       |                 |                     | Syndicated       |
|                                       |                                |                |                |                       |                | <u> </u>        |                     | Exclusivity      |
|                                       |                                |                |                |                       | <mark></mark>  |                 |                     | Surcharge        |
|                                       |                                |                |                |                       |                |                 |                     | for              |
|                                       |                                |                | <u>.</u>       |                       | <mark></mark>  |                 | ····-               | Partially        |
|                                       |                                |                | <del> </del>   |                       | <del>.  </del> |                 | <u></u>             | Distant          |
|                                       |                                |                |                |                       | <mark></mark>  |                 |                     | Stations         |
|                                       |                                |                |                |                       |                |                 | <u></u>             |                  |
|                                       |                                |                | <b></b>        |                       | <u> </u>       | H               | ····                |                  |
|                                       |                                |                | <del> </del>   |                       | <del>.  </del> |                 | ····                |                  |
|                                       |                                |                | <b>-</b>       |                       | <u>-</u>       | -               |                     |                  |
|                                       |                                |                | <b>-</b>       |                       | <u>-</u>       | -               | <u> </u>            |                  |
| Total DSEs                            | SEs <u>0.00</u>                |                |                | Total DSEs            |                | 11              |                     |                  |
| Gross Receipts First Gr               | oup                            | \$             | 0.00           | Gross Receipts Secor  | nd Group       | \$              | 0.00                |                  |
| Base Rate Fee First Gr                | oup                            | \$             | 0.00           | Base Rate Fee Secon   | nd Group       | \$              | 0.00                |                  |
| SEVENT                                | SEVENTY-FIFTH SUBSCRIBER GROUP |                |                | SEVE                  |                |                 |                     |                  |
| COMMUNITY/ AREA                       |                                |                | 0              | COMMUNITY/ AREA 0     |                |                 |                     |                  |
| CALL SIGN                             | DSE                            | CALL SIGN      | DSE            | CALL SIGN             | DSE            | CALL SIGN       | DSE                 |                  |
|                                       |                                |                |                |                       |                |                 |                     |                  |
|                                       |                                |                |                |                       | •              | -               |                     |                  |
|                                       |                                |                |                |                       |                |                 |                     |                  |
|                                       |                                |                |                |                       |                |                 |                     |                  |
|                                       |                                |                |                |                       |                |                 |                     |                  |
|                                       |                                |                |                |                       |                |                 |                     |                  |
|                                       |                                |                |                |                       |                |                 |                     |                  |
|                                       |                                |                |                |                       |                |                 |                     |                  |
|                                       |                                |                |                |                       | <mark></mark>  |                 |                     |                  |
|                                       |                                |                |                |                       |                |                 | <u></u>             |                  |
|                                       |                                |                |                |                       |                |                 |                     |                  |
|                                       |                                |                |                |                       |                |                 |                     |                  |
|                                       |                                |                | <mark>-</mark> |                       | <u></u>        |                 |                     |                  |
|                                       |                                |                | <u> </u>       |                       | <u></u>        |                 | <u></u>             |                  |
| Total DSEs                            |                                |                | 0.00           | Total DSEs            |                |                 | 0.00                |                  |
| Gross Receipts Third G                | roup                           | \$             | 0.00           | Gross Receipts Fourth | n Group        | \$              | 0.00                |                  |
|                                       |                                |                |                |                       |                |                 |                     |                  |
| Base Rate Fee Third G                 | roup                           | \$             | 0.00           | Base Rate Fee Fourth  | n Group        | \$              | 0.00                |                  |
| d the                                 | e base rat                     |                |                | as shown in the boxes |                | \$              | 0.00                |                  |

| Name             | YSTEM ID#<br>007219 | S`              |            |                                  |                                |                | R OF CABL | Advanced Cable C                  |  |
|------------------|---------------------|-----------------|------------|----------------------------------|--------------------------------|----------------|-----------|-----------------------------------|--|
|                  |                     |                 |            | TE FEES FOR EACH                 |                                |                |           |                                   |  |
| 9                | JP                  | SUBSCRIBER GROU | Y-EIGHTH   |                                  |                                | SUBSCRIBER GRO | SEVENTH   |                                   |  |
| Computation      | 0                   |                 |            | COMMUNITY/ AREA                  | 0                              |                |           | COMMUNITY/ AREA                   |  |
| of               | DSE                 | CALL SIGN       | DSE        | CALL SIGN                        | DSE                            | CALL SIGN      | DSE       | CALL SIGN                         |  |
| Base Rate Fe     |                     |                 |            |                                  |                                |                |           |                                   |  |
| and              |                     |                 |            |                                  |                                | <b> </b>       |           |                                   |  |
| Syndicated       |                     | <u></u>         |            |                                  |                                | <b> </b>       |           |                                   |  |
| Exclusivity      |                     | <u> </u>        |            |                                  |                                | H              |           |                                   |  |
| Surcharge        |                     | -               |            |                                  |                                |                |           |                                   |  |
| for<br>Partially |                     | -               |            |                                  | ·                              |                | ·         |                                   |  |
| Distant          |                     | <b>-</b>        |            |                                  |                                | T              |           |                                   |  |
| Stations         |                     | -               |            |                                  | ·                              |                | <u>-</u>  |                                   |  |
| Otations         |                     | +               |            |                                  |                                |                |           |                                   |  |
|                  |                     | H               |            |                                  |                                |                |           |                                   |  |
|                  |                     | H               |            |                                  |                                |                |           |                                   |  |
|                  |                     | -               |            |                                  |                                | -              |           | ·                                 |  |
|                  |                     |                 |            |                                  |                                |                |           |                                   |  |
|                  |                     |                 |            |                                  |                                |                |           |                                   |  |
|                  | 0.00                |                 | Total DSEs |                                  | 0.00                           |                | •         | otal DSEs                         |  |
|                  | 0.00                | \$              | d Group    | Gross Receipts Secon             | 0.00                           | \$             | roup      | Gross Receipts First G            |  |
|                  | 0.00                | \$              | d Group    | Base Rate Fee Secon              | 0.00                           | \$             | roup      | <b>Base Rate Fee</b> First G      |  |
|                  | JP                  | SUBSCRIBER GROU | IGHTIETH   | E                                | SEVENTY-NINTH SUBSCRIBER GROUP |                |           | SEVEN                             |  |
|                  | 0                   |                 |            | COMMUNITY/ AREA                  | 0                              |                |           | COMMUNITY/ AREA                   |  |
|                  | DSE                 | CALL SIGN       | DSE        | CALL SIGN                        | DSE                            | CALL SIGN      | DSE       | CALL SIGN                         |  |
|                  |                     |                 |            |                                  |                                |                |           |                                   |  |
|                  |                     |                 |            |                                  |                                |                |           |                                   |  |
|                  |                     |                 |            |                                  |                                |                |           |                                   |  |
|                  |                     |                 |            |                                  |                                | 4              |           |                                   |  |
|                  |                     |                 |            |                                  |                                | _              |           |                                   |  |
|                  |                     |                 |            |                                  |                                |                |           |                                   |  |
|                  |                     |                 |            |                                  |                                |                |           |                                   |  |
|                  |                     |                 |            |                                  |                                |                |           |                                   |  |
|                  |                     |                 |            |                                  |                                |                |           |                                   |  |
|                  |                     |                 |            |                                  |                                |                |           |                                   |  |
|                  |                     |                 |            |                                  |                                |                |           |                                   |  |
|                  |                     |                 |            |                                  |                                |                |           |                                   |  |
|                  |                     |                 |            |                                  |                                |                |           |                                   |  |
|                  |                     |                 |            |                                  |                                |                |           |                                   |  |
|                  |                     |                 |            |                                  |                                |                |           |                                   |  |
|                  | 0.00                |                 |            | Total DSEs                       | 0.00                           |                |           | Total DSEs                        |  |
|                  | 0.00                | \$              | Group      | Total DSEs Gross Receipts Fourth | 0.00                           | \$             | Group     | Total DSEs Gross Receipts Third G |  |

| NI   | YSTEM ID#<br>007219 | S'              |            |                                  | <b>.</b>            |                |                 | LEGAL NAME OF OWNE<br>Advanced Cable C |  |
|--|---------------------|-----------------|------------|----------------------------------|---------------------|----------------|-----------------|--|--|
|  |                     |                 |            | TE FEES FOR EACH                 |                     |                |                 |  |  |
| 9  |                     | SUBSCRIBER GROU | -SECOND    |                                  |                     | SUBSCRIBER GRO | TY-FIRST        |  |  |
| Computation                                  | 0                   |                 |            | COMMUNITY/ AREA                  | 0                   |                |                 | COMMUNITY/ AREA                        |  |
| of   | DSE                 | CALL SIGN       | DSE        | CALL SIGN                        | DSE                 | CALL SIGN      | DSE             | CALL SIGN                              |  |
| Base Rate Fe                                 |                     |                 |            |                                  |                     |                |                 |  |  |
| and and                                      |                     | <br>            |            |                                  |                     |                |                 |  |  |
| Syndicated                                   |                     |                 |            |                                  |                     |                |                 |  |  |
| Exclusivity                                  |                     |                 |            |                                  |                     |                |                 |  |  |
| Surcharge                                    |                     |                 |            |                                  |                     |                |                 |  |  |
| for  |                     | -               |            |                                  |                     |                |                 |  |  |
| Partially Distant                            |                     | <b></b>         |            |                                  |                     |                |                 |  |  |
| Stations                                     | <u> </u>            | -               | ļ          |                                  |                     |                | -               |  |  |
|  |                     | -               |            |                                  |                     |                |                 |  |  |
|  |                     |                 |            |                                  |                     |                |                 |  |  |
| •••  |                     |                 |            |                                  |                     |                |                 |  |  |
| ···  |                     |                 |            |                                  |                     |                |                 |  |  |
| •••  |                     |                 |            |                                  |                     |                |                 |  |  |
| •••  |                     |                 |            |                                  |                     |                |                 |  |  |
|  | 0.00                |                 | Total DSEs |                                  | 0.00                |                |                 | otal DSEs                              |  |
| _  | 0.00                | \$              | d Group    | Gross Receipts Secon             | 0.00                | \$             | roup            | Gross Receipts First Gr                |  |
|  | 0.00                | \$              | d Group    | Base Rate Fee Secon              | 0.00                | \$             | roup            | Base Rate Fee First Gr                 |  |
|  | JP                  | SUBSCRIBER GROU | /-FOURTH   | EIGHT                            | RD SUBSCRIBER GROUP |                |                 | EIGHT                                  |  |
|  | COMMUNITY/ AREA0    |                 |            | 0                                |                     |                | COMMUNITY/ AREA |  |  |
| <u>'                                    </u> | DSE                 | CALL SIGN       | DSE        | CALL SIGN                        | DSE                 | CALL SIGN      | DSE             | CALL SIGN                              |  |
|  |                     |                 |            |                                  |                     |                |                 |  |  |
| <del></del>                                  |                     |                 |            |                                  |                     | -              |                 |  |  |
|  |                     |                 |            |                                  |                     |                |                 |  |  |
|  |                     |                 |            |                                  |                     |                |                 |  |  |
|  |                     |                 |            |                                  |                     |                |                 |  |  |
|  |                     |                 | ļ          |                                  |                     |                |                 |  |  |
|  |                     |                 |            |                                  |                     |                |                 |  |  |
|  |                     |                 | ļ          |                                  |                     |                | ·               |  |  |
|  |                     | -               |            |                                  |                     |                |                 |  |  |
|  |                     |                 | ļ          |                                  |                     |                | <u>.</u>        |  |  |
|  |                     | -               | ļ          |                                  |                     |                |                 |  |  |
|  |                     | -               |            |                                  |                     |                | -               |  |  |
|  | <del></del>         |                 |            |                                  |                     |                | •               |  |  |
|  |                     | 11              | ļ          |                                  |                     |                | ·               |  |  |
|  |                     |                 |            |                                  |                     |                |                 |  |  |
| <u>.</u>                                     | 0.00                |                 |            | Total DSEs                       | 0.00                |                |                 | Total DSEs                             |  |
|  | 0.00                | \$              | Group      | Total DSEs Gross Receipts Fourth | 0.00                | \$             | Group           | Total DSEs<br>Gross Receipts Third G   |  |

| Name                     | YSTEM ID#<br>007219 | S`              |           |                      |          |                  |           | Advanced Cable C             |
|--------------------------|---------------------|-----------------|-----------|----------------------|----------|------------------|-----------|------------------------------|
|                          |                     |                 |           | TE FEES FOR EACH     |          |                  |           |                              |
| 9                        |                     | SUBSCRIBER GROU | HTY-SIXTH |                      |          | SUBSCRIBER GRO   | TY-FIFTH  |                              |
| Computation              | 0                   |                 |           | COMMUNITY/ AREA      | 0        |                  |           | COMMUNITY/ AREA              |
| of                       | DSE                 | CALL SIGN       | DSE       | CALL SIGN            | DSE      | CALL SIGN        | DSE       | CALL SIGN                    |
| Base Rate Fe             |                     |                 |           |                      |          |                  |           |                              |
| and                      |                     |                 |           |                      |          |                  |           |                              |
| Syndicated               |                     |                 |           |                      |          |                  |           |                              |
| Exclusivity<br>Surcharge |                     | -               |           |                      | <u>.</u> |                  |           |                              |
| for                      | <u></u>             | -               |           |                      | <u>.</u> |                  |           |                              |
| Partially                | ····                | -               |           |                      |          |                  |           |                              |
| Distant                  |                     |                 |           |                      |          |                  |           |                              |
| Stations                 |                     |                 |           |                      |          |                  |           |                              |
|                          |                     |                 |           |                      |          |                  |           |                              |
|                          |                     |                 |           |                      | <b></b>  |                  | <u> </u>  |                              |
|                          |                     |                 |           |                      | ļ        |                  | <u> </u>  |                              |
|                          |                     |                 | ļ         |                      | <b> </b> |                  | .         |                              |
|                          |                     |                 |           |                      |          |                  |           |                              |
|                          |                     | <u> </u>        |           |                      |          |                  |           |                              |
|                          | 0.00                |                 |           | Total DSEs           | 0.00     |                  | otal DSEs |                              |
|                          | 0.00                | \$              | d Group   | Gross Receipts Secon | 0.00     | \$               | roup      | Gross Receipts First G       |
|                          | 0.00                | \$              | d Group   | Base Rate Fee Secon  | 0.00     | \$               | roup      | <b>3ase Rate Fee</b> First G |
|                          | ID.                 | SUBSCRIBER GROU | V FIGURE  | FIGUE                | ID       | SUBSCRIBER GRO   | SEVENITU. | EICHTV                       |
|                          | UP                  | 00000           | Y-EIGHTH  | EIGHI                | O1       | SODSCINIDEN GIVO | SEVENTH   | EIGHT1-C                     |
|                          | <u>0</u>            |                 | Y-EIGHTH  | COMMUNITY/ AREA      | 0        |                  |           |                              |
|                          | 0                   |                 |           | COMMUNITY/ AREA      | 0        |                  |           | COMMUNITY/ AREA              |
|                          |                     | CALL SIGN       | DSE       |                      |          | CALL SIGN        | DSE       |                              |
|                          | 0                   |                 |           | COMMUNITY/ AREA      | 0        |                  |           | COMMUNITY/ AREA              |
|                          | 0                   |                 |           | COMMUNITY/ AREA      | 0        |                  |           | COMMUNITY/ AREA              |
|                          | 0                   |                 |           | COMMUNITY/ AREA      | 0        |                  |           | COMMUNITY/ AREA              |
|                          | 0                   |                 |           | COMMUNITY/ AREA      | 0        |                  |           | COMMUNITY/ AREA              |
|                          | 0                   |                 |           | COMMUNITY/ AREA      | 0        |                  |           | COMMUNITY/ AREA              |
|                          | 0                   |                 |           | COMMUNITY/ AREA      | 0        |                  |           | COMMUNITY/ AREA              |
|                          | 0                   |                 |           | COMMUNITY/ AREA      | 0        |                  |           | COMMUNITY/ AREA              |
|                          | 0                   |                 |           | COMMUNITY/ AREA      | 0        |                  |           | COMMUNITY/ AREA              |
|                          | 0                   |                 |           | COMMUNITY/ AREA      | 0        |                  |           | COMMUNITY/ AREA              |
|                          | 0                   |                 |           | COMMUNITY/ AREA      | 0        |                  |           | COMMUNITY/ AREA              |
|                          | 0                   |                 |           | COMMUNITY/ AREA      | 0        |                  |           | COMMUNITY/ AREA              |
|                          | 0                   |                 |           | COMMUNITY/ AREA      | 0        |                  |           | COMMUNITY/ AREA              |
|                          | DSE                 |                 |           | CALL SIGN            | DSE      |                  |           | CALL SIGN                    |
|                          | 0                   |                 |           | COMMUNITY/ AREA      | 0        |                  |           | COMMUNITY/ AREA              |
|                          | DSE                 |                 | DSE       | CALL SIGN            | DSE      |                  | DSE       | CALL SIGN                    |

| LEGAL NAME OF OWNE  Advanced Cable C |                    |                       |             |                                     |               | S                | 3YSTEM ID#<br>007219 | Name                 |
|--------------------------------------|--------------------|-----------------------|-------------|-------------------------------------|---------------|------------------|----------------------|----------------------|
|                                      |                    |                       |             | ATE FEES FOR EAC                    |               |                  |                      |                      |
| EIGHT<br>COMMUNITY/ AREA             | TY-NINTH           | SUBSCRIBER GRO        | 0<br>0      | COMMUNITY/ ARE                      |               | 1 SUBSCRIBER GRO | UP <b>0</b>          | 9                    |
| COMMUNITY AREA                       |                    |                       |             | COMMUNITY ARE                       | Α             |                  |                      | Computation          |
| CALL SIGN                            | DSE                | CALL SIGN             | DSE         | CALL SIGN                           | DSE           | CALL SIGN        | DSE                  | of                   |
|                                      |                    |                       |             |                                     |               |                  |                      | Base Rate Fe         |
|                                      | ·                  |                       | <u></u>     |                                     |               |                  |                      | and<br>Syndicated    |
|                                      |                    |                       | <del></del> |                                     | ····          |                  |                      | Exclusivity          |
|                                      |                    |                       |             |                                     |               |                  |                      | Surcharge            |
|                                      |                    |                       |             |                                     |               |                  |                      | for                  |
|                                      | ·                  | ļ                     | <del></del> |                                     |               |                  |                      | Partially<br>Distant |
|                                      |                    | _                     |             |                                     |               |                  |                      | Stations             |
|                                      |                    |                       |             |                                     |               |                  |                      |                      |
|                                      |                    |                       |             |                                     |               |                  |                      |                      |
|                                      |                    | -                     | <del></del> |                                     |               |                  |                      |                      |
|                                      |                    |                       |             |                                     |               |                  |                      |                      |
|                                      |                    |                       |             |                                     |               |                  |                      |                      |
| Total DSEs                           |                    |                       | 0.00        | Total DSEs                          |               |                  |                      |                      |
| Gross Receipts First G               | roup               | \$ 0.00               |             | Gross Receipts Second Group \$ 0.00 |               |                  |                      |                      |
|                                      |                    |                       |             |                                     |               |                  |                      |                      |
| Base Rate Fee First G                |                    | \$                    | 0.00        | Base Rate Fee Sec                   |               | \$               | 0.00                 |                      |
|                                      | TY-FIRST           | SUBSCRIBER GRO        | OUP 0       | NINE COMMUNITY/ ARE                 |               | SUBSCRIBER GRO   | UP <b>0</b>          |                      |
| COMMUNITY/ AREA                      |                    |                       |             | COMMONT I/ AREA                     |               |                  |                      |                      |
| CALL SIGN                            | DSE                | CALL SIGN             | DSE         | CALL SIGN                           | DSE           | CALL SIGN        | DSE                  |                      |
|                                      |                    |                       |             |                                     |               |                  |                      |                      |
|                                      |                    |                       |             |                                     |               |                  |                      |                      |
|                                      | ·                  |                       | <del></del> |                                     |               |                  |                      |                      |
|                                      |                    |                       |             |                                     |               |                  |                      |                      |
|                                      |                    | <u> </u>              |             |                                     |               |                  |                      |                      |
|                                      |                    |                       | <u></u>     |                                     | <mark></mark> |                  |                      |                      |
|                                      |                    |                       | <del></del> |                                     |               | •                |                      |                      |
|                                      |                    |                       |             |                                     |               |                  |                      |                      |
|                                      |                    |                       |             |                                     |               |                  |                      |                      |
|                                      |                    |                       |             |                                     |               |                  |                      |                      |
|                                      |                    |                       |             |                                     |               |                  |                      |                      |
|                                      |                    |                       |             |                                     |               |                  |                      |                      |
| Total DSEs                           |                    |                       | 0.00        | Total DSEs                          |               |                  | 0.00                 |                      |
| Gross Receipts Third C               | Group              | \$                    | 0.00        | Gross Receipts Fou                  | rth Group     | \$               | 0.00                 |                      |
|                                      |                    |                       | _           |                                     |               |                  |                      |                      |
| Base Rate Fee Third G                | Group              | \$                    | 0.00        | Base Rate Fee Fou                   | rth Group     | \$               | 0.00                 |                      |
|                                      |                    |                       |             | <u>II</u>                           |               |                  |                      |                      |
| Base Rate Fee: Add th                | ne <b>base rat</b> | te fees for each subs |             |                                     |               | \$               | 0.00                 |                      |

| Name                     | YSTEM ID#<br>007219 | S               |            |                                  |                               |                |          | LEGAL NAME OF OWNE  Advanced Cable C |  |
|--------------------------|---------------------|-----------------|------------|----------------------------------|-------------------------------|----------------|----------|--------------------------------------|--|
|                          |                     |                 |            | TE FEES FOR EACH                 |                               |                |          |                                      |  |
| 9                        |                     | SUBSCRIBER GROU | /-FOURTH   |                                  |                               | SUBSCRIBER GRO | TY-THIRD |                                      |  |
| Computation              | 0                   |                 |            | COMMUNITY/ AREA                  | 0                             |                |          | COMMUNITY/ AREA                      |  |
| of                       | DSE                 | CALL SIGN       | DSE        | CALL SIGN                        | DSE                           | CALL SIGN      | DSE      | CALL SIGN                            |  |
| Base Rate Fe             |                     |                 |            |                                  |                               |                |          |                                      |  |
| and                      |                     |                 |            | •••••                            |                               |                |          |                                      |  |
| Syndicated               |                     |                 |            |                                  |                               |                | <u> </u> |                                      |  |
| Exclusivity<br>Surcharge | · <del>-</del>      | <del> </del>    |            |                                  |                               |                |          |                                      |  |
| for                      |                     | -               |            |                                  | <u>-</u>                      |                | ·        |                                      |  |
| Partially                |                     |                 |            |                                  |                               |                |          |                                      |  |
| Distant                  |                     |                 |            |                                  |                               |                |          |                                      |  |
| Stations                 |                     |                 |            | •••••                            |                               |                |          |                                      |  |
|                          |                     |                 |            |                                  |                               |                |          |                                      |  |
|                          |                     |                 |            |                                  | <u>.</u>                      |                |          |                                      |  |
|                          | ····                |                 |            |                                  |                               |                | ·        |                                      |  |
|                          |                     |                 |            |                                  | <u>-</u>                      |                |          |                                      |  |
|                          |                     | <b>1</b>        |            |                                  |                               |                |          |                                      |  |
|                          | 0.00                |                 | Total DSEs |                                  | 0.00                          |                | •        | otal DSEs                            |  |
|                          | 0.00                | \$              | d Group    | Gross Receipts Secon             | 0.00                          | \$             | roup     | Gross Receipts First G               |  |
|                          | 0.00                | \$              | d Group    | Base Rate Fee Secon              | 0.00                          | \$             | roup     | Base Rate Fee First G                |  |
|                          | IP                  | SUBSCRIBER GROU | TY-SIXTH   | NINE                             | NINETY-FIFTH SUBSCRIBER GROUP |                |          | NINE                                 |  |
|                          | MUNITY/ AREA 0      |                 |            | COMMUNITY/ AREA                  | 0                             |                |          | COMMUNITY/ AREA                      |  |
|                          | DSE                 | CALL SIGN       | DSE        | CALL SIGN                        | DSE                           | CALL SIGN      | DSE      | CALL SIGN                            |  |
|                          |                     |                 |            |                                  |                               |                |          |                                      |  |
|                          |                     | -               |            |                                  |                               |                |          |                                      |  |
|                          |                     | -               |            |                                  |                               |                |          |                                      |  |
|                          |                     | -               |            |                                  |                               | -              |          |                                      |  |
|                          |                     | -               |            |                                  | -                             |                | <u>-</u> |                                      |  |
|                          |                     |                 |            |                                  |                               |                |          |                                      |  |
|                          |                     |                 |            |                                  |                               |                |          |                                      |  |
|                          | ····[··········     |                 |            |                                  |                               |                |          |                                      |  |
|                          |                     |                 |            |                                  | •                             |                | ···      |                                      |  |
|                          |                     |                 |            |                                  |                               |                |          |                                      |  |
|                          |                     |                 |            |                                  |                               |                |          |                                      |  |
|                          |                     |                 |            |                                  |                               |                |          |                                      |  |
|                          |                     |                 |            |                                  |                               |                |          |                                      |  |
|                          |                     |                 |            |                                  |                               |                |          |                                      |  |
|                          | 0.00                |                 |            | Total DSEs                       | 0.00                          |                |          | Total DSEs                           |  |
|                          | 0.00                | \$              | Group      | Total DSEs Gross Receipts Fourth | 0.00                          | \$             | Group    | Total DSEs<br>Gross Receipts Third G |  |

| LEGAL NAME OF OWNE  Advanced Cable C |                   |                |          |                       |                | S               | YSTEM ID#<br>007219 | Name  |
|--------------------------------------|-------------------|----------------|----------|-----------------------|----------------|-----------------|---------------------|---|
|                                      |                   |                |          | TE FEES FOR EACH      |                |                 |                     | 0 9   |
|                                      | EVENTH            | SUBSCRIBER GRO |          |                       | Y-EIGHTH       | SUBSCRIBER GROU |                     | a   |
| COMMUNITY/ AREA                      |                   |                | 0        | COMMUNITY/ AREA       |                |                 | 0                   | Computation                                 |
| CALL SIGN                            | DSE               | CALL SIGN      | DSE      | CALL SIGN             | DSE            | CALL SIGN       | DSE                 | Computation E of                            |
|                                      |                   |                |          |                       |                |                 |                     | Base Rate Fee                               |
|                                      |                   |                |          |                       |                |                 |                     |   |
|                                      |                   |                |          |                       |                |                 |                     |   |
|                                      |                   |                |          |                       | <b>.</b>       | -               |                     | Exclusivity Surcharge for Partially Distant |
|                                      |                   |                |          |                       | <mark>-</mark> |                 | <u></u>             |   |
|                                      |                   |                |          |                       | ·              | -               |                     |   |
|                                      |                   |                |          |                       | <u>.</u>       | -               | ····                | -   |
|                                      |                   | -              |          |                       |                |                 |                     |   |
|                                      |                   | ]              |          |                       |                |                 |                     |   |
|                                      |                   | -              |          |                       |                |                 |                     |   |
|                                      |                   |                | <u> </u> |                       | <u> </u>       |                 |                     |   |
|                                      | ļ                 |                | <b></b>  |                       | <b></b>        |                 |                     |   |
|                                      |                   |                | <b> </b> |                       | <mark>-</mark> |                 | <u></u>             |   |
|                                      |                   |                |          |                       |                |                 |                     |   |
| Total DSEs                           |                   |                | 0.00     | Total DSEs            |                |                 | 0.00                |   |
| Gross Receipts First Gr              | oup               | \$             | 0.00     | Gross Receipts Secon  | d Group        | \$              | 0.00                |   |
| <b>3ase Rate Fee</b> First Gr        | oup               | \$             | 0.00     | Base Rate Fee Secon   | d Group        | \$              | 0.00                |   |
| NINET                                | Y-NINTH           | SUBSCRIBER GRO | UP       | ONE HU                | NDREDTH        | SUBSCRIBER GROU | JP                  |   |
| COMMUNITY/ AREA                      |                   |                | 0        | COMMUNITY/ AREA       |                |                 | 0                   |   |
| CALL SIGN                            | DSE               | CALL SIGN      | DSE      | CALL SIGN             | DSE            | CALL SIGN       | DSE                 |   |
|                                      |                   |                |          |                       |                |                 |                     |   |
|                                      |                   |                |          |                       |                |                 |                     |   |
|                                      |                   |                |          |                       |                |                 |                     |   |
|                                      |                   |                |          |                       | <u>.</u>       |                 |                     |   |
|                                      |                   |                | -        |                       | <b></b>        |                 |                     |   |
|                                      |                   |                |          |                       | <b>.</b>       | -               |                     |   |
|                                      |                   |                | <b></b>  |                       | ······         | -               |                     |   |
|                                      |                   | -              |          |                       |                |                 |                     |   |
|                                      |                   |                |          |                       |                |                 |                     |   |
|                                      |                   | -              |          |                       |                |                 |                     |   |
|                                      |                   |                | ļ        |                       | <u> </u>       |                 |                     |   |
|                                      |                   |                | <b> </b> |                       | <b></b>        |                 | <u></u>             |   |
|                                      |                   |                | <b> </b> |                       | <u> </u>       |                 | <u></u>             |   |
| Total DSEs                           | 1                 |                | 0.00     | Total DSEs            |                |                 | 0.00                |   |
| Gross Receipts Third G               | roup              | \$             | 0.00     | Gross Receipts Fourth | Group          | \$              | 0.00                |   |
| <b>Base Rate Fee</b> Third G         | roup              | \$             | 0.00     | Base Rate Fee Fourth  | ı Group        | \$              | 0.00                |   |
| ate Fee: Add th                      | e <b>base rat</b> |                |          | Base Rate Fee Fourth  |                | \$              | 0.00                |   |

| LEGAL NAME OF OWNER  Advanced Cable C |          |                 |             |                       |                | S               | YSTEM ID#<br>007219 | Name  |
|---------------------------------------|----------|-----------------|-------------|-----------------------|----------------|-----------------|---------------------|---|
|                                       |          |                 |             | TE FEES FOR EACH      |                |                 |                     | 9   |
| ONE HUNDRE                            | D FIRST  | SUBSCRIBER GROU | JP          | ONE HUNDRED           | SECOND         | SUBSCRIBER GROU | JP                  | 0   |
| COMMUNITY/ AREA                       |          |                 | 0           | COMMUNITY/ AREA       |                |                 | 0                   | Computation of Base Rate Fee and Syndicated Exclusivity Surcharge |
| CALL SIGN                             | DSE      | CALL SIGN       | DSE         | CALL SIGN             | DSE            | CALL SIGN       | DSE                 | Computation  of Base Rate Fe and Syndicated Exclusivity           |
|                                       |          |                 |             |                       |                |                 |                     | Base Rate Fee   |
|                                       |          |                 |             |                       |                |                 |                     |   |
|                                       |          |                 |             |                       |                |                 |                     |   |
|                                       |          |                 |             |                       |                |                 |                     | Exclusivity Surcharge for Partially Distant                       |
|                                       |          |                 |             |                       |                |                 |                     | _   |
|                                       |          |                 |             |                       |                |                 |                     |   |
|                                       |          |                 |             |                       | <u>.</u>       |                 | <u></u>             | -   |
|                                       |          |                 |             |                       | <b></b>        |                 | <u></u>             |   |
|                                       |          |                 |             |                       | <mark>-</mark> | -               | <u></u>             | Stations  |
|                                       |          |                 |             |                       | <b></b>        | H               | <u></u>             |   |
|                                       |          |                 |             |                       | <b>-</b>       |                 | <del></del>         |   |
|                                       |          |                 |             |                       | <del> </del>   | -               |                     |   |
|                                       |          |                 |             |                       | ·····          | 1               | <u> </u>            |   |
|                                       |          |                 |             |                       |                | <b>+</b>        |                     |   |
| Γotal DSEs                            | <u> </u> |                 | 0.00        | Total DSEs            | <u> </u>       |                 | 0.00                | -   |
| Gross Receipts First Gr               | oup      | \$              | 0.00        | Gross Receipts Secon  | d Group        | \$              | 0.00                |   |
| Base Rate Fee First Gr                | oup      | \$              | 0.00        | Base Rate Fee Secon   | d Group        | \$              | 0.00                |   |
| ONE HUNDRE                            | D THIRD  | SUBSCRIBER GROU | JP          | ONE HUNDREI           | ) FOURTH       | SUBSCRIBER GROU | JP                  |   |
| COMMUNITY/ AREA                       |          |                 | 0           | COMMUNITY/ AREA       |                |                 | 0                   |   |
| CALL SIGN                             | DSE      | CALL SIGN       | DSE         | CALL SIGN             | DSE            | CALL SIGN       | DSE                 |   |
|                                       |          |                 |             |                       |                |                 |                     |   |
|                                       |          |                 |             |                       |                | -               |                     |   |
|                                       |          |                 |             |                       |                |                 |                     |   |
|                                       |          |                 |             |                       |                |                 |                     |   |
|                                       |          |                 |             |                       |                |                 |                     |   |
|                                       |          |                 |             |                       |                |                 |                     |   |
|                                       |          |                 |             |                       | ļ              |                 |                     |   |
|                                       |          |                 |             |                       | <u> </u>       |                 |                     |   |
|                                       |          |                 |             |                       | ļ              |                 |                     |   |
|                                       |          |                 |             |                       | <b></b>        |                 |                     |   |
|                                       |          |                 |             |                       | <b></b>        |                 | <u></u>             |   |
|                                       |          |                 |             |                       | <b></b>        |                 | <u></u>             |   |
|                                       |          |                 | ļ           |                       | <b></b>        | -               | <u></u>             |   |
|                                       |          |                 |             |                       | <b></b>        |                 | <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                |   |
| ate Fee: Add the                      |          |                 | riber group | as shown in the boxes | above.         | \$              |                     |   |

## **Nonpermitted 3.75 Stations**

| Name   | YSTEM ID#<br>007219 | S'              |           |   |              |                |               | LEGAL NAME OF OWNE  Advanced Cable C |
|--|---------------------|-----------------|-----------|---|--------------|----------------|---------------|--------------------------------------|
| 9  |                     |                 |           | TE FEES FOR EACH                        |              |                |               |                                      |
| ٥  | IP                  | SUBSCRIBER GROU | RED SIXTH | ONE HUNDI                               |              | SUBSCRIBER GRO | ED FIFTH      | ONE HUNDRI                           |
| Computation  | 0                   |                 |           | COMMUNITY/ AREA                         | 0            |                |               | COMMUNITY/ AREA                      |
| E of Base Rate Fe and Syndicated Exclusivity Surcharge | DSE                 | CALL SIGN       | DSE       | CALL SIGN                               | DSE          | CALL SIGN      | DSE           | CALL SIGN                            |
| Base Rate Fe   |                     |                 |           |   |              |                |               |                                      |
|  |                     |                 |           |   |              |                |               |                                      |
|  |                     |                 |           | *************************************** |              |                |               |                                      |
| Surcharge<br>for<br>Partially<br>Distant               |                     |                 |           |   |              |                |               |                                      |
| _  |                     |                 |           |   |              |                |               |                                      |
|  |                     |                 |           |   |              |                |               |                                      |
| -  |                     |                 |           |   |              |                |               |                                      |
|  | <u></u>             |                 |           |   | <del> </del> |                | <mark></mark> |                                      |
| Stations   |                     | -               |           |   |              |                |               |                                      |
|  |                     | -               |           |   | <b> </b>     |                |               |                                      |
|  | ····                |                 |           |   | <b></b>      |                |               |                                      |
| Surcharge for Partially Distant Stations               | ····                |                 |           |   | ·            |                | <u></u>       |                                      |
|  |                     |                 |           |   | ······       |                | ···           |                                      |
| Distant Stations                                       |                     | <u> </u>        |           |   | ·····        |                | <u>-</u>      |                                      |
|  | 0.00                |                 |           | Total DSEs                              | 0.00         |                |               | Total DSEs                           |
|  | 0.00                | \$              | d Group   | Gross Receipts Secon                    | 0.00         | \$             | roup          | Gross Receipts First G               |
|  | 0.00                | \$              | d Group   | Base Rate Fee Secon                     | 0.00         | \$             | roup          | <b>Base Rate Fee</b> First Gi        |
|  | IP                  | SUBSCRIBER GROU | D EIGHTH  | ONE HUNDRE                              | JP           | SUBSCRIBER GRO | SEVENTH       | ONE HUNDRED S                        |
|  | 0                   |                 |           | COMMUNITY/ AREA                         | 0            |                |               | COMMUNITY/ AREA                      |
|  | DSE                 | CALL SIGN       | DSE       | CALL SIGN                               | DSE          | CALL SIGN      | DSE           | CALL SIGN                            |
|  | DOL                 | 07 IEE 01014    | DOL       | OF ILLE CHOIN                           | BOL          | OF ILL OF OTT  | DOL           | CALL CICIT                           |
|  |                     | -               |           |   | ·            |                |               |                                      |
|  |                     |                 |           |   |              |                | <u>-</u>      |                                      |
|  |                     |                 |           |   |              |                |               |                                      |
|  |                     |                 |           |   |              |                |               |                                      |
|  |                     |                 |           |   |              |                |               |                                      |
|  |                     |                 |           |   |              |                |               |                                      |
|  |                     |                 |           |   |              |                |               |                                      |
|  |                     |                 |           |   |              |                |               |                                      |
|  |                     |                 |           |   |              |                |               |                                      |
|  |                     |                 |           |   |              |                |               |                                      |
|  |                     |                 |           |   |              |                |               |                                      |
|  |                     |                 |           |   |              |                |               |                                      |
|  |                     |                 |           |   |              |                |               |                                      |
|  |                     |                 |           |   |              |                |               |                                      |
|  | 0.00                |                 |           | Total DSFs                              | 0.00         |                |               | Total DSEs                           |
|  | 0.00                |                 |           | Total DSEs                              | 0.00         |                |               |                                      |
|  | 0.00                | \$              | Group     | Total DSEs Gross Receipts Fourth        | 0.00         | \$             | Group         | Total DSEs<br>Gross Receipts Third G |

|   | YSTEM ID#<br>007219 | S'              |          |                                  |              |                |          | Advanced Cable C                     |
|---|---------------------|-----------------|----------|----------------------------------|--------------|----------------|----------|--------------------------------------|
|   |                     |                 |          | TE FEES FOR EACH                 |              |                |          |                                      |
|   | JP                  | SUBSCRIBER GROU | ED TENTH | ONE HUNDR                        | JP           | SUBSCRIBER GRO | ED NINTH | ONE HUNDRE                           |
| Base Rate Fee<br>and<br>Syndicated<br>Exclusivity | 0                   |                 |          | COMMUNITY/ AREA                  | 0            |                |          | COMMUNITY/ AREA                      |
| Computation  of  Base Rate Fe  and  Syndicated    | DSE                 | CALL SIGN       | DSE      | CALL SIGN                        | DSE          | CALL SIGN      | DSE      | CALL SIGN                            |
| Base Rate Fe                                      |                     |                 |          |                                  |              |                |          |                                      |
| •-  |                     |                 |          |                                  |              |                |          |                                      |
| ••  |                     |                 |          |                                  |              |                |          |                                      |
| Surcharge<br>for<br>Partially<br>Distant          |                     |                 |          |                                  |              |                |          |                                      |
| Surcharge<br>for<br>Partially<br>Distant          |                     |                 |          |                                  |              |                |          |                                      |
| Surcharge<br>for<br>Partially<br>Distant          |                     | -               |          |                                  | <u>.</u>     |                |          |                                      |
| for Partially Distant                             |                     |                 |          |                                  |              |                |          |                                      |
|   | <u></u>             |                 |          |                                  | <del> </del> |                | ··       |                                      |
| Stations  |                     | -               |          |                                  |              | -              |          |                                      |
| -   |                     |                 |          |                                  | ·····        |                |          |                                      |
| •   |                     |                 |          |                                  | <u> </u>     |                |          |                                      |
| Surcharge for Partially Distant Stations          |                     |                 |          |                                  | <u> </u>     |                |          |                                      |
|   |                     |                 |          |                                  |              | •              |          |                                      |
|   |                     |                 |          |                                  |              |                |          |                                      |
|   | 0.00                |                 | •        | Total DSEs                       | 0.00         |                | •        | Total DSEs                           |
|   | 0.00                | \$              | d Group  | Gross Receipts Secon             | 0.00         | \$             | roup     | Gross Receipts First G               |
|   | 0.00                | \$              | d Group  | Base Rate Fee Secon              | 0.00         | \$             | roup     | Base Rate Fee First G                |
|   | JP                  | SUBSCRIBER GROU | TWELVTH  | ONE HUNDRED                      | JP           | SUBSCRIBER GRO | LEVENTH  | ONE HUNDRED E                        |
|   | 0                   |                 |          | COMMUNITY/ AREA                  | 0            |                |          | COMMUNITY/ AREA                      |
| 1   | DSE                 | CALL SIGN       | DSE      | CALL SIGN                        | DSE          | CALL SIGN      | DSE      | CALL SIGN                            |
|   |                     |                 |          |                                  |              |                |          |                                      |
| "   |                     |                 |          |                                  |              |                |          |                                      |
|   |                     |                 |          |                                  |              |                |          |                                      |
|   |                     |                 |          |                                  |              |                |          |                                      |
| <br><br>  |                     |                 |          |                                  |              |                |          |                                      |
| <br><br>  |                     |                 |          |                                  |              |                |          |                                      |
| <br><br>  |                     |                 |          |                                  |              |                |          |                                      |
| <br><br><br>                                      |                     |                 |          |                                  |              |                |          |                                      |
| <br><br>  |                     |                 |          |                                  |              |                |          |                                      |
| <br><br>  |                     |                 |          |                                  |              |                |          |                                      |
| <br><br><br>                                      |                     |                 |          |                                  |              |                |          |                                      |
| <br><br>  |                     |                 |          |                                  |              |                |          |                                      |
| <br><br><br>                                      |                     |                 |          |                                  |              |                |          |                                      |
| <br><br><br>                                      |                     |                 |          |                                  |              |                |          |                                      |
|   |                     |                 |          |                                  |              |                |          |                                      |
|   | 0.00                |                 |          | Total DSEs                       | 0.00         |                |          | Total DSEs                           |
| <br><br><br><br>                                  | 0.00                | \$              | Group    | Total DSEs Gross Receipts Fourth | 0.00         | \$             | Group    | Total DSEs<br>Gross Receipts Third C |

| and  |
|--|
| DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Of Base Rate Fee and |
| DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE of Base Rate Fee and |
| DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE of Base Rate Fee and |
| and  |
| ······································                             |
|  |
| Syndicated   |
| Exclusivity  |
| Surcharge  |
| for Partially.   |
| Partially Distant  |
| Distant Stations   |
| Stations   |
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|  |
| up \$ 0.00 Gross Receipts Second Group \$ 0.00                     |
| up \$ 0.00 Base Rate Fee Second Group \$ 0.00                      |
| TEENTH SUBSCRIBER GROUP ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP     |
| O COMMUNITY/ AREA O  |
| DSE CALL SIGN DSE CALL SIGN DSE                                    |
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| 0.00 Total DSEs  |
| pup \$ 0.00 Gross Receipts Fourth Group \$ 0.00                    |
|  |

| 19   | 007219      | S'                 |          |  |             |                    |              | LEGAL NAME OF OWNE  Advanced Cable C |
|--|-------------|--------------------|----------|--|-------------|--------------------|--------------|--------------------------------------|
| 9  |             | IBER GROUP         | SUBSCRI  | TE FEES FOR EACH                         | BASE RA     | COMPUTATION OF     | LOCK A: 0    | Bl                                   |
|  | )           | SUBSCRIBER GROUP   | GHTEENTH | ONE HUNDRED E                            | 1           | SUBSCRIBER GROUP   | ENTEENTH     | ONE HUNDRED SEVE                     |
| Computation SE of Base Rate Fee                      | 0           |                    |          | COMMUNITY/ AREA                          | 0           |                    |              | COMMUNITY/ AREA                      |
| E of Base Rate Fe                                    | DSE         | CALL SIGN          | DSE      | CALL SIGN                                | DSE         | CALL SIGN          | DSE          | CALL SIGN                            |
| Base Rate Fe   |             |                    |          |  |             |                    |              |                                      |
| and  |             |                    |          |  |             |                    |              |                                      |
| Syndicated   |             |                    |          |  |             |                    |              |                                      |
| Surcharge<br>for<br>Partially<br>Distant             |             |                    |          |  |             |                    |              |                                      |
| Surcharge<br>for<br>Partially<br>Distant             |             |                    |          |  |             |                    |              |                                      |
| Surcharge<br>for<br>Partially<br>Distant             | ·····       |                    |          |  |             |                    |              |                                      |
| for Partially Distant                                |             |                    |          |  |             |                    |              |                                      |
| for Partially Distant Stations                       |             |                    |          |  |             |                    | <u></u>      |                                      |
| Stations   |             |                    |          |  |             |                    | <u></u>      |                                      |
|  |             |                    |          |  |             |                    | <u>  </u>    |                                      |
|  |             |                    |          |  | ·           |                    | <u>-</u>     |                                      |
| Exclusivity Surcharge for Partially Distant Stations |             | -                  | ·····    |  |             |                    | <u></u>      |                                      |
|  |             |                    |          |  |             |                    | <u></u>      |                                      |
| Partially Distant Stations                           | ••••        |                    |          |  |             |                    |              |                                      |
|  | 0.00        |                    | ļ        | Total DSEs                               | 0.00        |                    | <del>-</del> | Total DSEs                           |
| <u>)                                    </u>         | 0.00        | \$                 | d Group  | Gross Receipts Secon                     | 0.00        | \$                 | Group        | Gross Receipts First G               |
|  |             |                    |          |  |             |                    |              |                                      |
|  | 0.00        | \$                 | d Group  | Base Rate Fee Secon                      | 0.00        | \$                 | Group        | Base Rate Fee First G                |
|  |             | \$ SUBSCRIBER GROU |          |  |             | \$ SUBSCRIBER GROU |              |                                      |
| 0  |             |                    |          |  |             |                    |              | ONE HUNDRED NIN                      |
| 0  | JP          |                    |          | ONE HUNDRED T                            | JP          |                    |              | ONE HUNDRED NIN                      |
| 0  | JP <b>0</b> | SUBSCRIBER GROU    | VENTIETH | ONE HUNDRED T                            | JP <b>0</b> | SUBSCRIBER GROU    | NTEENTH      | ONE HUNDRED NIN                      |
| 0  | JP <b>0</b> | SUBSCRIBER GROU    | VENTIETH | ONE HUNDRED T                            | JP <b>0</b> | SUBSCRIBER GROU    | NTEENTH      | ONE HUNDRED NIN                      |
| 0  | JP <b>0</b> | SUBSCRIBER GROU    | VENTIETH | ONE HUNDRED T                            | JP <b>0</b> | SUBSCRIBER GROU    | NTEENTH      | ONE HUNDRED NIN                      |
| 0  | JP <b>0</b> | SUBSCRIBER GROU    | VENTIETH | ONE HUNDRED T                            | JP <b>0</b> | SUBSCRIBER GROU    | NTEENTH      | ONE HUNDRED NIN                      |
| 0  | JP <b>0</b> | SUBSCRIBER GROU    | VENTIETH | ONE HUNDRED T                            | JP <b>0</b> | SUBSCRIBER GROU    | NTEENTH      | ONE HUNDRED NIN                      |
| 0  | JP <b>0</b> | SUBSCRIBER GROU    | VENTIETH | ONE HUNDRED T                            | JP <b>0</b> | SUBSCRIBER GROU    | NTEENTH      | ONE HUNDRED NIN                      |
| 0  | JP <b>0</b> | SUBSCRIBER GROU    | VENTIETH | ONE HUNDRED T                            | JP <b>0</b> | SUBSCRIBER GROU    | NTEENTH      | ONE HUNDRED NIN                      |
| 0  | JP <b>0</b> | SUBSCRIBER GROU    | VENTIETH | ONE HUNDRED T                            | JP <b>0</b> | SUBSCRIBER GROU    | NTEENTH      | ONE HUNDRED NIN                      |
| 0  | JP <b>0</b> | SUBSCRIBER GROU    | VENTIETH | ONE HUNDRED T                            | JP <b>0</b> | SUBSCRIBER GROU    | NTEENTH      | ONE HUNDRED NIN                      |
| 0  | JP <b>0</b> | SUBSCRIBER GROU    | VENTIETH | ONE HUNDRED T                            | JP <b>0</b> | SUBSCRIBER GROU    | NTEENTH      | ONE HUNDRED NIN                      |
| 0  | JP <b>0</b> | SUBSCRIBER GROU    | VENTIETH | ONE HUNDRED T                            | JP <b>0</b> | SUBSCRIBER GROU    | NTEENTH      | ONE HUNDRED NIN                      |
| 0  | JP <b>0</b> | SUBSCRIBER GROU    | VENTIETH | ONE HUNDRED T                            | JP <b>0</b> | SUBSCRIBER GROU    | NTEENTH      | ONE HUNDRED NIN                      |
| 0  | JP <b>0</b> | SUBSCRIBER GROU    | VENTIETH | ONE HUNDRED T                            | JP <b>0</b> | SUBSCRIBER GROU    | NTEENTH      | COMMUNITY/ AREA                      |
| 0  | JP <b>0</b> | SUBSCRIBER GROU    | VENTIETH | ONE HUNDRED T                            | JP <b>0</b> | SUBSCRIBER GROU    | NTEENTH      | ONE HUNDRED NIN                      |
| O  | JP <b>0</b> | SUBSCRIBER GROU    | VENTIETH | ONE HUNDRED T                            | JP <b>0</b> | SUBSCRIBER GROU    | NTEENTH      | ONE HUNDRED NIN                      |
| O  | JP 0 DSE    | SUBSCRIBER GROU    | DSE      | ONE HUNDRED T COMMUNITY/ AREA  CALL SIGN | JP 0        | SUBSCRIBER GROU    | DSE          | ONE HUNDRED NIN                      |

| LEGAL NAME OF OWNER  Advanced Cable C          |          |                  |              |                      |  | S   | 007219                           | Name         |
|--|----------|------------------|--------------|----------------------|--|---|----------------------------------|--------------|
| BL   | OCK A: ( | COMPUTATION OF   | BASE RA      | TE FEES FOR EAC      | H SUBSCF   | RIBER GROUP   |                                  |              |
| ONE HUNDRED TWEN                               | TY-FIRST | SUBSCRIBER GROUP | )            | ONE HUNDRED TWE      | NTY-SECONE   | SUBSCRIBER GROUP  | <b>D</b>                         | 9            |
| COMMUNITY/ AREA                                |          |                  | 0            | COMMUNITY/ AREA      | Α  |   | 0                                | Computation  |
| CALL SIGN                                      | DSE      | CALL SIGN        | DSE          | CALL SIGN            | DSE  | OND SUBSCRIBER GROUP  O Com CALL SIGN DSE Base Syn Exc Sur Pa | of                               |              |
|  |          |                  |              |                      |  |   |                                  | Base Rate Fe |
|  |          |                  |              |                      | DSE CALL SIGN DSE  One of the second Group \$ 0.00       | and   |                                  |              |
|  |          |                  |              |                      | ACH SUBSCRIBER GROUP //ENTY-SECOND SUBSCRIBER GROUP //EA | Syndicated  |                                  |              |
|  |          |                  |              |                      |  | Exclusivity   |                                  |              |
|  |          |                  |              |                      |  |   | Surcharge                        |              |
|  |          |                  |              |                      |  |   |                                  | for          |
|  |          |                  |              |                      |  |   | Partially<br>Distant             |              |
|  |          |                  |              |                      | ·····  |   |                                  | Stations     |
|  |          |                  |              |                      |  |   |                                  | Otations     |
|  |          |                  | •            |                      | ••••   |   |                                  |              |
|  |          |                  |              |                      | ••••   | COND SUBSCRIBER GROUP   |                                  |              |
|  |          |                  |              |                      |  |   |                                  |              |
|  |          |                  |              |                      |  |   |                                  |              |
|  |          |                  |              |                      |  |   |                                  |              |
| Total DSEs                                     |          |                  | 0.00         | Total DSEs           |  |   | 0.00<br>0.00<br>BER GROUP        |              |
| Gross Receipts First Gr                        | oup      | \$               | 0.00         | Gross Receipts Sec   | ond Group  | \$  | 0.00                             |              |
| Base Rate Fee First Gr                         | oup      | \$               | 0.00         | Base Rate Fee Seco   | ond Group  | \$  | 0.00                             |              |
| ONE HUNDRED TWEN                               | TY-THIRD | SUBSCRIBER GROUP | )            | ONE HUNDRED TWE      | NTY-FOURTH   | SUBSCRIBER GROUP  | )                                |              |
| COMMUNITY/ AREA                                |          |                  | 0            | COMMUNITY/ AREA      | Α  |   | 0                                |              |
| CALL SIGN                                      | DSE      | CALL SIGN        | DSE          | CALL SIGN            | DSE  | CALL SIGN   | DSE                              |              |
|  |          |                  |              |                      |  |   |                                  |              |
|  |          |                  |              |                      |  |   |                                  |              |
|  |          |                  |              |                      |  |   |                                  |              |
|  |          |                  |              |                      |  |   |                                  |              |
|  |          |                  |              |                      |  |   |                                  |              |
|  |          |                  |              |                      | <u>.</u>   |   |                                  |              |
|  |          | -                |              |                      |  |   |                                  |              |
|  |          |                  |              |                      |  |   | 0 DSE 0 0.00 0.00 0.00 0.00 0.00 |              |
|  |          |                  | ·            |                      | ·····  |   | O.00  O.00  ROUP  DSE            |              |
|  |          |                  |              |                      | ••••   |   | 0.00  0.00  DSE  0.00            |              |
|  |          | -                | •            |                      |  |   | 0.00  0.00  DSE                  |              |
|  |          | -                |              |                      |  |   |                                  |              |
|  |          |                  |              |                      |  |   |                                  |              |
|  |          |                  |              |                      |  |   |                                  |              |
| Γotal DSEs                                     |          |                  | 0.00         | Total DSEs           |  |   | 0.00                             |              |
|  | rour     | •                |              |                      | rth Crave  | •   |                                  |              |
| Gross Receipts Third G                         | roup     | \$               | 0.00         | Gross Receipts Fou   | iui Group  | \$  | 0.00                             |              |
| Base Rate Fee Third G                          | roup     | \$               | 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.   | \$  |                                  |              |

| Advanced Cable Commu                     | BLE SYSTEM:<br>nications, LLC |         |                       |                | S                | YSTEM ID#<br>007219 | Name   |
|--|-------------------------------|---------|-----------------------|----------------|------------------|---------------------|--|
| BLOCK A:                                 | COMPUTATION OF                | BASE RA | TE FEES FOR EACH      | SUBSCR         | RIBER GROUP      |                     | 0 9  |
| ONE HUNDRED TWENTY-FIFTH                 | SUBSCRIBER GROUP              |         | ONE HUNDRED TWE       | NTY-SIXTH      | SUBSCRIBER GROUP |                     | 0  |
| COMMUNITY/ AREA                          |                               | 0       | COMMUNITY/ AREA       |                |                  | 0                   | Computation  |
| CALL SIGN DSE                            | CALL SIGN                     | DSE     | CALL SIGN             | DSE            | CALL SIGN        | DSE                 | Computation of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially |
|  |                               |         |                       |                |                  |                     | Base Rate Fe   |
|  |                               |         |                       |                | <u> </u>         |                     |  |
|  |                               |         |                       |                |                  |                     |  |
|  |                               |         |                       |                | <u> </u>         |                     |  |
|  |                               |         |                       |                | -                |                     |  |
|  |                               |         |                       | <u>.</u>       |                  | <u></u>             |  |
|  |                               |         |                       | ·····          | H                |                     | -  |
|  |                               | l       |                       | <del> </del>   | <b>-</b>         | <del> </del>        |  |
|  |                               |         |                       |                | +                |                     | Otations   |
|  |                               |         |                       | ······         | H                |                     |  |
|  |                               |         |                       | ·              | <u> </u>         |                     |  |
|  |                               |         |                       |                |                  |                     | Surcharge for Partially Distant Stations                                       |
|  |                               |         |                       |                |                  |                     |  |
|  |                               |         |                       |                |                  |                     |  |
| Total DSEs                               |                               | 0.00    | Total DSEs            | •              |                  | 0.00                | <br><br>   |
| Gross Receipts First Group               | \$                            | 0.00    | Gross Receipts Secon  | d Group        | \$               | 0.00                |  |
| Base Rate Fee First Group                | \$                            | 0.00    | Base Rate Fee Secon   | d Group        | \$               | 0.00                |  |
| NE HUNDRED TWENTY-SEVENTI                | SUBSCRIBER GROUP              |         | ONE HUNDRED TWEN      | TY-EIGHTH      | SUBSCRIBER GROUP |                     |  |
| COMMUNITY/ AREA                          |                               | 0       | COMMUNITY/ AREA       |                |                  | 0                   |  |
| CALL SIGN DSE                            | CALL SIGN                     | DSE     | CALL SIGN             | DSE            | CALL SIGN        | DSE                 |  |
|  |                               |         |                       |                |                  |                     |  |
|  |                               |         |                       |                |                  |                     |  |
|  |                               |         |                       |                |                  |                     |  |
|  |                               |         |                       |                |                  |                     |  |
|  |                               |         |                       |                | <u> </u>         |                     |  |
|  |                               |         |                       | <b></b>        |                  |                     |  |
|  |                               | ļ       |                       | <mark>-</mark> |                  | <u> </u>            |  |
|  |                               | l       |                       | <u> </u>       |                  | <u></u>             |  |
|  |                               | l       |                       | <del> </del>   | -                | <del></del>         |  |
|  |                               |         |                       | <b></b>        | H                | <u> </u>            |  |
|  | H                             | l       |                       | <del> </del>   | H                |                     |  |
|  | H                             |         |                       | ······         | H                |                     |  |
|  |                               |         |                       | <b> </b>       | 1                | <u> </u>            |  |
|  |                               |         |                       | ·              |                  |                     |  |
| <u> </u>                                 |                               | 0.00    | Total DSEs            | 1              |                  | 0.00                |  |
| Total DSEs                               |                               |         | 11                    |                | •                |                     |  |
| Total DSEs<br>Gross Receipts Third Group | \$                            | 0.00    | Gross Receipts Fourth | Group          | <u>\$</u>        | 0.00                |  |

|   | 007219 | s                |                 |                      |          |                  |           | Advanced Cable C       |
|---|--------|------------------|-----------------|----------------------|----------|------------------|-----------|------------------------|
| 9   |        | IBER GROUP       | SUBSCR          | TE FEES FOR EACH     | BASE RA  | COMPUTATION OF   | LOCK A: ( | BL                     |
| 0   | •      | SUBSCRIBER GROUP | THIRTIETH       | ONE HUNDRED          | )        | SUBSCRIBER GROUP | NTY-NINTH | ONE HUNDRED TWEN       |
| Computation  of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant    | 0      |                  |                 | COMMUNITY/ AREA      | 0        |                  |           | COMMUNITY/ AREA        |
| Computation  SE of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially          | DSE    | CALL SIGN        | DSE             | CALL SIGN            | DSE      | CALL SIGN        | DSE       | CALL SIGN              |
| Base Rate Fe  |        |                  |                 |                      |          |                  |           |                        |
| ••  |        |                  |                 |                      |          |                  |           |                        |
| ••  |        |                  |                 | •                    |          |                  |           |                        |
| Surcharge<br>for<br>Partially<br>Distant  |        |                  |                 |                      |          |                  |           |                        |
| ••  |        |                  |                 |                      |          |                  |           |                        |
| Surcharge<br>for<br>Partially<br>Distant  |        |                  |                 |                      |          |                  | <u>-</u>  |                        |
| •   |        |                  |                 |                      |          |                  |           |                        |
| ••  |        |                  |                 |                      |          |                  | ·-        |                        |
| . Gtations  |        | -                |                 |                      |          | -                |           |                        |
| -   | •••••  |                  |                 |                      |          |                  |           |                        |
| ••  | •••••  | -                |                 |                      |          |                  | •         |                        |
| Surcharge for Partially Distant Stations  |        |                  |                 |                      |          |                  |           |                        |
|   |        |                  |                 |                      |          |                  |           |                        |
|   |        |                  |                 |                      |          |                  |           |                        |
|   | 0.00   |                  |                 | Total DSEs           | 0.00     |                  |           | Total DSEs             |
|   | 0.00   | \$               | d Group         | Gross Receipts Secon | 0.00     | \$               | roup      | Gross Receipts First G |
|   | 0.00   | \$               | d Group         | Base Rate Fee Secon  | 0.00     | \$               | roun      | Base Rate Fee First Gr |
|   | 0.00   |                  |                 |                      | <u> </u> | į.               | Топр      |                        |
| <br> =<br> -  |        | SUBSCRIBER GROUP |                 | ONE HUNDRED THIRT    | )        | SUBSCRIBER GROUP |           | ONE HUNDRED THIF       |
| 0   |        | SUBSCRIBER GROUP |                 | ONE HUNDRED THIRT    | 0        |                  |           |                        |
| -   | )      | SUBSCRIBER GROUP |                 |                      |          |                  |           |                        |
| -   | 0      |                  | Y-SECOND        | COMMUNITY/ AREA      | 0        | SUBSCRIBER GROUP | RTY-FIRST | COMMUNITY/ AREA        |
| =<br>-<br>-<br>-<br>-   | 0      |                  | Y-SECOND        | COMMUNITY/ AREA      | 0        | SUBSCRIBER GROUP | RTY-FIRST | COMMUNITY/ AREA        |
| -   | 0      |                  | Y-SECOND        | COMMUNITY/ AREA      | 0        | SUBSCRIBER GROUP | RTY-FIRST | COMMUNITY/ AREA        |
| =<br>-<br>-<br>-<br>-<br>-<br>-   | 0      |                  | Y-SECOND        | COMMUNITY/ AREA      | 0        | SUBSCRIBER GROUP | RTY-FIRST | COMMUNITY/ AREA        |
| -<br>-<br>-<br>-<br>  | 0      |                  | Y-SECOND        | COMMUNITY/ AREA      | 0        | SUBSCRIBER GROUP | RTY-FIRST | COMMUNITY/ AREA        |
| -<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-  | 0      |                  | Y-SECOND        | COMMUNITY/ AREA      | 0        | SUBSCRIBER GROUP | RTY-FIRST | COMMUNITY/ AREA        |
| -<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-                                    | 0      |                  | Y-SECOND        | COMMUNITY/ AREA      | 0        | SUBSCRIBER GROUP | RTY-FIRST | COMMUNITY/ AREA        |
| -<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-                                    | 0      |                  | Y-SECOND        | COMMUNITY/ AREA      | 0        | SUBSCRIBER GROUP | RTY-FIRST | COMMUNITY/ AREA        |
| -<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>- | 0      |                  | Y-SECOND        | COMMUNITY/ AREA      | 0        | SUBSCRIBER GROUP | RTY-FIRST | COMMUNITY/ AREA        |
| -<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>- | 0      |                  | Y-SECOND        | COMMUNITY/ AREA      | 0        | SUBSCRIBER GROUP | RTY-FIRST | COMMUNITY/ AREA        |
| -<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>- | 0      |                  | Y-SECOND        | COMMUNITY/ AREA      | 0        | SUBSCRIBER GROUP | RTY-FIRST | COMMUNITY/ AREA        |
|   | 0      |                  | Y-SECOND        | COMMUNITY/ AREA      | 0        | SUBSCRIBER GROUP | RTY-FIRST | COMMUNITY/ AREA        |
|   | 0      |                  | Y-SECOND        | COMMUNITY/ AREA      | 0        | SUBSCRIBER GROUP | RTY-FIRST | COMMUNITY/ AREA        |
|   | 0      |                  | Y-SECOND        | COMMUNITY/ AREA      | 0        | SUBSCRIBER GROUP | RTY-FIRST | COMMUNITY/ AREA        |
|   | 0      |                  | Y-SECOND        | COMMUNITY/ AREA      | 0        | SUBSCRIBER GROUP | RTY-FIRST | CALL SIGN              |
|   | DSE    |                  | Y-SECOND<br>DSE | CALL SIGN            | DSE      | SUBSCRIBER GROUP | DSE       | COMMUNITY/ AREA        |

| LEGAL NAME OF OWNER  Advanced Cable C |          |                       |          |                        |          | S'               | YSTEM ID#<br>007219 | Name          |
|---------------------------------------|----------|-----------------------|----------|------------------------|----------|------------------|---------------------|---------------|
|                                       |          |                       | BASE RA  | TE FEES FOR EACH       |          |                  |                     |               |
|                                       | TY-THIRD | SUBSCRIBER GROUP      |          | H                      | Y-FOURTH | SUBSCRIBER GROUP |                     | a             |
| COMMUNITY/ AREA                       |          |                       | 0        | COMMUNITY/ AREA        |          |                  | 0                   | _             |
| CALL SIGN                             | DSE      | CALL SIGN             | DSE      | CALL SIGN              | DSE      | CALL SIGN        | DSE                 |               |
| Of ILL OTOTA                          | DOL      | OF ILLE GIGIT         | BOL      | O/ ILL GIGIT           | DOL      | OF ILL OF OTT    | DOL                 | Base Rate Fee |
|                                       |          |                       |          |                        |          |                  |                     | and           |
|                                       |          |                       |          |                        |          |                  |                     | Syndicated    |
|                                       |          |                       |          |                        |          |                  |                     | Exclusivity   |
|                                       |          |                       |          |                        |          |                  |                     | Surcharge     |
|                                       |          | -                     |          |                        |          |                  |                     |               |
|                                       |          |                       |          |                        |          |                  |                     |               |
|                                       |          | -                     |          |                        |          | -                |                     |               |
|                                       |          |                       |          |                        |          |                  |                     | Stations      |
|                                       |          |                       |          |                        |          |                  |                     |               |
|                                       |          |                       |          |                        |          | -                |                     |               |
|                                       |          |                       |          |                        |          |                  |                     |               |
|                                       |          |                       |          |                        |          |                  |                     |               |
|                                       |          |                       |          |                        |          |                  |                     |               |
| Total DSEs                            | •        |                       | 0.00     | Total DSEs             | •        | -                | 0.00                |               |
| Gross Receipts First Gr               | oup      | \$                    | 0.00     | Gross Receipts Secon   | d Group  | \$               | 0.00                |               |
| <b>Base Rate Fee</b> First Gr         | oup      | \$                    | 0.00     | Base Rate Fee Second   | d Group  | \$               | 0.00                |               |
| ONE HUNDRED THIRT                     | Y-FIFTH  | SUBSCRIBER GROU       | JP       | ONE HUNDRED THIS       | TY-SIXTH | SUBSCRIBER GROU  | JP                  |               |
| COMMUNITY/ AREA                       |          |                       | 0        | COMMUNITY/ AREA        |          |                  | 0                   |               |
| CALL SIGN                             | DSE      | CALL SIGN             | DSE      | CALL SIGN              | DSE      | CALL SIGN        | DSE                 |               |
|                                       |          |                       |          |                        |          |                  |                     |               |
|                                       |          |                       |          |                        |          |                  |                     |               |
|                                       |          |                       |          |                        |          |                  |                     |               |
|                                       |          |                       |          |                        |          |                  |                     |               |
|                                       |          |                       |          |                        |          |                  |                     |               |
|                                       |          |                       |          |                        |          |                  |                     |               |
|                                       |          |                       | l        |                        | ļ        | -                | <u> </u>            |               |
|                                       |          |                       |          |                        |          |                  |                     |               |
|                                       |          |                       |          |                        | ļ        | -                |                     |               |
|                                       |          |                       |          |                        | ·····    |                  |                     |               |
|                                       |          |                       |          |                        |          |                  |                     |               |
|                                       |          |                       |          |                        |          |                  |                     |               |
|                                       |          |                       |          |                        |          |                  |                     |               |
|                                       |          |                       |          |                        |          |                  |                     |               |
| Total DSEs                            |          |                       | 0.00     | Total DSEs             |          |                  | 0.00                |               |
| Gross Receipts Third G                | roup     | \$                    | 0.00     | Gross Receipts Fourth  | Group    | \$               | 0.00                |               |
| C. SOC TOOCIPIS TIII'U G              | Jup      | . •                   | <u> </u> | S. 500 Recorpts Fourth | J. 5up   | <del>-</del>     | 0.00                |               |
| Base Rate Fee Third G                 | oup      | \$                    | 0.00     | Base Rate Fee Fourth   | Group    | \$               | 0.00                |               |
|                                       |          | e fees for each subsc |          | Ш                      |          |                  |                     |               |

**Nonpermitted 3.75 Stations** 

| Name  | YSTEM ID#<br>007219   |                    |                        |  |                |                  |          | LEGAL NAME OF OWNE  Advanced Cable C                           |
|---|-----------------------|--------------------|------------------------|--|----------------|------------------|----------|--|
| <u> </u>  | RIBER GROUP           | SUBSCRI            | TE FEES FOR EACH       | BASE RA  | COMPUTATION OF | OCK A: C         | BL       |  |
| ٥   | 1                     | I SUBSCRIBER GROUP | TY-EIGHTH              | ONE HUNDRED THII   |                | SUBSCRIBER GROUP | SEVENTH  | ONE HUNDRED THIRTY-  |
| O Computation OSE of Base Rate Fee                              |                       |                    |                        |  |                |                  |          | COMMUNITY/ AREA  |
| Computation DSE of  | DSE                   | CALL SIGN          | DSE                    | CALL SIGN  | DSE            | CALL SIGN        | DSE      | CALL SIGN  |
| Base Rate F   |                       |                    |                        |  |                |                  |          |  |
| and   |                       |                    |                        |  |                | -                |          |  |
| _   |                       |                    |                        |  |                |                  |          |  |
| Exclusivity Surcharge for Partially Distant                     |                       | <u> </u>           |                        |  |                | -                |          |  |
| Exclusivity Surcharge for Partially Distant                     |                       | <u> </u>           |                        |  |                | -                |          |  |
| Exclusivity Surcharge for Partially Distant Stations            |                       |                    |                        |  |                | -                |          |  |
| Surcharge for Partially Distant Stations                        |                       | .                  |                        |  |                | -                |          |  |
| Surcharge for Partially Distant Stations                        |                       |                    |                        |  |                | -                |          |  |
| Exclusivity Surcharge for Partially Distant Stations            |                       |                    |                        |  |                | -                |          |  |
| Syndicated Exclusivity Surcharge for Partially Distant Stations |                       | H                  |                        |  |                | -                | <b> </b> |  |
| Syndicated Exclusivity Surcharge for Partially Distant Stations | ····                  | <b>-</b>           | <u>.</u>               |  |                | -                | <b> </b> |  |
| Exclusivity Surcharge for Partially Distant Stations            |                       | -                  |                        |  | ·····          | -                | <b> </b> |  |
|   |                       | +                  |                        |  |                |                  |          |  |
|   |                       | <u> </u>           |                        |  |                |                  |          |  |
| <br><br>  |                       | .!!                | <b>!</b>               | Total DSEs   | 0.00           |                  | <u> </u> | otal DSEs  |
| <u> </u>  | 0.00                  |                    |                        | 0 50   | 0.00           | \$               | oup      | Gross Receipts First Gr  |
|   | 0.00                  | \$                 | d Group                | Gross Receipts Seco  |                |                  |          |  |
|   |                       | \$                 | d Group                | Gross Receipts Seco  |                |                  |          |  |
|   |                       | \$                 |                        | Base Rate Fee Secon  | 0.00           | \$               | oup      | Base Rate Fee First Gr   |
|   | 0.00                  |                    | d Group                | Base Rate Fee Secon  | _              |                  |          |  |
|   | 0.00                  | \$                 | d Group                | Base Rate Fee Secon  | _              |                  |          | Base Rate Fee First Gr<br>DNE HUNDRED THIRT<br>COMMUNITY/ AREA |
|   | 0.00<br>0.00          | \$                 | d Group                | Base Rate Fee Secon  | JP             |                  |          | ONE HUNDRED THIRT  |
|   | 0.00<br>0.00          | \$ SUBSCRIBER GROU | d Group                | ONE HUNDRED  | JP <b>0</b>    | SUBSCRIBER GROU  | Y-NINTH  | ONE HUNDRED THIRT  |
|   | 0.00<br>0.00          | \$ SUBSCRIBER GROU | d Group                | ONE HUNDRED  | JP <b>0</b>    | SUBSCRIBER GROU  | Y-NINTH  | ONE HUNDRED THIRT  |
|   | 0.00<br>0.00          | \$ SUBSCRIBER GROU | d Group                | ONE HUNDRED  | JP <b>0</b>    | SUBSCRIBER GROU  | Y-NINTH  | ONE HUNDRED THIRT  |
|   | 0.00<br>0.00          | \$ SUBSCRIBER GROU | d Group                | ONE HUNDRED  | JP <b>0</b>    | SUBSCRIBER GROU  | Y-NINTH  | ONE HUNDRED THIRT  |
|   | 0.00<br>0.00          | \$ SUBSCRIBER GROU | d Group                | ONE HUNDRED  | JP <b>0</b>    | SUBSCRIBER GROU  | Y-NINTH  | ONE HUNDRED THIRT  |
|   | 0.00<br>0.00          | \$ SUBSCRIBER GROU | d Group                | ONE HUNDRED  | JP <b>0</b>    | SUBSCRIBER GROU  | Y-NINTH  | ONE HUNDRED THIRT  |
|   | 0.00<br>0.00          | \$ SUBSCRIBER GROU | d Group                | ONE HUNDRED  | JP <b>0</b>    | SUBSCRIBER GROU  | Y-NINTH  | ONE HUNDRED THIRT  |
|   | 0.00<br>0.00          | \$ SUBSCRIBER GROU | d Group                | ONE HUNDRED  | JP <b>0</b>    | SUBSCRIBER GROU  | Y-NINTH  | ONE HUNDRED THIRT  |
|   | 0.00<br>0.00          | \$ SUBSCRIBER GROU | d Group                | ONE HUNDRED  | JP <b>0</b>    | SUBSCRIBER GROU  | Y-NINTH  | ONE HUNDRED THIRT  |
|   | 0.00<br>0.00          | \$ SUBSCRIBER GROU | d Group                | ONE HUNDRED  | JP <b>0</b>    | SUBSCRIBER GROU  | Y-NINTH  | ONE HUNDRED THIRT  |
|   | 0.00<br>0.00          | \$ SUBSCRIBER GROU | d Group                | ONE HUNDRED  | JP <b>0</b>    | SUBSCRIBER GROU  | Y-NINTH  | ONE HUNDRED THIRT  |
|   | 0.00<br>0.00          | \$ SUBSCRIBER GROU | d Group                | ONE HUNDRED  | JP <b>0</b>    | SUBSCRIBER GROU  | Y-NINTH  | ONE HUNDRED THIRT  |
|   | 0.00<br>0.00          | \$ SUBSCRIBER GROU | d Group                | ONE HUNDRED  | JP <b>0</b>    | SUBSCRIBER GROU  | Y-NINTH  | ONE HUNDRED THIRT  |
|   | 0.00<br>0.00          | \$ SUBSCRIBER GROU | d Group                | ONE HUNDRED  | JP <b>0</b>    | SUBSCRIBER GROU  | Y-NINTH  | ONE HUNDRED THIRT  |
|   | 0.00<br>0.00          | \$ SUBSCRIBER GROU | d Group                | ONE HUNDRED  | JP <b>0</b>    | SUBSCRIBER GROU  | Y-NINTH  | ONE HUNDRED THIRT  |
|   | 0.00  0.00  JP  0 DSE | \$ SUBSCRIBER GROU | d Group  FORTIETH  DSE | Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA           | JP 0           | SUBSCRIBER GROU  | Y-NINTH  | CALL SIGN  |
|   | 0.00    DSE           | SUBSCRIBER GROU    | d Group  FORTIETH  DSE | Dase Rate Fee Second ONE HUNDRED COMMUNITY/ AREA CALL SIGN | DSE O.00       | SUBSCRIBER GROU  | Y-NINTH  | CALL SIGN  CALL SIGN  Total DSEs                               |

| Name  | YSTEM ID#<br>007219 | S                   |                        |  |          |                     |          | LEGAL NAME OF OWNE  Advanced Cable C                             |
|---|---------------------|---------------------|------------------------|--|----------|---------------------|----------|--|
|   |                     | IBER GROUP          | SUBSCR                 | TE FEES FOR EACH   |          |                     |          |  |
| ۵   | )                   | SUBSCRIBER GROUP    | Y-SECOND               | H  |          | SUBSCRIBER GROUP    | TY-FIRST |  |
| 0 Computation DSE of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant | 0                   |                     |                        | COMMUNITY/ AREA  | 0        |                     |          | COMMUNITY/ AREA  |
| Computation  DSE of  Base Rate Fe  and  Syndicated  Exclusivity  Surcharge  for               | DSE                 | CALL SIGN           | DSE                    | CALL SIGN  | DSE      | CALL SIGN           | DSE      | CALL SIGN  |
| Base Rate F   |                     |                     |                        |  |          |                     |          |  |
|   |                     |                     |                        |  |          |                     |          |  |
| -   |                     |                     |                        |  |          |                     |          |  |
| Syndicated Exclusivity Surcharge for Partially Distant  |                     |                     |                        |  |          |                     |          |  |
|   |                     | -                   |                        |  |          |                     |          |  |
|   |                     | -                   |                        |  |          |                     |          |  |
| Surcharge<br>for<br>Partially<br>Distant<br>Stations  |                     | -                   |                        |  |          | -                   |          |  |
| Surcharge for Partially Distant Stations  |                     |                     |                        |  |          |                     |          |  |
| Exclusivit Surcharge for Partially Distant Stations   |                     |                     |                        |  |          |                     |          |  |
| Exclusivity Surcharge for Partially Distant Stations  |                     |                     |                        |  |          | -                   |          |  |
| Exclusivity Surcharge for Partially Distant Stations  |                     |                     |                        |  |          |                     |          |  |
| Surcharge for Partially Distant Stations  |                     |                     |                        |  |          |                     |          |  |
|   |                     |                     | ļ                      |  |          |                     |          |  |
| Partially Distant Stations  |                     |                     | ļ                      |  | <u> </u> |                     | <u> </u> |  |
| -   | 0.00                |                     |                        | Total DSEs   | 0.00     |                     |          | Total DSEs   |
| -   |                     |                     | d Group                | Gross Receipts Secon   | 0.00     | \$                  | oup      | Gross Receipts First Gr  |
| -<br>-  | 0.00                | \$                  | u Group                |  |          |                     |          |  |
|   | 0.00                | \$                  | u Group                |  |          |                     |          |  |
|   | 0.00                | \$                  |                        | Base Rate Fee Secon  | 0.00     | \$                  | oup      | Base Rate Fee First Gr   |
|   | 0.00                |                     | d Group                | Base Rate Fee Secon  |          | \$ SUBSCRIBER GROUP |          |  |
| 0   | 0.00                | \$                  | d Group                | Base Rate Fee Secon  |          |                     |          | ONE HUNDRED FOR  |
|   | 0.00                | \$                  | d Group                | Base Rate Fee Secon  |          |                     |          | Base Rate Fee First Gr ONE HUNDRED FOR COMMUNITY/ AREA CALL SIGN |
|   | 0.00                | \$ SUBSCRIBER GROUP | d Group<br>'Y-FOURTH   | Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA                          | 0        | SUBSCRIBER GROUP    | TY-THIRD | ONE HUNDRED FOR  |
|   | 0.00                | \$ SUBSCRIBER GROUP | d Group<br>'Y-FOURTH   | Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA                          | 0        | SUBSCRIBER GROUP    | TY-THIRD | ONE HUNDRED FOR  |
|   | 0.00                | \$ SUBSCRIBER GROUP | d Group<br>'Y-FOURTH   | Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA                          | 0        | SUBSCRIBER GROUP    | TY-THIRD | ONE HUNDRED FOR  |
|   | 0.00                | \$ SUBSCRIBER GROUP | d Group<br>'Y-FOURTH   | Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA                          | 0        | SUBSCRIBER GROUP    | TY-THIRD | ONE HUNDRED FOR  |
|   | 0.00                | \$ SUBSCRIBER GROUP | d Group<br>'Y-FOURTH   | Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA                          | 0        | SUBSCRIBER GROUP    | TY-THIRD | ONE HUNDRED FOR  |
|   | 0.00                | \$ SUBSCRIBER GROUP | d Group<br>'Y-FOURTH   | Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA                          | 0        | SUBSCRIBER GROUP    | TY-THIRD | ONE HUNDRED FOR  |
| 0.00  | 0.00                | \$ SUBSCRIBER GROUP | d Group<br>'Y-FOURTH   | Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA                          | 0        | SUBSCRIBER GROUP    | TY-THIRD | ONE HUNDRED FOR  |
|   | 0.00                | \$ SUBSCRIBER GROUP | d Group<br>'Y-FOURTH   | Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA                          | 0        | SUBSCRIBER GROUP    | TY-THIRD | ONE HUNDRED FOR  |
|   | 0.00                | \$ SUBSCRIBER GROUP | d Group<br>'Y-FOURTH   | Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA                          | 0        | SUBSCRIBER GROUP    | TY-THIRD | ONE HUNDRED FOR  |
|   | 0.00                | \$ SUBSCRIBER GROUP | d Group<br>'Y-FOURTH   | Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA                          | 0        | SUBSCRIBER GROUP    | TY-THIRD | ONE HUNDRED FOR  |
|   | 0.00                | \$ SUBSCRIBER GROUP | d Group<br>'Y-FOURTH   | Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA                          | 0        | SUBSCRIBER GROUP    | TY-THIRD | ONE HUNDRED FOR  |
|   | 0.00                | \$ SUBSCRIBER GROUP | d Group<br>'Y-FOURTH   | Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA                          | 0        | SUBSCRIBER GROUP    | TY-THIRD | ONE HUNDRED FOR  |
|   | 0.00                | \$ SUBSCRIBER GROUP | d Group<br>'Y-FOURTH   | Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA                          | 0        | SUBSCRIBER GROUP    | TY-THIRD | ONE HUNDRED FOR  |
|   | 0.00                | \$ SUBSCRIBER GROUP | d Group<br>'Y-FOURTH   | Base Rate Fee Secon  ONE HUNDRED FOR  COMMUNITY/ AREA  CALL SIGN             | DSE      | SUBSCRIBER GROUP    | TY-THIRD | ONE HUNDRED FOR COMMUNITY/ AREA  CALL SIGN                       |
|   | 0.00 DSE 0.00       | \$ SUBSCRIBER GROUP | d Group  Y-FOURTH  DSE | Base Rate Fee Secon  ONE HUNDRED FOR  COMMUNITY/ AREA  CALL SIGN  Total DSEs | 0<br>DSE | SUBSCRIBER GROUP    | DSE      | ONE HUNDRED FOR COMMUNITY/ AREA  CALL SIGN  Total DSEs           |
|   | 0.00                | \$ SUBSCRIBER GROUP | d Group  Y-FOURTH  DSE | Base Rate Fee Secon  ONE HUNDRED FOR  COMMUNITY/ AREA  CALL SIGN             | DSE      | SUBSCRIBER GROUP    | DSE      | ONE HUNDRED FOR COMMUNITY/ AREA  CALL SIGN                       |

|               | 007219 | S                |           |                       |          |                  |           | LEGAL NAME OF OWNER  Advanced Cable C |
|---------------|--------|------------------|-----------|-----------------------|----------|------------------|-----------|---------------------------------------|
|               |        | IBER GROUP       | SUBSCRI   | TE FEES FOR EACH      | BASE RA  | COMPUTATION OF   | OCK A: C  | BL                                    |
|               | 1      | SUBSCRIBER GROUP | RTY-SIXTH | ONE HUNDRED FC        |          | SUBSCRIBER GROUP | RTY-FIFTH | ONE HUNDRED FOR                       |
| O Computation | 0      |                  |           | COMMUNITY/ AREA       | 0        |                  |           | COMMUNITY/ AREA                       |
|               | DSE    | CALL SIGN        | DSE       | CALL SIGN             | DSE      | CALL SIGN        | DSE       | CALL SIGN                             |
| Base Rate Fee |        |                  |           |                       |          |                  |           |                                       |
| and           |        |                  |           |                       |          |                  |           |                                       |
| Syndicated    |        |                  |           |                       |          |                  |           |                                       |
| Exclusivity   |        |                  |           |                       |          |                  |           |                                       |
| Surcharge     |        |                  |           |                       |          |                  |           |                                       |
| for           |        |                  |           |                       |          |                  |           |                                       |
| Partially     |        |                  |           |                       |          |                  |           |                                       |
| Distant       |        |                  |           |                       |          |                  |           |                                       |
| Stations      |        |                  |           |                       |          |                  |           |                                       |
| •••••         |        |                  |           |                       |          |                  |           |                                       |
|               |        |                  |           |                       | <u> </u> | <b>-</b>         |           |                                       |
|               |        |                  |           |                       | ·····    |                  | ·····     |                                       |
|               |        | -                |           |                       |          |                  | <b></b>   |                                       |
|               |        | <u> </u>         |           |                       |          |                  | <b> </b>  |                                       |
|               | ····   | <b>-</b>         |           | •••••                 |          |                  | ·····     |                                       |
| 0             | 0.00   |                  |           | Total DSEs            | 0.00     |                  | <u> </u>  | Total DSEs                            |
| 0             | 0.00   | \$               | d Group   | Gross Receipts Secon  | 0.00     | \$               | oup       | Gross Receipts First Gr               |
| <del>-</del>  |        |                  |           |                       |          |                  |           |                                       |
| 0             | 0.00   | \$               | d Group   | Base Rate Fee Secon   | 0.00     | \$               | oup       | Base Rate Fee First Gr                |
|               | 1      | SUBSCRIBER GROUP | TY-EIGHTH | ONE HUNDRED FOR       |          | SUBSCRIBER GROUP | SEVENTH   | ONE HUNDRED FORTY-                    |
| <u>o</u>      | 0      |                  |           | COMMUNITY/ AREA       | 0        |                  |           | COMMUNITY/ AREA                       |
| =             | DSE    | CALL SIGN        | DSE       | CALL SIGN             | DSE      | CALL SIGN        | DSE       | CALL SIGN                             |
|               | BOL    | O/ LEE OIGIT     | DOL       | O/ IEE OIOIV          | DOL      | OF ILL CIOIT     | DOL       | O/ LEE OF OFF                         |
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|               |        |                  |           |                       |          |                  |           |                                       |
|               |        |                  |           | Total DSEs            | 0.00     |                  |           | Total DSEs                            |
| <br>D         | 0.00   |                  |           | LIOIGI DOES           |          |                  |           |                                       |
| _             | 0.00   |                  |           | Total DSEs            | _        | -                |           | _                                     |
| _             | 0.00   | \$               | Group     | Gross Receipts Fourth | 0.00     | \$               | roup      | Gross Receipts Third G                |

|                   |                |         |                   | •       |                 |          | LEGAL NAME OF OWNE<br>Advanced Cable C |
|-------------------|----------------|---------|-------------------|---------|-----------------|----------|--|
| OUP               | CRIBE          | CH SU   | E FEES FOR EA     | BASE RA | COMPUTATION OF  | OCK A: 0 | BL                                     |
| BER GROUP         | ETH SU         | ED FIF  | ONE HUNDE         | JP      | SUBSCRIBER GROU | Y-NINTH  | ONE HUNDRED FORT                       |
| 0 Computation     |                |         | COMMUNITY/ ARI    | 0       |                 |          | COMMUNITY/ AREA                        |
| SIGN DSE of       |                | DS      | CALL SIGN         | DSE     | CALL SIGN       | DSE      | CALL SIGN                              |
| Base Rate Fee     |                |         |                   |         |                 |          |  |
| and               |                |         |                   |         | -               |          |  |
| Syndicated        |                |         |                   |         | -               |          |  |
| Exclusivity       |                | <b></b> |                   |         |                 |          |  |
| Surcharge         |                | <b></b> |                   |         |                 |          |  |
| for               | <del> </del>   | ·····   |                   |         | -               |          |  |
| Partially Distant | <del> -</del>  |         |                   |         | -               |          |  |
| Stations          |                |         |                   |         |                 | <b> </b> |  |
| - Otations        | ······         |         |                   |         |                 |          |  |
| ·····             |                |         |                   |         |                 |          |  |
|                   |                | •••••   |                   |         |                 |          |  |
|                   |                |         |                   |         | -               |          |  |
|                   |                |         |                   |         |                 |          |  |
|                   |                |         |                   |         |                 |          | ••••••                                 |
| 0.00              | _              | •       | Total DSEs        | 0.00    |                 |          | Total DSEs                             |
| 0.00              | р <u>\$</u>    | ond Gro | Gross Receipts Se | 0.00    | \$              | oup      | Gross Receipts First Gr                |
| 0.00              | p <b>\$</b>    | ond Gro | Base Rate Fee Se  | 0.00    | \$              | oup      | Base Rate Fee First Gr                 |
| BER GROUP         | OND SU         | TY-SE   | ONE HUNDRED FI    | JP      | SUBSCRIBER GROU | TY-FIRST | ONE HUNDRED FIFT                       |
| <b>0</b>          |                | Α       | COMMUNITY/ ARI    | 0       |                 |          | COMMUNITY/ AREA                        |
| SIGN DSE          |                | DS      | CALL SIGN         | DSE     | CALL SIGN       | DSE      | CALL SIGN                              |
|                   |                |         |                   |         |                 |          |  |
|                   |                |         |                   |         | <del>-</del>    |          |  |
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| ······            |                | ·····   |                   |         |                 | <b> </b> |  |
| 0.00              |                |         | Total DSEs        | 0.00    |                 | 1        | Total DSEs                             |
|                   | \$             | rth Gro | Gross Receipts Fo | 0.00    | \$              | roup     | Gross Receipts Third G                 |
| 0.00              |                |         |                   | 0.00    | ·               | •        | •                                      |

| LEGAL NAME OF OWNER  Advanced Cable C          |  |                 |              |                       |          | S               | YSTEM ID#<br>007219 | Name                      |
|--|--|-----------------|--------------|-----------------------|----------|-----------------|---------------------|---------------------------|
|  |  |                 |              | TE FEES FOR EACH      |          |                 |                     |                           |
| ONE HUNDRED FIFT                               | Y-THIRD  | SUBSCRIBER GROU |              | ONE HUNDRED FIFT      | /-FOURTH | 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<br>Exclusivity |
|  |  |                 |              |                       |          |                 |                     | Surcharge                 |
|  |  |                 |              |                       |          |                 |                     | for                       |
|  |  |                 |              |                       |          | -               |                     | Partially                 |
|  |  |                 |              |                       |          |                 |                     | Distant                   |
|  |  | -               |              |                       |          |                 |                     | Stations                  |
|  |  |                 |              |                       |          |                 |                     |                           |
|  |  |                 |              |                       | <u> </u> |                 |                     |                           |
|  |  |                 |              |                       |          |                 |                     |                           |
|  |  |                 |              |                       |          |                 | ····                |                           |
|  |  |                 |              |                       |          | 1               |                     |                           |
| Total DSEs                                     | <u> </u>                                       |                 | 0.00         | Total DSEs            |          |                 | 0.00                |                           |
| Gross Receipts First Gr                        | oup  | \$              | 0.00         | Gross Receipts Secon  | d Group  | \$              | 0.00                |                           |
| <b>3ase Rate Fee</b> First Gr                  | oup  | \$              | 0.00         | Base Rate Fee Secon   | d Group  | \$              | 0.00                |                           |
| ONE HUNDRED FIFT                               | ΓY-FIFTH                                       | SUBSCRIBER GROU | JP           | ONE HUNDRED FII       | TY-SIXTH | SUBSCRIBER GROU | JP                  |                           |
| COMMUNITY/ AREA                                |  |                 | 0            | COMMUNITY/ AREA       |          |                 | 0                   |                           |
| CALL SIGN                                      | DSE  | CALL SIGN       | DSE          | CALL SIGN             | DSE      | CALL SIGN       | DSE                 |                           |
|  |  |                 |              |                       |          |                 |                     |                           |
|  |  |                 |              |                       |          |                 |                     |                           |
|  |  |                 |              |                       |          | <br>            |                     |                           |
|  |  |                 |              |                       |          |                 |                     |                           |
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|  | ļ  |                 |              |                       |          | -               |                     |                           |
|  | <b> </b>                                       |                 |              |                       |          | H               |                     |                           |
|  |  | -               |              |                       |          |                 |                     |                           |
|  |  |                 |              |                       |          |                 |                     |                           |
|  |  |                 |              |                       |          |                 |                     |                           |
|  |  |                 |              |                       |          |                 |                     |                           |
|  |  |                 |              |                       |          |                 | <u></u>             |                           |
|  |  |                 |              |                       |          |                 |                     |                           |
| Total DSEs                                     | <u>ı                                      </u> |                 | 0.00         | Total DSEs            | 1        | П               | 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 |  |                 | criber group | as shown in the boxes | above.   | \$              |                     |                           |

| Advanced Cable (   |             | LE SYSTEM:<br>ications, LLC |             |                                |              |                     | 007219       | Name                     |
|--|-------------|-----------------------------|-------------|--------------------------------|--------------|---------------------|--------------|--------------------------|
|  |             |                             |             | TE FEES FOR EAC                |              |                     |              |                          |
| ONE HUNDRED FIFTY  | -SEVENTH    | SUBSCRIBER GROU             |             | i i                            |              | 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 F              |
|  |             |                             |             |                                |              |                     |              | and                      |
|  |             |                             |             |                                |              | -                   |              | Syndicated               |
|  |             |                             |             |                                |              | <del> </del>        |              | Exclusivity<br>Surcharge |
|  | ·           |                             | <del></del> |                                |              |                     |              | for                      |
|  |             |                             |             |                                |              |                     |              | Partially                |
|  |             |                             |             |                                |              |                     |              | Distant                  |
|  |             |                             |             |                                |              |                     |              | Stations                 |
|  | <u></u>     |                             | <u></u>     |                                |              | -                   |              |                          |
|  | ··          |                             | ···         |                                |              |                     |              |                          |
|  |             |                             |             |                                |              |                     |              |                          |
|  |             |                             |             |                                |              |                     |              |                          |
|  |             |                             |             |                                |              |                     |              |                          |
| Total DSEs   |             |                             | 0.00        | Total DSEs                     |              |                     | 0.00         |                          |
| Gross Receipts First G                                   | roup        | \$                          | 0.00        | Gross Receipts Seco            | nd Group     | \$                  | 0.00         |                          |
| <b>Base Rate Fee</b> First G                             | roup        | \$                          | 0.00        | Base Rate Fee Seco             | nd Group     | \$                  | 0.00         |                          |
|  |             |                             | •           |                                |              |                     | •            |                          |
| ONE HUNDRED FIF  | I Y-NIN I H | SUBSCRIBER GRO              | )UP         | ONE HUNDRE                     | 1) SIX HE LE | LSUBSCRIBER GRO     | 1110         |                          |
|  |             |                             | 0           | COMMUNITY/ ADEA                |              | - COBCOTTIBLIT CITO | _            |                          |
| COMMUNITY/ AREA  |             |                             | 0           | COMMUNITY/ AREA                |              |                     | 0            |                          |
| COMMUNITY/ AREA CALL SIGN                                | DSE         | CALL SIGN                   | DSE         | COMMUNITY/ AREA                |              | CALL SIGN           | _            |                          |
|  | DSE         | CALL SIGN                   |             |                                |              |                     | 0            |                          |
|  | DSE         | CALL SIGN                   |             |                                |              |                     | 0            |                          |
|  | DSE         | CALL SIGN                   |             |                                |              |                     | 0            |                          |
|  | DSE         | CALL SIGN                   |             |                                |              |                     | 0            |                          |
|  | DSE         | CALL SIGN                   |             |                                |              |                     | 0            |                          |
|  | DSE         | CALL SIGN                   |             |                                |              |                     | 0            |                          |
|  | DSE         | CALL SIGN                   |             |                                |              |                     | 0            |                          |
|  | DSE         | CALL SIGN                   |             |                                |              |                     | 0            |                          |
|  | DSE         | CALL SIGN                   |             |                                |              |                     | 0            |                          |
|  | DSE         | CALL SIGN                   |             |                                |              |                     | 0            |                          |
|  | DSE         | CALL SIGN                   |             |                                |              |                     | 0            |                          |
|  | DSE         | CALL SIGN                   |             |                                |              |                     | 0            |                          |
| CALL SIGN  | DSE         | CALL SIGN                   | DSE         | CALL SIGN                      |              |                     | DSE          |                          |
|  | DSE         | CALL SIGN                   | 0.00        |                                |              |                     | 0 DSE        |                          |
| CALL SIGN  |             | CALL SIGN                   | DSE         | CALL SIGN                      | DSE          |                     | DSE          |                          |
| CALL SIGN  CALL SIGN  Total DSEs  Gross Receipts Third ( | Group       | \$                          | DSE         | Total DSEs Gross Receipts Four | DSE          | CALL SIGN           | 0.00<br>0.00 |                          |
| CALL SIGN  | Group       |                             | 0.00        | CALL SIGN  Total DSEs          | DSE          | CALL SIGN           | 0 DSE        |                          |

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Advanced Cable Communications, LLC 007219 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 Third Group . . . . . . . . . . . . . . . . Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Advanced Cable Communications, LLC 007219 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 Third Group . . . . . . . . . . . . . . . . Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Advanced Cable Communications, LLC 007219 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 Third Group . . . . . . . . . . . . . . . . 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 Advanced Cable Communications, LLC 007219 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. ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP ONE HUNDRED FIFTY-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 Second Group . . . . . . . . . . . . . . . . ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP ONE HUNDRED FIFTY-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 Third Group . . . . . . . . . . . . . . . . Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Advanced Cable Communications, LLC 007219 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. ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED FIFTY-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 . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group . . . . . . . . . . . . . . . . ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP ONE HUNDRED SIXTIETH 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 Third Group . . . . . . . . . . . . . . . . Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown