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 Period	2018/1								
B	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the busine If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account compared in the control of the control	ess of the cable system or on the last day of the counting perion	em the accounting period should s						
	CABLE ONE, INC.								
	00741720181								
				007417 2018/1					
	210 E. EARLL DRIVE PHOENIX, AZ 85012-2626								
С	INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.								
System	1 IDENTIFICATION OF CABLE SYSTEM:	<u> </u>	<u> </u>	·					
	MAILING ADDRESS OF CABLE SYSTEM: 19201 Pineville Rd - 786 Martin Luther King Blvd (Number, street, rural route, apartment, or suite number) LONG BEACH, MS 39560 - BILOXI, MS 39530 - PA (City, town, state, zip code)			wer 1818					
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and rel	ist on page 1b					
Area Served	with all communities.	lota te							
First	CITY OR TOWN GULFPORT	STATE MS							
Community	Below is a sample for reporting communities if you report multiple cha		pace G.						
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#					
Sample	Alda	MD	Α	1					
- Campio	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.

FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 007417 CABLE ONE, INC. Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE **CH LINE UP** SUB GRP# **GULFPORT** D MS **First BILOXI** MS 3 Community Α **D'IBERVILLE** MS 3 **ESCATAWPA** MS Ε 2 **GAUTIER** Ε 2 MS 3 **HARRISON COUNTY** D MS See instructions for С HANCOCK CO-DIAMONDHEAD MS additional information on alphabetization. HARRISON COUNTY-DIAMONDHEAD MS D 4 **KEESLER AFB** Α 3 MS LONG BEACH D 4 MS **MOSS POINT** MS Ε Add rows as necessary. 3 NORTH BILOXI (HARRISON COUNTY) A MS В NORTH BILOXI (JACKSON COUNTY) MS **OCEAN SPRINGS** MS В **PASCAGOULA** Ε 2 MS D **PASS CHRISTIAN** MS 4 **VANCLEAVE** MS В

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

007417

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 seco

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 F call for the number of subscribers to the cable system broken.

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.

BLC	OCK 1	BLOCK 2				
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	
Residential:						
 Service to first set 	32,082	20.00-80.00	HOSPITALS	1,114	7.99-30.62	
 Service to additional set(s) 	3,386		CASINOS	3,233	6.12-28.39	
 FM radio (if separate rate) 			NURSING HOMES	261	8.00-17.41	
Motel, hotel	6,294	3.31-17.41				
Commercial	1,606	18.65-94.00				
Converter						
Residential						
Non-residential						

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.

	BLO	CK 1		BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
 Pay cable 	15.00-44.00	Motel, hotel	COST PLUS	SHOWTIME	\$ 17.00
 Pay cable—add'l channel 	9.00-40.00	Commercial	COST PLUS	TIER DELUXE	\$ 44.00
Fire protection	\$ 4.00	Pay cable	COST PLUS	DVP	\$ 15.00
Burglar protection		Pay cable-add'l channel	\$ 4.00	CINEMAX	\$ 17.00
Installation: Residential		Fire protection		MOVIE CHANNEL	\$ 17.00
First set	0-90.00	Burglar protection		НВО	\$ 15.00
Additional set(s)	30.00-60.00	Other services:		STARZ	\$ 17.00
• FM radio (if separate rate)		Reconnect	0.00-90.00		
Converter		Disconnect			
		Outlet relocation	\$ 60.00		
		Move to new address	30.00-60.00		

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007417 CABLE ONE, INC. PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER STATION (If Distant) **WDSU** 43 Ν Yes **NEW ORLEANS, LA WKRG** 20 Ν No MOBILE, AL See instructions for additional information WKRG-SIMUL MOBILE, AL 27 Ν No on alphabetization. No WLOX-1 13 N-M **BILOXI, MS** WLOX-1-SIMUL 13 N-M No **BILOXI, MS** WLOX-2 13 N-M No **BILOXI, MS** WLOX-2-SIMUL No 13 N-M BILOXI, MS WLOX-3 I-M No BILOXI, MS 13 **WMAH** 16 Ε No **BILOXI, MS** Ν WWL 36 Yes 0 **NEW ORLEANS, LA** WXXV-1 48 I-M No **GULFPORT, MS** WXXV-1-SIMUL 48 I-M No **GULFPORT, MS** WXXV-2 48 N-M No **GULFPORT, MS** No **WYES** 11 Ε Yes 0 **NEW ORLEANS, LA** WXXV-2-SIMUL 48 N-M No **GULFPORT, MS** WDSU-SIMUL 43 Ν No **NEW ORLEANS, LA**

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#
Name

Name

PRIMARY TRANSMITTERS: TELEVISION

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

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

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

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Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AB	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WDSU	43	N	Yes	0	NEW ORLEANS, LA
WKRG	20	N	No		MOBILE, AL
WKRG-SIMUL	27	N	No		MOBILE, AL
WLOX-1	13	N-M	No		BILOXI, MS
WLOX-1-SIMUL	13	N-M	No		BILOXI, MS
WLOX-2	13	N-M	No		BILOXI, MS
WLOX-2-SIMUL	13	N-M	No		BILOXI, MS
WLOX-3	13	I-M	No		BILOXI, MS
WMAH	16	E	No		BILOXI, MS
WXXV-1	48	I-M	No		GULFPORT, MS
WXXV-2	48	N-M	No		GULFPORT, MS
			No		
WYES	11	E	Yes	0	NEW ORLEANS, LA
WXVO-LD	13	I	No		PASCAGOULA, MS
WGUD-LD	51	I	No		PASCAGOULA, MS
WXXV-1-SIMUL	48	I-M	No		GULFPORT, MS
WDSU-SIMUL	43	N	No		NEW ORLEANS, LA
	T		No		

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 0r 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent, "I-M" (for independent), "I-M" (for network), "N-M" (for network multicast), "I' (for independent), "I-M" (for independent), "I-M" (for independent), "I-M" (for independent), "I-M" (for independen
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational multicast), "For
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CHANNEL LINE-UP AB CONT'D
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CHANNEL OF (Yes or No) CARRIAGE NUMBER STATION 6. LOCATION OF STATION (If Distant)
WXXV-2-SIMUL 48 N-M No GULFPORT, MS

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#
Name

Name

PRIMARY TRANSMITTERS: TELEVISION

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

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Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

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

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AC			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
KGLA	42	N	No		HAMMOND, LA		
WDSU	43	N	No		NEW ORLEANS, LA		
WGNO	26	N	No		NEW ORLEANS, LA		
WHNO	21	I	No		NEW ORLEANS, LA		
WKRG	20	N	Yes	0	MOBILE, AL		
WKRG-SIMUL	27	N	No		MOBILE, AL		
WLOX-1	13	N-M	No		BILOXI, MS		
WLOX-SIMUL	#N/A	#N/A	No		#N/A		
WMAH	16	E	No		BILOXI, MS		
WPXL	50	I	No		NEW ORLEANS, LA		
WUPL	24	l	No		SLIDELL, LA		
WVUE	8	I	No		NEW ORLEANS, LA		
WWL	36	N	No		NEW ORLEANS, LA		
WXXV-1	48	I-M	No		GULFPORT, MS		
WXXV-3	#N/A	#N/A	No		#N/A		
WYES	11	E	No		NEW ORLEANS, LA		
WDSU-SIMUL	43	N	No		NEW ORLEANS, LA		
WMAH-SIMUL	#N/A	#N/A	No		#N/A		

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Primary Transmitters: Television

FORM SA3E. PAGE 3.					ACCOUNTI	NG PERIOD: 2018/1
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Nama
CABLE ONE, IN	NC.				007417	Name
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program bas Substitute 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 eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local serving Column 5: If you cable system carried the distant stat. For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the Column 6: Give the	G, identify even by system during the ions in effect or ions. With in CC rules, regular here in space only on a substand also in spatioformation concurn. In station's call associated with example system carried the in each case we entered "Ye in each case we entered "Ye in edistant station ion on a part-time ion of a distant at entered into or a primary trans simulcasts, also are categories e location of ea	y television standard and accounting and June 24, 19 4), or 76.63 (Id in the next process of the sepect to any ations, or auth G—but do listitute basis. In the standard area of the station account of the station account of the station. In the station account of the station. In the local service of the service of the station on during the one basis becamulticast stream or before Jumitter or an account of the station. In the station of the station of the station of the service of the service of the station. In the station of the service of the station of the service of the station. In the station of the service of the station of the station. In the station of the station of the station of the station. In the station of	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations for izations: It it in space I (the station was carried that basis station report origination cording to its own be reported in origination is a network as assigned to annel 4 in Wash station is a network as assigned to annel 4 in Wash station is a network area, (i.e. "or general instructive area, in accounting period ause of lack of a seam that is not some 30, 2009, be sesociation repreyou carried the of the general in U.S. stations,	(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 designaticolumn 1 (list each the television station; or "E-M" (for noncontrol located in the special properties of the television station; or "E-M" (for noncontrol located in the special properties of the television station; or "E-M" (for noncontrol located in the special properties of the speci	s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing				•		
		CHANN	EL LINE-UP	AC CONT'D		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
WXXV-1-SIMUL	48	I-M	No		GULFPORT, MS	
WXXV-3-SIMUL	48	I-M	No		GULFPORT, MS	
WPXL-SIMUL	50	l	No		NEW ORLEANS, LA	
WVUE-2	8	l	No		NEW ORLEANS, LA	
WGNO-SIMUL	26	N	No		NEW ORLEANS, LA	
WNOL-2	15	l	No		NEW ORLEANS, LA	
	<u> </u>					
	<u> </u>					
						

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#
Name
Name

PRIMARY TRANSMITTERS: TELEVISION

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

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

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

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AD	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WDSU	43	N	No		NEW ORLEANS, LA
WDSU-SIMUL	43	N	No		NEW ORLEANS, LA
WGNO	26	N	No		NEW ORLEANS, LA
WKRG	20	N	No		MOBILE, AL
WKRG-SIMUL	27	N	No		MOBILE, AL
WLOX-1	13	N-M	No		BILOXI, MS
WLOX-1-SIMUL	13	N-M	No		BILOXI, MS
WLOX-2	13	N-M	No		BILOXI, MS
WLOX-2-SIMUL	13	N-M	No		BILOXI, MS
WLOX-3	13	I-M	No		BILOXI, MS
WMAH	16	E	No		BILOXI, MS
WWL	36	N	No		NEW ORLEANS, LA
WXXV-1	48	I-M	No		GULFPORT, MS
WXXV-1-SIMUL	48	I-M	No		GULFPORT, MS
WXXV-2	48	N-M	No		GULFPORT, MS
WYES	11	E	Yes	0	NEW ORLEANS, LA
		[

G

Primary Transmitters: Television

FORM SA3E. PAGE 3.					ACCOL	JNTING PERIOD: 2018/1
LEGAL NAME OF OWN		/STEM:			SYSTEM I	Name
CABLE ONE, IN	NC.				0074	17
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during the constant of	he accounting n June 24, 199 4), or 76.63 (red in the next p	period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
basis under specifc FC	CC rules, regula here in space	ations, or auth G—but do list	orizations:		ent and Program Log)—if the	relevision
 List the station here, basis. For further in in the paper SA3 fo 	and also in spa formation cond rm.	ace I, if the state erning substite	ute basis station	ns, see page (v) o	ute basis and also on some other f the general instructions located	
each multicast stream	associated with	h a station acc	cording to its over	er-the-air designa	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example	
its community of licens on which your cable sy	se. For example stem carried th	e, WRC is Cha ne station.	annel 4 in Wash	nington, D.C. This	on for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial	
(for independent multion For the meaning of the	cast), "E" (for no ese terms, see	oncommercial page (v) of the	l educational), o e general instruc	or "E-M" (for nonco	ast), "I" (for independent), "I-M" ommercial educational multicast). ne paper SA3 form. es". If not, enter "No". For an ex-	
	ave entered "Yo ne distant statio	es" in column on during the	4, you must cor accounting perion	mplete column 5, s od. Indicate by ent	stating the basis on which your tering "LAC" if your cable system	
For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For	ion of a distant entered into of a primary trans simulcasts, also	multicast stre n or before Ju mitter or an as o enter "E". If	eam that is not s ine 30, 2009, be ssociation repre you carried the	subject to a royalty etween a cable systemating the primation ethannel on any ot	r payment because it is the subject stem or an association representing ry transmitter, enter the designa- her basis, enter "O." For a further	
Column 6: Give the	e location of ea Canadian statio	ch station. Fo	r U.S. stations, 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.	
Trote: If you are dimen	ig manipic onai		•	AD CONT'D	onamier inte ap.	_
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
WMAH-SIMUL	#N/A	#N/A	No	(11 = 12 12 11 1)	#N/A	
WXXV-2-SIMUL	48	N-M	No		GULFPORT, MS	
WXXV-3-SIMUL	48	I-M	No		GULFPORT, MS	
					<u> </u>	
		<u> </u>				
		l				

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

Name

007417

PRIMARY TRANSMITTERS: TELEVISION

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

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

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

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AE	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WGUD-LD	51	I	No		PASCAGOULA, MS
WKFK-LD	7	I	No		PASCAGOULA, MS
WKRG	20	N	No		MOBILE, AL
WKRG-SIMUL	27	N	No		MOBILE, AL
WLOX-1	13	N-M	No		BILOXI, MS
WLOX-1-SIMUL	13	N-M	No		BILOXI, MS
WLOX-2	13	N-M	No		BILOXI, MS
WLOX-2-SIMUL	13	N-M	No		BILOXI, MS
WLOX-3	13	I-M	No		BILOXI, MS
WMAH	16	Е	No		BILOXI, MS
WPMI	15	N	No		MOBILE, AL
WPMI-SIMUL	15	N	No		MOBILE, AL
WXXV-1	48	I-M	No		GULFPORT, MS
WXXV-1-SIMUL	48	I-M	No		GULFPORT, MS
WXXV-2	48	N-M	No		GULFPORT, MS
WXXV-2-SIMUL	48	N-M	No		GULFPORT, MS
WXXV-3	#N/A	#N/A	No		#N/A
WMAH-SIMUL	#N/A	#N/A	No		#N/A

G

Primary Transmitters: Television

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 multi-basis 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 the 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 noncommercial educational multicast). "" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). "" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). "" (for independent), "I-M" (for ind	FORM SA3E. PAGE	3.					
PRIMARY TRANSMITTERS: TELEVISION A 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 P.C.C. rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections R-596l(2)] and (4), 76.61(e)(2) an			YSTEM:				Name
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 reCC rules an tergulations in effect on June 24, 1981, permitting the carriage of certain network programs jeections r8.59(d)(2) and (4), 78.61(e)(2) and (4), or 78.63 (referring to 78.61(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 PCC rules, regulations, or authorizations: 10 not list the station here in space (— but to list it in space 1 (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space 1, 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 associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream was must be reported in column 1 (list each stream separately; for example WRETA-simulcast). Column 4: In indicate in each case whether the station is a network station, an independent station, or a noncommercial educational multicast). The indicate in each case whether the station is network station, an independent station, by	CABLE ONE	, INC.				007417	
CC rules and regulations in effect on June 24, 1981, permitting the carried only on a part-time basis under reCC 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, 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 multi-asat streams was WETA-2*. Simulcasts treams 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 4: If the station is outside the bocal service area, (i.e. "distant"), enter "Yes" if not entered "Yes" in columnal capacity. For the meaning of these terms, 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 zable 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	PRIMARY TRANSMI	TTERS: TELEVISIO	ON				
Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AE(CONT'D) 1. CALL SIGN 2. B'CAST CHANNEL OF 4. DISTANT? (Yes or No) CARRIAGE 6. LOCATION OF STATION CARRIAGE	In General: In spac carried by your cab FCC rules and regu 76.59(d)(2) and (4), substitute program Substitute Basi basis under specife Do not list the stat station was carri List the station he basis. For furthe in the paper SA3 Column 1: List e each multicast strea cast stream as "WETA-simulcast). Column 2: Give its community of lic on which your cable Column 3: Indic educational station, (for independent m For the meaning of Column 4: If the planation of local se Column 5: If you cable system carried carried the distant s For the retransm of a written agreem the cable system ar tion "E" (exempt). F explanation of these Column 6: Give	te G, identify ever le system during to lations in effect or 76.61(e)(2) and (basis, as explaines S Stations : With FCC rules, regulation here in space ed only on a substre, and also in spar information conditions of a form. Beach station's call am associated with ETA-2". Simulcast the channel numbers. For example esystem carried thate in each case to by entering the leulticast), "E" (for not these terms, see estation is outside ervice area, see put have entered "Y do the distant station of a distant ent entered into ond a primary transor simulcasts, alse three categories the location of each	y television st he accounting in June 24, 194, or 76.63 (i 4), or 76.63 (i 4), or 76.63 (i respect to any ations, or auth G—but do lis- titute basis. ace I, if the sta- terning substiff sign. Do not r h a station acc streams must beer the FCC h e, WRC is Cha- ne station. whether the stater "N" (for no oncommercial page (v) of the ter "N" (for no oncommercial page (v) of the the local servage (v) of the es" in column on during the ame basis becan multicast stream or before Ju mitter or an a- onenter "E". If , see page (v) ch station. Fo	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried the station was carried the station was carried to the station was carried to the station was carried to the period of the station was assigned to the station is a network of the station was assigned to the station	(1) stations carried ecarriage of cert 1(e)(2) and (4))]; as carried by your of the Special Statem of both on a substitute, see page (v) of the program service er-the-air designate column 1 (list each the television statington, D.C. This located in the for "E-M" (for noncottons located in the insplete column 5, and Indicate by enactivated channel subject to a royalty senting the primal channel on any of instructions located in the insplete column 5, and Indicate by enactivated channel subject to a royalty senting the primal channel on any of instructions located list the community is the community of the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the senting the primal channel on	ed only on a part-time basis under ain network programs [sections and (2) certain stations carried on a cable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located as such as HBO, ESPN, etc. Identify tition. For example, report multiph stream separately; for example ion for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial east), "I" (for independent), "I-M" commercial educational multicast). The paper SA3 form. Sear. If not, enter "No". For an exemple stating the basis on which your teering "LAC" if your cable system capacity. If you which the station is licensed by the station the paper SA3 form.	Primary Transmitters:
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL OF (Yes or No) CARRIAGE	Note: If you are util	izing multiple chai	nnel line-ups,	use a separate	space G for each	channel line-up.	
SIGN CHANNEL OF (Yes or No) CARRIAGE			CHANN	EL LINE-UP	AE(CONT'D)		
	1. CALL SIGN	CHANNEL	3. TYPE OF	4. DISTANT?	5. BASIS OF CARRIAGE		
						-	
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		·····					
		-					
		·····					

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	IC.				007417		
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute 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 multicast). "E" (for independent multicast). "E" (for noncommercial educational) or "E-M" (for noncommercial educational multicast).							
(for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.							
		CHANN	EL LINE-UP	AF			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
		 			 		
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				007417	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat 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 ead each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the	system during the consistence of	ne accounting In June 24, 194, or 76.63 (In d in the next prespect to any attons, or auth G—but do listitute basis. In the state of the	g period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: t it in space I (the ation was carried cute basis station report origination coording to its over be reported in our	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your content of both on a substitution, see page (v) on program service er-the-air designal column 1 (list each the television statistics.	s and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a cable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- h stream separately; for example ion for broadcasting over-the-air in may be different from the channel	Primary Transmitters: Television
educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h. cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	rentering the lecast), "E" (for neese terms, see ation is outside ce area, see pave entered "Yihe distant staticion on a partial it entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio	etter "N" (for no concommercial page (v) of the the local servage (v) of the es" in column on during the eme basis becamulticast streen or before Jumitter or an accomment of the enter "E". If the see page (v) ch station. Forns, if any, giv	etwork), "N-M" (I educational), of a general instruct vice area, (i.e. "congeneral instruct 4, you must correct accounting period accounting period accounting period accounting that is not a sam that is not some 30, 2009, be association repreyou carried the pof the general in U.S. stations, at the name of the second in th	for network multic or "E-M" (for nonce ctions located in the distant"), enter "Ye ions located in the mplete column 5, io d. Indicate by en- ictivated channel of subject to a royalty etween a cable sys- senting the prima channel on any of instructions locate list the community me community with	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed.	
		CHANN	EL LINE-UP	AG		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	NC.				007417		
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 program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream 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"							
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Note: If you are utilizing		, , ,		•	which the station is identifed. channel line-up.		
-		CHANN	EL LINE-UP	ΔН			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	0. LOCATION OF STATION		
	NUMBER	STATION		(If Distant)			
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FORM SA3E. PAGE 3.						, -
LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				007417	
PRIMARY TRANSMITT	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 bas Substitute Pasis Substitute Pasis Substitute Pasis Substitute Basis Substitute Pasis Pasis Substitute Pasis S	G, identify even system during tions in effect of 5.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a substand also in spanformation concorn. ch station's call associated with A-2". Simulcast e channel numbers in each case were entered "Ye entering the lecast), "E" (for neese terms, see pation is outside ice area, see pation on a part-ting simulcasts, also no a primary trans simulcasts, also nee categories	y television standard and accounting an 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 are station account as the station account as the station. Whether the station account are station. Whether the station account are station. Whether the station are station are station. Whether the station are station. Whether the station are station are station. Whether the station are station. Whether the station are station are station. Whether the station are station are basis becard and the station are basis becard multicast street or or before Jumitter or an associated are page (v) see page (v), see page (v).	period, except period, except period, except period, except per period, except per period, per	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitution, see page (v) on a program services the television station of the television of	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	Primary Transmitters: Television
FCC. For Mexican or 0	Canadian statio	ns, if any, give	e the name of the	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	Al		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
		l			<u>,</u>	

FORM SA3E. PAGE 3.						,
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
· · · · · · · · · · · · · · · · · · ·					007417	
carried by your cable s FCC rules and regulat 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 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 servi Column 5: If you h cable system carried ti carried the distant stat For the retransmiss of a written agreement	ers: TELEVISIO G, identify every system during to ions in effect or 6.6.1(e)(2) and (sis, as explaine stations: With a CC rules, regula a here in space only on a subs and also in space formation concurre. The station's call associated with a-2". Simulcast be channel numl se. For example system carried the in each case w or entering the le cast), "E" (for m este terms, see atton is outside ce area, see pa ave entered "Y the distant static ion on a part-tin cion of a distant a entered into o	y television standard programment of the station actions on the station actions of the stations of t	period, except period, except period, except period, except period, except period, permitting the referring to 76.6 paragraph. I distant stations orizations: I it in space I (the station was carried ute basis station period or origination period origination period pe	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the Special Statement of the second of the Special Statement of the second	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television
explanation of these the Column 6: Give the	nree categories e location of ea Canadian statio	, see page (v) ch station. Fo ns, if any, giv nnel line-ups,	of the general of the general of the name of the name of the the name of the general of the gene	instructions locate list the community ne community with space G for each	ther basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	0. LOCATION OF STATION	
	NUMBER	STATION		(If Distant)		
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CABLE ONE CONNER OF CABLE PNYTENE CABLE ONE, INC. PRIMARY TRANSMITTERS. TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) are carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under PCC orders and regulations in effect on June 24, 1961, permitting the carried order on inches programs (peculian order). For the station of the control of the carried provided on a substitute program basis are societied in the next paragraph (2) (2) and (3), and (2) contain allotions control on a substitute program basis under specific PCC rules, regulations, or authorizations. For this station was carried from the special station scarried by your cable system on a substitute program basis under specific PCC rules, regulated basis. List the station here in space G—but do list in space (1 the space) special statement and Program Log—if the station was carried by your cable system and shown on one other station was carried by your cable system and shown on the control of the station and th	FORM SA3E. PAGE 3.						T
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under PCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76,59(i)(2) and (4), 76,51(e)(2) and (4)); and (2) cartain stations carried on a substitute program basis under specific PCC rules, regulations, or authorizations: 'Do not list the station here, and also in space (4) 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 associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its own of the station of the second	LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.63 (referring to 76.63	CABLE ONE, IN	IC.				007417	
Carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules an effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4)), 76.61(e)(2) and (4), 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis under specific FCC rules, regulations, or authorizations: 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: 10 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. 1. 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 associated with a station according to its over-the-air designation. For example, report multicast streams and swife and stations are suffered 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 5: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational multicast). For the meaning of these terms, 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; if you the according to the second program of the second program in the acc	PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
CHANNEL LINE-UP AK 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL OF (Yes or No) CARRIAGE	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 specife FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational) adducation on a part-time b						
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION (Yes or No) CARRIAGE	Note. If you are utilizing	ig multiple chai		·		спатнетше-ир.	
SIGN CHANNEL OF (Yes or No) CARRIAGE		T	CHANN	EL LINE-UP	AK		
		2. B'CAST		4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
NOMBER STATION (IT DIStant)	SIGN	_	_	, ,			
		NUMBER	STATION		(If Distant)		
						<u> </u>	
						<u> </u>	

PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions 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 "well-A-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, "I-M" (for independent multicast), "E" (for noncommercial educational station, by entering the letter "N" (for network), "I-M" (for network multicast), "I' (for independent), "I-M" (for independent), "I-M" (for independent), "I-								
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under PCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(()/2) and (4), 76.63 (referring to 76.63 (referring to 76.61(e)/2) and (4)); and (2) cartain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife PCC rules, regulations, or authorizations: 1.50 not list the station here, and also in space (1, if the station was carried both on a substitute basis. It set station here, and also in space (1, if the station was carried both on a substitute 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 associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream sascoiated with a station according to its over-the-air designation. For example, report multicast stream susceinated with a station according to its over-the-air designation. For example, report multicast stream shall be reported in column 1 (list each stream separately; for example wETA-simulcast). Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial education also problems of the service of the service of the service		/STEM:			SYSTEM ID#			
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Courted by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4)); and (2) certain stations carried on a substitute program basis under specific FCC rules, regulations, or authorizations: 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: 10 not list the station here, and also in space II, 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 streams associated with a station according to its over-the-air designation. For example, report multicast streams and switch a station. Column 2: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast streams and switch a station according to its over-the-air designation. For example, report multicast streams and "WETA-2". Simulcast in each station according to its over-the-air designation. For example, report multicast streams must be reported in column 1 (list each streams separately; for example, report multicast). The column 1 (list each streams are substitute basis and also on some other basis on which your cable system care in the station. Column 5: In clicate in each case whether the station is a network station, an independent station, or an explanation of local service area, see page (v) of the general	PRIMARY TRANSMITTERS: TELEVISION							
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FORM SA3E. PAGE 3.						,	
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name	
					007417		
carried by your cable s FCC rules and regulat 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 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 multi For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried ti carried the distant stat For the retransmiss of a written agreement	ERS: TELEVISIO G, identify even system during ti ions in effect or 6.61(e)(2) and (sis, as explaine Stations: With a CC rules, regula a here in space only on a subs and also in space formation conc orm. th station's call associated with a-2". Simulcast e channel numl se. For example ystem carried the in each case w or entering the le cast), "E" (for ne see terms, see ation is outside ice area, see pa ave entered "Y the distant static ion on a part-ti sion of a distant t entered into o	y television standard programment of the station actions on the station actions of the stations of t	period, except 81, permitting the referring to 76.6 paragraph. It is in space I (the tition was carried ute basis station eport origination coording to its own be reported in the assassigned to eas assigned to eas general instruct 4, you must correct accounting period assigned to eas as as assigned to eas as as as as as as as as as a as a	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the Special Statement of the second of the Special Statement of the second	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television	
tion "E" (exempt). For explanation of these th Column 6: Give the	simulcasts, also nree categories e location of ea Canadian statio	o enter "E". If , see page (v) ch station. Fo ns, if any, givennel line-ups,	you carried the of the general in U.S. stations, the name of the use a separate	channel on any ot instructions locate list the community ne community with space G for each	her basis, enter "O." For a further d in the paper SA3 form. y to which the station is licensed by the which the station is identifed.		
			EL LINE-UP				
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		
0.0.1	NUMBER	STATION	(10001110)	(If Distant)			
	<u> </u>						

FORM SA3E. PAGE 3.				,		
LEGAL NAME OF OWNER OF CABLE SY	STEM:		SYSTEM ID#	Name		
CABLE ONE, INC.			007417			
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 (f)(e)(2) and (4), 76,63 (f)(e)(2) and (4), 76,63 (f)(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream 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, "I-M" (for independent) "I-M" (for independent) multicast). "E" (for noncommercial educational multicast). "F" (for noncommercial educational multic						
the cable system and a primary transr tion "E" (exempt). For simulcasts, also explanation of these three categories,	mitter or an association re o enter "E". If you carried t , see page (v) of the gener ch station. For U.S. station ns, if any, give the name on the line-ups, use a separa	oresenting the prima ne channel on any of al instructions locate is, list the community of the community with te space G for each	ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed.			
	CHANNEL LINE-U	PAN				
1. CALL 2. B'CAST SIGN CHANNEL	3. TYPE 4. DISTANT OF (Yes or No		6. LOCATION OF STATION			
NUMBER	OF (Yes or No STATION	(If Distant)				
		(222 3)				
		••••				
		·····				
		•••••				

FORM SA3E. PAGE 3.						101 ENIOD: 2010)
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
CABLE ONE, I	NC.				007417	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space carried by your cable: FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Pasis: 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-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 the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify even system during this ions in effect or 3.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a substand also in spanformation concorn. ch station's call associated with A-2". Simulcast e channel number in each case we are the cast), "E" (for nease terms, see particular is on a part-inition on a part-inition on a part-tito is on a part-inition of a distant tentered into on a primary trans simulcasts, also ree categories e location of ea	y television standard accounting in June 24, 194, or 76.63 (rd d in the next) respect to any ations, or auth G—but do list titute basis. In the standard account in a station account in a station account in a station account in a station account in a station. Whether the station. Whether the station. Whether the station account in a count in a station account in a station. Whether the station. Whether the station in column on during the same basis became the station or before Junitter or an account in the station or before Junitter or an account in the same basis became the station. For the station in Forest in Station.	period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: a tit in space I (the referring to referring to 76.6 paragraph. It is in space I (the referring to respect to the report origination coording to its own be reported in the reported in the report origination as assigned to annel 4 in Wash ation is a network), "N-M" (I educational), consider a read instruction of the general instruction of the report of lack of a seam that is not some 30, 2009, be association repression of the general in the referring of the general in the ref	(1) stations carried to carriage of certa- the carriage of certa- 1(e)(2) and (4))]; as a carried by your of the Special Statement of both on a substitution, see page (v) on a program service er-the-air designation of the television station of the television of the televi	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	Primary Transmitters: Television
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AO		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
	†				<u> </u>	
					<u> </u>	
						
	 				 	

FORM SA3E. PAGE 3.						T	
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	IC.				007417		
PRIMARY TRANSMITTE	RS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as 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)," I-M" (for in							
Note. II you are utilizin	ig multiple chai		·		спанненине-ир.		
	1	CHANN	EL LINE-UP	AP			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			
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					<u> </u>		
					 		
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	<u> </u>	<u> </u>					

FORM SA3E. PAGE 3.						,
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
· · · · · · · · · · · · · · · · · · ·					007417	
carried by your cable s FCC rules and regulat 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 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 servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a	ERS: TELEVISIO G, identify even system during ti ions in effect or 6.61(e)(2) and (sis, as explaine Stations: With a CC rules, regula a here in space only on a subs and also in spa formation cond form. ch station's call associated with a-2". Simulcast be channel numl se. For example ystem carried the in each case w or entering the le cast), "E" (for n ese terms, see ation is outside ice area, see pa ave entered "Y the distant static ion on a part-ti sion of a distant t entered into o a primary trans	y television standard accounting in June 24, 194, or 76.63 (rd din the next) respect to any ations, or auth G—but do list titute basis. In the standard accounting the station account as treams must be the FCC in the station. Whether the station account a	period, except 81, permitting the referring to 76.6 paragraph. It is in space I (the tition was carried ute basis station eport origination coording to its own be reported in the tition is a network), "N-M" (I educational), one general instruct 4, you must coraccounting period as and that is not some 30, 2009, be association represents to 76.6 per 10.0	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the Special Statement of the Special	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television
explanation of these the Column 6: Give the	nree categories e location of ea Canadian statio	, see page (v) ch station. Fo ns, if any, giv nnel line-ups,	of the general in the state of the name of the name of the tree of	instructions locate list the community ne community with space G for each	d in the paper SA3 form. I to which the station is licensed by the which the station is identifed.	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name		
CABLE ONE, IN	NC.				007417			
PRIMARY TRANSMITTE	ERS: TELEVISIO)N						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 0, 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under 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), "I" (for independent), "I-M" (for ind								
Note: If you are utilizing	ng multiple char	ınel line-ups,	use a separate	space G for each	channel line-up.			
		CHANN	EL LINE-UP	AS				
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE				
	NUMBER	STATION		(If Distant)				
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FORM SA3E. PAGE 3.										
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name				
CABLE ONE, IN	NC.				007417					
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 specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station										
on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is										
		CHANN	EL LINE-UP	AT						
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION					
					ļ					
					ļ					

ACCOUNTING PERIOD: 2018/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007417 CABLE ONE. INC. 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: 2018/1		
LEGAL NAME OF OWNER OF CABLE ONE, INC.	CABLE SYST	ГЕМ:					SYSTEM ID# 007417	Name		
SUBSTITUTE CARRIAG					a the et			ı		
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.										
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 sta	tion?	-	•			Yes	XNo	Statement and Program Log		
log in block 2. 2. LOG OF SUBSTITUTION			, ,		·					
In General: List each subsclear. If you need more spa	ace, please a	attach addition	al pages.				5			
period, was broadcast by a under certain FCC rules, re	distant stat	ion and that yo	ision program (substitute p our cable system substitute s. See page (vi) of the gen	d for the prog	ramming of	f another sta	ation			
SA3 form for futher informatitles, for example, "I Love	ation. Do no Lucy" or "NE	t use general o BA Basketball:	categories like "movies", or 76ers vs. Bulls."	"basketball".						
Column 3: Give the call	sign of the s	station broadca	r "Yes." Otherwise enter "N sting the substitute progra ne community to which the	m.	nsed by the	ECC or in				
the case of Mexican or Car	nadian statio	ons, if any, the		station is iden	ntified).		nth			
	es when the		gram was carried by your				ely			
to the nearest five minutes stated as "6:00–6:30 p.m." Column 7: Enter the lett	•		was substituted for progra	·	·		ed			
to delete under FCC rules a gram was substituted for preffect on October 19, 1976	and regulation rogramming	ons in effect du	iring the accounting period	; enter the let	ter "P" if the	e listed pro				
	SUBSTITUT	E PROGRAM	 		EN SUBST		7. REASON			
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN		5. MONTH AND DAY		TIMES	FOR DELETION			
						_				
						_				
						_				
						_				
						_				
						_				
						_				
						_				

LEG	AL NAME OF OWNER OF CABLE SYSTEM: BLE ONE, INC.			SYSTEM ID# 007417	Name					
GR Inst all a	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.									
IMP	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 • Cor • If your fee • If your	COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.									
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b $\!$	e enter	ed on li	ne 1 of						
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.	entered	d on line	2 in block						
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be	entered	on line						
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064									
	Enter the result here. This is your minimum fee.	\$		87,693.66						
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block. • Did your cable system carry any distant television stations during the accounting peri X Yes—Complete the DSE schedule. Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	nn 4, yo	ou must	check						
3	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	-	•	0.00						
	Line 3. Add lines 1 and 2 and enter here	\$		20,280.34						
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter		\$	87,693.66	Cable systems submitting additional					
	zero. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	deposits under Section 111(d)(7) should contact 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	\$		88,418.66	form for submitting the additional fees.					
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See pa	ige (i) of	the						

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

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

007417

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 "4/10"
- State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.—3:15 a.m. app."
- You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m."
 12:00 p.m."

		DATES	AND HOURS (OF PART-TIME CAR	RIAGE			
CALL SIGN	WHEN CARRIAGE OCCURRED			CALL SIGN	WHEN CARRIAGE OCCURRED			
	DATE	HOUR FROM	rs TO		DATE	FROM	DURS TO	то
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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM 007	/I ID# 7417
M Channels	CHANNELS 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. 1. Enter the total number of channels on which the cable system carried television broadcast stations. 2. Enter the total number of activated channels on which the cable system carried television broadcast stations	
	and nonbroadcast services	
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
for Further Information	Name EMERSON YEARWOOD Telephone 602-364-6195	
	Address 210 E. EARLL DRIVE (Number, street, rural route, apartment, or suite number) PHOENIX, AZ 85012-2626 (City, town, state, zip)	
	Email emerson.yyearwood@cableone.biz Fax (optional) 602-364-6013	
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.	
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) [Owner other than corporation or partnership] I am the owner of the cable system as identified in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or X (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.	
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	
	X /s/ Raymond Storck	
	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 cursor in the box and press the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	
	Typed or printed name: RAYMOND STORCK	
	Title: VICE PRESIDENT (Title of official position held in corporation or partnership)	
	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	M ID#
CABLE ONE, INC. 007	7417 Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the 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. 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. \$	Special Statement Concerning Gross Receipts Exclusion
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 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	<u>-</u>
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@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	<u></u>
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 ε television market added stations after June 24, 1981, that would not have been permitted under FCC rules, regulations, and authorizations (hereafter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

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

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

EXAMPLE:

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

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



	Distant Stations Carried		Identification o	f Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
in	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
3	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

		40,0000				
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	E 11. (CONTINUED)											
4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#											
Т	CABLE ONE, INC. 007417											
	SUM OF DSEs OF CATEGORY "O" STATIONS:											
	Add the DSEs of each station		.									
	Enter the sum here and in line	1 of part 5 of this	schedule.		0.75							
	Instructions:			I.								
2	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5											
	f space G (page 3).											
Computation	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-											
of DSEs for	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						
Stations	WDSU		CALL SIGN	DSE	CALL SIGN	DSE						
		0.250										
	WKRG	0.250										
	WYES	0.250										
Add rows as		<u>.</u>										
necessary.												
Remember to copy												
all formula into new		<u> </u>										
rows.												
		·										
		<u>-</u>										
		·										
		 										
		 										
		<mark></mark>										
												
												
		<u></u>										
		<u>.</u>										
]["]								

Name	CABLE ONE, IN						S	YSTEM ID# 007417
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2: Fo figure should corre Column 3: Fo Column 4: Div be carried out at le Column 5: Fo give the type-value Column 6: Mu	e call sign of all dista or each station, give the espond with the information each station, give the tright of the figure in columents to the third deciror each independent see as ".25."	he number of hours mation given in space he total number of humn 2 by the figure in mal point. This is the station, give the "typ lumn 4 by the figure	your cable system to J. Calculate on ours that the stating column 3, and good "basis of carriage e-value" as "1.0." in column 5, and	n carried the sta ly one DSE for e on broadcast ov ive the result in e value" for the s For each network give the result in	tion during the accounting each station. er the air during the acco decimals in column 4. Th	ounting period. his figure must cational station,	
Capacity		С	ATEGORY LAC	STATIONS:	COMPUTATI	ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	R 3. NI JRS 0 ED BY S	JMBER F HOURS FATION N AIR	4. BASIS OF CARRIAG VALUE	5. TYPE	6. DS	βE
						x		
						x		
						x x	<u>_</u>	
			÷	=		x	=	
			÷	=		x	=	
			÷ ÷	=======================================		<u>х</u> х	<u>=</u>	
	Add the DSEs of ea	CATEGORY LAC S ach station. ere and in line 2 of pa		3,		0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried by tions in effect of Broadcast one of space I). Column 2: For at your option. This Column 3: Ente Column 4: Divide Column 4: Divide Column 5: Enter Column 5: Enter Column 6: Enter Colu	your system in substin October 19, 1976 (or more live, nonnetwo each station give the figure should correser the number of days de the figure in column	itution for a program as shown by the lett ork programs during number of live, non spond with the informs in the calendar yearn 2 by the figure in a	that your system or "P" in column 7 that optional carris metwork programs nation in space I. r: 365, except in a column 3, and giv	was permitted to of space I); and age (as shown by as carried in substance) a leap year. The the result in compare the result in co	rograms) if that station: o delete under FCC rules t the word "Yes" in column titution for programs that blumn 4. Round to no les the general instructions in	2 of were deleted s than the third	rm).
	•	SUI	BSTITUTE-BAS	IS STATIONS	S: COMPUTA	ATION OF DSEs	1	
	SIGN	NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷				÷		=
		÷				÷		
		÷				· · · · · · · · · · · · · · · · · · ·	•	=
		÷		=		÷		=
	Add the DSEs of ea	SUBSTITUTE-BASI ach station. ere and in line 3 of pa		3,		0.00]	
5 Total Number of DSEs		plicable to your system Es from part 2● Es from part 3●		in parts 2, 3, and	4 of this schedule	e and add them to provide	0.75 0.00 0.00	
	TOTAL NUMBER O	F DSEs						0.75

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

CABLE ONE,	OWNER OF CABLE	SYSTEM:					S'	YSTEM ID# 007417	Name
In block A: • If your answer if schedule.	ck A must be comp "Yes," leave the re	emainder of p	•	7 of the DSE scho	edule blank aı	nd complete pa	art 8, (page 16) of	the	6
your answer in	140, complete bic			ELEVISION M.	ARKETS				Computation of
effect on June 24,	m located wholly o , 1981? nplete part 8 of the plete blocks B and	utside of all r	major and sma	aller markets as de	efined under s			gulations in	3.75 Fee
		BLOC	K B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulations e DSE Scheen	ons prior to Jui dule. (Note: Ti	part 2, 3, and 4 of ne 25, 1981. For fu ne letter M below r Act of 2010.)	urther explana	ation of permitt	ed stations, see the	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfatherec instructions fo E Carried pursus *F A station pre	lles and reguled pursuant to on as defined all educations if station (76.6 or DSE sched ant to individuations with the station will be station will end pursuant to station will regular to station will regular to station will provide the station will provide the station will provide the provided the station will provide the station will be	lations cited boot the FCC made in 76.5(kk) (7 all station [76.555) (see paragule). It is all waiver of Fid on a part-tin ithin grade-Boot in the fid on grade-Boot in the fide fide fide fide fide fide fide fid	76.59(d)(1), 76.61(9(c), 76.61(d), 76. graph regarding su CC rules (76.7) ne or substitute ba contour, [76.59(d)(ose in effect of 76.57, 76.59(b) re)(1), 76.63(a) 63(a) referring bstitution of g	n June 24, 198 a), 76.61(b)(c), a) referring to 7 g to 76.61(d) irandfathered s une 25, 198	76.63(a) referring 76.61(e)(1 stations in the		
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on page	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
WDSU	D	0.25							
WKRG	D	0.25							
WYES	С	0.25							
							<u> </u>		
							ļ		
<mark></mark>									
								1.50	
								I	-
		В	LOCK C: CO	MPUTATION OF	- 3.75 FEE				-
	e total number of						,		
Line 2: Enter the	e sum of permitte	d DSEs fror	n block B ab	ove			<u>.</u>		
	line 2 from line 1 leave lines 4–7 b			•		rate.			
Line 4: Enter gro	oss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply I	line 4 by 0.0375 a	and enter su	ım here				<u> </u>		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSI	Es from line	3				<u>, </u>		carriage? If yes, see part 9 instructions.
Line 7: Multiply I	line 6 by line 5 ar	nd enter her	e and on line	2, block 3, spac	e L (page 7))		0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 007417 **BLOCK A: TELEVISION MARKETS (CONTINUED)** 6 3. DSE 1. CALL 2. PERMITTED 1. CALL 2. PERMITTED 1. CALL 2. PERMITTED 3. DSE 3. DSE SIGN BASIS SIGN **BASIS** BASIS SIGN Computation of 3.75 Fee **WDSU** 0.25 D D **WKRG** 0.25 С **WYES** 0.25

Name	CABLE ONE, IN		/STEM:						S	907417	
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried prior Column 1: List the or Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the FORAM APart-time spicate) For Fore Fore Fore Fore Fore Fore Fore F	or to June 25, 196 call sign for each the DSE for this the accounting p the basis of carric CC rules and reg ecialty programm (d)(1),76.61(e)(1) rogramming: Car (e)(3)). arriage under cer al instructions in the station's DSE the DSE figures B, column 3 of p information you get the DSE figures and the station of p information you get the DSE figures and the station of p information you get the DSE figures and the post figures are the post the post figures	81, under former distant station for a sing seriod and year in iage on which the judations cited be sing. Carriage, or or 76.63 (referriage under FCC train FCC rules, referringe to the paper SA3 for the current solisted in column part 6 for this statigive in columns 2	r FCC rules gov dentifed by the gle accounting p n which the can e station was or the apart-time baring to 76.61(e) C rules, sections regulations, or a orm. accounting per ns 2 and 5 and tion. 2, 3, and 4 mus	rerrier lette per riag arriag arriag (1) s 7 aut	entifed by the letter "F" ning part-time and subter "F" in column 2 of priod, occurring betweer ge and DSE occurred ied by listing one of the se in effect on June 24 s, of specialty program 1). 6.59(d)(3), 76.61(e)(3) thorizations. For further if as computed in parts the smaller of the two e accurate and is subject to the smaller of the subject in the smaller of the subject in parts.	stitute carri- part 6 of the n January 1 (e.g., 1981/ e following l l, 1981. Iming under , or 76.63 (i r explanation 2, 3, and 4 of figures her	age. DSE schedule, 1978 and Jun 1) etters FCC rules, se referring to in, see page (v of this schedule. This figure	ene 30, 19 ections vi) of the should b	e enterei	
		PERMITTED	DSE FOR STA	TIONS CARRIE	ΞD	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS			
	1. CALL	2. PRIOR		COUNTING		4. BASIS OF		RESENT	6. P	ERMITTED	
	SIGN	DSE	PE	ERIOD		CARRIAGE	[SE		DSE	
											•••
7 Computation	Instructions: Block A In block A: If your answer is	"Yes," complete	blocks B and C,								
of the	If your answer is	"No," leave block		•	•	art 8 of the DSE schedu					
Syndicated Exclusivity			BLOCK	(A: MAJOR	TE	ELEVISION MARKI	ET				_
Surcharge	Is any portion of the c X Yes—Complete	•		or television mar	ket	as defined by section 7 No—Proceed to		rules in effect J	une 24,	1981?	
	BLOCK B: Ca	arriage of VHF/G	rade B Contour	Stations	٦	BI OCK	C: Compu	tation of Exem	nt DSEs		
	Is any station listed in commercial VHF station in part, over the cal	n block B of part 6 ion that places a	6 the primary stre	eam of a		Was any station listed nity served by the cab to former FCC rule 76.	in block B	of part 7 carrie	d in any	commu-	_
	Yes—List each st	station below with it		mitted DSE		Yes—List each sta			ate permi	tted DSE	
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	SN	DSE	
								••••••			
		ļ									
		·	TOTAL DSEs	0.00				TOTAL DS	SEs	0.00	
	I .				- 11						

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC.	SYSTEM ID# 007417	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	8,241,885.00	7
Section 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 Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Yes—Complete part 9 of this schedule. X 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 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? 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			STEM ID# 007417
		CABLE ONE, INC.	007417
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)	
of the Syndicated 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> .
	Instruc	ctions:	
8		ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part	
-		checked "Yes," use the total number of DSEs from part 5. bck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation	• If you	ır answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	
of Base Rate Fee	• If you blank	ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below i.	
	What i	is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.	
	SCIVIO	salea, see page (v) or the general instructions.	
		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 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		
	3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts (the amount in section 1) ▶ \$	
		(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	<u></u> '-

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2018/1

		TEM ID# 007417	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	in the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 5 blank.		8
	A. Enter 0.01064 of gross receipts (the amount in section 1) **Section 1.1**		J
	B. Enter 0.00701 of gross receipts (the amount in section 1)		Computation of
	C. Multiply line B by 3.000 and enter here		Base Rate Fee
	D. Enter 0.00330 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here▶		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)		
	Base Rate Fee	0.00	
	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast sign be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-		9
In Gen	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to e.		Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advanta on, you must:	age of this	of Base Rate Fee
station DSEs a	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the source or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each subscriber group. That total is the base rate fee for your system.	umber of	and Syndicated Exclusivity Surcharge
also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, impute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. cable system is wholly located outside all major television markets, complete block A only.	,	for Partially Distant Stations, and
	oldentify a Subscriber Group for Partially Distant Stations		for Partially Permitted
	: For each community served, determine the local service area of each wholly distant and each partially distant station yo to that community.	ou l	Stations
outside	: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and the subscriber.)		
subscri	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each iber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a calculul will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
groups		subscriber	
	n section: fy the communities/areas represented by each subscriber group.		
• Give	the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the ibers in the group.	9	
• If:		- 0 0	
and 4 d	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts of this schedule; or, portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block E		
part	6 of this schedule.	,	
	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
in the	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instruct paper SA3 form.		
page.	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceinn making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, to that group)'s complement of stations and total gross receipts from the subscribers in that group). You do not need to s	the total	

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

actual calculations on the form.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007417 CABLE ONE, INC. 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 OWN CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007417	Name
В	SLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH				
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA		SPRINGS, PORT	IONS O	COMMUNITY/ AREA			WPA, POR	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
WDSU	0.25							Base Rate Fe
WYES	0.25							and
								Syndicated
								Exclusivity
								Surcharge
					<u>.</u>			for
	 	-						Partially
								Distant
		-			<u>.</u>	_	<u></u>	Stations
	<mark></mark>		†		-		<u></u>	
	<u></u>							
	<u></u>		†					
	<u></u>		†				···	
	···		+		·-		···	
Total DSEs			0.50	Total DSEs	_		0.00	
Gross Receipts First G	roup	. 1366	,597.00	Gross Receipts Secon	nd Croup	\$ 1,76	62,640.00	
GIOSS Receipts Filst C	лоир	\$ 1,366	,597.00	Gioss Receipts Secoi	iu Gioup	3 1,70	52,040.00	
Base Rate Fee First G	Group	\$ 7	,270.30	Base Rate Fee Secon	nd Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	BILOXI	, HARRISON COL	INTY	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
WYES	0.25			WYES	0.25			
						_		
					<u> </u>			
	<u></u>				<u>.</u>			
	<mark></mark>		 		-		<u></u>	
	<u> </u>		 					
	<u></u>		†				···	
	<u></u>		 				<u></u>	
			†		<u>_</u>			
Total DSEs			0.25	Total DSEs			0.25	
Gross Receipts Third	Group	\$ 1,740	,983.00	Gross Receipts Fourtl	n Group	\$ 2,96	52,718.00	
Base Rate Fee Third (Group	\$ 4	,631.01	Base Rate Fee Fourth	n Group	\$	7,880.83	
Base Rate Fee: Add t	he base rat	e fees for each subsc	riber group	as shown in the boxes a	above.			
Enter here and in bloc			- '			\$ 2	20,280.34	

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007417	Name
В	FIFTH	COMPUTATION OF SUBSCRIBER GRO	UP	TE FEES FOR EAG		IBER GROUP SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA		OCK COUNTY (DI		COMMUNITY/ ARE		EAVE		9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u>.</u>	WDSU WYES	0.25 0.25			Base Rate Fee and
								Syndicated
			<u> </u>					Exclusivity
			<u>.</u>					Surcharge for
								Partially
	···		<u> </u>					Distant
	···	-	<u>.</u>		·····			Stations
			<u>.</u>					
Total DSEs			0.00	Total DSEs			0.50	
Gross Receipts First G	Group	<u>\$</u> 315	,300.00	Gross Receipts Sec				
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	498.20	
	SEVENTH	SUBSCRIBER GRO	UP		EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
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 Fou	ırth Group	\$	0.00	
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	es above.	\$		

LEGAL NAME OF OW		E SYSTEM:				S	YSTEM ID# 007417	Name		
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GROU	UP	9		
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	COMMUNITY/ AREA 0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
				-				Base Rate Fee and		
								Syndicated		
				-				Exclusivity Surcharge		
								for		
								Partially Distant		
								Stations		
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First	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 GRO		004441417//AREA		I SUBSCRIBER GROU	UP 0			
COMMUNITY/ ARE/	Α		0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
							<u></u>			
T / 1855							0.00			
Total DSEs Gross Receipts Thir	d Group	<u> </u>	0.00	Total DSEs	th Group	e	0.00			
Gross Receipts Third	и Огоир	\$	0.00	Gross Receipts Four	ıı Gıoup	\$	0.00			
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00			
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$				

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007417	Name	
[BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP			
		SUBSCRIBER GRO		H	FOURTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				
COMMUNITY/ AREA			0	COMMUNITY/ ARE	9 Computation				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fe	
								and	
								Syndicated Exclusivity	
					•••••		····	Surcharge	
								for	
								Partially	
			<u>.</u>					Distant	
								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		
F	IFTEENTH	SUBSCRIBER GRO	UP		SIXTEENTH	I SUBSCRIBER GRO	JP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
				·					
	····		···						
	<u></u>								
					·····				
	<mark>.</mark>		<mark></mark>		·····				
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 Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$			

LEGAL NAME OF OWNE CABLE ONE, INC.		E SYSTEM:				S	YSTEM ID# 007417	Name
				TE FEES FOR EACH				
	NTEENTH	SUBSCRIBER GROU		EIC		9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
				-				Surcharge
								for
								Partially
					<u> </u>			Distant Stations
								Stations
Total DSEs	-!	•	0.00	Total DSEs	_		0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	NTEENTH	SUBSCRIBER GROU		ii .	WENTIETH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					···			
					. <mark>.</mark>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
				11				
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

CABLE ONE, IN		LE SYSTEM:				S	YSTEM ID# 007417	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					<u></u>			Base Rate Fee and
				·				Syndicated
								Exclusivity
								Surcharge for
		-						Partially
					<u></u>			Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
		SUBSCRIBER GROU		II		SUBSCRIBER GROU		
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007417	Name
В	LOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
	ITY-FIFTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				0.1.20				Base Rate Fee
								and
								Syndicated
						-		Exclusivity
					·····	-	····	Surcharge for
						-		Partially
								Distant
								Stations
			<u></u>			-		
						-		
						<u> </u>		
		•				· · · · · · · · · · · · · · · · · · ·		
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TWENTY-	SEVENTH	SUBSCRIBER GRO)UP	TWE	NTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					·····	-		
			<u></u>		····			
						-	·····	
	···					 		
		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 Four	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN		LE SYSTEM:				S	YSTEM ID# 007417	Name
				TE FEES FOR EAC				
		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 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	
THII	RTY-FIRST	SUBSCRIBER GRO	UP	THIR	TY-SECONE	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<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 Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007417								
				ATE FEES FOR EACH			ID	
COMMUNITY/ AREA		SUBSCRIBER GROU	0	COMMUNITY/ AREA		I SUBSCRIBER GROU	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
					<u> </u>			and
					<u></u>			Syndicated Exclusivity
								Surcharge
					<u> </u>			for
					<u></u>			Partially Distant
								Stations
					<u></u>			
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 GROU	JP -	
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
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				-	<u>-</u>			
					<u>-</u>			
					<u></u>			
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					<u></u>			
Total DSEs			0.00	Total DSEs		_	0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourth	า Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourth	า Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007417								Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	SEVENTH	SUBSCRIBER GRO		i i		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	١		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
					····			for
								Partially Distant
		-			····			Stations
								
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
THIR	TY-NINTH	SUBSCRIBER GRO	JP		FORTIETH	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>			
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	···	-			····			
					••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add to			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007417								
				TE FEES FOR EAC				
		SUBSCRIBER GRO		II		SUBSCRIBER GROU		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
					<u></u>			and
	·····							Syndicated Exclusivity
			-					Surcharge
								for
								Partially
					<u></u>			Distant Stations
								Stations
					<u></u>			
					<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	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GRO		ii —		SUBSCRIBER GROU		
COMMUNITY/ AREA	٩		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
					 			
		-						
					<u></u>			
			·					
					<u></u>			
					<u></u>			
			·					
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	n Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007417								
				TE FEES FOR EAC				
FO COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		1 SUBSCRIBER GRO	UP 0	9
COMMUNITY AREA				COMMUNITY AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	·····				····			and Syndicated
				· · · · · · · · · · · · · · · · · · ·	····			Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
FORT	Y-SEVENTH	SUBSCRIBER GRO	UP	FOF	RTY-EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	٩		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-			<u></u>			
			-	-				
					····			
					····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
			criber group	as shown in the boxes	s above.			
Enter here and in blo	ock 3, line 1, s	space L (page 7)				\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007417								
				ATE FEES FOR EACH			10	
FO COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
								and
		-						Syndicated
								Exclusivity
					<u></u>			Surcharge
	·····				<u></u>			for Partially
								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	Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
		SUBSCRIBER GROU		II		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	<i>\</i>		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					 			
								
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007417								
		COMPUTATION OF SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GRO	LID	
COMMUNITY/ ARE		SUBSCRIBER GRO	0	COMMUNITY/ AREA		1 SUBSCRIBER GRO	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and
	·····				····			Syndicated Exclusivity
				-				Surcharge
								for
								Partially Distant
					····			Stations
								İ
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	·····				····			İ
					••••		····	İ
								İ
Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts Firs	t Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	İ
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ſ	FIFTY-FIFTH	SUBSCRIBER GRO	UP	F	FIFTY-SIXTH	SUBSCRIBER GRO	UP	1
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA	١		İ	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	İ
	·····		<u> </u>		····			İ
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Total DSEs			0.00	Total DSEs			0.00	1
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	1
								1
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	İ
			criber group	as shown in the boxes	s above.			1
Enter here and in blo	ock 3, line 1, s	space L (page 7)				\$		İ

	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007417								
				TE FEES FOR EAC					
		SUBSCRIBER GRO		it .		SUBSCRIBER GRO		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	
		-			<u></u>			Syndicated Exclusivity	
								Surcharge	
								for	
								Partially	
								Distant	
					····		<u></u>	Stations	
					····				
Total DSEs			0.00	Total DSEs	ļ	11	0.00		
	0	_					-		
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ona Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00		
F	IFTY-NINTH	SUBSCRIBER GRO	JP		SIXTIETH	SUBSCRIBER GRO	UP		
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	·····				····				
			<u>.</u>	-					
	·····				····				
					····				
					····				
					····				
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007417								Name
E	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO		11		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	······		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
			<u></u>		<u></u>			Syndicated
	····		<u> </u>		····		<u> </u>	Exclusivity Surcharge
	••••		<u>-</u>		····	•		for
								Partially
								Distant
			<u></u>		<u></u>			Stations
			<u></u>					
					····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SIX	KTY-THIRD	SUBSCRIBER GRO	UP	SIX	TY-FOURTH	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>		····	•		
		_	<u> </u>		<u></u>			
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			<u> </u>					
			<u></u>					
			<u></u>			· · · · · · · · · · · · · · · · · · ·		
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007417								Name
BLOC	KA: C	OMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	RIBER GROUP		
	FIFTH	SUBSCRIBER GROU		ii .	XTY-SIXTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	_
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.122 07.011	0_	0,122 0.0.1		07.22 070.1	100	0.122 0.011	302	Base Rate Fee
								and
								Syndicated
						<u> </u>		Exclusivity
						-		Surcharge for
								Partially
								Distant
								Stations
						-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group	ı	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Group	U.	\$	0.00	Base Rate Fee Secon		\$	0.00	
	ENTH S	SUBSCRIBER GROU		li	Y-EIGHTF	SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						-		
						-		
						-		
						<u> </u>		
Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third Group	o	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Date Bat E Title		_	0.00	B B (5 5	0			
Base Rate Fee Third Group	0	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the ba Enter here and in block 3, li			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007417								
				ATE FEES FOR EACI				
		SUBSCRIBER GROU	JP 0			SUBSCRIBER GROU	UP 0	9
COMMUNITY/ AREA			U	COMMUNITY/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	····				<u></u>			and Syndicated
	····							Exclusivity
								Surcharge
					<u></u>			for
	····							Partially Distant
								Stations
	<u></u>	-						
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
SEVE	NTY-FIRST	SUBSCRIBER GROU	JP	SEVENT	Y-SECONE	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
	····							
	····							
	····				<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
							<u> </u>	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add	the base rat	e fees for each subsc	riber aroun	as shown in the boxes	above			
Enter here and in bloo			J P		- "	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007417								
-	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP			
		SUBSCRIBER GRO		li		SUBSCRIBER GRO		9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٩		0	_	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
0,122 0.0.1	202	07.22 0.0.1	302	07.22 070.1	202	07.122.01.01.1	302	Base Rate Fee	
								and	
								Syndicated	
						<u> </u>		Exclusivity	
			. 				<u> </u>	Surcharge for	
			<u>-</u>		••••	-		Partially	
								Distant	
		_	<u> </u>			 		Stations	
			<u></u>						
			<u> </u>			-			
		H				-			
		•	<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 Seco	ond Group	\$	0.00		
SEVE	NTY-FIFTH	SUBSCRIBER GRO	UP	SEV	ENTY-SIXTH	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>		••••	- 			
	<u>.</u>		<u></u>			-			
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	····								
	····		<u></u>		••••	<u> </u>			
Total DSEs		_	0.00	Total DSEs	•		0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Foul	rth Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxe	s above.	\$			

CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 007417	Name
В	LOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	SEVENTH	SUBSCRIBER GRO				I SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<u> </u>		<u> </u>					Base Rate Fee
	<u></u>		<u></u>	·				Syndicated
	··		<u>-</u>					Exclusivity
								Surcharge
	<u> </u>	ļ	<u> </u>					for
		-	<u> </u>					Partially
	<u></u>		<u></u>	-	·····			Distant Stations
			<u></u>	1				Stations
			<u></u>					
	<u></u>		<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVEN	TY-NINTH	SUBSCRIBER GRO	UP	 	EIGHTIETH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>		<u></u>	-	·····			
			-					
			······································					
			<u> </u>					
								
	<u></u>		<u>-</u>		••••			
			<u></u>					
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
					•			
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007417	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	HTY-FIRST	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
	···	H		1	•••••	 		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	
EIGH	HTY-THIRD	SUBSCRIBER GRO	UP	EIGH	TY-FOURTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
	···		···		••••			
			<u></u>		<u>.</u>			
		-						
	···							
	···				·····			
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 Enter here and in bloc			criber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007417	Name
				ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO)UP	TT .		SUBSCRIBER GRO	UP	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>	Exclusivity Surcharge
	····	-	<u></u>					for
								Partially
	<u></u>	-						Distant
		_	<u></u>					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	
EIGHTY	-SEVENTH	SUBSCRIBER GRO	UP	EIG	HTY-EIGHTH	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>				<u> </u>	
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	····		<u></u>					
	<mark></mark>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	«	0.00	Gross Receipts Fou	rth Group	<u> </u>	0.00	
Oloss Necelbis IIIIIa	Cloup	\$	0.00	10000 Neceipio Fou	iai Gioup	\$	0.00	
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 OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007417								Name
				TE FEES FOR EACH				
		SUBSCRIBER GROU				I SUBSCRIBER GROU		9
COMMUNITY/ AREA	······································		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-			<u> </u>			and Syndicated
					<u></u>			Exclusivity
								Surcharge
					<u> </u>			for
					<u>-</u>			Partially Distant
		-			-			Stations
					<u></u>			
					<u> </u>			
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	
NIN	NETY-FIRST	SUBSCRIBER GROU	JP	NINET	Y-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-			<u></u>			
				-				
					<u></u>			
					<u></u>			
					<u></u>			
				·	<u>-</u>			
					<u> </u>			
Total DSEs			0.00	Total DSEs		II	0.00	
		0.00	Gross Receipts Fourt	n Group	\$	0.00		
	- 1				I ₂	-		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourti	າ Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007417							
				TE FEES FOR EACH				
NIN COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	11		1 SUBSCRIBER GRO	UP 0	9
COMMUNITY AREA	Α			COMMUNITY/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	·····		<u>.</u>		<u></u>			and Syndicated
					<u></u>			Exclusivity
								Surcharge
								for Partially
			·					Distant
								Stations
			<u>.</u>					
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GRO		II		SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			-					
			<u> </u>		<u></u>			
			<u>.</u>		<u></u>			
			<u>.</u>					
			<u>.</u>		<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fourt	th Group	\$	0.00		
Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fourt	:h Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007417								Name
				ATE FEES FOR EACH				
	SEVENTH	SUBSCRIBER GROU		TI .	ry-eighth	I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
	<u></u>				<u> </u>			Syndicated Exclusivity
	<u></u>							Surcharge
								for
	<u></u>	-						Partially
	<u> </u>	-						Distant Stations
	··							Stations
	<mark></mark>							
	<u> </u>							
Total DSEs	-		0.00	Total DSEs		H	0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	Froup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	TY-NINTH	SUBSCRIBER GROU		III	INDREDTH	I SUBSCRIBER GROU		
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>							I
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fourth	Group	\$	0.00		
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
	•	ı			•	-		
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007417							
				TE FEES FOR EAC			ID.	
ONE HUNDRI COMMUNITY/ AREA	ED FIRST	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		SUBSCRIBER GROU	UP 0	9
	T 50E			041.004		II oall olon		Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
					••••		····	and
			•				•••••	Syndicated
								Exclusivity
								Surcharge
								for
								Partially
			<u>.</u>					Distant Stations
			<u>.</u>					Stations
							····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRE	ED THIRD	SUBSCRIBER GRO	JP	ONE HUNDR	ED FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/				
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 C	Group	\$	0.00	Gross Receipts Foul	rth 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.	\$		

LEGAL NAME OF OWNI		LE SYSTEM:				S	YSTEM ID# 007417	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	ED FIFTH	SUBSCRIBER GRO		t e		SUBSCRIBER GROU	JP	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
						-		Surcharge
			<u> </u>			-		for Partially
			<u> </u>		••••			Distant
		-	·			-		Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED	SEVENTH	SUBSCRIBER GRO	UP	ONE HUNDF	RED EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_				 		
			<u> </u>			-		
			<u> </u>		••••	-		
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	···							
	•••••••••••••••••••••••••••••••••••••••							
	•••••••••••••••••••••••••••••••••••••••				•••••	1		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Four	rth Group	\$	0.00		
Base 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.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007417	Name
В	LOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDR	ED NINTH	SUBSCRIBER GRO	UP	ONE HUND	RED TENTH	I SUBSCRIBER GRO	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u>-</u>					Base Rate Fee
	···		<u></u>		·····			Syndicated
			······································		••••			Exclusivity
								Surcharge
			<u> </u>					for
		-	<u> </u>					Partially
			<u></u>		·····			Distant Stations
		-		·				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	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED E	LEVENTH	SUBSCRIBER GRO	UP	ONE HUNDRE	D TWELVTH	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>		•••••			
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			<u></u>					
			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007417							
E	SLOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	RTEENTH	SUBSCRIBER GRO		Ti .		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
0.122 0.011	302	07.22 0.011	302	07.22 0.011	202	07.22 0.0.1	302	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
	···					-		Partially
								Distant
								Stations
		-						
	···		•				••••	
Total DSEs		_	0.00	Total DSEs			0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First (\$	0.00	Base Rate Fee Seco		\$	0.00	
	IFTEENTH	SUBSCRIBER GRO		Ti .		SUBSCRIBER GROU	UP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>				<u> </u>	
	···							
		<u> </u>						
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	<u></u>		<u>.</u>			-		
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloo			criber group	as shown in the boxes	s above.	\$		

BLONE HUNDRED SEVEN COMMUNITY/ AREA		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EACH				
	TEENTH	SUBSCRIBER GROU		1				
COMMUNITY/ AREA				11		SUBSCRIBER GROU		9
			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					<u> </u>	-		and
						 		Syndicated Exclusivity
						 	<u></u>	Surcharge
								for
					<u></u>			Partially
					<u> </u>	-		Distant Stations
					<u> </u>	-		Stations
					<u> </u>			
					. 	-		
Total DSEs	!	-	0.00	Total DSEs		-!-!	0.00	
Gross Receipts First Gro	auc	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
					отты	-		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED NIN	TEENTH	SUBSCRIBER GROU		ii	WENTIETH	SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u> </u>	-		
					-	 	<u></u>	
					<u> </u>	-		
					<u> </u>	-		
					<u> </u>			
					. 	-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third Gr	oup.	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Dago Rate Fee Hill Gi	Jup	<u> </u>	0.00	Dasc rate i ee i ouiti	, Group	<u> </u>	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007417	Name
E	BLOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED TWE	NTY-FIRST	SUBSCRIBER GRO	UP	ONE HUNDRED TWE	NTY-SECOND	SUBSCRIBER GROUP)	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
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 TWE	NTY-THIRD	SUBSCRIBER GROUP	0	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	
					·····	-	····	
	·····				·····	-		
			······································		·····	-		
								
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		-						
		-						
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 the Enter here and in blood			criber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007417	Name
В	SLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	NTY-FIFTH	SUBSCRIBER GROU		††		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<u></u>		<u></u>	.				Base Rate Fee
		-	<u>-</u>					Syndicated
								Exclusivity
								Surcharge
			<u> </u>					for
			<u> </u>					Partially
			<u>-</u>					Distant Stations
	···		<u>-</u>		••••			Otations
			<u> </u>					
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	
NE HUNDRED TWENT	/-SEVENTH	SUBSCRIBER GROU	P	ONE HUNDRED TWO	ENTY-EIGHTH	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>		·····			
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			<u> </u>					
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007417	Name
В	SLOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED TWE	NTY-NINTH	SUBSCRIBER GROUP		ONE HUNDRE	ED THIRTIETH	SUBSCRIBER GROUP)	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
07.122.01011	202	57 LL 5.5.1	302	07.22 0.0.1	302	07.22 0.011	302	Base Rate Fee
							••••	and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
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 Second	ond Group	\$	0.00	
ONE HUNDRED TH	IRTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED THI	RTY-SECOND	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
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					•••••			
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third	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 Enter here and in bloo			riber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 007417	Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED THII	RTY-THIRD	SUBSCRIBER GROUP)	ONE HUNDRED THI	RTY-FOURTH	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
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	<mark></mark>		ļ					
	<mark></mark>							
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	Froup	\$	0.00	Base Rate Fee Second	ond Group	\$	0.00	
ONE HUNDRED THI	RTY-FIFTH	SUBSCRIBER GROUP)	ONE HUNDRED T	THIRTY-SIXTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 007417	Name
				ATE FEES FOR EACH				
ONE HUNDRED THIRT		SUBSCRIBER GROUP	0	ONE HUNDRED THIS COMMUNITY/ AREA		I SUBSCRIBER GROUP	0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
				-				and
		-			······································			Syndicated
								Exclusivity
					<u> </u>			Surcharge
		-						for
					<u> </u>		····	Partially Distant
					-			Stations
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Total DSEs			0.00	Total DSEs		<u> </u>	0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED TH	IRTY-NINTH	SUBSCRIBER GROUP		ONE HUNDRED	FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourtl	n Group	\$	0.00	
S. SOS MOSSIPLS TIMU	эгоар		3.00	Si soo rescipto i suiti	. С.оцр	*		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in blood			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 007417	Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED FO	RTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED FO	RTY-SECOND	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	٩		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
					<u></u>			Partially
								Distant
								Stations
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	<mark></mark>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	RTY-THIRD	SUBSCRIBER GROUP		it .		SUBSCRIBER GROUP	•	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Total DSEs	_			Total DSEs		-		
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 the Enter here and in block			riber group	as shown in the boxe	s above.	\$		
	, , , , ,	. (1-3)						

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 007417	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GROUP		TI .		H SUBSCRIBER GROUF		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
								Syndicated Exclusivity
								Surcharge
								for
					<u></u>			Partially 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	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROUP		II		H SUBSCRIBER GROUF		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	I Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 007417	Name
				ATE FEES FOR EACH				
		SUBSCRIBER GROU		II		I SUBSCRIBER GROU		9
COMMUNITY/ AREA	<i></i>		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
								Surcharge
								for
								Partially
		-						Distant
								Stations
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Total DSEs			0.00	Total DSEs		11	0.00	
Gross Receipts First	Croup	¢	0.00	Gross Receipts Secon	nd Croup	\$	0.00	
Gloss Receipts Filst	Group	\$	0.00	Gloss Receipts Secon	id Group	3	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED F	IFTY-FIRST	SUBSCRIBER GROU	JP	h		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007417	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		İ		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 Fee
		ļ						and
						-		Syndicated
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								Partially
								Distant
		-						Stations
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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 FI	FTY-FIFTH	SUBSCRIBER GRO	UP	ONE HUNDRED I	FIFTY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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		-				 		
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABI	LE SYSTEM:				S	YSTEM ID# 007417	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED FIFTY	-SEVENTH	SUBSCRIBER GROUP	•	ONE HUNDRED F	IFTY-EIGHTH	SUBSCRIBER GROUP)	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
								and
								Syndicated
								Exclusivity
			. <mark>.</mark>					Surcharge
	·	-						for
	·				·····			Partially Distant
	·		······································			-		Stations
			<u> </u>		••••	-		0
	<u>.</u>							
T D. D. D.			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-NINTH	SUBSCRIBER GROUP)	ONE HUNDE	RED SIXTIETH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٩		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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		-	•		•••••			
								
	 							
						-		
Total DSEs			0.00	Total DSEs			0.00	
	`roup	•			rth Crown	•		
Gross Receipts Third G	лоир	*	0.00	Gross Receipts Fou	rın Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABI	LE SYSTEM:	•			SY	STEM ID# 007417	Name
BL				TE FEES FOR EACH				
COMMUNITY/ AREA		SUBSCRIBER GROU		COMMUNITY/AREA		SUBSCRIBER GROU GOULA, ESCATAV		9
COMMONT IT AREA		OT KINGO, TOK		COMMONT IT AREA		COULA, LUCATAV		Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						-	<u></u>	Base Rate Fee
		-					<u></u>	and Syndicated
								Exclusivity
								Surcharge
								for
							<u>-</u>	Partially Distant
							<u>-</u>	Stations
			l				 	
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	roup	\$ 1,366,	597.00	Gross Receipts Secon	d Group	\$ 1,76	2,640.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second		\$	0.00	
		SUBSCRIBER GROU				SUBSCRIBER GROU		
COMMUNITY/ AREA	BILOXI	, HARRISON COL	JNIY	COMMUNITY/ AREA	HARRIS	SON CO (DIAMONE	DHEAD), G	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs	1	11	0.00	
Gross Receipts Third G							-	
	roup	\$ 1,740,	983.00	Gross Receipts Fourth	Group	\$ 2,96	2,718.00	
	Group	\$ 1,740,	983.00	Gross Receipts Fourth	Group	\$ 2,96	2,718.00	
Base Rate Fee Third G	·	\$ 1,740,	0.00	Base Rate Fee Fourth	·	\$ 2,96	0.00	
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CABLE ONE, INC.		LE SYSTEM:					007417	Name
В				TE FEES FOR EACH				
		SUBSCRIBER GRO				SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA	HANCO	OCK COUNTY (D	IAMOND	COMMUNITY/ AREA	VANCL	EAVE		Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicated
								Exclusivity
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			 		•••			
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First G	roup	\$ 31	5,300.00	Gross Receipts Seco	nd Group	\$	93,647.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO)UP		EIGHTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third (Froup	4	0.00	Base Rate Fee Fourt	h Group	•	0.00	
Suse Mate I de IIIII (o oup	\$	0.00	Dase Rate i ee Fourt	ii Gioup	\$	0.00	
				11				

Name	YSTEM ID# 007417	S			•	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
				TE FEES FOR EACH				BL
9		SUBSCRIBER GROU	TENTH			SUBSCRIBER GRO	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		-			<u> </u>			
Syndicated Exclusivity		-						
Surcharge		-						
for								
Partially								
Distant					<u> </u>			
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1	0.00			Total DSEs	0.00			Total 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
	TWELVTH SUBSCRIBER GROUP					SUBSCRIBER GRO	LEVENTH	EL
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	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	007417	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. 007417							
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	IRTEENTH			SUBSCRIBER GROU	RTEENTH		
Computat	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate									
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	\$ 0.00		d Groun	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G	
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	0.00	•	а огоар						
	0.00	\$		Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G	
	0.00		d Group	Base Rate Fee Secon		\$ SUBSCRIBER GROU			
	0.00	\$	d Group	Base Rate Fee Secon				FII	
	0.00	\$	d Group	Base Rate Fee Secon	JP			FII	
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TEENTH	FII COMMUNITY/ AREA	
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TEENTH	FII COMMUNITY/ AREA	
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TEENTH	FII COMMUNITY/ AREA	
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TEENTH	FII COMMUNITY/ AREA	
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TEENTH	FII COMMUNITY/ AREA	
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TEENTH	FII COMMUNITY/ AREA	
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TEENTH	FII COMMUNITY/ AREA	
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TEENTH	FII COMMUNITY/ AREA	
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TEENTH	FII COMMUNITY/ AREA	
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TEENTH	FII COMMUNITY/ AREA	
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TEENTH	COMMUNITY/ AREA	
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TEENTH	FII COMMUNITY/ AREA	
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TEENTH	FII OMMUNITY/ AREA	
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	TEENTH	CALL SIGN	
	0.00 JP	SUBSCRIBER GROU	d Group	Base Rate Fee Second SECOMMUNITY/ AREA CALL SIGN	DSE O.00	CALL SIGN	DSE	CALL SIGN CALL SIGN Total DSEs	
	O.00 JP O DSE	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second Sec	JP 0	SUBSCRIBER GROU	DSE	FII COMMUNITY/ AREA	

0 9 Computation	SUBSCRIBER GROU		TE FEES FOR EACH			OCK A: (BL	
O Computation DSE of Base Rate Ference and Syndicated Exclusivity Surcharge for Partially Distant		HTEENTH	İ	JP	CLIDCODIDED ODO			
Computation DSE of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant				1 SUBSCRIBER GROUP		NTEENTH		
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant		CALL SIGN DSE CALL SIGN DSE		0			COMMUNITY/ AREA	
and Syndicated Exclusivity Surcharge for Partially Distant		1	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Syndicated Exclusivity Surcharge for Partially Distant								
Exclusivity Surcharge for Partially Distant								
Surcharge for Partially Distant								
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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 Gr	
P	SUBSCRIBER GROU	VENTIETH	T\	JP	SUBSCRIBER GRO	NTEENTH	NIN	
<u>0</u>						COMMUNITY/ AREA		
DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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0.00			Total DOF-	0.00			Tatal DCFa	
0.00			Total DSEs	0.00			Total DSEs	
0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G	
0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	Broup	Base Rate Fee Third G	

NI	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. 907417							
		RIBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION O	LOCK A: (Bl
9	JP	SUBSCRIBER GROU	-SECOND	TWENT		SUBSCRIBER GRO	TY-FIRST	TWEN
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe		<u> </u>	<u>.</u>					
and								
Syndicated							<mark></mark>	
Exclusivity								
Surcharge	<u></u>					-		
for Partially		-						
Partially Distant	····		·····		······································		<u>-</u>	
Stations		-	·····				·	
2.3.10110			 					
	••••							
							<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	/-FOURTH	TWENT	UP	SUBSCRIBER GRO	TY-THIRD	TWEN
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	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	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	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	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	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	Total DSEs	DSE	CALL SIGN	DSE	CALL SIGN Total DSEs
		CALL SIGN				CALL SIGN		

LEGAL NAME OF OWN CABLE ONE, INC		0.0				_	3YSTEM ID# 007417	Name
				TE FEES FOR EAC				
	NTY-FIFTH	SUBSCRIBER GRO		iii		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 F
								and
								Syndicate
	···		····					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	
			0.00				0.00	
Base Rate Fee First (Froup	\$	0.00	Base Rate Fee Sec	ona Group	\$	0.00	
	-SEVENTH	SUBSCRIBER GRO		TWE				
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α	0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					·····			
	···				·····			
	<u></u>							
Total DSEs			0.00	Total DSEs			0.00	
	Crour	•	0.00		rth Crown	¢	0.00	
Gross Receipts Third	Эгоир	\$	0.00	Gross Receipts Fou	rar Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
						•	*	

	ID	IBER GROUP SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GROU		
9	0	SUBSCRIBER GROC	HIKHEIH	COMMUNITY/ AREA	0		1 1-INIIN 1 11	COMMUNITY/ AREA
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F	DOE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and								
Syndicate							<u> </u>	
Exclusivit								
Surcharge for		-						
Partially		-						
Distant								
Stations								
		-						
	<u></u>	-				-		
	<u> </u>	-	·····				<u>-</u>	
							<u>-</u>	
	0.00			Total DSEs	0.00			otal DSEs
	-			\$ 0.00				
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	ase Rate Fee First G
	JP	SUBSCRIBER GROU	'-SECOND	THIRTY	JP	SUBSCRIBER GRO	TY-FIRST	THIR
	COMMUNITY/ AREA0		0			OMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
			DOL	CALL SIGN				
		-	DOL	CALL SIGN				
			DOL	CALL SIGN				
			BOL	CALL SIGN				
				CALL SIGN				
				CALL SIGN				
				CALL SIGN				
				CALL SIGN				
				CALL SIGN				
				CALL SIGN				
				CALL SIGN				
				CALL SIGN				
				CALL SIGN				
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$			0.00	\$		otal DSEs

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. 907417								Name
				TE FEES FOR EACH				
	ry-THIRD	SUBSCRIBER GRO			Y-FOURTH	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
		-						Syndicated
						-		Exclusivity Surcharge
						-		for
		-				-		Partially
								Distant
								Stations
	<u> </u>							
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							<u> </u>	
	·		<u></u>		·		<u></u>	
Total DSEs	<u> </u>		0.00	Total DSEs		II.	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
THIR	TY-FIFTH	SUBSCRIBER GRO	UP	THIE				
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	1	Ш	0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
							$\overline{}$	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	\$		

	ID.					COMPUTATION OF		
9	0	SUBSCRIBER GROU	I-EIGHTH	COMMUNITY/ AREA	<u> 0</u>	SUBSCRIBER GRO		THIRTY-
Computati				OOMMONT 1774 KEST				
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I								
and								
Syndicate							····	
Exclusivit Surcharg								
for	·····					-		
Partially								
Distant								
Stations								
							<u></u>	
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	0.00	! !		Total DSEs	0.00			otal DSEs
	Gross Receipts Second Group \$ 0.00		\$ 0.00		2roun	ross Receipts First G		
	0.00	<u>*</u>	u Group	Gross Receipts Secon	0.00	4	Jioup	ilogo recocipio i iloi e
	0.00		u Group	Gross Receipts Secon	0.00	•	эгоир	roos reocipio i noi e
	0.00	\$		Base Rate Fee Secon	0.00	\$		
	0.00		d Group	Base Rate Fee Secon	0.00		Group	ase Rate Fee First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	ase Rate Fee First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Jase Rate Fee First G
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	Group RTY-NINTH	ase Rate Fee First G THIR OMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	Group RTY-NINTH	ase Rate Fee First G THIR OMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	Group RTY-NINTH	ase Rate Fee First G THIR OMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	Group RTY-NINTH	ase Rate Fee First G THIR OMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	Group RTY-NINTH	THIR
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	Group RTY-NINTH	ase Rate Fee First G THIR OMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	Group RTY-NINTH	THIR COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	Group RTY-NINTH	ase Rate Fee First G THIR OMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	Group RTY-NINTH	THIR
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	Group RTY-NINTH	Base Rate Fee First G THIR COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	Group RTY-NINTH	Base Rate Fee First G THIR COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	Group RTY-NINTH	THIR COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	Group RTY-NINTH	ase Rate Fee First G THIR OMMUNITY/ AREA
	O.00 JP O DSE	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 JP O DSE	\$ SUBSCRIBER GRO	Group RTY-NINTH	THIR COMMUNITY/ AREA CALL SIGN
	0.00 JP	SUBSCRIBER GROU	DSE	CALL SIGN CALL SIGN Total DSEs	0.00 JP	SUBSCRIBER GRO CALL SIGN	Broup RTY-NINTH DSE	THIR OMMUNITY/ AREA CALL SIGN otal DSEs
	O.00 JP O DSE	\$ SUBSCRIBER GROU	DSE	Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN	0.00 JP O DSE	\$ SUBSCRIBER GRO	Broup RTY-NINTH DSE	THIR COMMUNITY/ AREA CALL SIGN Total DSEs
	0.00 JP	SUBSCRIBER GROU	DSE Group	CALL SIGN CALL SIGN Total DSEs	0.00 JP	SUBSCRIBER GRO CALL SIGN	Broup RTY-NINTH DSE	Base Rate Fee First G THIR COMMUNITY/ AREA

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. 907417								Name
				TE FEES FOR EACH				
	TY-FIRST	SUBSCRIBER GRO			Y-SECOND	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
								Syndicated
			<u> </u>			 		Exclusivity Surcharge
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		-				-		Partially
								Distant
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			<u> </u>		·		<u> </u>	
Total DSEs	!!		0.00	Total DSEs		Ш	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
FOR1	Y-THIRD	SUBSCRIBER GRO	UP	FORT				
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				-		
			<u></u>			-		
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Total DSEs			0.00	Total DSEs	1		0.00	
Gross Receipts Third G	Froup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
		e fees for each subs	criber group	as shown in the boxes	above.	\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. 907417							
				TE FEES FOR EACH				
9	JP	SUBSCRIBER GROU	RTY-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 Surcharge								
for	<u> </u>	-				-	··	
Partially	····							
Distant								
Stations								
	<u></u>						<mark>.</mark>	
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secor	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	FOR ⁻	UP	SUBSCRIBER GRO	SEVENTH	FORTY-S
	0			COMMUNITY/ AREA	0		COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
				Total DSF-				Total DSFs
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third C

9 Computation		IBER GROUP	CLIDCCD			· · · · · · · · · · · · · · · · · · ·		
Computation				TE FEES FOR EACH		COMPUTATION OF		
Computation		SUBSCRIBER GROU	FIFTIETH	OOMAN BUT (177		SUBSCRIBER GRO	ΓΥ-NINTH	
•••	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated Exclusivity							·	
Surcharge	••••					H	-	
for								
Partially								
Distant								
Stations		-					·	
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		1						
-	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	-SECOND	FIFT	JP	SUBSCRIBER GRO	TY-FIRST	FIF
<u>) </u>	FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0				0			COMMUNITY/ AREA
····	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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		<u> </u>					<u>.</u>	
		-					<u> </u>	
		-				H	·	
_	0.00			Total DSEs	0.00			Total DSEs
_	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
	0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	Group	Base Rate Fee Third G

Name	9YSTEM ID# 007417											
9		SUBSCRIBER GROU	Y-FOURTH			SUBSCRIBER GROU	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		-										
Exclusivity Surcharge												
for		-										
Partially			······································									
Distant			•									
Stations						_						
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			<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	3ase Rate Fee First G				
	UP	SUBSCRIBER GROU	TY-SIXTH	FI	UP	SUBSCRIBER GROU	TY-FIFTH					
	UP 0	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIFTH					
		SUBSCRIBER GROU	TY-SIXTH			SUBSCRIBER GROU	TY-FIFTH					
	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				
	DSE			CALL SIGN	DSE			CALL SIGN				
	0 DSE		DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	0 DSE	CALL SIGN	DSE	CALL SIGN CALL SIGN Total DSEs				
	DSE		DSE	CALL SIGN	DSE		DSE	COMMUNITY/ AREA				

Name	YSTEM ID# 007417	S			•	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
				TE FEES FOR EACH				
٥	JP	SUBSCRIBER GROU	Y-EIGHTH	FIFT		SUBSCRIBER GRO	SEVENTH	FIFTY-S
9 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	<u> </u>	-						
Distant								
Stations								
							·	
		Į.						
	0.00			Total DSEs	0.00			Total 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	SIXTIETH		JP	SUBSCRIBER GRO	TY-NINTH	FIFT
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
					<u> </u>			
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		-					-	
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			l	F		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

	A: COMPLITATION (
01/11 1-1111	ST SUBSCRIBER GR		TE FEES FOR EAC		RIBER GROUP SUBSCRIBER GRO	UP	
OMMUNITY/ AREA	o. oobookiblik GR	0	COMMUNITY/ ARE		CODOUNDER GRO	0	9
							Computati
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate F
		·····				<u></u>	Syndicate
	····						Exclusivit
							Surcharg
							for
							Partially
							Distant
							Stations
						<u> </u>	
					-		
otal DSEs		0.00	Total DSEs			0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
	<u>·</u>						
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SIXTY-THII	RD SUBSCRIBER GR	OUP	SIX	(TY-FOURTH	SUBSCRIBER GRO	UP	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		·····		·····			
						<u></u>	
otal DSEs		0.00	Total DSEs			0.00	
	¢	0.00		urth Croup	¢	0.00	
ross Receipts Third Group	\$	0.00	Gross Receipts Fou	iiii Gioup	\$	0.00	

	R OF CABL	BLE SYSTEM:				S	YSTEM ID# 007417	Name
				TE FEES FOR EAC				
SIX	TY-FIFTH	H SUBSCRIBER GRO		S	IXTY-SIXTH	I SUBSCRIBER GRO	UP	Ω
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	-							Base Rate Fee
			·					and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
	ļļ							
	<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	
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
SIXTY-S	SEVENTH	H SUBSCRIBER GRO	UP	SIX	TY-EIGHTH	I SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	١		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
					th Group			
Total DSEs Gross Receipts Third G	Group	\$	0.00	Total DSEs Gross Receipts Fourt	th Group	\$	0.00	

Name	YSTEM ID# 007417					LE SYSTEM:		CABLE ONE, INC.	
	-			TE FEES FOR EACH					
9	JP	SUBSCRIBER GROU	VENTIETH	SE		SUBSCRIBER GRO	TY-NINTH	SIX	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe									
and		<u> </u>							
Syndicated		<u> </u>							
Exclusivity		<u> </u>	<u>.</u>						
Surcharge									
for		-					<u>-</u>		
Partially Distant	····	-	.						
Stations	<u></u>	-	· ·····				·-		
Glations	<u></u>		······				··		
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	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	/-SECOND	SEVENT	UP	SUBSCRIBER GRO	TY-FIRST	SEVEN	
	0		BSCRIBER GROUP SEVENTY-SECOND SUBSCRIBER COMMUNITY/ AREA		0		SEVENTY-FIRST SUBSCRIBER GRO DMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE		
		CALL SIGN		CALL SIGN		CALL SIGN		Total DSEs Gross Receipts Third C	

OUP O Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	SUBSCRIBER GROU				COMPUTATION OF	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
0 Computation DSE of Base Rate Fed and Syndicated Exclusivity Surcharge for Partially Distant		/-FOURTH	SEVENT				DI							
Computation DSE of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant				JP	SUBSCRIBER GROU	TY-THIRD	SEVEN ⁻							
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant			COMMUNITY/ AREA	0			COMMUNITY/ AREA							
and Syndicated Exclusivity Surcharge for Partially Distant	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN							
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Exclusivity Surcharge for Partially Distant														
Surcharge for Partially Distant														
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0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G							
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OUP	SUBSCRIBER GROU	NTY-SIXTH	SEVE	JP	SUBSCRIBER GROU	TY-FIFTH	SEVEN							
<u>0</u>			COMMUNITY/ AREA	0			COMMUNITY/ AREA							
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9	JP 0	SUBSCRIBER GROU	T-EIGHTH	SEVENT COMMUNITY/ AREA	<u> </u>	SUBSCRIBER GRO	SEVENIH	SEVENTY- COMMUNITY/ AREA
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	ase Rate Fee First G
	JP	SUBSCRIBER GROU	IGHTIETH	E	JP	SUBSCRIBER GRO	TY-NINTH	SEVEN
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	0.00			Total DSEs	0.00			Total DSEs
			Group				Group	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	otal DSEs

Name	YSTEM ID# 007417									
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9	JP	SUBSCRIBER GROU	-SECOND			SUBSCRIBER GRO	TY-FIRST			
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
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	JP	SUBSCRIBER GROU	/-FOURTH	EIGHT	UP	SUBSCRIBER GRO	TY-THIRD	EIGH'		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
				COMMONT IT AREA						
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		\$		CALL SIGN		CALL SIGN				

Name	YSTEM ID# 007417									
9		SUBSCRIBER GROU	HTY-SIXTH			SUBSCRIBER GRO	TY-FIFTH			
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
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Base Rate Fe										
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	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	EIGHT	UP	SUBSCRIBER GRO	SEVENTH	EIGHTY-S		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
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	0.00			Total DSFs	0.00			Total DSFs		
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	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G		

LEGAL NAME OF OWNE CABLE ONE, INC.		E SYSTEM:				S	YSTEM ID# 007417	Name
				TE FEES FOR EACH				
	ΓΥ-NINTH	SUBSCRIBER GRO			NINTIETH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
	·		. 			-		Syndicated Exclusivity
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
NINE	TY-FIRST	SUBSCRIBER GRO	UP	NINET	/-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
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Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	\$		

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9	0	SUBSCRIBER GROU	UUKIH	COMMUNITY/ AREA	<u>مر</u>	SUBSCRIBER GRO	: i t- i HIKD	NINE COMMUNITY/ AREA
Computati				COMMONT IT AREA				DOMINIONITITY AIREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and		-						
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	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	Group	ross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	ase Rate Fee First G
	0.00		d Group	Base Rate Fee Secon	0.00		Group	sase Rate Fee First G
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	0.00 JP 0	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon NINI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	Group ETY-FIFTH	Base Rate Fee First G NINE COMMUNITY/ AREA
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				TE FEES FOR EACH				
9		SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GRO	SEVENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First Gr
	IP	SUBSCRIBER GROU	NDREDTH	ONE HU	JP	SUBSCRIBER GRO	TY-NINTH	NINET
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	007417							CABLE ONE, INC.
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Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	JP 0	SUBSCRIBER GROU) FOURTH	ONE HUNDRE	JP 0	SUBSCRIBER GROU	ED THIRD	ONE HUNDRI
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	JP 0	SUBSCRIBER GROU) FOURTH	ONE HUNDRE	JP 0	SUBSCRIBER GROU	ED THIRD	ONE HUNDRI OMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU) FOURTH	ONE HUNDRE	JP 0	SUBSCRIBER GROU	ED THIRD	ONE HUNDRI OMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU) FOURTH	ONE HUNDRE	JP 0	SUBSCRIBER GROU	ED THIRD	ONE HUNDRI OMMUNITY/ AREA
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Name	YSTEM ID# 007417	S			-	_E SYSTEM:		CABLE ONE, INC.
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION O	LOCK A: (BL
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	0.00		•	Total DSEs	0.00		•	Total 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
	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
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	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

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:	•			S	YSTEM ID# 007417	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	RIBER GROUP		
ONE HUNDRE	D NINTH	SUBSCRIBER GRO	JP	ONE HUNDR	ED TENTH	SUBSCRIBER GROU	JP	^
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
		-						for
								Partially
								Distant
								Stations
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			·····			+	<u> </u>	
Total DSEs	<u> </u>		0.00	Total DSEs		Щ	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Secon		\$	0.00	
	EVENTH	SUBSCRIBER GRO		ONE HUNDRED				
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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			·····			++	<u> </u>	
Total DSEs	1		0.00	Total DSEs	1		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 a	above.	\$		

Name								
				TE FEES FOR EACH				
9	JP 0	SUBSCRIBER GROU	KIEENTH	ONE HUNDRED FOU COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	KIEENTH	ONE HUNDRED THII COMMUNITY/ AREA
Computation								
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			otal DSEs
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	0.00	\$		Base Rate Fee Secon	0.00	\$		
	0.00		d Group	Base Rate Fee Secon ONE HUNDRED S	0.00		Group	Base Rate Fee First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G
	0.00	\$	d Group	Base Rate Fee Secon ONE HUNDRED S	0.00	\$	Group	one Hundred Fl
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group XTEENTH	Base Rate Fee Secon ONE HUNDRED S COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	FTEENTH	ONE HUNDRED FI
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	0.00 JP 0	\$ SUBSCRIBER GROU	d Group XTEENTH	Base Rate Fee Secon ONE HUNDRED S COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	FTEENTH	ONE HUNDRED FI
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	0.00 JP 0	\$ SUBSCRIBER GROU	d Group XTEENTH	Base Rate Fee Secon ONE HUNDRED S COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	FTEENTH	ONE HUNDRED FI
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group XTEENTH	Base Rate Fee Secon ONE HUNDRED S COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	FTEENTH	ONE HUNDRED FICOMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group XTEENTH	Base Rate Fee Secon ONE HUNDRED S COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	FTEENTH	ONE HUNDRED FICOMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group XTEENTH	Base Rate Fee Secon ONE HUNDRED S COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	FTEENTH	Base Rate Fee First G ONE HUNDRED FI COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group XTEENTH	Base Rate Fee Secon ONE HUNDRED S COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	FTEENTH	Base Rate Fee First G ONE HUNDRED FI COMMUNITY/ AREA
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	0.00 JP 0	\$ SUBSCRIBER GROU	d Group XTEENTH	Base Rate Fee Secon ONE HUNDRED S COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	FTEENTH	ONE HUNDRED FICOMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group XTEENTH	Base Rate Fee Secon ONE HUNDRED S COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	FTEENTH	ONE HUNDRED FICOMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group XTEENTH	Base Rate Fee Secon ONE HUNDRED S COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	FTEENTH	ONE HUNDRED FI COMMUNITY/ AREA CALL SIGN
	O.00 JP O DSE	\$ SUBSCRIBER GROU	DSE	Base Rate Fee Secon ONE HUNDRED S COMMUNITY/ AREA CALL SIGN	0.00 JP OSE	SUBSCRIBER GROU	FTEENTH DSE	ONE HUNDRED FI COMMUNITY/ AREA CALL SIGN Total DSEs
	0.00 JP	SUBSCRIBER GROU	DSE	Base Rate Fee Secon ONE HUNDRED S COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 JP	SUBSCRIBER GROU	FTEENTH DSE	ONE HUNDRED FI COMMUNITY/ AREA CALL SIGN Fotal DSEs
	0.00 JP	SUBSCRIBER GROU	d Group XTEENTH DSE Group	Base Rate Fee Secon ONE HUNDRED S COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 JP	SUBSCRIBER GROU	FTEENTH DSE Group	Base Rate Fee First G ONE HUNDRED FI COMMUNITY/ AREA

	YSTEM ID# 007417					LE SYSTEM:		CABLE ONE, INC.
		IBER GROUP	SUBSCRI	TE FEES FOR EACH				
•		SUBSCRIBER GROUP	GHTEENTH	ONE HUNDRED E		SUBSCRIBER GROUP	ENTEENTH	ONE HUNDRED SEVE
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00		•	Total DSEs
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	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First G
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	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
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	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
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	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0 DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED T COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	ONE HUNDRED NIN

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_ U		SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED TWENT		SUBSCRIBER GROUP	NTY-FIRST	ONE HUNDRED TWEN
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
****	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I								
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)	0.00			Total DSEs	0.00			Total DSEs
<u>) </u>	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	3ase Rate Fee First Gr
		SUBSCRIBER GROUP	Y-FOURTH	ONE HUNDRED TWENT	l	SUBSCRIBER GROUP	ITY-THIRD	ONE HUNDRED TWEN
0	0			COMMUNITY/ AREA	0		IMUNITY/ AREA	
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	0.00			Total DSEs	0.00			Γotal DSEs
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_		\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G
_	0.00				 1			

LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABL	E SYSTEM:				S'	YSTEM ID# 007417	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	RIBER GROUP		
ONE HUNDRED TWEN	TY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED TWE	NTY-SIXTH	SUBSCRIBER GROUP		^
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-						Syndicated
						-		Exclusivity
					-	-		Surcharge
						-		for
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Total DSEs			0.00	Total DSEs		11	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	
NE HUNDRED TWENTY-	SEVENTH	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	
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Total DSEs			0.00	Total DSEs			0.00	
TOTAL DOES				TOTAL DOES		-	_	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
eipts Third G Fee Third G	oup	\$	0.00		Group	\$ \$		

Name	YSTEM ID# 007417	S				.E SYSTEM:		CABLE ONE, INC.
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (BL
^		SUBSCRIBER GROUP	THIRTIETH	ONE HUNDRED)	SUBSCRIBER GROUP	ITY-NINTH	ONE HUNDRED TWEN
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
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	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	Base Rate Fee First Gr
		SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIRT)	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIS
	COMMUNITY/ AREA 0				0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						-		
		Ц				`		
	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# 007417					LE SYSTEM:	ER OF CABL	CABLE ONE, INC.
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (Bl
0		SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED THIR		SUBSCRIBER GROUP	RTY-THIRD	ONE HUNDRED THIS
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
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Exclusivity								
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	0.00			Total DSEs	0.00		<u> </u>	Total DSEs
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Froup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THII	UP	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED THIR
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THII COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	RTY-FIFTH	
		SUBSCRIBER GROU	DSE			SUBSCRIBER GROU	TY-FIFTH	
	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
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	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE		DSE	CALL SIGN	DSE		DSE	CALL SIGN

Name	YSTEM ID# 007417						K OF CABI	CABLE ONE, INC.
		IBER GROUP	SUBSCR	TE FEES FOR EACH				
9		SUBSCRIBER GROUP	TY-EIGHTH			SUBSCRIBER GROUP	SEVENTH	ONE HUNDRED THIRTY
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F	302	07.22 0.0.1	302	0,122 0.0.1	302	07.122 0.011	202	07.122 0.011
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Otations								
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First G
	IP	SUBSCRIBER GROU	FORTIETH	ONE HUNDRED	JP	SUBSCRIBER GROU	Y-NINTH	ONE HUNDRED THIR
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	505	CALL SIGN				CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	07 (22 01011		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	07.22 0.0.1		
	DSE	CALL GIGIN	DSE	CALL SIGN	DSE			
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	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
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	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
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	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
		CALL SIGN	DSE					Total DSEs
	0.00			Total DSEs	0.00			Total DSEs
		\$				\$	roup	Total DSEs Gross Receipts Third G

	007417	S			·	LE SYSTEM:	R OF CABL	LEGAL NAME OF OWNER CABLE ONE, INC.
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
		SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED FORT		SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED FOR
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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_	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
		SUBSCRIBER GROUP	Y-FOURTH	ONE HUNDRED FOR		SUBSCRIBER GROUP	TY-THIRD	ONE HUNDRED FOR
<u></u>	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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					LE SYSTEM:	R OF CABL	CABLE ONE, INC.
1	IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: 0	BL
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DSE of	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FOR		SUBSCRIBER GROUP	SEVENTH	ONE HUNDRED FORTY-
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	YSTEM ID# 007417	S			•	LE SYSTEM:	R OF CABL	LEGAL NAME OF OWNER CABLE ONE, INC.		
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL		
_ ^	JP	SUBSCRIBER GROU	ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP ONE HUNDRED FIFTIETH SUBSCRIBE							
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Name	YSTEM ID# 007417	S				LE SYSTEM:		CABLE ONE, INC.	
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LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 007417	Name
				TE FEES FOR EACH	H SUBSCF	RIBER GROUP		
ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP								0
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Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIFT	Y-NINTH	SUBSCRIBER GRO	UP	ONE HUNDRED	SIXTIETH	SUBSCRIBER GRO	UP	
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		T				<u> *</u>	3.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	\$		

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LEGAL NAME OF OWNER OF CARLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 007417 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 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

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FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CARLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. THIRTEENTH SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group FIFTEENTH SUBSCRIBER GROUP SIXTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE 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 CARLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 007417 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 FORTY-NINTH SUBSCRIBER GROUP ONE HUNDRED FIFTIETH 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-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-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 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 CABLE ONE, INC. 007417 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 CARLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 007417 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 First Group 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