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 Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the business of the cable system If there were different owners during the accounting period, only the owner on the last day of the accounting period should submi a single statement of account and royalty fee payment covering the entire accounting perion Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. 007462 LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM								
	CABLE ONE,, INC.								
				00746220181					
				007462 2018/1					
	210 E. EARLL DRIVE PHOENIX, AZ 85012-2626								
С	INSTRUCTIONS: In line 1, give any business or trade names used to it names already appear in space B. In line 2, give the mailing address of	•							
System	1 IDENTIFICATION OF CABLE SYSTEM:	<u> </u>		·					
	MAILING ADDRESS OF CABLE SYSTEM: 900 STEUBEN STREET ((Number, street, rural route, apartment, or suite number) SIOUX CITY, IA 51101 ((City, town, state, zip code)								
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and rel	ist on page 1b					
Area	with all communities.	T		_					
Served First	SIOUX CITY	STATE							
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					
Janipie	Alliance	MD	В	2					
	Gering	MD	В	3					

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

-ORM SA3E. PAGE 1b.			• · · · · · · · · · · · · · · · · · · ·								
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#								
CABLE ONE,, INC.			007462								
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.											
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.											
If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).											
When reporting the carriage of television broadcast stations on a community-by-commu channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns by	a subscriber grou										
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#								
SIOUX CITY	IA	В	3	First							
DAKOTA CITY	NE	Α	1	Community							
DAKOTA COUNTY	NE	A	2								
DAKOTA DUNES	SD	В	3								
NORTH SIOUX CITY	SD	В	3								
SERGEANT BLUFF	IA	В	3	See instructions for							
SOUTH SIOUX CITY	NE	Α	2	additional information							
				on alphabetization.							
				Add rows as necessary.							

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE,, INC.

SYSTEM ID#

007462

Ε

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLC	OCK 1		BLOCK 2					
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE		
Residential: • Service to first set	10,917	\$	40.00	BULK RESIDENTIAL	2,497	25.00-43.00		
Service to additional set(s) FM radio (if separate rate)	19,125							
Motel, hotel	722	\$	9.00					
Commercial	451	\$	72.00					
Converter		ļ						
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.

	BLOCK 2				
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
Pay cable	10.00-17.00	Motel, hotel		SPANISH TIER	\$ 3.00
 Pay cable—add'l channel 		Commercial		DIGITAL VALUE PAK	\$ 14.00
Fire protection		Pay cable		TIER 1	\$ 37.00
•Burglar protection		 Pay cable-add'l channel 		DIG CONVERTER	0.00-15.00
Installation: Residential		Fire protection			
First set	30.00-90.00	Burglar protection			
 Additional set(s) 	30.00-60.00	Other services:			
FM radio (if separate rate)		Reconnect	\$ 90.00		
Converter		Disconnect			
		Outlet relocation			
		Move to new address	\$ 30.00		

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007462 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) KCAU-1 9 N-M No SIOUX CITY, IA **KETV** 20 Ν Yes 0 OMAHA, NE See instructions for additional information KMEG-1 39 N-M No SIOUX CITY, IA on alphabetization. I-M No KMEG-3 39 SIOUX CITY, IA KPTH-1 49 No I-M SIOUX CITY, IA KPTH-2 49 I-M No SIOUX CITY, IA KPTH-3 49 I-M No SIOUX CITY, IA KSIN-1 28 E-M No SIOUX CITY, IA KSIN-2 28 E-M No SIOUX CITY, IA KSIN-3 28 E-M No SIOUX CITY, IA KSXC-LP 5 ı No SOUTH SIOUX CITY, NE **KTIV** 41 N-M No SIOUX CITY, IA KTIV-2 41 I-M No SIOUX CITY, IA KTIV-3 41 I-M No SIOUX CITY, IA **KUSD** 34 E-M No **VERMILLION. SD WOWT** Ν 22 Yes 0 OMAHA, NE

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007462 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 CONT'D 1. CALL 2. B'CAST 3 TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL OF CARRIAGE SIGN (Yes or No) NUMBER STATION (If Distant) KCAU-Simul 9 N-M No SIOUX CITY, IA KMEG-Simul 39 N-M No SIOUX CITY, IA See instructions for additional information KTIV-Simul 41 N-M No SIOUX CITY, IA on alphabetization. No KSIN-Simul 28 E-M SIOUX CITY, IA No **KPTH-Simul** 49 I-M SIOUX CITY, IA KTIV-2-Simul 41 I-M No SIOUX CITY, IA **KUON-1** 12 E-M Yes LINCOLN, NE 0 **KUON-2** LINCOLN, NE 12 E-M Yes 0

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE,, INC.

SYSTEM ID#
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	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
KCAU-1	9	N-M	No		SIOUX CITY, IA
KCAU-SIMUL	9	N-M	No		SIOUX CITY, IA
KMEG-1	39	N-M	No		SIOUX CITY, IA
KMEG-SIMUL	39	N-M	No		SIOUX CITY, IA
KPTH-1	49	I-M	No		SIOUX CITY, IA
KPTH-SIMUL	49	I-M	No		SIOUX CITY, IA
KSIN-1	28	E-M	No		SIOUX CITY, IA
KSIN-2	28	E-M	No		SIOUX CITY, IA
KSIN-3	28	E-M	No		SIOUX CITY, IA
KSXC-LP	5	I	No		SOUTH SIOUX CITY, NE
KTIV	41	N-M	No		SIOUX CITY, IA
KTIV-2	41	I-M	No		SIOUX CITY, IA
KTIV-2-SIMUL	41	I-M	No		SIOUX CITY, IA
KTIV-SIMUL	41	N-M	No		SIOUX CITY, IA
KPTH-2	49	I-M	No		SIOUX CITY, IA
KPTH-3	49	I-M	No		SIOUX CITY, IA

G

Primary Transmitters: Television

FORM SA3E. PAGE 3.					ACCOUNTI	ING PERIOD: 2018
LEGAL NAME OF OW	/NER OF CABLE S	YSTEM:			SYSTEM ID#	
CABLE ONE,,	INC.				007462	Name
PRIMARY TRANSMIT	TERS: TELEVISION	ON				
In General: In space carried by your cable FCC rules and regular 76.59(d)(2) and (4), 7 substitute Basis basis under specific F Do not list the static station was carried List the station here basis. For further in the paper SA3 tolumn 1: List ea each multicast stream as "WET WETA-simulcast). Column 2: Give ti its community of licer on which your cable Column 3: Indicateducational station, to (for independent mulfor the meaning of the Column 5: If you cable system carried the distant star For the retransmis of a written agreement the cable system and tion "E" (exempt). Fo	G, identify ever system during to a system. With a system carried to a	y television st he accounting in June 24, 19 4), or 76.63 (in the next respect to any ations, or auth G—but do listitute basis. ace I, if the stateming substitute basis. Sign. Do not a ha station ac streams must ber the FCC has, WRC is Chine station. Whether the station. Whether the station acque (v) of the est in column during the me basis becar multicast stream or before Jumitter or an acquenter "E". If	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations to report origination cording to its own be reported in the referring to the reported in the report origination cording to its own be reported in the report origination cording to its own be reported in the reported i	t (1) stations carried to carriage of certifice (2) and (4))]; as a carried by your one Special Statement of the Special Spec	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
Column 6: Give t	he location of ea	ch station. Fo	or U.S. stations,	list the community	y to which the station is licensed by the n which the station is identified.	
Note: If you are utiliz				•		
		CHANN	EL LINE-UP	AB CONT'D		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
KTIV-3	41	I-M	No		SIOUX CITY, IA	
KSIN-Simul	28	E-M	No		SIOUX CITY, IA	
				<u>.</u>		
				<u>.</u>		
				<u>.</u>		
					ļ	

FORM SA3E. PAGE 3.					Account	14G 1 EMIOD: 2010/1
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Nama
CABLE ONE,, I	NC.				007462	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you had cable system carried the cable system carried the cable system and attion "E" (exempt). For explanation of these the Column 6: Give the	G, identify even yystem during the one in effect or in each case we enter effect or in effect or	y television stree accounting in June 24, 194, or 76.63 (in d in the next present to any attions, or auth G—but do listitute basis. In the statement of the station acceptable with the local service of the station. Whether the station whether the station. Whether the station and uning the service of the size of the local service of the local se	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations for izations: It it in space I (the referring to station was carried that basis station report origination cording to its own be reported in containing the reported in the report in the reported in the reported in the reported in the reported	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on a program services the television statification, D.C. This work station, an indefor network multicar "E-M" (for noncontions located in the special statement of the	es". If not, enter "No". For an expaper SA3 form. It stating the basis on which your ering "LAC" if your cable system capacity. It payment because it is the subject stem or an association representing y transmitter, enter the designation in the paper SA3 form. It to which the station is licensed by the which the station is identifed.	G Primary Transmitters: Television
		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	

FORM SA3E. PAGE 3.					Account	NG 1 EMOD. 2010/1
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
CABLE ONE,, I	NC.				007462	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	G, identify even during the system during the solutions in effect on Sis, as explained stations: With a CC rules, regular here in space only on a subsum and also in spatformation concern. The station's call associated with each case with the in each case with the ineach case with t	y television standard and the accounting of June 24, 194, or 76.63 (in did in the next prespect to any ations, or auth G—but do listitute basis. In the standard area of the station acceptance of the station acceptance of the station acceptance of the station. In the station acceptance of the station acceptance of the station. In the station acceptance of the station of the station of the local service of the station of the station. In the station of the station of the station of the station. For the station of the station of the station of the station of the station. For one, if any, giving the station of the stat	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations for izations: It it in space I (the referring to station was carried that basis station report origination cording to its own the reported in containing the reported in the repor	(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 services the television station of the television of the	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your ering "LAC" if your cable system capacity. expaper says to be subject estem or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. et to which the station is licensed by the enter says form.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	AD		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					ACCOUNT	NG PERIOD: 2018/1	
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name	
CABLE ONE,, I					007462		
carried by your cable s	G, identify every system during the	y television sta he accounting n June 24, 19	period, except 81, permitting th	(1) stations carrie e carriage of certa	and low power television stations) d only on a part-time basis under ain network programs [sections	G Primary	
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 FC	CC rules, regula here in space	ations, or auth G—but do list	orizations:	, ,	ent and Program Log)—if the		
basis. For further in in the paper SA3 fo	formation conc rm.	erning substit	ute basis station	ns, see page (v) of	ute basis and also on some other f the general instructions located		
each multicast stream cast stream as "WETA	associated with	h a station acc	cording to its over	er-the-air designat	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example		
			-		on for broadcasting over-the-air in may be different from the channel		
	in each case v	whether the st			pendent station, or a noncommercial ast), "I" (for independent), "I-M"		
(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	r "E-M" (for nonco ctions located in th	mmercial educational multicast). ne paper SA3 form.		
planation of local servi	ce area, see pa	age (v) of the	general instructi	ons located in the	s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your		
cable system carried the carried the distant state	ne distant statio ion on a part-tir	on during the a	accounting perions ause of lack of a	od. Indicate by ent ctivated channel o	ering "LAC" if your cable system		
of a written agreement the cable system and a tion "E" (exempt). For explanation of these th	entered into or a primary trans simulcasts, also aree categories	n or before Ju mitter or an as o enter "E". If , see page (v)	ine 30, 2009, be ssociation repre you carried the of the general i	tween a cable system in a cabl	stem or an association representing by transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form.		
	Canadian statio	ns, if any, give	e the name of th	ne community with	to which the station is licensed by the which the station is identifed. channel line-up.		
	<u> </u>	CHANN	EL LINE-UP	AE	<u> </u>		
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)			

FORM SA3E. PAGE 3.					Account	NG 1 EMOD. 2010/1
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Namo
CABLE ONE,, I	NC.				007462	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76	system during the ons in effect or i.61(e)(2) and (he accounting n June 24, 198 4), or 76.63 (r	period, except 81, permitting th referring to 76.6	(1) stations carrie	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary Transmitters:
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. 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 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" i						
Note: If you are utilizing				•	which the station is identifed. channel line-up.	
	T	CHANN	EL LINE-UP	AF		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					Account	14G 1 EMOD: 2010/1
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	N
CABLE ONE,, I	NC.				007462	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you had cable system carried the cable system carried the cable system and attion "E" (exempt). For explanation of these the Column 6: Give the	G, identify even dystem during the long in effect or is, as explaine stations: With a CC rules, regular here in space only on a substand also in spatformation concern. In station's call associated with example stem carried the in each case we entering the least), "E" (for not example is terms, see pation is outside ce area, see pation on a part-ting ion of a distant entered into on a primary transisting in each casts, also a primary transisting in each case, also a primary transisting in each categories e location of each canadian station can a part-ting ion of a distant entered into on a primary transisting in each categories e location of each canadian station can a part-ting ion of a distant entered into on a primary transisting in each categories e location of each canadian station in effect of the categories e location of each canadian station in each categories e location of each categories explains in effect of the categories explains the categories explains in each categories explains i	y television stree accounting in June 24, 194, or 76.63 (in d in the next present to any attions, or auth G—but do listitute basis. In the statement of the station acceptable with the local service of the station. Whether the station whether the station. Whether the station and uning the service of the size of the local service of the local se	period, except 81, permitting the referring to 76.6 paragraph. of distant stations orizations: tit in space I (the stion was carried the basis station was carried to the stion was carried to the period of the reported in origination of the period of the stion is a network, "N-M" (I educational), or egeneral instruct of the stion was entirely in the stion of the space of lack of a seam that is not some 30, 2009, be sesociation repression of the general in the loft the general in the	(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 of the television of the telev	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your ering "LAC" if your cable system capacity. expaper says to be subject estem or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. expected to which the station is licensed by the expanding says the station is identified.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	AG		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	U. LOCATION OF STATION	
	NUMBER	STATION	((If Distant)		
					ļ	
					<u> </u>	
					ļ	
	<u> </u>				ļ	
	<u> </u>				ļ	
	ļ				ļ	

FORM SA3E. PAGE 3.					ACCOUNT	NG PERIOD: 2018/1
LEGAL NAME OF OWN	IER OF CABLE SY	YSTEM:			SYSTEM ID#	Name
CABLE ONE,, I	NC.				007462	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat	system during to ions in effect or	he accounting n June 24, 19	period, except 81, permitting th	(1) stations carrie	and low power television stations) d only on a part-time basis under ain network programs [sections	G
substitute program bas	sis, as explaine	d in the next	paragraph.	. , , , , , , , , , , , , , , , , , , ,	and (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
basis under specifc FC	CC rules, regula	ations, or auth	orizations:		ent and Program Log)—if the	Television
· ·	and also in spa	ace I, if the sta			ute basis and also on some other f the general instructions located	
	ch station's call	•		. •	s such as HBO, ESPN, etc. Identify tion. For example, report multi-	
cast stream as "WETA WETA-simulcast).	-2". Simulcast	streams must	be reported in o	column 1 (list each	n stream separately; for example	
	se. For example	e, WRC is Cha	-		on for broadcasting over-the-air in may be different from the channel	
Column 3: Indicate	in each case v	whether the st			ependent station, or a noncommercial	
(for independent multion	cast), "E" (for n	oncommercia	l educational), o	r "E-M" (for nonco	ast), "I" (for independent), "I-M" ommercial educational multicast).	
For the meaning of the Column 4: If the st					ne paper SA3 form. es". If not, enter "No". For an ex-	
planation of local servi	ce area, see pa	age (v) of the	general instructi	ions located in the	paper SA3 form.	
					stating the basis on which your ering "LAC" if your cable system	
carried the distant stat	ion on a part-tii	me basis beca	ause of lack of a	ctivated channel o	capacity.	
					payment because it is the subject stem or an association representing	
the cable system and	a primary trans	mitter or an as	ssociation repre	senting the primar	ry transmitter, enter the designa-	
` ' '			•	•	her basis, enter "O." For a further d in the paper SA3 form.	
					to which the station is licensed by the	
FCC. For Mexican or (Note: If you are utilizing		. ,		•	which the station is identifed.	
			EL 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	(11 1 1,	(If Distant)		
	•					
	 				ļ	
	<u> </u>					

CABLE ONE,, INC. PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations are carried by your cable system during the accounting period, except (1) stations carried FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cabbasis 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 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. For further information concerning substitute basis stations, see page (v) of the inthe paper SA3 form. Column 1: List each station's call sign. Do not report origination program services seach multicast stream associated with a station according to its over-the-air designatio cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each swETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station its community of license. For example, WRC is Channel 4 in Washington, D.C. This may on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent.	only on a part-time basis under network programs [sections d (2) certain stations carried on a cole system on a substitute program that and Program Log)—if the see basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multistream separately; for example on for broadcasting over-the-air in	Rame G Primary Transmitters Television
In General: In space G, identify every television station (including translator stations at carried by your cable system during the accounting period, except (1) stations carried FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cabbasis 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 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. For further information concerning substitute basis stations, see page (v) of the inthe paper SA3 form. Column 1: List each station's call sign. Do not report origination program services seach multicast stream associated with a station according to its over-the-air designatio cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each station as the stream as "WETA-2". Simulcast streams must be reported in column 1 (list each station as Column 2: Give the channel number the FCC has assigned to the television station its community of license. For example, WRC is Channel 4 in Washington, D.C. This may on which your cable system carried the station.	only on a part-time basis under network programs [sections d (2) certain stations carried on a cole system on a substitute program that and Program Log)—if the see basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multistream separately; for example on for broadcasting over-the-air in	Primary Transmitters
carried by your cable system during the accounting period, except (1) stations carried FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cabbasis 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 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. For further information concerning substitute basis stations, see page (v) of the inthe paper SA3 form. Column 1: List each station's call sign. Do not report origination program services seach multicast stream associated with a station according to its over-the-air designatio cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each swETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station its community of license. For example, WRC is Channel 4 in Washington, D.C. This may on which your cable system carried the station.	only on a part-time basis under network programs [sections d (2) certain stations carried on a cole system on a substitute program that and Program Log)—if the see basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multistream separately; for example on for broadcasting over-the-air in	Primary Transmitters
 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 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. For further information concerning substitute basis stations, see page (v) of the inthe paper SA3 form. Column 1: List each station's call sign. Do not report origination program services seach multicast stream associated with a station according to its over-the-air designatio cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each swet-A-simulcast). Column 2: Give the channel number the FCC has assigned to the television station its community of license. For example, WRC is Channel 4 in Washington, D.C. This may on which your cable system carried the station. 	t and Program Log)—if the e basis and also on some other he general instructions located such as HBO, ESPN, etc. Identify en. For example, report multi- stream separately; for example n for broadcasting over-the-air in	Television
	andant station, or a nancommercial	
educational station, by entering the letter "N" (for network), "N-M" (for network multicas (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncom For the meaning of these terms, see page (v) of the general instructions located in the Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes" planation of local service area, see page (v) of the general instructions located in the p Column 5: If you have entered "Yes" in column 4, you must complete column 5, state cable system carried the distant station during the accounting period. Indicate by enter carried the distant station on a part-time basis because of lack of activated channel cap For the retransmission of a distant multicast stream that is not subject to a royalty p of a written agreement entered into on or before June 30, 2009, between a cable system cable system and a primary transmitter or an association representing the primary tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any othe explanation of these three categories, see page (v) of the general instructions located in Column 6: Give the location of each station. For U.S. stations, list the community to FCC. For Mexican or Canadian stations, if any, give the name of the community with w Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel in the community with w Note:	mercial educational multicast). paper SA3 form. If not, enter "No". For an example SA3 form. ating the basis on which your ring "LAC" if your cable system pacity. It is the subject em or an association representing transmitter, enter the designation the paper SA3 form. If which the station is licensed by the which the station is identifed.	
CHANNEL LINE-UP AI		
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6 SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER STATION (If Distant)	S. LOCATION OF STATION	

FORM SA3E. PAGE 3.						10 1 EMIOD: 2010)
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
CABLE ONE,, I					007462	
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,	G, identify even system during the ions in effect or 6.61(e)(2) and (sis, as explaine Stations: With I CC rules, regular here in space only on a subs and also in spa	y television strange accounting in June 24, 1944), or 76.63 (if the state of the st	period, except 81, permitting th referring to 76.6 paragraph. distant stations orizations: t it in space I (th tion was carried	(1) stations carried carriage of certa 1(e)(2) and (4))]; as carried by your case Special Statement both on a substitution of the carried by the statement but on a substitution of the carried but of the carried	and low power television stations) Id only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other f the general instructions located	G Primary Transmitters: Television
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 sty planation of local servi Column 5: If you h cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these th Column 6: Give the	ch station's call associated with associated with associated with a case of the case of th	n a station accepted as the station accepted as the station. Whether the station accepted as the stat	cording to its ovibe reported in order to as assigned to a sand ation is a network, "N-M" (I educational), order to a sand in	er-the-air designar column 1 (list each the television stati ington, D.C. This ork station, an indefor network multic or "E-M" (for noncoctions located in the distant"), enter "Yes in the mplete column 5, so do. Indicate by entictivated channel or distinguished to a royalty extween a cable system of the primary channel on any of instructions locate list the community with	es". If not, enter "No". For an expaper SA3 form. stating the basis on which your dering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing by transmitter, enter the designation the paper SA3 form. To which the station is licensed by the which the station is identifed.	
,		•	EL LINE-UP	<u> </u>		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
				 	 	

FORM SA3E. PAGE 3.				ACCOUNTI	NG PERIOD: 2018/1
LEGAL NAME OF OWNER OF CABLE SY	YSTEM:			SYSTEM ID#	Name
CABLE ONE,, INC.				007462	
PRIMARY TRANSMITTERS: TELEVISION	ON				
In General: In space G, identify ever carried by your cable system during t FCC rules and regulations in effect or	he accounting n June 24, 19	period, except 81, permitting th	(1) stations carrie e carriage of certa	d only on a part-time basis under ain network programs [sections	G
76.59(d)(2) and (4), 76.61(e)(2) and (substitute program basis, as explaine Substitute Basis Stations: With	d in the next	paragraph.		able system on a substitute program	Primary Transmitters: Television
basis under specifc FCC rules, regular Do not list the station here in space	ations, or auth	orizations:	, ,	,	relevicien
 station was carried only on a subs List the station here, and also in spabasis. For further information cond 	ace I, if the sta				
each multicast stream associated wit	h a station ac	cording to its over	er-the-air designat	• • •	
cast stream as "WETA-2". Simulcast WETA-simulcast). Column 2: Give the channel numl		•	`	, ,,	
its community of license. For example on which your cable system carried the	e, WRC is Chane station.	annel 4 in Wash	ington, D.C. This	may be different from the channel	
Column 3: Indicate in each case we deducational station, by entering the least (for independent multicast), "E" (for n	etter "N" (for n	etwork), "N-M" (for network multic		
For the meaning of these terms, see Column 4: If the station is outside	page (v) of the	e general instruc	ctions located in th	e paper SA3 form.	
planation of local service area, see pa Column 5: If you have entered "Y	es" in column	4, you must cor	mplete column 5, s	stating the basis on which your	
cable system carried the distant static carried the distant station on a part-tin For the retransmission of a distant	me basis beca	ause of lack of a	ctivated channel of	,	
of a written agreement entered into o the cable system and a primary trans	n or before Ju	ine 30, 2009, be	tween a cable sys	tem or an association representing	
tion "E" (exempt). For simulcasts, also explanation of these three categories	, see page (v	of the general i	instructions locate		
FCC. For Mexican or Canadian static Note: If you are utilizing multiple chai	ns, if any, giv	e the name of th	ne community with	which the station is identifed.	
	CHANN	EL LINE-UP	AK	·	
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)		
NOWBER	STATION		(If Distant)		
					

FORM SA3E. PAGE 3.					ACCOUNT	NG PERIOD: 2018/1
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name
CABLE ONE,, I	NC.				007462	Name
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat	system during to ions in effect or	he accounting n June 24, 19	g period, except 81, permitting th	(1) stations carrie	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary
substitute program bas	sis, as explaine	d in the next	paragraph.	. , , , , , , , , , , , , , , , , , , ,	, ,	Transmitters:
basis under specifc FO	CC rules, regula	ations, or auth	orizations:		able system on a substitute program ent and Program Log)—if the	Television
basis. For further in	and also in spa formation cond	ace I, if the sta			ute basis and also on some other f the general instructions located	
	ch station's call	•		. •	s such as HBO, ESPN, etc. Identify tion. For example, report multi-	
			•	•	n stream separately; for example	
	se. For example	e, WRC is Ch	-		on for broadcasting over-the-air in may be different from the channel	
Column 3: Indicate	in each case v	whether the st			pendent station, or a noncommercial	
(for independent multi-	cast), "E" (for n	oncommercia	l educational), o	r "E-M" (for nonco	ast), "I" (for independent), "I-M" mmercial educational multicast).	
For the meaning of the Column 4: If the st planation of local servi	ation is outside	the local ser	vice area, (i.e. "d	distant"), enter "Ye	es". If not, enter "No". For an ex-	
Column 5: If you h	ave entered "Y	es" in column	4, you must cor	mplete column 5, s	stating the basis on which your	
carried the distant stat	ion on a part-ti	me basis beca	ause of lack of a	ctivated channel o	ering "LAC" if your cable system capacity. payment because it is the subject	
of a written agreement	t entered into o	n or before Ju	ıne 30, 2009, be	tween a cable sys	stem or an association representing	
,			•	• .	ry transmitter, enter the designa- her basis, enter "O." For a further	
explanation of these th	ree categories	, see page (v	of the general	instructions locate	d in the paper SA3 form.	
				•	to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing		. ,		•		
		CHANN	EL LINE-UP	AL		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		

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

FORM SA3E. PAGE 3.					Account	NG 1 EMOD. 2010/1
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
CABLE ONE,, I	NC.				007462	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you h cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	G, identify even dystem during the long in effect or a sexplaine stations: With a CC rules, regular here in space only on a substand also in spatformation concern. In station's call associated with each case when the cast), "E" (for not see terms, see pation is outside ce area, see pation of a distant entered "to a primary trans simulcasts, also a canadian station of eacanadian station of eacanadian station of eacanadian station of eacanadian station canadian station of eacanadian station canadian station of eacanadian station of eacanadian station canadian station of eacanadian station canadian station canadi	y television standard and accounting in June 24, 194, or 76.63 (in d in the next respect to any ations, or auth G—but do listitute basis. In the standard area in a station acceptable with the station acceptable with the station. In the station acceptable with the local service and the station acceptable with the local service and the station. In during the service in column and unring the service in column and unring the service in the station and the station are basis becamulational station or before Jumitter or an acceptable with the station. For the station, if any, giving the station, if any, giving the station, if any, giving the station acceptable with the station.	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations for izations: It it in space I (the referring to station was carried that basis station report origination cording to its own the reported in containing the reported in the repor	(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 services the television station of the television of the	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your ering "LAC" if your cable system capacity. expaper says to be subject estem or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. et to which the station is licensed by the enter says form.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	AM		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					ACCOUNTI	NG PERIOD: 2018/1
LEGAL NAME OF OWN	IER OF CABLE S	YSTEM:			SYSTEM ID#	Name
CABLE ONE,, I	NC.				007462	- Namo
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 to ions in effect of 6.61(e)(2) and (sis, as explaine	he accounting n June 24, 19 (4), or 76.63 (red in the next	period, except 81, permitting the eferring to 76.6 paragraph.	(1) stations carrie the carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program	G Primary Transmitters: Television
basis under specifc FC Do not list the station	CC rules, regula here in space	ations, or auth G—but do lis	orizations:		ent and Program Log)—if the	relevision
· ·	and also in spa formation cond	ace I, if the sta			ute basis and also on some other fthe general instructions located	
Column 1: List each each multicast stream	ch station's call associated wit	h a station ac	cording to its over	er-the-air designat	s such as HBO, ESPN, etc. Identify ion. For example, report multi- o stream separately; for example	
Column 2: Give the its community of licens on which your cable sy	se. For example stem carried the	e, WRC is Cha ne station.	annel 4 in Wash	ington, D.C. This	on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial	
educational station, by (for independent multion For the meaning of the	entering the lecast), "E" (for neese terms, see	etter "N" (for no oncommercia page (v) of the	etwork), "N-M" (I educational), o e general instruc	for network multicates for "E-M" (for noncoctions located in the	ast), "I" (for independent), "I-M" mmercial educational multicast).	
planation of local servi Column 5: If you have cable system carried to	ce area, see pa ave entered "Y he distant statio	age (v) of the es" in column on during the	general instructi 4, you must cor accounting perio	ions located in the mplete column 5, s od. Indicate by ent	paper SA3 form. stating the basis on which your ering "LAC" if your cable system	
of a written agreement	ion of a distant entered into o	multicast stre n or before Ju	eam that is not s ine 30, 2009, be	ubject to a royalty tween a cable sys	payment because it is the subject stem or an association representing y transmitter, enter the designa-	
explanation of these the Column 6: Give the	ree categories e location of ea	, see page (v) ch station. Fo	of the general in U.S. stations,	nstructions locate list the community	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the	
Note: If you are utilizing		, ,, ,		,	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AN		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
	NOWBER	STATION		(II Distailt)		
	•					
	•					
	T	T]		

FORM SA3E. PAGE 3. LEGAL NAME OF OWNER	OF CARLE SY	'STEM'			SYSTEM ID#	
CABLE ONE,, INC		STEW.			007462	Name
PRIMARY TRANSMITTERS)N				
carried by your cable system and regulations (6.59(d)(2) and (4), 76.61 substitute program basis, Substitute Basis Statem assis under specific FCC of Do not list the station he station was carried only be List the station here, and basis. For further inform in the paper SA3 form. Column 1: List each statem assist stream as "WETA-2". WETA-simulcast). Column 2: Give the chart community of license. I for which your cable system and application of local services. Column 3: Indicate in educational station, by engine for independent multicast for the meaning of these Column 5: If you have cable system carried the distant station. For the retransmission of a written agreement enthe cable system and applion "E" (exempt). For sime explanation of these three Column 6: Give the local significance of the second of the cable system and applion "E" (exempt). For sime explanation of these three Column 6: Give the local carried the column 6: Give the local carried for the cable system and applied the	tem during the sin effect or l(e)(2) and (e) as explained tions: With rules, regular fere in space by on a substitution of a distant station on a part-time of a distant station on a part-time of a distant categories, ecation of eaction of eactions. With the properties are eaction of eaction of eactions of eaction of eactions of eaction of eactions.	ne accounting a June 24, 194, or 76.63 (in the next) espect to any tions, or auth G—but do listitute basis. It is the state erning substitute sign. Do not real a station acceptation of the station. The station commercial	g period, except 81, permitting the 181, permitting the 181, permitting the 181, permitting the 181, permitting to 76.6 paragraph. If distant stations orizations: to it in space I (the 181) the 181, permitting to the 181, permitting to the 181, permitting to	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of both on a substitution, see page (v) on program services er-the-air designation of the television statistington, D.C. This ork station, an indefer network multicution "E-M" (for noncontrolled in the television of the television statistington, D.C. This ork station, an indefer network multicution "E-M" (for noncontrolled in the television of the television statistington, D.C. This ork station, an indefer network multicutions located in the mplete column 5, so d. Indicate by enticutivated channel of the televisions located in the televisions loca	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your tering "LAC" if your cable system capacity. expaper says to be subject estem or an association representing ery transmitter, enter the designa- ether basis, enter "O." For a further enter the paper SA3 form. expaper says the station is licensed by the	G Primary Transmitters Television
lote: If you are utilizing n		, , ,		•	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AO		
SIGN	B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
					<u> </u>	
					 	

FORM SA3E. PAGE 3.					Account	14G 1 EMOD. 2010/1
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
CABLE ONE,, I	NC.				007462	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	G, identify even during the system during the sist as explained that it is, as explained the sist as explained the sist as explained the sist and also in sparformation concern. It is associated with explaining the sist and also in sparformation concern. It is associated with explaining the sist and associated with explaining the least of the sist and as explaining the least of the sist and a sist and a part-inition of a distant the entered into of a primary transist as included the categories in canadian station of ear categories in canadian station of ear categories in canadian station and	y television standard and accounting in June 24, 194, or 76.63 (in d in the next respect to any ations, or auth G—but do listitute basis. In the standard area in a station acceptable with the station acceptable with the station. In the station acceptable with the local service and the station acceptable with the local service and the station. In during the service in column and unring the service in column and unring the service in the station and the station are basis becamulational station or before Jumitter or an acceptable with the station. For the station, if any, giving the station, if any, giving the station, if any, giving the station acceptable with the station.	g period, except 81, permitting the ferring to 76.6 paragraph. It is in space I (the fitting the ferring to 76.6 paragraph. It is in space I (the fitting the fitting that is a satisfied to the fitting that is a satisfied to the fitting that is a network of the fitting that is not some some fitting that is not some 30, 2009, be sesociation repreyou carried the fitting that is not some 30, 2009, be sesociation repreyou carried the fitting to the fitting that is not some 30, 2009, be sesociation repreyou carried the fitting that is not some 30, 2009, be sesociation repreyou carried the fitting that is not some 30, 2009, be sesociation repreyou carried the fitting that is not some 30, 2009, be sesociation repreyou carried the fitting that is not some 30, 2009, be sesociation repreyou carried the fitting that is not some 30, 2009, be sesociation repreyou carried the fitting that is not some 30, 2009, be sesociation repreyou carried the fitting that is not some 30, 2009, be sesociation repreyou carried the fitting that is not some 30, 2009, be sesociation repreyou carried the fitting that is not some 30, 2009, be sesociation repreyou carried the fitting that is not some 30, 2009, be sesociation repreyou carried the fitting that is not some 30, 2009, be sesociation repreyou carried the fitting that is not some 30, 2009, be sesociation repreyou carried the fitting that is not some 30, 2009, be sesociation repreyou carried the fitting that is not some 30, 2009, be sesociation repreyou carried the fitting that is not some 30, 2009, and 30, 30, 30, 30, 30, 30, 30, 30, 30, 30,	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on a program services the television statification, D.C. This work station, an indefor network multicar "E-M" (for noncontions located in the special statement of the statemen	s". If not, enter "No". For an expaper SA3 form. stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing transmitter, enter the designation in the paper SA3 form. To which the station is licensed by the which the station is identifed.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	AP		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					ACCOUNT	NG PERIOD: 2018/1			
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name			
CABLE ONE,, I	NC.				007462				
PRIMARY TRANSMITTE	RS: TELEVISIO	ON							
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect or i.61(e)(2) and (sis, as explaine	he accounting n June 24, 19 4), or 76.63 (r d in the next p	period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie the carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary Transmitters: Television			
basis under specifc FC Do not list the station	C rules, regula here in space	tions: With respect to any distant stations carried by your cable system on a substitute program rules, regulations, or authorizations: ere in space G—but do list it in space I (the Special Statement and Program Log)—if the ly on a substitute basis.							
• List the station here,	and also in spa formation cond	ice I, if the sta			ute basis and also on some other f the general instructions located				
Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast).	h station's call associated with -2". Simulcast	n a station acc streams must	cording to its over be reported in o	er-the-air designat column 1 (list each	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	e. For example stem carried the	e, WRC is Cha ne station.	annel 4 in Wash	ington, D.C. This	on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial				
educational station, by (for independent multion For the meaning of the Column 4: If the sta	entering the le cast), "E" (for no se terms, see pation is outside	etter "N" (for no concommercia page (v) of the the local serv	etwork), "N-M" (' I educational), o e general instruc vice area, (i.e. "c	for network multica for "E-M" (for nonco ctions located in the distant"), enter "Ye	ast), "I" (for independent), "I-M" mmercial educational multicast). ne paper SA3 form. s". 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	ering "LAC" if your cable system				
For the retransmiss of a written agreement the cable system and a	ion of a distant entered into o a primary trans	multicast stre n or before Ju mitter or an a	eam that is not s ine 30, 2009, be ssociation repre	subject to a royalty stween a cable sys senting the priman	payment because it is the subject stem or an association representing by transmitter, enter the designather basis, enter "O." For a further				
Column 6: Give the	e location of ea	ch station. Fo	or U.S. stations,	list the community	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.				
Note: If you are utilizing	g multiple char	•	•		channel line-up.				
		CHANN	EL LINE-UP	AQ					
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				
				, , ,					
	<u> </u>								

EIGNA NAME OF CAME TO CASE EYSTEM CABLE ONE, INC. PRIMARY TRANSMITERS: TELEVISION In General: In space 6, identify every television station (including translator stations and low power television stations are carried by our cable system during the accounting parted, 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 75,00(x)) and (1), 76,10(x)) and (1), 76,10(x)) and (1), 76,10(x) and (1), 76,10(x)) and (1), 76,10(x)) and (1), 76,10(x)) and (1), 76,10(x) and (1), 76,10(x)) and (1), 76,10(x) and (1), 76,10(x) and (1), 76,10(x) and (1), 76,10(x) an	FORM SA3E. PAGE 3.					ACCOUNTI	NG PERIOD: 2018/1
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), 76.63 (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 specific PCC rules, regulations, or authorizations: 10 not list the station here, and also in space 6.—but to list it in space 1 (the Special Statement and Program Log)—if the station was carried only on a substitute basis. 1.1st the station here, and also in space 6.—but to list it in space 1 (the Special Statement and Program Log)—if the station was carried only 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). Column 3: Indicate in each case whether the station or over-the-air designation. For example, report multicast streams must be reported in column 1 (list each stream separately, for example were received as the station of 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 store of the service of the service area of the service area. (i.e. "distant"), enter "Yes" (for independent),	LEGAL NAME OF OWN	IER OF CABLE S	YSTEM:				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(g)(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: 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. state 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 give the television is an etwork station, an independent station, or a noncommercial educational multicast). For for memory the little station is an entwork station, an independent station, or an encommercial educational 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	CABLE ONE,, I	NC.				007462	
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, well-this include the station of the station assistance on which your cable system on a noncommercial educational station or a noncommercial educational station, or a noncommercial educational station or a noncommercial educational station, or a noncommercial educational station, or a noncommercial educational station or a part-time basis under specific FCC rules, regulations, or authorizations: 1. Substitute Basis Stations is pace 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 streams and switch a station according to its over-the-air designation. For example, report multicast streams and switch as the station. 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 case whether the station is a network station, an independent, 1-IM* (for independent multicast), 15 (for inde	PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
Transmitters: 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: 1 Do not list the station here in space 6—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 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 "if" (for network, "N-M" (for network multicast), "If (for independent), "I-M" (for independent) as 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 on a part-time basis because of lack of activated channe	carried by your cable s FCC rules and regulat	system during to ions in effect or	he accounting n June 24, 19	period, except 81, permitting th	(1) stations carrie	d only on a part-time basis under ain network programs [sections	
basis under specifc FCC rules, regulations, or a utilhorizations: **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 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 calciated 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), "If (for independent),"-H.M" (for independent multicast), "E" (for incommercial educational), or "Em" (for independent multicast), "E" (for independent), "E" (for independent), "E" (for independent), "E" (for independent), "E" (for ind	substitute program bas	sis, as explaine	d in the next	paragraph.	. , , , , , , , , , , , , , , , , , , ,	, ,	Transmitters:
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 4: Si f 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	basis under specifc FC	CC rules, regula	ations, or auth	orizations:		,	relevicion
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 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 during the accounting period. Indicate by entering "LAC" if your cable system carried the 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 or an association representing the cable system and a prim	List the station here, basis. For further in	and also in spa formation cond	ace I, if the sta				
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 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 "0." 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	Column 1: List each each multicast stream	h station's call associated wit	h a station acc	cording to its over	er-the-air designat	tion. For example, report multi-	
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 identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AR 1. CALL BCAST OF CHANNEL OF CHANNEL	WETA-simulcast).			•	`		
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 identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AR 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? (Yes or No) CARRIAGE 6. LOCATION OF STATION	its community of licens on which your cable sy	se. For example stem carried the	e, WRC is Cha ne station.	annel 4 in Wash	ington, D.C. This	may be different from the channel	
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 AR 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CARRIAGE	educational station, by	entering the le	etter "N" (for no	etwork), "N-M" (for network multic	ast), "I" (for independent), "I-M"	
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 AR 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CARRIAGE	For the meaning of the	ese terms, see	page (v) of the	e general instruc	ctions located in th	ne paper SA3 form.	
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 AR 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL OF CHANNEL CHANNEL CHANNEL	Column 5: If you ha	ave entered "Y	es" in column	4, you must cor	mplete column 5, s	stating the basis on which your	
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 AR 1. CALL 2. B'CAST CHANNEL OF 4. DISTANT? CARRIAGE 6. LOCATION OF STATION CARRIAGE	carried the distant stat	ion on a part-tii	me basis beca	ause of lack of a	ctivated channel o	capacity.	
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 AR 1. CALL 2. B'CAST CHANNEL 3. TYPE 4. DISTANT? (Yes or No) CARRIAGE 6. LOCATION OF STATION CARRIAGE	the cable system and	a primary trans	mitter or an as	ssociation repre	senting the primar	y transmitter, enter the designa-	
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 AR 1. CALL SIGN 2. B'CAST CHANNEL OF 4. DISTANT? (Yes or No) CARRIAGE 6. LOCATION OF STATION CARRIAGE	explanation of these th	ree categories	, see page (v)	of the general i	instructions locate	d in the paper SA3 form.	
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CHANNEL OF (Yes or No) CARRIAGE 6. LOCATION OF STATION	FCC. For Mexican or 0	Canadian statio	ons, if any, give	e the name of th	ne community with	which the station is identifed.	
SIGN CHANNEL OF (Yes or No) CARRIAGE			CHANN	EL LINE-UP	AR		
SIGN CHANNEL OF (Yes or No) CARRIAGE	1 CALL	2 R'CAST	3 TVPE	4 DISTANT2	5 BASIS OF	6 LOCATION OF STATION	
NUMBER STATION (If Distant)		CHANNEL	OF		CARRIAGE	U. LOCATION OF STATION	
		NUMBER	STATION		(If Distant)		

LEGAL NAME OF OV		YSTEM:			SYSTEM ID#	Name
CABLE ONE,	, INC.				007462	
PRIMARY TRANSMIT	TERS: TELEVISION	ON				
carried by your cable	e system during t	he accounting	period, except	(1) stations carrie	and low power television stations) d only on a part-time basis under ain network programs [sections	G
76.59(d)(2) and (4), substitute program b	. , , ,	. , .	•	1(e)(2) and (4))]; a	and (2) certain stations carried on a	Primary Transmitters
Substitute Basis basis under specifc		. ,		s carried by your c	able system on a substitute program	Television
Do not list the station station was carried	•		t it in space I (th	e Special Stateme	ent and Program Log)—if the	
	information cond				ute basis and also on some other fthe general instructions located	
• •		sign. Do not r	eport origination	n program service	s such as HBO, ESPN, etc. Identify	
			•	•	tion. For example, report multi- n stream separately; for example	
Column 2: Give to ts community of lice	nse. For example	e, WRC is Ch	-		on for broadcasting over-the-air in may be different from the channel	
on which your cable Column 3: Indica			ation is a netwo	ork station, an inde	ependent station, or a noncommercial	
					ast), "I" (for independent), "I-M"	
(for independent mu For the meaning of t	,		, .	,	emmercial educational multicast).	
					es". If not, enter "No". For an ex-	
planation of local ser						
					stating the basis on which your ering "LAC" if your cable system	
carried the distant st		•	٠.	•	, ,	
					payment because it is the subject	
-				•	stem or an association representing ry transmitter, enter the designa-	
•			•	• .	her basis, enter "O." For a further	
					d in the paper SA3 form.	
				•	to which the station is licensed by the which the station is identified.	
Note: If you are utilize		, ,, ,		,		
		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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	T.	T				

FORM SA3E. PAGE 3.					ACCOUNT	ING PERIOD: 2018/1
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE,, I	NC.				007462	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect or i.61(e)(2) and (sis, as explaine	ne accounting n June 24, 199 4), or 76.63 (r d in the next p	period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie the carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary Transmitters:
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	C rules, regula here in space only on a subs and also in spa formation cond rm.	ations, or auth G—but do list titute basis. ace I, if the sta erning substit	orizations: t it in space I (th ution was carried ute basis station	e Special Statement both on a substitus, see page (v) o	able system on a substitute program ent and Program Log)—if the ute basis and also on some other f the general instructions located s such as HBO, ESPN, etc. Identify	Television
cast stream as "WETA			•	•	ion. For example, report multi- n stream separately; for example	
	e. For example	e, WRC is Cha	•		on for broadcasting over-the-air in may be different from the channel	
Column 3: Indicate educational station, by (for independent multic	in each case we entering the lecast), "E" (for no	whether the st tter "N" (for no oncommercial	etwork), "N-M" (i l educational), o	for network multic r "E-M" (for nonco	pendent station, or a noncommercial ast), "I" (for independent), "I-M" mmercial educational multicast).	
planation of local servi	ation is outside ce area, see pa	the local servage (v) of the	rice area, (i.e. "d general instructi	distant"), enter "Ye ions located in the	s". If not, enter "No". For an ex-	
cable system carried the carried the distant stati	ne distant station on on a part-tir	on during the a	accounting perions ause of lack of a	od. Indicate by ent	ering "LAC" if your cable system	
the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	a primary trans simulcasts, also ree categories e location of ea	mitter or an as o enter "E". If , see page (v) ch station. Fo	ssociation repre you carried the of the general i r U.S. stations,	senting the primar channel on any ot instructions locate list the community	stem or an association representing by transmitter, enter the designa- ther basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing		, ,, ,		,		
		CHANN	EL LINE-UP	AT		
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)		
	•					
	•					
	_					

FORM SA3E. PAGE 3.					Account	40 1 LMOD. 2010/1
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
CABLE ONE,, I					007462	
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here,	G, identify every eystem during the consistence of	y television st he accounting in June 24, 19 4), or 76.63 (i d in the next respect to any ations, or auth G—but do lis- titute basis.	period, except 81, permitting the eferring to 76.6 paragraph. distant stations orizations: t it in space I (the ation was carried	(1) stations carried carriage of certarile (2) and (4))]; as carried by your carried by your carried by the Special Statement both on a substite.	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other f the general instructions located	G Primary Transmitters: Television
in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servi Column 5: If you ha 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	rm. th station's call associated with associated with -2". Simulcast e channel numb se. For example stem carried the in each case wand entering the le cast), "E" (for no ese terms, see pa ation is outside ce area, see pa ave entered "Yi ne distant statio ion on a part-tir ion of a distant ion of a distant ion entered into on a primary trans simulcasts, also iree categories e location of ea Canadian statio	sign. Do not read a station accepted by the FCC has been station. Whether the station are stationary of the local server are column on during the server of the station are stationary of the station. For the station are page (v) of the station. For the station are page (v) of the station. For the station are station are page (v) of the station. For the station are station are station are station are station are station are station.	report origination cording to its own be reported in or assausigned to the annel 4 in Wash retained in a network), "N-M" (I educational), one general instructivice area, (i.e. "or general instructivice area, (i.e. "or general instructivice area, (i.e. "or general instructivice area, i.e. "or general instructivity of the general instructivity or general instructivity or general instructivity."	n program services er-the-air designal column 1 (list each the television stati ington, D.C. This ington ington, D.C. This ington ingto	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in may be different from the channel spendent station, or a noncommercial ast), "I" (for independent), "I-M" mmercial educational multicast). se paper SA3 form. s". If not, enter "No". For an ex- spaper SA3 form. stating the basis on which your sering "LAC" if your cable system capacity. spapent because it is the subject stem or an association representing ry transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. To which the station is licensed by the which the station is identifed.	
		CHANN	EL LINE-UP	AU		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						•	
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name	
CABLE ONE,, IN	NC.				007462		
PRIMARY TRANSMITTE In General: In space G carried by your cable sy FCC rules and regulation 76.59(d)(2) and (4), 76. substitute program bas Substitute Basis S basis under specific FC Do not list the station station was carried of station basis. For further inf in the paper SA3 for Column 1: List each each multicast stream a cast stream as "WETA- WETA-simulcast). Column 2: Give the its community of licension which your cable sy:	RS: TELEVISION i, identify every system during the constant of	y television strange accounting a June 24, 1944), or 76.63 (rd d in the next perspect to any attons, or auth G—but do list titute basis. In the state of the station account of the station account of the station account of the station.	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: tit in space I (the attion was carried ute basis station eport origination coording to its own be reported in of as assigned to the annel 4 in Wash	(1) stations carried to carriage of certariage of the certariage of the television statistington, D.C. This	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a sable system on a substitute program ent and Program Log)—if the state basis and also on some other af the general instructions located as such as HBO, ESPN, etc. Identify attion. For example, report multi- an stream separately; for example and for broadcasting over-the-air in any be different from the channel	G Primary Transmitters: Television	
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 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	AV			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
				,			

FORM SA3E. PAGE 3. LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	
CABLE ONE,, I	NC.				007462	Name
PRIMARY TRANSMITTE	ERS: TELEVISION	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76	system during t ions in effect or 6.61(e)(2) and (he accounting n June 24, 19 4), or 76.63 (i	period, except 81, permitting the referring to 76.6	(1) stations carrie	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary
substitute program bas Substitute Basis S				s carried by your c	able system on a substitute program	Transmitters: Television
basis under specifc FC	CC rules, regula	ations, or auth	orizations:		ent and Program Log)—if the	10.01.0.0
	and also in spa formation cond	ace I, if the sta			ute basis and also on some other fthe general instructions located	
• •		sign. Do not r	eport origination	n program service	s such as HBO, ESPN, etc. Identify	
			•	•	tion. For example, report multi- n stream separately; for example	
Column 2: Give the its community of licens	se. For example	e, WRC is Ch	-		on for broadcasting over-the-air in may be different from the channel	
on which your cable sy			ation is a netwo	ork station an inde	ependent station, or a noncommercial	
educational station, by	entering the lecast), "E" (for n	tter "N" (for n oncommercia	etwork), "N-M" (l educational), o	for network multic or "E-M" (for nonco	ast), "I" (for independent), "I-M" mmercial educational multicast).	
					es". If not, enter "No". For an ex-	
planation of local servi						
•			•	-	stating the basis on which your rering "LAC" if your cable system	
carried the distant stat		-		•		
					payment because it is the subject	
_				•	stem or an association representing ry transmitter, enter the designa-	
•			•	• .	her basis, enter "O." For a further	
					d in the paper SA3 form.	
				•	to which the station is licensed by the	
Note: If you are utilizing				•	which the station is identifed.	
			EL LINE-UP	•	·	
4.0411	O DICACT				C LOCATION OF STATION	
1. CALL	2. B'CAST	3. TYPE OF	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	STATION	(Yes or No)	CARRIAGE (If Distant)		
	NOMBLIX	OTATION		(II Distant)		
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	+					
	-				<u> </u>	
	†				<u> </u>	
						
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	†				<u> </u>	
					 	

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007462 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 SYS1	EM:					SYSTEM ID# 007462	Name
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEN	NT AND PROGRAM LOG					ı
In General: In space I, ident substitute basis during the a explanation of the programm	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regula	ations, or a	uthorization	s. For a further	Substitute
1. SPECIAL STATEMENT				<u> </u>		<u> </u>	, apo. 0, 10 10	Carriage:
During the accounting per broadcast by a distant star		r cable system	carry, on a substitute basi	s, any nonne	twork telev	vision progra		Special Statement and Program Log
Note: If your answer is "No	", leave the	rest of this pag	ge blank. If your answer is '	'Yes," you mι	ust comple	te the progr	am	1 Togram Log
log in block 2.	- DDOCDA	MC						
2. LOG OF SUBSTITUTE In General: List each subs			te line. Use abbreviations	wherever pos	sible, if the	eir meaning	is	
clear. If you need more spa	ice, please a	attach addition	al pages.			_		
period, was broadcast by a	distant stat	ion and that yo	ision program (substitute p our cable system substitute	d for the prog	ramming o	of another s	tation	
under certain FCC rules, re	gulations, o	r authorization	s. See page (vi) of the gen	eral instructio	ons located	in the pape	er	
SA3 form for futher informatitles, for example, "I Love I				"basketball".	LIST Speci	nc program		
Column 2: If the program	n was broad	lcast live, ente	r "Yes." Otherwise enter "N					
			asting the substitute prograne community to which the		nsed by th	e FCC or. i	n	
the case of Mexican or Car	adian statio	ns, if any, the	community with which the	station is ider	ntified).			
Column 5: Give the mor first. Example: for May 7 given		when your sys	tem carried the substitute p	orogram. Use	numerals,	, with the m	onth	
Column 6: State the time	es when the		gram was carried by your o				tely	
to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	program carri	ed by a system from 6:01:	15 p.m. to 6:2	28:30 p.m.	should be		
	er "R" if the	listed program	was substituted for progra	mming that y	our systen	n was requi	red	
to delete under FCC rules a								
gram was substituted for prefect on October 19, 1976.		triat your syste	em was permitted to delete	under FCC I	ules and re	eguiations i	.1	
				\\/\L	EN SUBST	TITLITE		
S	SUBSTITUT	E PROGRAM	1		IAGE OC		7. REASON FOR	
TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH		TIMES	DELETION	
	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM	<u> — тс</u>)	
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ACCOUNTING PERIOD: 2018/1 FORM SA3E. PAGE 6.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE,, INC.

SYSTEM ID#

007462

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 OCCU			WHEN CARRIAGE OCCURRED			
	DATE	HOUR FROM	rs TO		DATE	FROM	DURS TO)
		_					_	
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LEG	AL NAME OF OWNER OF CABLE SYSTEM: BLE ONE,, INC.			SYSTEM ID# 007462	Name					
GR Ins	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. \$ 2,670,466.00									
IMF	PORTANT: You must complete a statement in space P concerning gross receipts.	-		of gross receipts)						
• Cor • Cor • If you fee • If you accord	PRIGHT ROYALTY FEE Inctions: Use the blocks in this space L to determine the royalty fee you owe: mplete block 1, showing your minimum fee. mplete block 2, showing whether your system carried any distant television stations. Dur system did not carry any distant television stations, leave block 3 blank. Enter the air from block 1 on line 1 of block 4, and calculate the total royalty fee. Dur system did carry any distant television stations, you must complete the applicable prompanying this form and attach the schedule to your statement of account.	arts of t	he DSE	Schedule	L Copyright Royalty Fee					
bloo	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b ck 3 below.									
3 b	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.									
	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.	\$		28,413.76						
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						
Block 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	\$		678.91						
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	-	\$	28,413.76	Cable systems submitting					
	(block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.	r _		0.00	additional deposits under					
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	-		0.00	Section 111(d)(7) should contact the Licensing					
	Line 4. FILING FEE									
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$		29,138.76	appropriate 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	ge (i) of	the	200.000					

Name	LEGAL NAME OF OWNER OF CABLE S	SYSTEM:	SYSTEM ID#							
	CABLE ONE,, INC.		007462							
М	CHANNELS Instructions: You must give	(1) the number of channels on which the cable system carried television broadcast	t stations							
	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.									
Channels	Enter the total number of contact the state of the s	hannels on which the cable								
		oadcast stations	26							
	Enter the total number of a on which the cable system	ctivated channels carried television broadcast stations								
	-		295							
N		CTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual								
Individual to	we can contact about this sta	tement of account.)								
Be Contacted										
for Further Information	Name EMERSON YE	EARWOOD Telephone	6602-364-6195							
ormanon	Address 210 E. EARLL	DBIVE								
		oute, apartment, or suite number)								
	PHOENIX, AZ	85012-2626								
	(City, town, state, zip)									
	Email emers	son.yearwood@cableone.biz Fax (optional) 602-364-	6013							
_	CERTIFICATION (This statem	ent of account must be certifed and signed in accordance with Copyright Office reg	gulations.							
0										
Certifcation	• I, the undersigned, hereby ce	tify that (Check one, but only one, of the boxes.)								
	(Owner other than corpora	ation or partnership) I am the owner of the cable system as identifed in line 1 of space	e B; or							
	_									
	<u> </u>	n corporation or partnership) I am the duly authorized agent of the owner of the cable that the owner is not a corporation or partnership; or	e system as identified							
		n officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as o	wher of the cable system							
	in line 1 of space B.	it difficer (if a corporation) of a partitier (if a partitiership) of the legal entity identified as of	wher of the cable system							
	I have examined the statement	nt of account and hereby declare under penalty of law that all statements of fact contain	ned herein							
		to the best of my knowledge, information, and belief, and are made in good faith.								
	[.5 5.5.5., Geodolf 1001(1900	<i>n</i>								
	1									
	X	/s/ Raymond Storck								
		electronic signature on the line above using an "/s/" signature to certify this statement.								
		John Smith). Before entering the first forward slash of the /s/ signature, place your cursor ton, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus								
	Typed	or printed name: RAYMOND STORCK								
	i yped	or printed fidities. TATINGTO OTOTOT								
	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

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name						
CABLE ONE,, INC. 007462							
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							
Name Mailing Address Mailing Address							
INTEREST ASSESSMENTS							
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q						
Line 1 Enter the amount of late payment or underpayment	Interest Assessment						
Line 2 Multiply line 1 by the interest rate* and enter the sum here							
xdays							
Line 3 Multiply line 2 by the number of days late and enter the sum here							
x 0.00274							
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)							
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							
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.

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	

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

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

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

EXAMPLE:

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

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



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

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

Ψ0,0000							
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 CABL	E SYSTEM:			S	STEM ID#
	CABLE ONE,, INC.					007462
	SUM OF DSEs OF CATEGOR	RY "O" STATION	IS:			
	Add the DSEs of each station					
	Enter the sum here and in line		schedule.		1.00	
2	Instructions: In the column headed "Call S	Sian": list the call	l eigne of all dietant etatione	identified by t	he letter "Ω" in column 5	
_	of space G (page 3).	Jigii . list the can	i signis of all distant stations	identified by t	The letter O in column 5	
Computation	In the column headed "DSE"	: for each indepe	endent station, give the DSE	as "1.0"; for	each network or noncom-	
of DSEs for	mercial educational station, given	ve the DSE as ".2	5."			
Category "O"			CATEGORY "O" STATION	IS: DSEs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	KETV	0.250				
	WOWT	0.250				
	KUON-1	0.250				
	KUON-2	0.250				
	110011 2					
Add rows as						
necessary.						
Remember to copy						
all formula into new						
rows.						
		ı I				

Name	CABLE ONE,, II	NC.					S	007462
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2: Fo figure should corr Column 3: Fo Column 4: Di be carried out at I Column 5: Fo give the type-valu Column 6: Mi	ne call sign of all distator each station, give the respond with the information each station, give the reach station, give the reach independent size as ".25."	the number of hours mation given in spath total number of himm 2 by the figure in all point. This is the station, give the "typlumn 4 by the figure illumn 4 by the figure illumn 4 by the figure.	your cable system ce J. Calculate or cours that the stat in column 3, and g "basis of carriag re-value" as "1.0."	m carried the sta nly one DSE for a ion broadcast or give the result in e value" for the a For each netwo	ation during the accounting each station. Wer the air during the accounting the a	ounting period. his figure must ucational station,	
Capacity		С	ATEGORY LAC	STATIONS:	COMPUTAT	ION OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	R 3. N JRS C ED BY S M O	UMBER F HOURS TATION N AIR	4. BASIS OI CARRIAC VALUE	5. TYPE GE VALU	E	
						x		
						<u>x</u>		
			-			x x	<u>-</u>	
						x		
			÷		=	x	=	
			÷ ÷		= -	<u>х</u>	<u>-</u>	
	Add the DSEs of ea	CATEGORY LAC S ach station. here and in line 2 of pa		e,		0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried by tions in effect o Broadcast one of space I). Column 2: For at your option. This Column 3: Ente Column 4: Divie	your system in substi on October 19, 1976 (or or more live, nonnetwo each station give the s figure should corres er the number of days de the figure in colum s is the station's DSE	itution for a program as shown by the let ork programs during number of live, nor spond with the inform in the calendar years 2 by the figure in (For more informatical).	n that your system ter "P" in column that optional carrimetwork program mation in space I. ar: 365, except in column 3, and given on rounding, s	was permitted 7 of space I); an iage (as shown by s carried in subs a leap year. we the result in c ee page (viii) of	of the word "Yes" in column stitution for programs that olumn 4. Round to no les the general instructions i	2 of t were deleted	rm).
		SUI	BSTITUTE-BAS	IS STATION	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
		÷		=			:	=
		÷		=			.	
	l	÷		=			· ÷	
		÷		=			÷	=
	Add the DSEs of ea	F SUBSTITUTE-BASI ach station. nere and in line 3 of pa		e,	▶	0.00		
5 Total Number of DSEs		plicable to your systen SEs from part 2 ●		s in parts 2, 3, and	4 of this schedul	e and add them to provide	1.00 0.00	
	3. Number of DS	SEs from part 4 ●				-	0.00	
	TOTAL NUMBER O	OF DSEs					\	1.00
	l							

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

CABLE ONE,,		SYSTEM:					S	YSTEM ID# 007462	Name
			art 6 and part	7 of the DSE sche	edule blank ar	nd complete pa	art 8, (page 16) of	the ·	6
schedule. If your answer if	"No." complete blo	ocks B and C	below.						
n your anower ii	110, complete bit			TELEVISION M.	ARKETS				Computation of
=	1981?	schedule—D	•	aller markets as de				gulations in	3.75 Fee
		BLOC	K B: CARR	IAGE OF PERI	MITTED DS	SEs			•
Column 1: CALL SIGN	under FCC rules	and regulations and regulations	ons prior to Judule. (Note: T	part 2, 3, and 4 of ne 25, 1981. For fu he letter M below r Act of 2010.)	urther explana	ation of permitt	ed stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rt. A Stations carrivation of the Stations carrivation of the Station of the Stati	ules and reguled pursuant to on as defined all educations of the station (76.6 or DSE sched ant to individuations of the station will be station will enter the	ations cited b o the FCC ma I in 76.5(kk) (7 il station [76.5 55) (see paragule). ule). ual waiver of F d on a part-tir ithin grade-B	ne or substitute ba contour, [76.59(d)(se in effect of 6.57, 76.59(b e)(1), 76.63(a 63(a) referring bstitution of g	n June 24, 198 i), 76.61(b)(c), ii) referring to 7 g to 76.61(d) irandfathered s	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			worksheet on pag	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	
KETV	Broio	0.25	01011	Brois		OIOIV	Briole		-
WOWT		0.25				-	†		
KUON-1		0.25					†		
KUON-2		0.25					†		
							†		
							†		
							†		
								1.00	
		В	LOCK C: CC	MPUTATION OF	3.75 FEE]
Line 1: Enter the	e total number of	DSEs from	part 5 of this	schedule			<u>, </u>		
Line 2: Enter the	sum of permitte	ed DSEs fror	n block B ab	ove			,		
				r of DSEs subject 7 of this schedu		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	ine 4 by 0.0375	and enter su	ım here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DS	Es from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 ar	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00	

ABLE ONE	OWNER OF CABLE	SYSTEM:					S	7STEM ID# 007462	Name
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	UED)			_
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation o
		• • • • • • • • • • • • • • • • • • • •							3.75 Fee
								••••••	
		•			• • • • • • • • • • • • • • • • • • • •			••••••	
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Name	CABLE ONE,, II		: 5151EW.								007462		
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED												
		PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS											
	1. CALL	1								6. P	ERMITTED		
	SIGN	DSE		PERIOD			CARRIAGE	Γ	OSE		DSE		
7 Computation	Instructions: Block A In block A: If your answer is	"Yes," comple	ete blocks B an										
of the	If your answer is	"No," leave bl	ocks B and C	olank and co	mplete p	art	t 8 of the DSE schedu	ule.					
Syndicated			BL	OCK A: MA	AJOR T	EI	LEVISION MARK	ET					
Exclusivity													
Surcharge	Is any portion of the c Yes—Complete	-	•	major televisi	on marke	et a	S defined by section 7 X No—Proceed to		rules in effect J	une 24,	1981?		
	DI OCK Di Ci	orrings of VUI		tour Stationa		Ī	DI OCK	C: Compu	tation of Evam	nt DCE			
		-	F/Grade B Con			 -			tation of Exem				
	Is any station listed in commercial VHF stati or in part, over the cal	ion that places				n	Vas any station listed lity served by the cab o former FCC rule 76	le system p					
	Yes—List each st	tation below wif	th its appropriate	permitted DS	E		Yes—List each st	ation below	vith its appropria	ate permi	tted DSE		
	X No—Enter zero a	and proceed to p	part 8.				X No—Enter zero a	nd proceed t	o part 8.				
	CALL SIGN	DSE	CALL SIGN	DS	E		CALL SIGN	DSE	CALL SIG	SN	DSE		
												l	
												l	
		ļ										l	
								 				l	
				····								l	
					0.00							l	
			TOTAL DSE	8	0.00				TOTAL DS	SEs	0.00	1	

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC.	SYSTEM ID# 007462	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	2,670,466.00	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. 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.	E	
	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)	E	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name		ME OF OWNER OF CABLE SYSTEM:									
	(CABLE ONE,, INC.	7462								
7	Section 4b	ure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. 0.00300 of gross receipts (the amount in section 1). S									
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$									
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ _\$									
Exclusivity 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									
		Enter here and on line 2, block 4, space L (page 7)									
		Syndicated Exclusivity Surcharge▶	<u>'</u> .								
8 Computation of Base Rate Fee	You me 6 was 6 In blo If you If you blank What i	cust 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. cock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below it. 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 er area," see page (v) of the general instructions.									
	301 1100	s area, see page (v) of the general instituctions.									
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS									
	• Did y	rour cable system retransmit the signals of any partially distant television stations during the accounting period?									
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.									
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE									
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ _\$									
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)									
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1)									
		B. Enter 0.00701 of gross receipts (the amount in section 1)									
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here									
		D. Multiply line B by line C and enter here									
		E. Add lines A, and D. This is your base rate fee. Enter here									
		and in block 3, line 1, space L (page 7) Base Rate Fee	.00								
		· · · · · · · · · · · · · · · · · · ·									

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC.	SYSTEM ID# 007462	Name
Section If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
A. Enter 0.01064 of gross receipts (the amount in section 1) **State		8
B. Enter 0.00701 of gross receipts (the amount in section 1) \$	_	Computation of Base Rate Fee
C. Multiply line B by 3.000 and enter here		Dase Nate Fee
D. Enter 0.00330 of gross receipts (the amount in section 1)	_	
E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here▶	_	
F. Multiply line D by line E and enter here		
G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee	0.00	
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of	television broadcast signals shall	
instead be reported on a community-by-community basis (subscriber groups) if the cable system report Space G.	ed multiple channel line-ups in	9
In General: If any of the stations you carried were partially distant, the statute allows you, in computing receipts from subscribers located within the station's local service area, from your system's total gross in		Computation of
exclusion, you must:		Base Rate Fee
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscriber station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable s DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separat	system. Determine the number of the base rate fee for each group.	Syndicated Exclusivity Surcharge
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for NOTE: If any portion of your cable system is located within the top 100 television market and the station	, ,	for Partially
also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both if your cable system is wholly located outside all major television markets, complete block A only.		Distant Stations, and
How to Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
Step 1: For each community served, determine the local service area of each wholly distant and each parried to that community.	partially distant station you	Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of your soutside the station's local service area. A subscriber located outside the local service area of a station in the same token, the station is distant to the subscriber.)		
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to whice subscriber group must consist entirely of subscribers who are distant to exactly the same complement of system will have only one subscriber group when the distant stations it carried have local service areas	of stations. Note that a cable	
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for groups. In each section:	or each of your system's subscriber	
Identify the communities/areas represented by each subscriber group.		
• Give the call sign for each of the stations in the subscriber group's complement—that is, each station subscribers in the group.	that is distant to all of the	
If:1) your system is located wholly outside all major and smaller television markets, give each station's DS	SE as you gave it in parts 2, 3,	
and 4 of this schedule; or,2) any portion of your system is located in a major or smaller televison market, give each station's DSE part 6 of this schedule.	as you gave it in block B,	
Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
• Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (in the paper SA3 form.	vii) of the general instructions	
• Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of thi page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscribers for that group's complement of stations and total gross receipts from the subscribers in that group	bscriber group (that is, the total	

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actual calculations on the form.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007462 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		E SYSTEM:				S	YSTEM ID# 007462	Name
В				TE FEES FOR EAC				
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA				COMMUNITY/ ARE		x City/Dakota Co		9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
KUON-1	0.25			KETV	0.25			Base Rate Fee
KUON-2	0.25							and
			<u>.</u>					Syndicated
			<u>.</u>		<mark>.</mark>			Exclusivity
								Surcharge
	 		<u>.</u>					for
			<u>.</u>		·····			Partially
			<u>. </u>		·····		·····	Distant
								Stations
	···							
	···		- 					
			+					
	<u></u>		-					
			<u>-</u>		•••••			
Total DSEs	•		0.50	Total DSEs	<u> </u>		0.25	
Gross Receipts First Group \$ 42,743.00		Gross Receipts Sec	cond Group	\$ 1				
Base Rate Fee First G	Group	\$	227.39	Base Rate Fee Sec	cond Group	\$	451.51	
	T	0.1000000000000000000000000000000000000						
		SUBSCRIBER GROU				SUBSCRIBER GRO	0P	
COMMUNITY/ AREA	Sioux C	City/Sergeant/No.	Sioux C	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>					
								
	<u></u>		<u>.</u>					
	<u></u>		-					
	 		+					
	<u></u>		-					
	···		-		•••••			
			†					
		-	***************************************					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$ 2,457	,981.00	Gross Receipts Fou	urth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
Base Rate Fee: Add to			riber group	as shown in the boxe	s above.			
Enter here and in bloc	k 3, line 1, s	space L (page 7)				\$	678.91	

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA
COMMUNITY/ AREA O COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE A CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Base Base Sur Pri D St Total DSEs O .000 Total DSEs O .000 Total DSEs D .000 Total DSEs O .000 Community/ AREA O .000 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 Base Base
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE
Syr Exc Sull Property of the Control
Syr Exc Sul
Total DSEs
Total DSEs
Total DSEs
Total DSEs
Total DSEs
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00
Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00
SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE
Total DSEs 0.00 Total DSEs 0.00
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462							Name			
		COMPUTATION OF SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP	IP.			
COMMUNITY/ ARE			0	COMMUNITY/ ARE						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	Computation of			
							DSE	Base Rate Fee		
								and		
	·····				····			Syndicated Exclusivity		
					·····			Surcharge		
								for		
								Partially Distant		
	·····		·		·····			Stations		
					·····					
	·····		•		····					
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First Group \$ 0.00		0.00	Gross Receipts Sec	ond Group	\$	0.00				
Base Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00			
	ELEVENTH	SUBSCRIBER GRO	UP		TWELVTH	SUBSCRIBER GRO	UP			
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA						
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 Thir	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00			
Base Rate Fee Thir	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 boxe	s above.	\$				
	,	(3-,)				•				

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462							Name			
				ATE FEES FOR EAC						
		SUBSCRIBER GRO		iii		SUBSCRIBER GRO		9		
COMMUNITY/ ARE	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		
			<u> </u>		····		<u></u>	Syndicated Exclusivity		
			-					Surcharge		
								for		
								Partially		
		-			·····			Distant Stations		
						•		Stations		
					····		<u></u>			
Total DSEs	<u> </u>	!	0.00	Total DSEs			0.00			
			0.00	Gross Receipts Seco	ond Group	\$	0.00			
						<u>*</u>				
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00			
		SUBSCRIBER GRO		III		SUBSCRIBER GRO	UP 0			
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
					····					
		-								
			<u>-</u>		····					
			<u> </u>		·····		<u> </u>			
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Thir	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			
				П						
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# 007462								
[BLOCK A: (COMPUTATION C	F BASE RA	TE FEES FOR EAC				
SEVI	ENTEENTH	SUBSCRIBER GRO		iii —		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL GIGIT	DOL	OALL GIGIN	DOL	OALL GIGIT	DOL	OALL GIGIT	DOL	Base Rate Fee
			••••					and
								Syndicated
								Exclusivity
								Surcharge
								for
	····							Partially
	····							Distant Stations
						-		Stations
	••••	L						
	••••							
						<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Sec	0.00			
Gross Receipts First Group \$ 0.00					0.14 0.04p	\$		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
N	IINTEENTH	SUBSCRIBER GRO	DUP		TWENTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····							
	····					-		
						-		
	••••							
			<u></u>					
	<u></u>						<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 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# 007462								
				ATE FEES FOR EACH			ID	
COMMUNITY/ AREA		SUBSCRIBER GROU	0	COMMUNITY/ AREA	Y-SECONL	SUBSCRIBER GROU	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL GIGIT	BOL	OALL GIGIT	DOL	Office Office	DOL	O'ALL GIGIT	DOL	Base Rate Fee
								and
		-						Syndicated
	····							Exclusivity Surcharge
								for
								Partially
								Distant Stations
	····				·			Otations
								
	····				·			
Total DSEs			0.00	Total DSEs	-		0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
TWE	NTY-THIRD	SUBSCRIBER GROU	JP	TWENT	Y-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	l Group	c	0.00	Gross Receipts Fourth	Group	\$	0.00	
Gross Necelbis Hilla	отоир	\$	3.00	Orosa Necelpia Fourti	, Oroup	Ψ	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourti	n Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462								
				ATE FEES FOR EACH				
	ITY-FIFTH	SUBSCRIBER GROU		III		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 Exclusivity
	···							Surcharge
								for
								Partially
					<u></u>			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 G	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	SEVENTH	SUBSCRIBER GROU		III		I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
	···				···			
	···				···			
								I
	···				····			I
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add to			riber group	as shown in the boxes	above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462								
				ATE FEES FOR EACH					
		SUBSCRIBER GROU	JP 0	11		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	
	·····				 			and Syndicated	
					···			Exclusivity	
								Surcharge	
		-			 			for Partially	
					···			Distant	
								Stations	
	·····				 				
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	Gross Receipts First Group \$ 0.00			Gross Receipts Seco	nd Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00		
TH	IRTY-FIRST	SUBSCRIBER GROU	JP	II		SUBSCRIBER GROU	UP		
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		П	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,, IN		LE SYSTEM:				S	YSTEM ID# 007462	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		1		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
					·····			Exclusivity Surcharge
	••••	-	····				·····	for
								Partially
		-						Distant
	<u></u>	 						Stations
			····		·····			
	·····		····	·	·····			
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts First	ross Receipts First Group \$ 0.0				ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		ii —		SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····		·····			
	····		····	·	·····			
			····					
		-						
	····		····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462								
				TE FEES FOR EAC				
		SUBSCRIBER GROU		it .		1 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
					<u></u>			Syndicated Exclusivity
					<u></u>		••••	Surcharge
								for
								Partially
					<u></u>			Distant Stations
						•		Stations
					<u></u>			
					<u></u>			
Total DSEs		Į.	0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	and Group	\$	0.00	
Gross receipts i list	Огоир		0.00	Cross recorpts eco	па стоар		0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROU				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>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	:h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462								
				TE FEES FOR EACH					
		SUBSCRIBER GROU		ii —	Y-SECONE	SUBSCRIBER GROU		9	
COMMUNITY/ AREA	٠		0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
					<u></u>			and	
								Syndicated Exclusivity	
				-	<u>-</u>			Surcharge	
								for	
					<u></u>			Partially	
					<u></u>			Distant Stations	
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								İ	
	····				<u></u>			İ	
Total DSEs	!	'	0.00	Total DSEs	-		0.00	İ	
Gross Receipts First Group \$ 0.00				Gross Receipts Secon	nd Group	\$	0.00	İ	
	·				·			İ	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00		
		SUBSCRIBER GROU		ii .	Y-FOURTH	I SUBSCRIBER GROU		1	
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA			0	l	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	İ	
					<u></u>			İ	
				-	<u> </u>			İ	
		-						İ	
								İ	
					<u></u>			İ	
					<u> </u>			İ	
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								İ	
					<u></u>			İ	
					<u> </u>			İ	
					<u>-</u>			İ	
								İ	
Total DSEs			0.00	Total DSEs			0.00	İ	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	İ	
								1	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	İ	
								1	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		1	

LEGAL NAME OF OWN CABLE ONE,, INC		LE SYSTEM:				S	YSTEM ID# 007462	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO		TT .		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
	····			-			<u> </u>	Exclusivity Surcharge
	····		<u></u>					for
								Partially
								Distant
			<u></u>					Stations
						•		
Total DSEs		-	0.00	Total DSEs			0.00	
			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FORTY	-SEVENTH	SUBSCRIBER GRO	UP	FO	RTY-EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<mark></mark>							
	····						····	
	<mark></mark>		<u></u>					
	····							
	····							
	····		<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
ccc . toodipto Tilliu	2.0 0 p	·			Отобр	*		
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.	\$		

CABLE ONE,, IN		LE SYSTEM:				S	YSTEM ID# 007462	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO				I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
			<u></u>					Syndicated
			 	·				Exclusivity Surcharge
	····	-	<u></u>		••••			for
								Partially
		-						Distant
	<u>.</u>		<u></u>					Stations
		-			••••			
Total DSEs			0.00	Total DSEs			0.00	
			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	IFTY-FIRST	SUBSCRIBER GRO)UP	FIF	TY-SECONE	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE			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	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
2.300	. J. 5.5	· ·			С. Эцр		3.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462									
				ATE FEES FOR EAC					
F COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		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	
		-	<u></u>		<u>.</u>			and Syndicated	
			<u> </u>		····			Exclusivity	
								Surcharge	
			<u></u>					for	
			<u> </u>		·····	.		Partially Distant	
		-						Stations	
			<u> </u>						
			<u> </u>						
			<u>-</u>						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	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		
F	IFTY-FIFTH	SUBSCRIBER GRO	UP	F	FIFTY-SIXTH	SUBSCRIBER GRO	UP		
COMMUNITY/ AREA	٩		0	COMMUNITY/ AREA	CALL SIGN DSE CALL SIGN DSE				
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		
							<u> </u>		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add	I the base rat	te fees for each subs	criber groun	as shown in the boxes	s above.				
Enter here and in blo			5 -1			\$			

EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462								
				ATE FEES FOR EAC				
	SEVENTH	SUBSCRIBER GROU		TI .		I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
	···							Surcharge
								for
								Partially
	<u></u>							Distant Stations
	<u></u>							Stations
								I
								
Total DSEs		!	0.00	Total DSEs		!!	0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	and Group	\$	0.00	
Gross recorpts i list e	эгоир		0.00	Cross receipts econ	па стоар	<u>*</u>	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	TY-NINTH	SUBSCRIBER GROU		-		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
	···							
		-						
								I
	<u></u>							
	···				····			
	<u></u>							I
					····			
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 Fourt	th Group	\$	0.00	
	1	i.	3.54		- -r	<u>L</u> *		
Base Rate Fee: Add t Enter here and in bloc			riber group	as shown in the boxes	above.	\$		

EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462								
				ATE FEES FOR EACH				
S COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	SIXT COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
COMMUNITY AREA	·············		U	COMMUNITY/ AREA			U	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
					<u></u>			Partially Distant
								Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
SI	IXTY-THIRD	SUBSCRIBER GROU	JP	SIXT	Y-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
								
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Raco Poto Foo: ۸-4-4	the base ref	o foos for each subs	rihar ara	as shown in the boxes	ahovo			
Enter here and in blo			ander group	, as shown in the bukes	above.	\$		

CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	CABLE ONE,, IN		E SYSTEM:				S	YSTEM ID# 007462	Name
COMMUNITY AREA O CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE DSE DSE DSE DSE DSE DSE DSE DSE DS									
CALL SIGN			SUBSCRIBER GRO		11		1 SUBSCRIBER GRO		9
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	COMMUNITY/ AREA				COMMUNITY/ AREA			U	Computation
and Syndicate Secretary Surchard for Partial Distant Station Total DSEs 0.00 Gross Receipts First Group \$ 0.00 Sixty-Seventh Subscriber Group \$ 0.00 Sixty-Seventh Subscriber Group Sixty-Seventh Subscriber Group Community/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL S	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	_
Syndicate Exclusive Surchary for Partially Station Total DSEs 0.00 Total DSEs 0.00 Gross Receipts First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 SIXTY-SEVENTH SUBSCRIBER GROUP SIXTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL									Base Rate Fee
Exclusive Surcharge for Partials Distant Stations Total DSEs 0.00 Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 SIXTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIG				<mark>.</mark>		<mark>.</mark>			
Surcharg for Partials Distant Stations Total DSEs Gross Receipts First Group Base Rate Fee First Group Sixtry-Seventh Subscriber Group COMMUNITY AREA O CALL SIGN DSE									_
Partiall Distant Station Total DSEs O.00 Gross Receipts First Group Base Rate Fee First Group SIXTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE				·		····	-		Surcharge
Distant Station Total DSEs O.00 Gross Receipts First Group Sixty-Seventh Subscriber Group Sixty-Seventh Subscriber Group COMMUNITY; AREA OCALL SIGN DSE CALL SIGN DS									for
Station Total DSEs O.00 Gross Receipts First Group Base Rate Fee First Group SIXTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE CALL				<u> </u>					Partially
Total DSEs Gross Receipts First Group Base Rate Fee First Group SIXTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SI				<mark>-</mark>		····			
Gross Receipts First Group Base Rate Fee First Group SIXTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL							•		Stations
Gross Receipts First Group Base Rate Fee First Group SIXTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL									
Gross Receipts First Group Base Rate Fee First Group SIXTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL									
Gross Receipts First Group Base Rate Fee First Group SIXTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL		<u></u>							
Gross Receipts First Group Base Rate Fee First Group SIXTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL		····		<mark>-</mark>		····			
Gross Receipts First Group Base Rate Fee First Group SIXTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL	Total DSEs		•	0.00	Total DSEs	<u>.</u>		0.00	
Base Rate Fee First Group SIXTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE		Group	\$			and Group	\$	0.00	
SIXTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIG						·			
COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE CALL SIG	Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE			SUBSCRIBER GRO		iii —		1 SUBSCRIBER GRO		
	COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				<u> </u>					
				<u>-</u>		····			
		····		<mark>-</mark>		····			
				<u>.</u>					I
									
		····		<u>.</u>		····		<u></u>	I
Total DSEs Total DSEs	Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 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 Fourth Group \$ 0.00	Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
					Ш				
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7) \$				criber group	as shown in the boxes	above.	\$		

CABLE ONE,, IN		E SYSTEM:				S	YSTEM ID# 007462	Name
				ATE FEES FOR EACH				
		SUBSCRIBER GROU	JP 0	11		I SUBSCRIBER GROU	JP 0	9
COMMUNITY/ AREA				COMMUNITY/ AREA			U	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>				<mark>.</mark>			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 Secon	nd Group	\$	0.00	
SEVE	NTY-FIRST	SUBSCRIBER GROU	JP	SEVENT	Y-SECONE	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
								
								
	····							
	···				<u> </u>			
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	
			riber group	as shown in the boxes	above.			
Enter here and in blo	ck 3, line 1, s	space L (page 7)				\$		

CABLE ONE,, IN		LE SYSTEM:				S	YSTEM ID# 007462	Name
[BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
		SUBSCRIBER GRO		Ħ		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>							Base Rate Fee
						-		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	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Oloss Neccipis i list	Oloup	Ψ	0.00	Oross receipts occ	ona Oroap		0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVE	NTY-FIFTH	SUBSCRIBER GRO	DUP	SEV	ENTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
	····					-		
	••••		<u></u>			-		
	<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 Enter here and in bloo			scriber group	as shown in the boxe	s above.	\$		

CABLE ONE,, IN		LE SYSTEM:				S	YSTEM ID# 007462	Name
				TE FEES FOR EACH				
		SUBSCRIBER GROU		TI .		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>			Syndicated Exclusivity
								Surcharge
					<u> </u>			for
	<u></u>				<u></u>			Partially Distant
								Stations
	<mark></mark>	-			<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	•	\$	0.00	Base Rate Fee Secon		\$	0.00	
		SUBSCRIBER GROU		II		I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>				<u>-</u>			
	····				<u>-</u>			
		-						
					<u>.</u>			
	····				<u>-</u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	า Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

CABLE ONE,, IN		E SYSTEM:				S	YSTEM ID# 007462	Name
				ATE FEES FOR EACH				
EIG COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	EIGHT COMMUNITY/ AREA		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
					 			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	
EIG	HTY-THIRD	SUBSCRIBER GROU	JP	EIGHT	Y-FOURTH	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		П	0.00	
Gross Receipts Third	l 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			criber group	as shown in the boxes	above.	\$		

CABLE ONE,, IN		LE SYSTEM:				S	O07462	Name
		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
			<u></u>					and
	·····				·····	-		Syndicated Exclusivity
								Surcharge
						-		for
								Partially Distant
	····	H	···		·····	-		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/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>		<u></u>			
	····					-		
	····		···		·····			
			<u></u>					
	·····				·····	-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	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 blo			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OW CABLE ONE,, IN		E SYSTEM:				S	YSTEM ID# 007462	Name
				ATE FEES FOR EACH				
EIG COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA		I SUBSCRIBER GROU	JP 0	9
COMMUNITY AREA	·············		U	COMMUNITY/ AREA				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
					•••			Distant
								Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
		SUBSCRIBER GROU		III		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
					····			
Total DSEs			0.00	Total DSEs		II	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	o as shown in the boxes	above.	\$		

LEGAL NAME OF OWN CABLE ONE,, INC		LE SYSTEM:				S	YSTEM ID# 007462	Name
				ATE FEES FOR EAC				
COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		SUBSCRIBER GRO	UP 0	9
		II call clos			T 505	II carr cross		Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
	····			1		-		and
							•	Syndicated
								Exclusivity
								Surcharge
			<u></u>					for
			<u></u>			-		Partially Distant
	····					-	<u> </u>	Stations
	····	H						Gtations
						-		
			0.00			<u> </u>	0.00	
Total DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NIN	ETY-FIFTH	SUBSCRIBER GRO)UP	NI	NETY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<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 the Enter here and in blood			scriber group	as shown in the boxe	es above.	\$		
	o,o 1, ·	cpaco = (pago 1,				T		

CABLE ONE,, INC		E SYSTEM:				S	YSTEM ID# 007462	Name
				TE FEES FOR EACH				
	SEVENTH	SUBSCRIBER GROU		ii e	TY-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
					<u></u>			and
					<mark></mark>			Syndicated Exclusivity
					-		••••	Surcharge
								for
					<u> </u>			Partially
					<mark></mark>			Distant Stations
					. 			Stations
								I
					<u></u>			I
					<mark></mark>			I
	···				. 			
Total DSEs		!	0.00	Total DSEs		·!·	0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	TY-NINTH	SUBSCRIBER GROU		ii —	JNDREDTH	I SUBSCRIBER GROU		
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 Fourth	n Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add to			riber group	as shown in the boxes	above.	\$		

CABLE ONE,, INC		LE SYSTEM:				S	YSTEM ID# 007462	Name
				ATE FEES FOR EACH			ID.	
ONE HUNDI COMMUNITY/ AREA		SUBSCRIBER GROU	0	COMMUNITY/ AREA		SUBSCRIBER GRO	UP 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
								
	····				<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	
ONE HUNDF	RED THIRD	SUBSCRIBER GROU	JP	ONE HUNDRE	D FOURTH	SUBSCRIBER GRO	UP	
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			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	:h Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	:h Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxes	above.	\$		

CABLE ONE,, INC		LE SYSTEM:				S	YSTEM ID# 007462	Name
В	LOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDR	ED FIFTH	SUBSCRIBER GRO	UP	ONE HUNI	DRED SIXTH	I SUBSCRIBER GRO	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u> </u>					Base Rate Fee
	···	-	<u></u>					Syndicated
			······································		••••			Exclusivity
								Surcharge
								for
			<u> </u>					Partially
			<u> </u>					Distant Stations
			<u>-</u>					Otations
			<u></u>					
	···		<u></u>					
Total DCFs			0.00	Total DCCs		1	0.00	
Total DSEs				Total DSEs			-	
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	
ONE HUNDRED	SEVENTH	SUBSCRIBER GRO	UP	ONE HUNDE	RED EIGHTH	I SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u> </u>					
			-					
			<u></u>					
			<u> </u>					
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			<u></u>	-	·····			
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Total DSEs			0.00	Total DSEs	1		0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add the 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# 007462	Name
В	SLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDR	ED NINTH	SUBSCRIBER GRO	UP	ONE HUND	RED TENTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
					<u></u>	-		Exclusivity
								Surcharge for
	···	-	·		••••			Partially
			•					Distant
								Stations
	<u></u>							
	<u></u>							
Total DSEs			0.00	Total DSEs			0.00	
			0.00	Gross Receipts Sec				
•	•	·		·	•	\$		
Base Rate Fee First 0		\$	0.00	Base Rate Fee Seco		\$	0.00	
	LEVENTH	SUBSCRIBER GRO		ii		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		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 bloo			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462								
				TE FEES FOR EAC				
ONE HUNDRED TH		SUBSCRIBER GRO		li		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
0.122 0.011	202	0,422 0.0.1	202	07.122.01011	202	07.122.01.01.1	302	Base Rate Fee
								and
		<u> </u>						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 0	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED F	IFTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	SIXTEENTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····	-	······································		·····	-		
						-		
					·····			
	····					-		
	····				·····			
					····			
					••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	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			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462								
				TE FEES FOR EAC				
		SUBSCRIBER GROU		ii		I SUBSCRIBER GROU		9
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					<u></u>			and
	·····							Syndicated Exclusivity
	·····						••••	Surcharge
								for
								Partially
		-						Distant Stations
								Stations
					<u>.</u>			
	·····							
Total DSEs	<u> </u>		0.00	Total DSEs		!!	0.00	
Gross Receipts Firs	t Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
·	·				•			
Base Rate Fee Firs		\$	0.00	Base Rate Fee Seco		\$	0.00	
		SUBSCRIBER GROU		ii —		SUBSCRIBER GROU		
COMMUNITY/ ARE	Α		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			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
	- 0.0up	<u> </u>	0.00		O.oup	 ▼	3.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		
l		· · ·						

LEGAL NAME OF OWN		LE SYSTEM:				S	YSTEM ID# 007462	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO		 		SUBSCRIBER GROUP)	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fe
								and
			<u></u>				····	Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
	····							Stations
			<mark></mark>	.				
			0.00			11	0.00	
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWE	NTY-THIRD	SUBSCRIBER GROU	Р	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····							
			···				·····	
	····							
		-						
	····							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	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			criber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OW CABLE ONE,, IN		LE SYSTEM:				S	YSTEM ID# 007462	Name
		COMPUTATION OF SUBSCRIBER GROUF		ATE FEES FOR EACH		RIBER GROUP I SUBSCRIBER GROUF)	
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
					<u></u>			Distant
								Stations
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					<u></u>			
								
Total DSEs			0.00	Total DSEs			0.00	
			0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROUP		11		SUBSCRIBER GROUF		
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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					<u></u>			
								I
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		E SYSTEM:				S	YSTEM ID# 007462	Name
E	BLOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH	1 SUBSCF	RIBER GROUP		
		SUBSCRIBER GROUP				SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
OALL SIGIY	BOL	O/ILL GIGIT	502	O'NEE GIGIT	502	O'ALL SIGIY	BOL	Base Rate Fee
								and
	<u></u>							Syndicated
					<u></u>			Exclusivity
					<u>-</u>			Surcharge for
					<u></u>			Partially
								Distant
		-						Stations
	<mark></mark>							1
					<u></u>			1
	····							1
								I
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 GROUP		ii e	TY-SECONE	SUBSCRIBER GROUP	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-			<u></u>			I
					<u></u>			1
		-			<u>-</u>			I
								I
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					<u>-</u>			1
	····				<u>-</u>			I
								1
		-						1
	<mark></mark>				<u></u>			I
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
- 1000 House	2. Jup	.*	3.00	3.000 Accorpto Fourth	. J.Jup	<u>-</u>		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	า Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW CABLE ONE,, IN		E SYSTEM:				S	YSTEM ID# 007462	Name
		COMPUTATION OF SUBSCRIBER GROUP		TE FEES FOR EACH		RIBER GROUP I SUBSCRIBER GROUF)	
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							····	Base Rate Fee and
								Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED T	HIRTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED TH	HIRTY-SIXTH	SUBSCRIBER GROUP	,	
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

CABLE ONE,, INC		LE SYSTEM:				S	YSTEM ID# 007462	Name
В	LOCK A: (COMPUTATION O	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED THIRTY	-SEVENTH	SUBSCRIBER GROUI		H		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>		<u></u>	Base Rate Fee
	<u></u>		<u> </u>		·····			and Syndicated
	···	-			·····			Exclusivity
								Surcharge
								for
								Partially
								Distant
	<u> </u>		. 				·····	Stations
	··		······································		••••	 	····	
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	
ONE HUNDRED THIS	RTY-NINTH	SUBSCRIBER GROUI	-	11		SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>		<u> </u>		·····			
		<u> </u>		-				
	<mark></mark>				·····			
	···							
		-						
	<u> </u>							
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
					•			
Base Rate Fee Third C	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		LE SYSTEM:				S	YSTEM ID# 007462	Name
В	LOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED FO	RTY-FIRST	SUBSCRIBER GROU	Р	ONE HUNDRED FO	RTY-SECONE	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
			<u></u>			-		and
						-		Syndicated
						-		Exclusivity Surcharge
						-		for
						-		Partially
								Distant
								Stations
			<u></u>			-		
			<u></u>			-		
	···		···					
						<u> </u>		
Total DSEs	-		0.00	Total DSEs	!		0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FO	RTY-THIRD	SUBSCRIBER GROU	Р	ONE HUNDRED FO	RTY-FOURTH	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	
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	es above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462								
				TE FEES FOR EAC				
		SUBSCRIBER GROUP		II .		H SUBSCRIBER GROUF		9
COMMUNITY/ AREA	······································		0	COMMUNITY/ AREA			0	Computation
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								and
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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	
ONE HUNDRED FORT	TY-SEVENTH	SUBSCRIBER GROUP	1	ONE HUNDRED FO	RTY-EIGHTI	SUBSCRIBER GROUF)	
COMMUNITY/ AREA	A		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	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462								
				TE FEES FOR EACH				
ONE HUNDRED FOR		SUBSCRIBER GROU		II		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>				<u></u>			and
	····				<mark></mark>			Syndicated Exclusivity
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Total DSEs			0.00	Total DSEs	_	11	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
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Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
		SUBSCRIBER GROU		h		SUBSCRIBER GROU		
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	
Dana Data Fan Thind	Craun		0.00	Basa Bata Fao Faunt	h C		0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	п Стоир	\$	0.00	
Page Pate Face Add	the base ref	to food for each other	oribor arous	as shown in the haves	above			
Enter here and in bloo			mber group	as shown in the boxes	abuve.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462								
				ATE FEES FOR EACH				
COMMUNITY/ AREA		SUBSCRIBER GROU)P 0	ONE HUNDRED FIFT COMMUNITY/ AREA		I SUBSCRIBER GROU	JP 0	9
	BOE				T 505	T car a cross		Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
					···			and
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								Exclusivity
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Total DSEs			0.00	Total DSEs	1	ļļ.	0.00	
			0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED F	IFTY-FIFTH	SUBSCRIBER GROU	JP	ONE HUNDRED FI	FTY-SIXTH	I 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	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		LE SYSTEM:				S	YSTEM ID# 007462	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		-
ONE HUNDRED FIFTY	-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED F	IFTY-EIGHTH	SUBSCRIBER GROUP)	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		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 SIGIN	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
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								Partially Distant
							<u></u>	Stations
						-		Gtations
					••••		•••••	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-NINTH	SUBSCRIBER GROUP	•	ONE HUNDF	RED SIXTIETH	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 G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE CABLE ONE,, INC		LE STSTEIVI:				3	007462	Mana
BI	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCF	RIBER GROUP		9
	FIRST	SUBSCRIBER GRO	UP		SECOND	SUBSCRIBER GRO	UP	^
COMMUNITY/ AREA	Dakota	l		COMMUNITY/ AREA	So. Sio	ux City/Dakota Co	ounty	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant Stations
						<u> </u>		Base Rate F
								and
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		Ц			ļ	Н		
otal DSEs			0.00	Total DSEs			0.00	
D into Finat O		. 42	742.00	O Di-t- O	1 - 0		60.742.00	
Gross Receipts First G	iroup	\$ 42	,743.00	Gross Receipts Secor	na Group	\$ 1	69,742.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
					1001(11	OODOONIDEN ONO	_	
COMMUNITY/ AREA	Sioux	City/Sergeant/No	. Sloux C	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs		11	0.00	Total DSEs			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$ 2,457	,981.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
							,	
			criber group	as shown in the boxes	above.	•	0.00	
Enter here and in block	k 3, line 1,	space ∟ (page 7)				\$	0.00	

Name	O07462	S			•	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE,, INC.
				TE FEES FOR EACH				BL
9		SUBSCRIBER GROU	SIXTH	001414111777777		SUBSCRIBER GRO	FIFTH	00144111777
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computation	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	IP	SUBSCRIBER GROU	EIGHTH		JP	SUBSCRIBER GRO	SEVENTH	S
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0.00			Total DSEs	0.00			Total DSEs
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		\$	Group			\$	Group	

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NIN	A: COMPUTATION C TH SUBSCRIBER GR		TE FEES FOR EAG		RIBER GROUP I SUBSCRIBER GRO	ID	
OMMUNITY/ AREA	TH OODOONBER ON	0	COMMUNITY/ ARE		I OODOONIDEN ONO	0	9
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of Base Rate For and Syndicated Exclusivity Surcharge for Partially Distant Stations
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otal DSEs		0.00	Total DSEs			0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ELEVEN ⁻	TH SUBSCRIBER GR	OUP		TWELVTH	I SUBSCRIBER GRO	UP	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	U	0.00	Total DSEs		11	0.00	
otal DSEs					•	0.00	
otal DSEs	¢	0.00			\$		
otal DSEs ross Receipts Third Group	<u>\$</u>	0.00	Gross Receipts Fou	irth Group	<u>Ψ</u>	0.00	

Name	YSTEM ID# 007462	S`				LE SYSTEM:		CABLE ONE,, INC
				TE FEES FOR EACH				
۵	JP	SUBSCRIBER GROU	IRTEENTH			SUBSCRIBER GRO	RTEENTH	THII
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
. Computation	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe							<u></u>	
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	0.00			Total DSEs	0.00		<u> </u>	Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	iroup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	JP	I SUBSCRIBER GROU	IXTEENTH	S	UP	SUBSCRIBER GRO	FTEENTH	FI
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	DSE			Total DSEs	0.00			Total DSEs
		\$			0.00	\$	Group	Total DSEs Gross Receipts Third (

COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA COMMUNITY/ AREA
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CALL SIGN DSE CALL SIGN DSE Of
Base Rate
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\$ 0.00 Gross Receipts Second Group \$ 0.00
\$ 0.00 Base Rate Fee Second Group \$ 0.00
SUBSCRIBER GROUP TWENTIETH SUBSCRIBER GROUP
0 COMMUNITY/ AREA 0
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE
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\$ 0.00 Gross Receipts Fourth Group \$ 0.00

Name 9	YSTEM ID# 007462					LE SYSTEM:		CABLE ONE,, INC
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (Bl
0	JP	SUBSCRIBER GROU	'-SECOND			SUBSCRIBER GROU	TY-FIRST	
Computatio	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	\$	d Group	Base Rate Fee Secon	0.00	\$	iroup	Base Rate Fee First G
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	DSE	SUBSCRIBER GROU	DSE	TWENTY COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	DSE DSE	TWENT COMMUNITY/ AREA CALL SIGN
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Name 9	YSTEM ID# 007462	S`				LE SYSTEM:		CABLE ONE,, INC
				TE FEES FOR EACH				
۵		SUBSCRIBER GROU	ITY-SIXTH			SUBSCRIBER GRO	NTY-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computation	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	\$	Group	Gross Receipts First G
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= -	JP	SUBSCRIBER GROU	Y-EIGHTH	TWENT	UP	SUBSCRIBER GRO	SEVENTH	TWENTY-
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	TWENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GRO	SEVENTH	
		SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GRO	SEVENTH	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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Name	YSTEM ID# 007462	S				LE SYSTEM:		CABLE ONE,, INC
				TE FEES FOR EACH				
۵		SUBSCRIBER GROU	HIRTIETH			SUBSCRIBER GRO	TY-NINTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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and		-						
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for								
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	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	iroup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Froup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	-SECOND	THIRT	UP	SUBSCRIBER GRO	TY-FIRST	THIR
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0.00 DSE	SUBSCRIBER GROU	d Group Y-EIGHTH DSE	Base Rate Fee Second SIXT COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 JP	SUBSCRIBER GROU	DSE	SIXTY-S OMMUNITY/ AREA CALL SIGN otal DSEs
	0.00 P	\$ SUBSCRIBER GROU	d Group Y-EIGHTH DSE	Base Rate Fee Second SIXT COMMUNITY/ AREA CALL SIGN	0.00 JP O DSE	SUBSCRIBER GROU	DSE	ase Rate Fee First Gr SIXTY-S OMMUNITY/ AREA CALL SIGN
	0.00 DSE	SUBSCRIBER GROU	d Group Y-EIGHTH DSE	Base Rate Fee Second SIXT COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 JP	SUBSCRIBER GROU	DSE	Siross Receipts First Gr SIXTY-S COMMUNITY/ AREA CALL SIGN Otal DSEs Gross Receipts Third G
	0.00 DSE	SUBSCRIBER GROU	d Group Y-EIGHTH DSE Group	Base Rate Fee Second SIXT COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 JP	SUBSCRIBER GROU	DSE	ase Rate Fee First Gr SIXTY-S OMMUNITY/ AREA CALL SIGN otal DSEs

Name	007462	S'						CABLE ONE,, INC
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9	JP	SUBSCRIBER GROU	VENTIETH			SUBSCRIBER GROU	TY-NINTH	
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	JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	ITY-FIRST	SEVEN
	JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	ITY-FIRST	SEVEN
	JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
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	JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA CALL SIGN
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LEGAL NAME OF OWNE		LE SYSTEM:				S	YSTEM ID# 007462	Name
Bl	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCR	RIBER GROUP		
SEVEN ⁻	Y-THIRD	SUBSCRIBER GRO	UP	SEVENT	Y-FOURTH	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
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Total DSEs	 		0.00	Total DSEs			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	nd Group	\$	0.00	
SEVEN	TY-FIFTH	SUBSCRIBER GRO	UP	SEVE	NTY-SIXTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	SEVENTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				
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Total DSEs			0.00	Total DSEs		П	0.00	
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ase Rate Fee: Add th			criber group	as shown in the boxes	above.	\$		

<u> </u>	YSTEM ID# 007462	S			•	LE SYSTEM:		LEGAL NAME OF OWNER CABLE ONE,, INC.
				TE FEES FOR EACH				
9	JP	SUBSCRIBER GROU	Y-EIGHTH	SEVENT		SUBSCRIBER GRO	SEVENTH	SEVENTY-S
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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]	JP	SUBSCRIBER GROU	IGHTIETH	Е	JP	SUBSCRIBER GRO	ΓΥ-ΝΙΝΤΗ	SEVENT
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	YSTEM ID# 007462	S`				LE SYSTEM:		CABLE ONE,, INC
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9		SUBSCRIBER GROU	-SECOND			SUBSCRIBER GRO	ITY-FIRST	
Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	JP 0	SUBSCRIBER GROU	/-FOURTH	EIGHT COMMUNITY/ AREA	UP 0	SUBSCRIBER GRO	TY-THIRD	
		SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GRO	TY-THIRD	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	YSTEM ID# 007462					LE SYSTEM:		CABLE ONE,, INC
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9		SUBSCRIBER GROU	ITY-SIXTH			SUBSCRIBER GROU	ITY-FIFTH	
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	UP 0		Y-EIGHTH	EIGH ⁻	UP		SEVENTH	EIGHTY-C
	UP 0	SUBSCRIBER GROU	Y-EIGHTH	EIGH* COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	SEVENTH	EIGHTY-C
	UP 0	SUBSCRIBER GROU	Y-EIGHTH	EIGH* COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	SEVENTH	EIGHTY-C
	UP 0	SUBSCRIBER GROU	Y-EIGHTH	EIGH* COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	SEVENTH	EIGHTY-C
	UP 0	SUBSCRIBER GROU	Y-EIGHTH	EIGH* COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	SEVENTH	EIGHTY-C
	UP 0	SUBSCRIBER GROU	Y-EIGHTH	EIGH* COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	SEVENTH	EIGHTY-C
	UP 0	SUBSCRIBER GROU	Y-EIGHTH	EIGH* COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	SEVENTH	EIGHTY-C
	UP 0	SUBSCRIBER GROU	Y-EIGHTH	EIGH* COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	SEVENTH	EIGHTY-: COMMUNITY/ AREA
	UP 0	SUBSCRIBER GROU	Y-EIGHTH	EIGH* COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	SEVENTH	EIGHTY-C
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	UP 0	SUBSCRIBER GROU	Y-EIGHTH	EIGH* COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	SEVENTH	EIGHTY-C
	UP 0	SUBSCRIBER GROU	Y-EIGHTH	EIGH* COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	UP 0	SUBSCRIBER GROU	Y-EIGHTH	EIGH* COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	SEVENTH	EIGHTY-C
	DSE	SUBSCRIBER GROU	Y-EIGHTH	EIGH* COMMUNITY/ AREA	DSE	SUBSCRIBER GROU	SEVENTH	EIGHTY-S
	DSE DSE O.00	SUBSCRIBER GROU	Y-EIGHTH DSE	EIGHT COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE	CALL SIGN	DSE	EIGHTY-S COMMUNITY/ AREA CALL SIGN Total DSEs
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	0		NINETY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA				NINETY-FIRST SUBSCRIBER G		
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Name	O07462	NER OF CABLE SYSTEM: IC. SYSTEM ID 00746						
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GRO	TY-THIRD	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	IP	SUBSCRIBER GROU	TY-SIXTH		JP	SUBSCRIBER GRO	TY-FIFTH	NINE
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		007462 A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP						
	ID							
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Name	O07462	F OWNER OF CABLE SYSTEM: SYSTEM ID 00746						
				TE FEES FOR EACH				
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9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	IP	SUBSCRIBER GROU	FOURTH	ONE HUNDRE	JP	SUBSCRIBER GRO	ED THIRD	ONE HUNDRE
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NI	YSTEM ID# 007462							
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9		SUBSCRIBER GROU	RED SIXTH			SUBSCRIBER GRO	ED FIFTH	
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	JP	SUBSCRIBER GROU	D EIGHTH	ONE HUNDRE	JP	SUBSCRIBER GRO	SEVENTH	ONE HUNDRED S
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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				TE FEES FOR EACH				
<u>,</u> 9		SUBSCRIBER GRO	ED TENTH	H		SUBSCRIBER GROU	D NINTH	
0 Computatio	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	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
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		CALL SIGN	DSE	ii e		SUBSCRIBER GROU	DSE	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	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
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	007462	F CABLE SYSTEM: SYSTEM II 00740						
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
	JP	SUBSCRIBER GROU	RTEENTH	ONE HUNDRED FOU	JP	SUBSCRIBER GROU	RTEENTH	ONE HUNDRED THIR
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	JP	SUBSCRIBER GROU	XTEENTH	ONE HUNDRED S	JP	SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
) 	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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_	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

	YSTEM ID# 007462	S'		CABLE ONE,, INC				
		IBER GROUP	SUBSCR	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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=		\$ SUBSCRIBER GROU				SUBSCRIBER GROU		
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-	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII
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- - - - - -	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII
- - - - - - - -	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII COMMUNITY/ AREA
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	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	COMMUNITY/ AREA
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		11							
		BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED TWENTY-FIRST SUBSCRIBER GROUP ONE HUNDRED TWENTY-SECOND SUBSCRIBER GROUP							
CALL SIGN	0	11	NIT-SECUNL	SUBSCRIBER GROUP)	٥			
CALL SIGN		COMMUNITY/ AREA	Α		0	9 Computation			
O/ LEE OIOIV	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of			
						Base Rate Fee			
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	0.00	Total DSEs			0.00				
\$	0.00	Gross Receipts Sec	ond Group	\$	0.00				
\$	0.00	Base Rate Fee Second	ond Group	\$	0.00				
DD CURCORINER CROI	ID.	ONE LILINDRED TWE	NTV FOURT	I CLIDCODIDED CDOLL	,				
RD SUBSCRIBER GROU		ii -		1 SUBSCRIBER GROUP					
		COMMUNITY/ AREA	٠						
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
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3	0.00	Gross Receipts Foul	ші Стоир	a	0.00				
\$	0.00	Base Rate Fee Four	th Group	\$	0.00				
	\$ CALL SIGN \$ \$ \$ \$ \$	\$ 0.00 RD SUBSCRIBER GROUP CALL SIGN DSE CALL SIGN DSE 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ rate fees for each subscriber group	\$ 0.00 Solve the state of the	\$ 0.00 S 0.00 Base Rate Fee Second Group RD SUBSCRIBER GROUP ONE HUNDRED TWENTY-FOURTH COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE O.00 Total DSEs Gross Receipts Second Group Base Rate Fee Fourth Group Base Rate Fee Fourth Group Prate fees for each subscriber group as shown in the boxes above.	\$ 0.00 Base Rate Fee Second Group \$ RD SUBSCRIBER GROUP ONE HUNDRED TWENTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN DSE CALL SIGN Total DSEs Gross Receipts Fourth Group \$ \$ 0.00 Base Rate Fee Fourth Group \$ Prate fees for each subscriber group as shown in the boxes above.	\$ 0.00 Stress Receipts Second Group \$ 0.00 RD SUBSCRIBER GROUP ONE HUNDRED TWENTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs Gross Receipts Fourth Group \$ 0.00 S 0.00 Base Rate Fee Second Group \$ 0.00 Total DSEs Gross Receipts Fourth Group \$ 0.00 S 0.00 Base Rate Fee Fourth Group \$ 0.00 Total DSEs Gross Receipts Fourth Group \$ 0.00 S 0.00			

LEGAL NAME OF OWNE		CABLE SYSTEM: SYSTEM I 0074						
Bl	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED TWE	NTY-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
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secor	ia Group	\$	0.00	
Base Rate Fee First G	roup	\$	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	
Gross Receipts Third G	Proup	•	0.00	Gross Receipts Fourth	Group	•	0.00	
Gross Receipts Third G	огоир	\$	0.00	Gross Receipts Fourti	i Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
	e base rat	e fees for each subse		Base Rate Fee Fourth		\$	0.00	

Name	YSTEM ID# 007462	CABLE SYSTEM: SYSTEM I 0074						
		IBER GROUP	SUBSCRI	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
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and								
Syndicated								
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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
		SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIRT		SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIR
	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

	YSTEM ID# 007462	<u> </u>		CABLE ONE,, INC				
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: C	Bl
0)	SUBSCRIBER GROUP	Y-FOURTH	ONE HUNDRED THIR	,	SUBSCRIBER GROUP	RTY-THIRD	ONE HUNDRED THIF
9 Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fo								
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	0.00			Total DSEs	0.00		•	Total DSEs
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	•	SUBSCRIBER GROU						
	•							ONE HUNDRED THIR
	JP			ONE HUNDRED THI	JP			Base Rate Fee First G ONE HUNDRED THIR COMMUNITY/ AREA
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	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THII	JP 0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED THIR
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THII	JP 0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED THIR
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THII	JP 0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED THIR
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THII	JP 0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED THIR
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THII	JP 0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED THIR
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THII	JP 0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED THIR
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THII	JP 0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED THIR
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THII	JP 0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED THIR COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THII	JP 0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED THIR
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THII	JP 0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED THIR COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THII	JP 0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED THIR
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THII	JP 0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED THIR
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THII	JP 0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED THIR
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THII	JP 0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED THIR
	JP 0 DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED THII COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	TY-FIFTH DSE	ONE HUNDRED THIR COMMUNITY/ AREA CALL SIGN

LEGAL NAME OF OWNER CABLE ONE,, INC.	R OF CABL	CABLE SYSTEM: SYSTEM I 0074						
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED THIRTY-	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED THIR	TY-EIGHTH	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
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								for
								Partially
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Total DSEs			0.00	Total DSEs	ļ	Ш	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
•	-			-				
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED THIRT	Y-NINTH	SUBSCRIBER GROU	JP	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 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			criber group	as shown in the boxes a	above.	\$		

CABLE ONE,, INC		LE SYSTEM:				S	007462	Name
				TE FEES FOR EAC				
	RTY-FIRST	SUBSCRIBER GROU		ONE HUNDRED FO		9		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0	Computatio		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
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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	
ONE HUNDRED FOR	RTY-THIRD	SUBSCRIBER GROU	IP	ONE HUNDRED FO	RTY-FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	1		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 th	ne base rat	te fees for each subs	scriber aroun	as shown in the boxe	s above.			

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462								Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	RIBER GROUP		
ONE HUNDRED FOR	RTY-FIFTH	SUBSCRIBER GROUP)	ONE HUNDRED FO		•		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	9 Computation			
CALL SIGN	DSE	CALL SIGN	CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
						<u> </u>		Exclusivity
		-				<u> </u>		Surcharge
								for
			<u>.</u>			.	<u></u>	Partially
	 		 		·		<u></u>	Distant
					-		<u></u>	Stations
						H	<u></u>	
	·		 		•	-	 	
			······			-	<u></u>	
						<u> </u>		
			·				····	
Total DSEs	<u> </u>		0.00	Total DSEs	1		0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FORTY-	SEVENTH	SUBSCRIBER GROUP)	ONE HUNDRED FOR	RTY-EIGHTH	I SUBSCRIBER GROUP		
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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	ļ				·		<u></u>	
	 		 				<u> </u>	
	 				·	-	<u></u>	
Total DSEs			0.00	Total DSEs	1		0.00	
Gross Receipts Third G	Froup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add th			criber group	as shown in the boxes a	above.	\$		

	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462								
				TE FEES FOR EACH					
0	JP	SUBSCRIBER GROU	ONE HUNDRE		SUBSCRIBER GRO	TY-NINTH	ONE HUNDRED FOR		
9 Computation	COMMUNITY/ AREA 0				0			COMMUNITY/ AREA	
of	DSE	I II				CALL SIGN	DSE	CALL SIGN	
Base Rate Fe									
and									
Syndicated									
Exclusivity									
Surcharge									
for									
Partially									
Distant							<u> </u>		
Stations									
	0.00		•	Total DSEs	0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G	
	JP	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT	UP	SUBSCRIBER GRO	TY-FIRST	ONE HUNDRED FIF	
	COMMUNITY/ AREA 0							COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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			-						
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		-							
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	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462							
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	ONE HUNDRED FIFT		SUBSCRIBER GROU	TY-THIRD	ONE HUNDRED FIFT	
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
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		SUBSCRIBER GROU		ONE HUNDRED FI	UP			ONE HUNDRED FIF
		SUBSCRIBER GROU		ONE HUNDRED FI COMMUNITY/ AREA	UP 0			
	JP	SUBSCRIBER GROU						
	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
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	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-FIFTH	CALL SIGN
	DSE		DSE	CALL SIGN	DSE	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE,, INC. SYSTEM ID# 007462								
				TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED FIFTY-	SEVENTH	SUBSCRIBER GROUP)	ONE HUNDRED FIR	FTY-EIGHTH	SUBSCRIBER GROUP)	0
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
					<mark></mark>			for
					<mark></mark>			Partially
			 		. 		<u></u>	Distant
					<u> </u>	-		Stations
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			-		<u>-</u>	-	<u></u>	
			 		-	-		
					-	1		
					<u> </u>	1	····	
Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIFT	Y-NINTH	SUBSCRIBER GRO	UP	ONE HUNDRED	SIXTIETH	SUBSCRIBER GRO	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>		<u> </u>	
					<u> </u>		<u> </u>	
			 		<u></u>		<u> </u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
e base r				Base Rate Fee Fourth		\$	0.00	

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE., INC. 007462 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 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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