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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY							
DATE RECEIVED	AMOUNT						
02/28/2019	\$ 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	2018/2									
	Instructions:									
B Owner	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 submit a single statement of account and royalty fee payment covering the entire accounting period Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.									
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM									
	CABLE ONE, INC.									
	01455220182									
				014552 2018/2						
	210 E. EARLL DRIVE									
	PHOENIX, AZ 85012-2626									
С	INSTRUCTIONS: In line 1, give any business or trade names used to id	dentify the busines	ss and operation of the syst	em unless these						
C	names already appear in space B. In line 2, give the mailing address of	the system, if diffe	erent from the address give	n in space B.						
System	1 IDENTIFICATION OF CABLE SYSTEM:									
	MAILING ADDRESS OF CABLE SYSTEM:									
	2 (Number, street, rural route, apartment, or suite number)									
	NORFOLK, NE 68702-1689									
	(City, town, state, zip code)									
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and rel	ist on page 1b						
Area	with all communities.									
Served	CITY OR TOWN	STATE								
First	NORFOLK	NE								
Community	Below is a sample for reporting communities if you report multiple cha	nnel line-ups in S	pace G.							
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#						
Sample	Alda	MD	Α	1						
•	Alliance	MD	В	2						
	Gering	MD	В	3						

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

FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 014552 CABLE ONE, INC. Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE **CH LINE UP** SUB GRP# **NORFOLK** NE First **BATTLE CREEK** Α NE Community **BEEMER** NE В **EASTERN HEIGHTS** NE Α **HADAR** NE Α 4 HOSKINS NE Α See instructions for **MADISON** NE A additional information on alphabetization. MADISON COUNTY NE Α 1 **PIERCE** NE 4 **PILGER** NE Α **RANDOLPH** NE Α 4 Add rows as necessary. **TILDEN** A 3 NE В 5 **WEST POINT** NE **WISNER** NE В 5 **WOODLAND PARK** NE

Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

014552

Ε

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLO	OCK 1		BLOCK 2			
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	
Residential:						
 Service to first set 	4,049	\$ 20.00	BULK RESIDENTIAL	911	620.00	
 Service to additional set(s) 	7,086					
 FM radio (if separate rate) 						
Motel, hotel	201	3.5-10.00				
Commercial						
Converter						
Residential						
Non-residential						
1	1	1	1 1	1	1	

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLO	CK 1		BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
Pay cable	8.95-14.95	Motel, hotel	1040.00	EXPANDED BASIC	\$ 33.00
 Pay cable—add'l channel 		Commercial	1040.00		
Fire protection		 Pay cable 	515.00		
Burglar protection		 Pay cable-add'l channel 			
Installation: Residential		Fire protection			
First set	0-75.00	 Burglar protection 			
 Additional set(s) 	1030.00	Other services:			
FM radio (if separate rate)		Reconnect	\$ 30.00		
Converter		Disconnect			
		Outlet relocation			
		Move to new address	\$ 15.00		

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name CABLE ONE, INC. 014552 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-DT1 9 Ν No SIOUX CITY, IA **KCAU-DT2** 9 No SIOUX CITY, IA See instructions for additional information **KETV** 20 Ν Yes 0 OMAHA, NE on alphabetization. Ν No **KMEG** 39 SIOUX CITY, IA I-M KNEN-3 35 No NORFOLK, NE KNEN-LD 35 I-M No NORFOLK, NE **KOLN** 10 Ν Yes LINCOLN, NE 0 **KPTH** 49 1 No SIOUX CITY, IA SIOUX CITY, IA KTIV-DT1 41 N-M No KTIV-DT2 41 I-M No SIOUX CITY, IA KXNE-DT1 19 E-M No NORFOLK, NE KXNE-DT2 19 E-M No NORFOLK, NE **WOWT** 22 Ν Yes 0 OMAHA, NE

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#
Name
Name

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	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-DT1	9	N	No		SIOUX CITY, IA
KCAU-DT2	9	I	No		SIOUX CITY, IA
KETV	20	N	Yes	0	OMAHA, NE
KMEG	39	N	No		SIOUX CITY, IA
KMTV	45	N	No		OMAHA, NE
KOLN	10	N	Yes	0	LINCOLN, NE
KPTM	43	I	No		OMAHA, NE
KTIV-DT1	41	N-M	No		SIOUX CITY, IA
KTIV-DT2	41	I-M	No		SIOUX CITY, IA
KXNE-DT1	19	E-M	No		NORFOLK, NE
KXNE-DT2	19	E-M	No		NORFOLK, NE
KXVO	38	I	No		OMAHA, NE
WOWT	22	N	Yes	0	OMAHA, NE
	····				1

G

Primary Transmitters: Television

FORM SA3E. PAGE 3.					Account	NG 1 EMOD. 2010/2	
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Nama	
CABLE ONE, IN	IC.				014552	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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 ilcense. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for ind							
		CHANN	EL LINE-UP	AC			
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)			
	• • • • • • • • • • • • • • • • • • • •						
	• • • • • • • • • • • • • • • • • • • •						
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FORM SA3E. PAGE 3.						NG PERIOD: 2018/2	
					SYSTEM ID#	Name	
CABLE ONE, IN	NC.				014552	Name	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(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 bas Substitute Basis S	•			s carried by your o	able system on a substitute program	Transmitters: Television	
basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the							
• List the station here,	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 pages 200 forms.						
Column 1: List eac	h station's call	•		. •	s such as HBO, ESPN, etc. Identify		
cast stream as "WETA WETA-simulcast).	2". Simulcast	streams must	be reported in o	column 1 (list each	tion. For example, report multi- n stream separately; for example		
	e. For example	e, WRC is Ch	-		on for broadcasting over-the-air in may be different from the channel		
					ependent station, or a noncommercial ast), "I" (for independent), "I-M"		
(for independent multion	cast), "E" (for n	oncommercia	l educational), o	r "E-M" (for nonco	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					e paper SA3 form. stating the basis on which your		
					tering "LAC" if your cable system		
carried the distant stat	•				capacity. y payment because it is the subject		
of a written agreement	entered into o	n or before Ju	ine 30, 2009, be	tween a cable sys	stem or an association representing		
,			•	• .	ry transmitter, enter the designa- ther basis, enter "O." For a further		
explanation of these th	ree categories	, see page (v)	of the general i	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	AD			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			
							

FORM SA3E. PAGE 3.								
	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#				Name			
CABLE ONE, II	NC.				014552	Name		
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a								
. , , , , , , , , , , , , , , , , , , ,	. , . ,	,	•	1(e)(2) and (4))]; a	and (2) certain stations carried on a	Primary 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 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								
·								
	formation cond				rute basis and also on some other f the general instructions located			
		•		. •	s such as HBO, ESPN, etc. Identify			
			•	•	tion. For example, report multi- n stream separately; for example			
Column 2: Give the			•		on for broadcasting over-the-air in may be different from the channel			
	in each case v	whether the st			ependent 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 serv	vice area, (i.e. "c	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	tering "LAC" if your cable system capacity. y payment because it is the subject			
					stem or an association representing			
•			•	• .	ry transmitter, enter the designa- ther basis, enter "O." For a further			
explanation of these th	ree categories	, see page (v)	of the general i	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 utilizir	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.			
		CHANN	EL LINE-UP	AE				
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE				
	NUMBER	STATION		(If Distant)				
	<u> </u>							

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

carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program ba Substitute Basis basis under specifc F	G, identify every system during the	y television sta he accounting	` .	translator atations	014552	Name
In General: In space carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program ba Substitute Basis basis under specifc F	G, identify every system during the tions in effect or	y television sta he accounting	` .	translator atations		
carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program ba Substitute Basis basis under specifc F	system during the tions in effect or	he accounting	` .	translator atations		
basis. For further in the paper SA3 f Column 1: List ea each multicast stream cast stream as "WET WETA-simulcast). Column 2: Give the stream on which your cable s Column 3: Indicated actional station, but (for independent multifor the meaning of the Column 4: If the splanation of local ser Column 5: If you cable system carried the distant station for the retransmits of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or	Stations: With a CC rules, regular here in space of only on a subset, and also in spanformation concorm. In associated with A-2". Simulcast are channel numbers of each case of the concorm of a concorm of a distant of the concorm of a co	4), or 76.63 (red in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the staterning substit sign. Do not red a station ace streams must be the FCC heart with the station. Whether the station whether the station accommercial page (v) of the es" in column on during the same basis becar multicast stream or before Jumitter or an accommercial page (v) of the es" in column on during the same basis becar multicast stream or before Jumitter or an accommercial page (v) of the es" in column on during the same basis becar multicast stream or before Jumitter or an accommercial page (v) of the station. For one, if any, giving the same page (v) ch station. For one, if any, giving the same page (v) ch station.	B1, permitting the referring to 76.6 coaragraph. It distant stations orizations: at it in space I (the station was carried ute basis station cording to its over be reported in coara assigned to the station is a network etwork), "N-M" (to educational), or egeneral instruction of the station is a network etwork), "N-M" (to educational), or egeneral instruction etwork), "N-M" (to educational), etwork et	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your control of the carried by the carrie	es". If not, enter "No". For an expaper SA3 form. Istating the basis on which your ering "LAC" if your cable system capacity. In payment because it is the subject stem or an association representing the your capacity ransmitter, enter the designation in the paper SA3 form. It is which the station is licensed by the which the station is identifed.	Primary Transmitters Television
Note: If you are utiliz	Tig malapio onai		EL LINE-UP		oralinor into ap.	
4.0011	2. B'CAST			5. BASIS OF	C LOCATION OF STATION	
1. CALL SIGN	CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	CARRIAGE	6. LOCATION OF STATION	
	NUMBER	STATION	,	(If Distant)		
	_L	 				

FORM SA3E. PAGE 3.					ACCOUNT	NG PERIOD: 2018/2
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, IN	C.				014552	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
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 Sibasis under specific FC Do not list the station station was carried of List the station here, a basis. For further infinite paper SA3 for Column 1: List each each multicast stream as "WETA-Simulcast). Column 2: Give the its community of licension which your cable sy: Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you ha cable system carried the carried the distant station. For the retransmission of a written agreement the cable system and a tion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or C	is, identify every ystem during the ons in effect or 61(e)(2) and (6) is, as explaine tations: With r C rules, regular here in space only on a substand also in spatormation concomment. In station's call associated with 2". Simulcast schannel numbers are carried the in each case ventering the least), "E" (for no se terms, see pation is outside the area, see pation of a distant tentered "Ye e distant station on a part-tiron of a distant tentered into or primary transification of each anadian station and station of each anadian stations."	r television standard accounting and June 24, 1984), or 76.63 (rd din the next prespect to any titions, or auth G—but do list titute basis. In the standard acceptance of the station acceptance of the station acceptance of the station. It is station acceptance of the station. It is station acceptance of the station. It is station acceptance of the station. It is station. It is station acceptance of the station. It is station and uning the station of the station of the station. It is see page (v) of the station. For the station. For the station of the station. For the station of the station of the station. For the station of the station of the station of the station of the station. For the station of the	period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried ute basis station to the report origination cording to its own be reported in comparation as assigned to the reported in the report origination of the station is a network etwork), "N-M" (if a decartional), one general instruction of the station is a network etwork), "N-M" (if a decartional), one general instruction of the station of the search that is not some 30, 2009, be sesociation repression of the general in the stations, if the general in the stations of the stations	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your context of the second o	paper SA3 form. stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing y transmitter, enter the 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.	Primary Transmitters: Television
Note: If you are utilizing	g multiple char	•	·		cnannei line-up.	
I		CHANN	EL LINE-UP	AG		
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
31314	NUMBER	STATION	, ,	(If Distant)		

FORM SA3E. PAGE 3.						NG PERIOD: 2018/2	
					SYSTEM ID#	Name	
CABLE ONE, INC. 014552 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 spa formation cond	ice I, if the sta			ute basis and also on some other fthe general instructions located		
each multicast stream cast stream as "WETA WETA-simulcast).	associated with a-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	se. For example ystem 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	entering the lecast), "E" (for n	tter "N" (for no oncommercia	etwork), "N-M" (l educational), o	for network multic r "E-M" (for nonco	ast), "I" (for independent), "I-M" mmercial educational multicast).		
Column 4: If the st planation of local servi	ation is outside ce area, see pa	the local servage (v) of the	rice area, (i.e. "c general instructi	distant"), enter "Ye ions located in the	s". If not, enter "No". For an expaper 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 designa-							
tion "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 (Note: If you are utilizing		, ,, ,		,	which the station is identifed. channel line-up.		
		CHANN	EL LINE-UP	АН			
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		
	NUMBER	STATION		(If Distant)			
	ı	ı		i	ı I		

FORM SA3E. PAGE 3.								
	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#				Name			
CABLE ONE, IN	NC.				014552	Name		
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(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								
. , . , . , . , . , . , . , . , . , . ,	. , . ,	,	•	1(e)(2) and (4))]; a	and (2) certain stations carried on a	Primary 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 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								
·								
· ·	formation cond				ute basis and also on some other f the general instructions located			
		•		. •	s such as HBO, ESPN, etc. Identify			
			•	•	tion. For example, report multi- n stream separately; for example			
Column 2: Give the					on for broadcasting over-the-air in may be different from the channel			
	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" mmercial educational multicast).			
For the meaning of the Column 4: If the staplanation of local servi	ation is outside	the local serv	vice area, (i.e. "c	distant"), enter "Ye	s". If not, enter "No". For an ex-			
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			
carried the distant stat	ion on a part-tii	me basis beca	ause of lack of a	ctivated channel o	ering "LAC" if your cable system capacity. payment because it is the subject			
					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 i	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	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.			
		CHANN	EL LINE-UP	Al				
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)				
	HOMBER	CIXIIGN		(ii Biotant)				

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

FORM SA3E. PAGE 3.					ACCOUNT	NG PERIOD: 2018/2
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				014552	Name
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) and 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 o	able system on a substitute program	Transmitters: Television
	here in space	G-but do lis		e Special Stateme	ent and Program Log)—if the	
· ·	and also in spa formation cond	ace I, if the sta			tute basis and also on some other f the general instructions located	
Column 1: List eac	h station's call	•		. •	s such as HBO, ESPN, etc. Identify	
cast stream as "WETA WETA-simulcast).	2". Simulcast	streams must	be reported in o	column 1 (list each	tion. For example, report multi- n stream separately; for example	
its community of licens on which your cable sy	se. For example stem carried th	e, WRC is Cha ne station.	annel 4 in Wash	ington, D.C. This	on for broadcasting over-the-air in may be different from the channel	
educational station, by	entering the le	tter "N" (for n	etwork), "N-M" (for network multic	ependent station, or a noncommercial ast), "I" (for independent), "I-M"	
For the meaning of the	ese terms, see	page (v) of the	e general instruc	ctions located in th	ommercial educational multicast). 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		
carried the distant stat	ion on a part-tiı	me basis beca	ause of lack of a	ctivated channel	. ,	
of a written agreement	entered into o	n or before Ju	ine 30, 2009, be	tween a cable sys	r payment because it is the subject stem or an association representing	
tion "E" (exempt). For	simulcasts, also	o enter "E". If	you carried the	channel on any ot	ry transmitter, enter the designa- ther 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	
Note: If you are utilizing		. ,		•	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AJ		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
	HOMBER	CIATION		(ii Biotairt)		

FORM SA3E. PAGE 3.					ACCOUNT	NG PERIOD: 2018/2
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, IN	IC.				014552	Name
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 6.61(e)(2) and (sis, as explaine	ne accounting I June 24, 198 4), or 76.63 (r d in the next p	period, except 31, permitting th eferring to 76.6° paragraph.	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program	G Primary Transmitters: Television
basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List 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 4: If the sta planation of local servic Column 5: If you the cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For sexplanation of these th Column 6: Give the	C rules, regular here in space only on a substand also in spatformation concern. In station's call associated with associated with associated with e.e. For example stem carried the in each case wentering the least), "E" (for no see terms, see pation is outside the distant station on a part-time ion of a distant entered into on a primary transistimulcasts, also ree categories, e location of each canadian statio	tions, or auth- G—but do list itute basis. ce I, if the sta erning substit sign. Do not re a station acc streams must ber the FCC h by WRC is Cha e station. whether the st tter "N" (for ne concommercial brage (v) of the the local serv age (v) of the concommercial brage (v) of th	orizations: It in space I (the Ition was carried Ition was station Ition Itio	e Special Statemer I both on a substitus, see page (v) of a program services er-the-air designat column 1 (list each the television static ington, D.C. This is rk station, an inde for network multica r "E-M" (for nonco stions located in the instant"), enter "Ye ons located in the inplete column 5, s od. Indicate by ent ctivated channel of ubject to a royalty tween a cable sys senting the primar channel on any ot instructions locate list the community with	ent and Program Log)—if the ute basis and also on some other if the general instructions located is such as HBO, ESPN, etc. Identify ion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in imay be different from the channel pendent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). Is paper SA3 form. s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject istem or an association representing y 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.	Television
Note. If you are utilized	y multiple chai		EL LINE-UP	'	Crianner inte-up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE		5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

CABLE ONE,	MILITOI OADLL O	/STEM:			SYSTEM ID#	
PRIMARY TRANSMIT					014552	Name
	TERS: TELEVISIO	ON				
carried by your cable FCC rules and regula 76.59(d)(2) and (4), substitute program b Substitute Basis basis under specifc F Do not list the static station was carrie List the station here basis. For further in the paper SA3 Column 1: List ea each multicast strear cast stream as "WET WETA-simulcast). Column 2: Give t its community of lice on which your cable Column 3: Indica educational station, t (for independent mul For the meaning of th Column 4: If the seplanation of local ser Column 5: If you cable system carried carried the distant state For the retransmis of a written agreeme the cable system and tion "E" (exempt). Fo explanation of these Column 6: Give t	a G, identify even system during the ations in effect or 76.61(e)(2) and (asis, as explaine Stations: With a CC rules, regular on here in space of only on a subset, and also in spainformation conform. The act of the act	y television standard accounting in June 24, 194, or 76.63 (rd in the next) respect to any ations, or auth G—but do list titute basis. In the standard account in a station account in a station account in a station account in the local service (v) of the local service (v)	period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried ute basis station to the report origination cording to its own be reported in comparation as assigned to the reported in the report origination of the station is a network etwork), "N-M" (if a decartional), one general instruction of the station is a network etwork), "N-M" (if a decartional), one general instruction of the station of the search that is not some 30, 2009, be sesociation repression of the general in the stations, if the general in the stations of the stations	(1) stations carried to carriage of certa 1(e)(2) and (4))]; as a carried by your context of the carried by the carr	es". If not, enter "No". For an expaper SA3 form. Istating the basis on which your ering "LAC" if your cable system capacity. In payment because it is the subject stem or an association representing by transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form. It to which the station is licensed by the which the station is identifed.	G Primary Transmitters Television
vote. Il you are uniz	g manpic onai		EL LINE-UP		onamier inte ap.	
4.001	O DICAGE				C LOCATION OF STATION	
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
	NUMBER	STATION		(If Distant)		

FORM SA3E. PAGE 3.					ACCOUNTI	NG PERIOD: 2018/2
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				014552	Name
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) and 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 o	able system on a substitute program	Transmitters: Television
	here in space	G-but do lis		e Special Stateme	ent and Program Log)—if the	
	and also in spa formation cond	ace I, if the sta			tute basis and also on some other f the general instructions located	
Column 1: List eac	h station's call	•		. •	s such as HBO, ESPN, etc. Identify	
cast stream as "WETA WETA-simulcast).	2". Simulcast	streams must	be reported in o	column 1 (list each	tion. For example, report multi- n stream separately; for example	
	e. For example	e, WRC is Ch	-		on for broadcasting over-the-air in may be different from the channel	
					ependent station, or a noncommercial ast), "I" (for independent), "I-M"	
	cast), "E" (for n	oncommercia	l educational), o	r "E-M" (for nonco	ommercial educational multicast).	
Column 4: If the st	ation is outside	the local serv	vice area, (i.e. "c	distant"), enter "Ye	es". If not, enter "No". For an ex-	
planation of local servi Column 5: If you have					e paper SA3 form. Stating the basis on which your	
cable system carried the carried the distant stat		•	٠.	•	tering "LAC" if your cable system	
For the retransmiss	ion of a distant	multicast stre	eam that is not s	subject to a royalty	payment because it is the subject	
				•	stem or an association representing ry transmitter, enter the designa-	
tion "E" (exempt). For	simulcasts, also	o enter "E". If	you carried the	channel on any ot	her basis, enter "O." For a further	
					or 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.	
Note: If you are utilizing	ig multiple chai	•	EL LINE-UP	•	channer inte-up.	
4 0011	O D'CACT				C LOCATION OF STATION	
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
	NUMBER	STATION	,	(If Distant)		
		<u> </u>				
						

FORM SA3E. PAGE 3.					ACCOUNTI	NG PERIOD: 2018/2
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				014552	Name
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) and 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 o	able system on a substitute program	Transmitters: Television
	here in space	G-but do lis		e Special Stateme	ent and Program Log)—if the	
	and also in spa formation cond	ace I, if the sta			tute basis and also on some other f the general instructions located	
Column 1: List eac	h station's call	•		. •	s such as HBO, ESPN, etc. Identify	
			•	•	tion. For example, report multi- n stream separately; for example	
	e. For example	e, WRC is Ch	-		on for broadcasting over-the-air in may be different from the channel	
					ependent station, or a noncommercial ast), "I" (for independent), "I-M"	
(for independent multion	cast), "E" (for n	oncommercia	l educational), o	r "E-M" (for nonco	ommercial educational multicast).	
For the meaning of the Column 4: If the sta					ne paper SA3 form. es". If not, enter "No". For an ex-	
planation of local servi						
					stating the basis on which your tering "LAC" if your cable system	
carried the distant stat	•				capacity. y payment because it is the subject	
of a written agreement	entered into o	n or before Ju	ine 30, 2009, be	tween a cable sys	stem or an association representing	
,			•	• .	ry transmitter, enter the designa- ther basis, enter "O." For a further	
explanation of these th	ree categories	, see page (v)	of the general i	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	AN		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		

FORM SA3E. PAGE 3.					ACCOUNTI	NG PERIOD: 2018/2
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				014552	Name
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) and 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 o	able system on a substitute program	Transmitters: Television
	here in space	G-but do lis		e Special Stateme	ent and Program Log)—if the	
	and also in spa formation cond	ace I, if the sta			tute basis and also on some other f the general instructions located	
Column 1: List eac	h station's call	•		. •	s such as HBO, ESPN, etc. Identify	
cast stream as "WETA WETA-simulcast).	2". Simulcast	streams must	be reported in o	column 1 (list each	tion. For example, report multi- 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	
					ependent station, or a noncommercial ast), "I" (for independent), "I-M"	
	cast), "E" (for n	oncommercia	l educational), o	r "E-M" (for nonco	ommercial educational multicast).	
Column 4: If the st	ation is outside	the local serv	vice area, (i.e. "c	distant"), enter "Ye	es". If not, enter "No". For an ex-	
planation of local servi Column 5: If you have					e paper SA3 form. Stating the basis on which your	
cable system carried the carried the distant stat		•	٠.	•	tering "LAC" if your cable system	
For the retransmiss	ion of a distant	multicast stre	eam that is not s	subject to a royalty	payment because it is the subject	
_				•	stem or an association representing ry transmitter, enter the designa-	
tion "E" (exempt). For	simulcasts, also	o enter "E". If	you carried the	channel on any ot	her basis, enter "O." For a further	
					or 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.	
Note: If you are duite!	ig multiple chai		EL LINE-UP	<u> </u>	Grianner inte-up.	
4 0011	O D'CACT				C LOCATION OF STATION	
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
	NUMBER	STATION	,	(If Distant)		
		<u> </u>				
						

FORM SA3E. PAGE 3. LEGAL NAME OF OWN	JED OF CARLE O	/QTEN4·			SYSTEM ID#	
CABLE ONE, IN		rSTEM:			014552	Name
PRIMARY TRANSMITTI		ON .				
carried by your cable s FCC rules and regulat	system during to ions in effect or 5.61(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) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary Transmitters:
				s carried by your o	able system on a substitute program	Television
 basis under specifc FC Do not list the station station was carried 	here in space	G-but do lis		e Special Stateme	ent and Program Log)—if the	
 List the station here, 	and also in spa nformation cond	ace I, if the sta			ute basis and also on some other f the general instructions located	
Column 1: List eac	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	
			tation is a netwo	ork station, an inde	ependent station, or a noncommercial	
	•	•	,,		ast), "I" (for independent), "I-M" mmercial educational multicast).	
For the meaning of the	ese terms, see	page (v) of the	e general instru	ctions located in th	ne paper SA3 form.	
planation of local servi				**	es". If not, enter "No". For an exepaper SA3 form.	
					stating the basis on which your	
carried the distant stat		•	٠.	•	tering "LAC" if your cable system capacity.	
					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 identifed.	
Note: If you are utilizing	ng multiple chai	• •	EL LINE-UP	•	cnannei iine-up.	
4.041	O DIOACT	1	1		C LOCATION OF STATION	
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
Ololy	NUMBER	STATION	(10001110)	(If Distant)		
	-					
	_	ļ				
	_					

FORM SA3E. PAGE 3.					ACCOUNT	NG PERIOD: 2018/2
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				014552	Name
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	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	G
substitute program bas	. , . ,	,	•	r(e)(2) and (4))]; a	and (2) certain stations carried on a	Primary Transmitters:
Substitute Basis S basis under specifc FC	Stations: With a CC rules, regula	respect to any ations, or auth	, distant stations norizations:		able system on a substitute program	Television
station was carried	only on a subs	titute basis.		·	ent and Program Log)—if the	
· ·	formation cond				ute basis and also on some other f the general instructions located	
		•		. •	s such as HBO, ESPN, etc. Identify	
			•	•	tion. For example, report multi- n stream separately; for example	
Column 2: Give the			•		on for broadcasting over-the-air in may be different from the channel	
	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" mmercial educational multicast).	
For the meaning of the Column 4: If the staplanation of local servi	ation is outside	the local serv	vice area, (i.e. "c	distant"), enter "Ye	s". If not, enter "No". For an ex-	
					stating the basis on which your	
carried the distant stat	ion on a part-tii	me basis beca	ause of lack of a	ctivated channel o	ering "LAC" if your cable system capacity. payment because it is the subject	
					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 i	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	AQ		
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 PERIOD: 2018/2
LEGAL NAME OF OWN		YSTEM:			SYSTEM ID#	Name
CABLE ONE, IN					014552	
carried by your cable s FCC rules and regulat	G, identify ever system during t ions in effect or	y television sta 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 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
	here in space	G-but do list		e Special Stateme	ent and Program Log)—if the	
· ·	and also in spa formation cond	ace I, if the sta			ute basis and also on some other f the general instructions located	
Column 1: List each each multicast stream	ch station's call associated wit	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	
Column 2: Give the	se. For example	e, WRC is Cha	-		on for broadcasting over-the-air in may be different from the channel	
educational station, by (for independent multion For the meaning of the	entering the lecast), "E" (for neese terms, see	etter "N" (for no oncommercial page (v) of the	etwork), "N-M" (I educational), o e general instruc	for network multice or "E-M" (for nonco ctions located in th		
planation of local servi	ce area, see pa ave entered "Y he distant statio	age (v) of the es" in column on during the a	general instructi 4, you must cor accounting perio	ions located in the mplete column 5, s od. Indicate by ent	stating the basis on which your ering "LAC" if your cable system	
For the retransmiss of a written agreement the cable system and a	sion of a distant t entered into o a primary trans	multicast stre n or before Ju mitter or an as	eam that is not s ine 30, 2009, be ssociation repre	subject to a royalty etween a cable system esenting the priman	payment because it is the subject stem or an association representing by transmitter, enter the designa-	
explanation of these the Column 6: Give the FCC. For Mexican or C	nree categories e location of ea Canadian statio	, see page (v) ch station. Fo ons, if any, giv	of the general in U.S. stations, let the name of the	instructions locate list the community ne community with	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing	ng multiple chai	• •	EL LINE-UP	•	cnannei iine-up.	
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)		
	NOMBER	017411014		(II Diotaint)		
	•					

CABLE ONE, INC. PRIMARY TRANSMITTERS: TELEVISION In General: in space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76,59(q)(2) and (4), 76.61(e)(2) and (4)		SYSTEM ID#			STEM:	ER OF CABLE SY	LEGAL NAME OF OWN
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 specife FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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 indep	52 Name	014552					
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 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 indep)N	RS: TELEVISIO	PRIMARY TRANSMITTE
1. CALL SIGN CHANNEL OF STATION (Yes or No) CARRIAGE CHANNEL LINE-UP AS 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CARRIAGE	G Primary Transmitt Television	d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a sable system on a substitute program able system on a substitute program able system on a substitute program and and Program Log)—if the sute basis and also on some other afthe general instructions located as such as HBO, ESPN, etc. Identify ion. For example, report multiparters are separately; for example on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial ast), "I" (for independent), "I-M" mmercial educational multicast). In the paper SA3 form. It is not, enter "No". For an expaper SA3 form. It is the subject attem or an association representing y transmitter, enter the designater basis, enter "O." For a further din the paper SA3 form. It is the subject attem or an association representing the basis, enter "O." For a further din the paper SA3 form. It is the station is licensed by the which the station is identifed.	(1) stations carried carriage of cert (e)(2) and (4))]; carried by your of a Special Statem both on a substite, see page (v) of program services rethe-air designation of the station, an independent of the station, and indicate by entity at the column 5, defined to a royalty ween a cable system on the community of the community ecommunity with	period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried ute basis station to the report origination cording to its own be reported in comparation as assigned to the reported in the report origination of the station is a network etwork), "N-M" (if a decartional), one general instruction of the station is a network etwork), "N-M" (if a decartional), one general instruction of the station of the search that is not some 30, 2009, be sesociation repression of the general in the stations, if the general in the stations of the stations	r television standard accounting and June 24, 194, or 76.63 (Id din the next perspect to any titions, or auth G—but do listitute basis. Idea of the station account as the station account as the station. If the station account are the FCC has the station. If the local service in column and uring the station are basis becamulticast stream or before Jumitter or an are of enter "E". If the see page (V) of t	G, identify ever ystem during toons in effect on .61(e)(2) and (sis, as explaine tations: With a C rules, regular here in space only on a substand also in spaformation concern. In station's call associated with -2". Simulcast echannel numbers are channel numbers are carried the in each case we entering the least), "E" (for not see terms, see atton is outside to a primary transpanding on a part-limition of a distant entered into on a part-limition entered	In General: In space Gearried by your cable so FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis Substitute Basis Subasis under specific FC Do not list the station station was carried or List the station here, a basis. For further into in the paper SA3 for Column 1: List each each multicast stream as "WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the staplanation of local service Column 5: If you have cable system carried the carried the distant stating For the retransmission of a written agreement the cable system and a stion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or Column 6: Give the FCC. For Mexican or Column 6: Give the FCC.
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION (Yes or No) CARRIAGE		chamic mic up.	·	·		g manapic onai	Note: If you are amizing
SIGN CHANNEL OF (Yes or No) CARRIAGE		C LOCATION OF STATION				2 D'CACT	4 0011
NUMBER STATION (If Distant)		6. LOCATION OF STATION					-
			(If Distant)	,	STATION	NUMBER	
						• • • • • • • • • • • • • • • • • • • •	

FORM SA3E. PAGE 3. LEGAL NAME OF OWNE	ER OF CABLE SY	STEM:			SYSTEM ID#	
CABLE ONE, IN					014552	Name
PRIMARY TRANSMITTE	RS: TELEVISIO)N				
In General: In space G carried by your cable sy FCC rules and regulation 76.59(d)(2) and (4), 76. substitute program basis Substitute Basis St basis under specific FCC Do not list the station station was carried control to the station was carried control to the station here, at basis. For further infinite the paper SA3 for Column 1: List each each multicast stream a cast stream as "WETA-simulcast). Column 2: Give the its community of license on which your cable system and it in the station of local service Column 4: If the station planation of local service Column 5: If you had cable system carried the cable system and at tion "E" (exempt). For sexplanation of these three Column 6: Give the FCC. For Mexican or Column 7: Column 6: Give the FCC. For Mexican or Column 6: Give the FCC. For Mexican or Column 7: Column 6: Give the FCC. For Mexican or Column 7: Column 6: Give the FCC. For Mexican or Column 7: Column 6: Column 7: Column 6: Column 7: Column 6: Column 6: Column 7: Col	in, identify every yestem during the one in effect or of 61(e)(2) and (is, as explaine tations: With r C rules, regular here in space only on a substand also in spacormation concom. In station's call associated with 2". Simulcast station's call is explained to the case we entering the least), "E" (for no see terms, see pattern as the case we entered "Ye edistant station on a part-time on of a distant tentered into on primary transitional includes, also ree categories, location of ea anadian statio	y television standard accounting in June 24, 194, or 76.63 (rd d in the next prespect to any attions, or auth G—but do list titute basis. In the standard account in a station account in a station account in a station account in the station. In the station account in the station. In the station account in the station. In the station account in the local server in column in during the station in during the station in during the station in the station. In the station in the station in the station in the station in the station. For each of the station in the	period, except 81, permitting the referring to 76.6 paragraph. of distant stations orizations: tit in space I (the stion was carried ute basis station eport origination coording to its own be reported in or as assigned to sannel 4 in Wash ation is a netwo etwork), "N-M" (I educational), one general instructive area, (i.e. "or general instructive area, (i.e. "or general instruction as a santhat is not sane 30, 2009, be association repreyou carried the profit of the general in true." I u.S. stations, ethe name of 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 services the television station of the television of the	es". If not, enter "No". For an expaper SA3 form. Istating the basis on which your dering "LAC" if your cable system capacity. It payment because it is the subject stem or an association representing the transmitter, enter the designation in the paper SA3 form. It is to which the station is licensed by the which the station is identifed.	G Primary Transmitters Television
Note: If you are utilizing	g multiple char		·	•	channel line-up.	
			EL LINE-UP			
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
0.0.1	NUMBER	_	, ,	(If Distant)		

				ACCOUNT	NG PERIOD: 2018/2
ER OF CABLE SY	STEM:			SYSTEM ID#	Name
IC.				014552	Name
RS: TELEVISIO	N				
ystem during the ons in effect or .61(e)(2) and (.61(e)(2) and (.6	ne accounting a June 24, 194), or 76.63 (if d in the next espect to any itions, or auth G—but do listitute basis. It it it it be staterning substitute sign. Do not reast a station acceptation of the station acceptation of the station. It is it	period, except 81, permitting the referring to 76.6 paragraph. I distant stations orizations: It it in space I (the stion was carried ute basis station eport origination cording to its own be reported in the station is a network), "N-M" (I educational), or egeneral instruct 4, you must correct accounting period ause of lack of a sam that is not some 30, 2009, be association represented in the general in truct of the general in the of th	(1) stations carried to carriage of certa 1(e)(2) and (4))]; as carried by your context of both on a substitute, see page (v) on program services er-the-air designate column 1 (list each that the television statington, D.C. This lark station, an indefor network multicur "E-M" (for noncoptions located in the thing of the television statington, p.c. the television statington, p.c. This lark station, an indefor network multicur "E-M" (for noncoptions located in the mplete column 5, so the program of the primary of	d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a sable system on a substitute program and and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify ion. For example, report multiparters are separately; for example on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial ast), "I" (for independent), "I-M" mmercial educational multicast). The paper SA3 form. Some separately: For an expaper SA3 form. Separately: In the paper SA3 form. Separately: It is the subject stem or an association representing the pasis, enter "O." For a further din the paper SA3 form. To which the station is licensed by the which the station is identified.	Primary Transmitters: Television
g multiple chai	•	•		спаппет ше-ир.	
	CHANN	EL LINE-UP	AU		
2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
	RS: TELEVISIO G, identify every ystem during the ons in effect or .61(e)(2) and (e .6is, as explaine retations: With r CC rules, regulate here in space only on a substitute and also in spate formation conc rm. h station's call associated with -2". Simulcast se channel numble e. For example stem carried the in each case we entering the le cast), "E" (for no se terms, see pa and also in substitute carea, see pa and entered "Ye ne distant statio on on a part-tir ion of a distant entered into or a primary transi simulcasts, also ree categories, e location of eac canadian statio g multiple char 2. B'CAST CHANNEL	GRS: TELEVISION G, identify every television strystem during the accounting ons in effect on June 24, 196.61(e)(2) and (4), or 76.63 (rist, as explained in the next particular in the rest particular in the rest particular in the rest particular in the stations: With respect to any in the rein space G—but do list only on a substitute basis. In and also in space I, if the station of the station in concerning substiture. In station's call sign. Do not reason in the station and experiments in the station and experiments in each case whether the station. In each case whether the station in each case whether the station is outside the local service area, see page (v) of the attention is outside the local service area, see page (v) of the average into on a part-time basis because of a distant station during the appropriate into on or before Julia primary transmitter or an assimulcasts, also enter "E". If rece categories, see page (v) e location of each station. For canadian stations, if any, giving multiple channel line-ups, CHANN 2. B'CAST CHANNEL OF	GRS: TELEVISION G, identify every television station (including ystem during the accounting period, except ons in effect on June 24, 1981, permitting the .61(e)(2) and (4), or 76.63 (referring to 76.6 sis, as explained in the next paragraphtations: With respect to any distant stations: C rules, regulations, or authorizations: here in space G—but do list it in space I (thonly on a substitute basis. and also in space I, if the station was carried formation concerning substitute basis station rm. In station's call sign. Do not report origination associated with a station according to its own-2". Simulcast streams must be reported in the echannel number the FCC has assigned to be channel number the FCC has assigned to be channel number the station. In each case whether the station is a network entering the letter "N" (for network), "N-M" (sast), "E" (for noncommercial educational), see terms, see page (v) of the general instruction is outside the local service area, (i.e. "carea, see page (v) of the general instruction on a part-time basis because of lack of a sion of a distant multicast stream that is not sentered into on or before June 30, 2009, be a primary transmitter or an association representation of each station. For U.S. stations, canadian stations, if any, give the name of the gmultiple channel line-ups, use a separate CHANNEL LINE-UP 2. B'CAST CHANNEL DISTANT? (Yes or No)	GRS: TELEVISION 3, identify every television station (including translator stations ystem during the accounting period, except (1) stations carrie ons in effect on June 24, 1981, permitting the carriage of certa .61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; a sis, as explained in the next paragraph. Itations: With respect to any distant stations carried by your carried stations, which respect to any distant stations carried by your carried stations. With respect to any distant stations carried by your carried sis, as explained in the next paragraph. Itations: With respect to any distant stations carried by your carried, and also in space I, if the station was carried both on a substitute basis. In station according to its stations, see page (v) of mm. In station's call sign. Do not report origination program services associated with a station according to its over-the-air designate-2". Simulcast streams must be reported in column 1 (list each explain the explain streams must be reported in column 1 (list each explain station). In each case whether the station is a network station, an independent of the station. In each case whether the station is a network station, an independent of the station is outside the local service area, (i.e. "distant"), enter "Ye carried the station during the accounting period. Indicate by entering in soutside the local service area, (i.e. "distant"), enter "Ye carried accounting period. Indicate by entering the accounting period. Indicate by entering the station on or before June 30, 2009, between a cable system primary transmitter or an association representing the primary simulcasts, also enter "E". If you carried the channel on any of the eccetegories, see page (v) of the general instructions located in the accounting period. Indicate by entering the primary transmitter or an association representing the primary simulcasts, also enter "E". If you carried the channel or any of the general instructions located. In the community transmitter or an associatio	ERS TELEVISION System during the accounting period, except (1) stations carried only on a part-time basis under ons in effect on June 24, 1981, permitting the carriage of certain network programs [sections .61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))), and (2) certain stations carried on a is, as explained in the next paragraph. Itations: With respect to any distant stations carried by your cable system on a substitute program (2 rules, regulations, or authorizations: here in space G—but do list it in space I (the Special Statement and Program Log)—if the only on a substitute basis. In and also in space I, if the station was carried both on a substitute basis and also on some other formation concerning substitute basis stations, see page (v) of the general instructions located rm. In station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify associated with a station according to its over-the-air designation. For example, report multi-2". Simulcast streams must be reported in column 1 (list each stream separately; for example exchannel number the FCC has assigned to the television station for broadcasting over-the-air in e. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel stem carried the station. In each case whether the station is a network station, an independent station, or a noncommercial entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" east), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). see terms, see page (v) of the general instructions located in the paper SA3 form. In each case whether the station is a network station, an independent station, or a noncommercial entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" east) in column 4, you must complete column 5, stating the basis on which your the distant faulticast stream that is not subject to a royalty payment because

FORM SA3E. PAGE 3.					ACCOUNTI	NG PERIOD: 2018/2
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				014552	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during the constant of	he 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	Primary Transmitters:
basis under specifc FC	CC rules, regula here in space	ntions, or auth G—but do list	orizations:		able system on a substitute program ent and Program Log)—if the	Television
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	
each multicast stream cast stream as "WETA WETA-simulcast).	associated with a-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 ion. For example, report multinatream separately; for example on for broadcasting over-the-air in	
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 pendent station, or a noncommercial	
educational station, by (for independent multion For the meaning of the	entering the lecast), "E" (for no ese terms, see	tter "N" (for no oncommercial page (v) of the	etwork), "N-M" (l 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). se paper SA3 form.	
planation of local servi Column 5: If you had cable system carried to	ce area, see pa ave entered "Yo ne 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	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 sine 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 FCC. For Mexican or C	ree categories e location of ea Canadian statio	, see page (v) ch station. Fo ns, if any, giv	of the general in the stations, leading the stations of the st	instructions locate list the community ne community with	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing	ig multiple chai		EL LINE-UP		спаппе ште-ир.	
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	
	TTOMBER	017411014		(ii Biotant)		

FORM SA3E. PAGE 3.					ı	ACCOUNTI	NG PERIOD: 2018/2	
LEGAL NAME OF OWN	ER OF CABLE SY	'STEM:			SYST	EM ID#		
CABLE ONE, IN	IC.				(14552	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	DN .						
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	ystem during the ons in effect or .61(e)(2) and (.6is, as explaine stations: With record or a substand also in spate formation concern. h station's call associated with -2". Simulcast sechannel number. For example	ne accounting a June 24, 1984), or 76.63 (r d in the next prespect to any attions, or auth G—but do list titute basis. In the state of	g period, except 81, permitting the referring to 76.67 paragraph. It distant stations corizations: It it in space I (the ation was carried tute basis station report origination cording to its over the be reported in come	(1) stations carried the carriage of certain (e)(2) and (4))]; and (4))]; and (4))]; and carried by your cast of Special Statement of both on a substitution, see page (v) of an program services the er-the-air designation of the column 1 (list each other the station station of the carried existence of the carried existen	and low power television stations) d only on a part-time basis under in network programs [sections and (2) certain stations carried on a able system on a substitute program and Program Log)—if the ute basis and also on some other in the general instructions located as such as HBO, ESPN, etc. Identify ion. For example, report multistream separately; for example on for broadcasting over-the-air in may be different from the channel	m	G Primary Transmitters: Television	
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.								
		CHANN	EL LINE-UP	AW				
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			

ACCOUNTING PERIOD: 2018/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 014552 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.							6 PERIOD: 2018/2				
LEGAL NAME OF OWNER OF	CABLE SYS	ГЕМ:				SYSTEM ID#	Nama				
CABLE ONE, INC. 014552											
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEN	NT AND PROGRAM LOG								
	In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this long see page (v) of the general instructions leasted in the page SA2 form										
explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.											
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE											
 During the accounting per broadcast by a distant state 		ır cable system	ı carry, on a substitute basi	s, any nonnet	twork television prograi	n X No	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 mu	ist complete the progra	m	i rogram Log				
log in block 2. 2. LOG OF SUBSTITUTE	BBOCBA	MC									
In General: List each subst			te line. Use abbreviations v	wherever pos	sible. if their meaning is	5					
clear. If you need more spa	ice, please	attach addition	al pages.								
Column 1: Give the title period, was broadcast by a			ision program (substitute p			ition					
under certain FCC rules, re	gulations, o	or authorization	s. See page (vi) of the gen	eral instructio	ns located in the paper						
SA3 form for futher informa titles, for example, "I Love L				"basketball".	List specific program						
Column 2: If the program	n was broad	dcast live, ente	r "Yes." Otherwise enter "N								
			asting the substitute programe community to which the		need by the ECC or in						
the case of Mexican or Can											
		when your sys	tem carried the substitute p	rogram. Use	numerals, with the mo	nth					
first. Example: for May 7 giv Column 6: State the time		e substitute pro	gram was carried by your o	able system.	List the times accurate	elv					
to the nearest five minutes.						,					
stated as "6:00–6:30 p.m." Column 7: Enter the letter	er "R" if the	listed program	was substituted for progra	mming that ve	our system was require	ed					
to delete under FCC rules a	and regulation	ons in effect du	iring the accounting period	enter the lett	ter "P" if the listed pro						
gram was substituted for preffect on October 19, 1976.		that your syste	em was permitted to delete	under FCC r	ules and regulations in						
ellect off October 19, 1970.	•					1					
	N IDOTITI IT		•		EN SUBSTITUTE	7. REASON					
	2. LIVE?	TE PROGRAM 3. STATION'S		5. MONTH	IAGE OCCURRED 6. TIMES	FOR DELETION					
TITLE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM — TO	BELLTION					
					_						
					_						
					_						
					_						
	 										
	 										
	_				<u> </u>						
					_						
					_						
					_						
					_						
											

ACCOUNTING PERIOD: 2018/2 FORM SA3E. PAGE 6.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

014552

J

Part-Time Carriage Log

PART-TIME CARRIAGE LOG

In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages.

Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G.

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

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

		DAT	ES /	AND HOURS (OF F	PART-TIME CAF	RRIAGE				
CALL SIGN -	WHEN CARRIAGE OCCURRED					CALL SIGN	WHE	WHEN CARRIAGE OCCURRED			
07.22 0.0.1	DATE	FROM	HOURS FROM		TO CALL SIGN		DATE	FROM	OURS	TO	
			_						_		
			_						_		
			=					 	-=		
			=						_=_		
			=					 			
			_						_		
			_						_		
									_		
			=-						-=-		
			=						-=-		
			=						_=_		
			=_								
			=_								
			_								

U.S. Copyright Office

LEG	AL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID# 014552	Name	
CA	BLE ONE, INC.			U 1400Z		
Ins all a (as	OSS RECEIPTS tructions: The figure you give in this space determines the form you fle and the amount amounts (gross receipts) paid to your cable system by subscribers for the system's secribentified in space E) during the accounting period. For a further explanation of how to de (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)	ondary	r transmi	ssion service	K Gross Receipts	
IMF	during the accounting period. PORTANT: You must complete a statement in space P concerning gross receipts.		\$ (Amount	1,209,612.00 of gross receipts)		
• Cor • Cor • If your fee • If your	YRIGHT ROYALTY FEE actions: Use the blocks in this space L to determine the royalty fee you owe: implete block 1, showing your minimum fee. implete block 2, showing whether your system carried any distant television stations. in system did not carry any distant television stations, leave block 3 blank. Enter the arifrom block 1 on line 1 of block 4, and calculate the total royalty fee. in system did carry any distant television stations, you must complete the applicable prompanying this form and attach the schedule to your statement of account.				Copyright Royalty Fee	
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should book 3 below.	e ente	red on li	ne 1 of		
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.	entere	d on line	2 in block		
▶ If pa	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	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		Ψ	1,209,612.00		
	Enter the result here.					
	This is your minimum fee.	\$		12,870.27		
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, y od?	ou mus	t check		
3	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE			0.00		
	schedule. If none, enter zero					
	Line 3. Add lines 1 and 2 and enter here	\$		3,718.68		
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		\$	12,870.27	Cable systems	
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.	r		0.00	submitting additional deposits under	
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)					
	Line 4. FILING FEE		\$	725.00	the Licensing additional fees. Division for the appropriate	
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$		13,595.27	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	age (i) of	f the		

Nama	LEGAL NAME OF OWNER OF CA	CABLE SYS	TEM:						SYSTEM ID#
Name	CABLE ONE, INC.								014552
	CHANNELS								
M	Instructions: You must	st aive (1) the number of chann	els on which the cable s	system	n carried televisi	ion broadcas	et stations	
141	to its subscribers and (2				-			a diamond	
Channels	to its subscribers and (2	2) 1110 00	bic system s total num	iber of activated charine	Ji5, uu	ing the account	ung penou.		
	1. Enter the total number	er of cha	innels on which the ca	ble				13	
	system carried televisi	sion broa	dcast stations					10	
	2. Enter the total number			ant stations			ĺ		
	on which the cable sys			si stations				244	
	and nonbroadous con								
		OUTAG		ODMATION IS NEEDE	· D // /				
N	we can contact about th			ORMATION IS NEEDE	: D : (Ide	entity an individ	uai		
Individual to	we can contact about an	ino otato	mont of doodant.)						
Be Contacted									
for Further	Name EMERSO	N YEA	RWOOD				Telephone	602-364-6195	
Information									
	Address 210 E. EA	ARLL D	DRIVE						
	(Number, street,	t, rural rout	te, apartment, or suite num	ber)					
			35012-2626						
	(City, town, state	te, zip)							
	Email er	merso	n vearwood@cah	oleone.biz		Fax (optional)	602-364-	.6013	
	Liliali	,,,,,,,,	n.yearwood@ear	ACOTIC.DIZ		i ax (optional)	002 004	0010	
	CERTIFICATION (This st	statemen	t of account must be o	certifed and signed in acc	corda	nce with Copyri	ght Office re	gulations.	
O									
Certifcation	• I, the undersigned, herel	eby certify	y that (Check one, but	only one, of the boxes.)					
	(Owner other than co	ornorati	on or partnership) La	n the owner of the cable s	cycton	n ac identifed in	ing 1 of case	o Pr or	
	(Owner other than co	orporati	on or partnership, rai	if the owner of the cable s	System	ii as ideililled iii i	ine i oi spac	е Б, бі	
	(A mant of aumon other					t of the		la avatana aa idantifi	
				rship) I am the duly autho prporation or partnership;		agent of the own	iei oi trie cabi	ie system as identilie	eu .
	V (055		- ff: (if ti)			£ 415 - 1 1 415	:		
	(Officer or partner) I in line 1 of space I		onicer (ii a corporation)	or a partner (if a partners	snip) oi	i the legal entity	identiled as d	owner of the cable sy	stem
	 I have examined the star are true, complete, and complete. 							ned herein	
	[18 U.S.C., Section 1001		are been or my randing	ago, illomaton, and som	, a	a a. oaao go			
						1			
		X	/s/ Raymond Storc	k					
	-								
				e line above using an "/s/" ring the first forward slash				r in the box and pres	s the
				name. Pressing the "F" b					
	Tv	vned or	nrinted name· RAV	MOND STORCK					
	ıy	ypeu oi	printed harne. IVAI	JIL CICKOR					
	Tit		ICE PRESIDEN						
		(Title of official position held	in corporation or partnership))		•		
	Da	ate: F	ebruary 28, 2019						

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.	014552	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system service of providing secondary transmissions of primary broadcast transmitters, the system sha scribers and amounts collected from subscribers receiving secondary transmissions pursuant to For more information on when to exclude these amounts, see the note on page (vii) of the general instraper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondar made by satellite carriers to satellite dish owners? X NO	for the basic I not include sub- section 119."	Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment of an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 for an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 for an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 for an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 for an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 for an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 for an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 for an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 for an explanation of interest assessment in the paper SA3 for all the general instructions in the paper SA3 for all the general instructions in the paper SA3 for all the general instructions in the paper SA3 for all the general instructions in the paper SA3 for all the general instructions in the general instruction in the genera		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	- days	
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)	nterest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further a 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 Copyriq please list below the owner, address, first community served, accounting period, and ID number as given 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.	

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 G of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

Step 3: Multiply the result of step 1 by the result of step 2. This gives 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	of Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
in	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
;	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

linimum Fee Total Gross Receipts	\$600,000.00
	x .01064
	00.004.00

		40,0000			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

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

ACCOUNTING PERIOD: 2018/2

DSE SCHEDULE. PAG	E 11. (CONTINUED)											
4	LEGAL NAME OF OWNER OF CAB	LE SYSTEM:			SY	STEM ID#						
Т	CABLE ONE, INC.					014552						
	SUM OF DSEs OF CATEGO	RY "O" STATION	S:									
	Add the DSEs of each station		o .									
	Enter the sum here and in line		schedule.		0.75							
						1						
2	Instructions: In the column headed "Call	Sign": list the call	signs of all distant stations	identified by t	he letter "∩" in column 5							
_	of space G (page 3).	oigii . list tile call	signs of all distant stations	identified by t	ne letter O in column 5							
Computation	In the column headed "DSE			as "1.0"; for	each network or noncom-							
of DSEs for	mercial educational station, give the DSE as ".25."											
Category "O"			CATEGORY "O" STATION									
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
	KETV	0.250										
	KOLN	0.250										
	WOWT	0.250										
		····										
Add rows as		<u> </u>		ļ		{						
necessary.		···										
Remember to copy												
all formula into new		<mark></mark>										
rows.												
		<mark></mark>										
		····										
		···										
												
												
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		<mark></mark>				<u> </u>						
		<mark></mark>				 						
						Ī						

									YSTEM ID#	
Name									014552	
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.									
Capacity	CATEGORY LAC STATIONS: COMPUTATION OF DSEs									
	1. CALL 2. NUMBE OF HO CARRII SYSTE		URS ED BY M	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAGE VALUE		5. TYPE VALUE		E	
						X				
				÷ ÷			(= (=			
				÷		v				
				÷		x				
					= 	X		<u> </u>		
			÷		= =	x x		······		
Computation of DSEs for Substitute-Basis Stations	Instructions: Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station: • Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulartions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and • Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I). Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I. Column 3: Enter the number of days in the calendar year: 365, except in a leap year. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form).									
		SU	IBSTITUTE	-BASIS STATION	IS: COMPUTA	ATION OF D	SEs			
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMB OF DA' IN YEA	YS IR	1. CALL SIGN		RAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	
			÷ = =						=	
			÷	=			÷		=	
				÷ =			÷		=	
			÷	=			÷		=	
	SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS: Add the DSEs of each station. Enter the sum here and in line 3 of part 5 of this schedule,									
5 Total Number	TOTAL NUMBER OF DSEs: Give the amounts from the boxes in parts 2, 3, and 4 of this schedule and add them to provide the tota number of DSEs applicable to your system. 1. Number of DSEs from part 2 ● ▶									
of DSEs	2. Number of DSEs from part 3 ●					<u> </u>		0.00		
	3. Number o	of DSEs from part 4 ●				>		0.00		
	TOTAL NUMBE	ER OF DSEs							0.75	

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2018/2

	OWNER OF CABLE	SYSTEM:					S	YSTEM ID#	Mana	
CABLE ONE,	INC.							014552	- Numb	
In block A: • If your answer if schedule.	ck A must be com "Yes," leave the re "No," complete ble	emainder of		7 of the DSE scho	edule blank a	ınd complete į	part 8, (page 16) of	f the	6	
•				ELEVISION M	ARKETS				Computation of 3.75 Fee	
effect on June 24	•	schedule—l	•				f FCC rules and re	gulations in	3.73 Fee	
		BLO	CK B: CARR	IAGE OF PERI	MITTED D	SEs				
Column 1: CALL SIGN	under FCC rules	and regulati ne DSE Sche	ons prior to Ju edule. (Note: T	ne 25, 1981. For fi ne letter M below i	urther explan	ation of permi	stem was permitte tted stations, see t st stream as set fo	he		
Column 2: BASIS OF PERMITTED CARRIAGE	BASIS OF (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. PERMITTED A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to									
Column 3:		e stations ide	entified by the	n parts 2, 3, and 4 etter "F" in columr			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		
			•					0.00		
		Е	SLOCK C: CC	MPUTATION O	F 3.75 FEE				1	
Line 1: Enter the	e total number of	DSEs from	part 5 of this	schedule						
Line 2: Enter the	e sum of permitte	d DSEs fro	m block B ab	ove						
	line 2 from line 1 leave lines 4–7 b			•		5 rate.				
Line 4: Enter gro	oss receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially	
Line 5: Multiply I	line 4 by 0.0375	and enter s	um here				x		permited/ partially nonpermitted	
Line 6: Enter tot	al number of DS	Es from line	3						carriage? If yes, see part 9 instructions.	
Line 7: Multiply	line 6 by line 5 ar	nd enter he	re and on line	2, block 3, spac	e L (page 7)		0.00		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 014552										Name
		T	BLOCK	A: TELEVI	SION MARKETS	S (CONTIN	UED)	1	ī	_
	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
										Computation of 3.75 Fee
						• • • • • • • • • • • • • • • • • • • •			••••••	
						•			•••••	
				-						

Name	CABLE ONE, IN		YSTEM:						S	4STEM ID# 014552			
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												
		PERMITTED	DSE FOR STA	TIONS CARRIE	ΞD	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS					
	1. CALL	2. PRIOR		COUNTING		4. BASIS OF		RESENT	6. P	ERMITTED			
	SIGN	DSE		ERIOD		CARRIAGE		OSE		DSE			
							•						
					••••								
7 Computation	Instructions: Block A In block A: If your answer is	"Yes," complete	blocks B and C,										
of the Syndicated	If your answer is	"No," leave bloc			•	art 8 of the DSE schedu							
Exclusivity			BLUCK	A. MAJUR	1 0	ELEVISION MARKI	<u> </u>						
Surcharge	Is any portion of the c Yes—Complete	•		r television marl	ket	t as defned by section 7 No—Proceed to		rules in effect J	une 24,	1981?			
	BLOCK B: Ca	arriage of VHF/0	Grade B Contour	Stations		BLOCK	C: Compu	tation of Exem	not DSEs	<u> </u>			
	Is any station listed in commercial VHF station in part, over the cal	block B of part on that places a	6 the primary stre	eam of a		Was any station listed nity served by the cab to former FCC rule 76.	in block B	of part 7 carrie	ed in any	commu-			
	Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8.												
	CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE												
		- - - - -											
			TOTAL DSEs	0.00				TOTAL DS	Es	0.00			

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC.	SYSTEM ID# 014552	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,209,612.00	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.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here	_	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)		
	Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ _\$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)		
	Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Nama	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM:	YSTEM ID# 014552									
Name	CABLE ONE, INC.											
7 Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. A. Enter 0.00300 of gross receipts (the amount in section 1). B. Enter 0.00189 of gross receipts (the amount in section 1). C. Multiply line B by 3.000 and enter here. D. Enter 0.00089 of gross receipts (the amount in section 1). E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here. F. Multiply line D by line E and enter here G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge. \$\begin{array}{c} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\										
Reservice area," see page (v) of the general instructions. You must complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part 6 was checked "Yes," use the total number of DSEs from part 5. • In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. • If your answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. • If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B be blank. What is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers were located within that station's local service area and others were located outside that area. For the definition of a station's "local service area," see page (v) of the general instructions.												
	RLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS											
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS • Did your cable system retransmit the signals of any partially distant television stations during the accounting period?											
	_	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS d your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the 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)	_									
and in block 3, line 1, space L (page 7) Base Rate Fee												

LEGAL N	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nome
CABL	E ONE, INC.	014552	Name
Section	If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.		
4	A F. /		8
	A. Enter 0.01064 of gross receipts (the amount in section 1) ▶ \$		
	B. Enter 0.00701 of gross receipts	_	Computation
	(the amount in section 1) \$		of
	C. Multiply line B by 3.000 and enter here▶\$		Base Rate Fee
		_	
	D. Enter 0.00330 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs		
	(the figure in section 2) and enter here▶		
	F. Multiply line D by line E and enter here >		
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)		
	Base Rate Fee	0.00	
IMPOR	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca	st signals shall	
instead Space	be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channe G.	I line-ups in	9
In Gen	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee		Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take ac on, you must:	Ivantage of this	of Base Rate Fee
First: [Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to	the same	and
station	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine	the number of	Syndicated Exclusivity
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for : Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	each group.	Surcharge for
	If any portion of your cable system is located within the top 100 television market and the station is not exempt in p		Partially
	mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B be cable system is wholly located outside all major television markets, complete block A only.	low. However,	Distant Stations, and
How to	Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
_	For each community served, determine the local service area of each wholly distant and each partially distant stat to that community.	ion you	Stations
	to that community. For each wholly distant and each partially distant station you carried, determine which of your subscribers were lo	cated	
	the station's local service area. A subscriber located outside the local service area of a station is distant to that state token, the station is distant to the subscriber.)	tion (and, by	
	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant.	Each	
	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.	at a cable	
1	Iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your syst	em's subscriber	
groups			
	section: fy the communities/areas represented by each subscriber group.		
• Give	the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all	of the	
• If:	bers in the group.		
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in	n parts 2, 3,	
	of this schedule; or, portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b	lock B	
	6 of this schedule.	Joon B,	
	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in paper SA3 form.	structions	
• Comp	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the		
DSEs f	In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that or that group's complement of stations and total gross receipts from the subscribers in that group). You do not nee calculations on the form.		

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 014552 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 OWNE		E SYSTEM:					3YSTEM ID# 014552	Name
В	LOCK A: (COMPUTATION C	F BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	NORFO	LK		COMMUNITY/ AREA	WOODL	AND PARK/PILG	SER	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
KETV	0.25	51.22 51511						Base Rate Fee
				-				and
•••••	<u> </u>							Syndicated
	···		····					Exclusivity
	···		••••	-	†			Surcharge
					•			for
								Partially
					•			Distant
	···				 		·····	Stations
								Stations
					.			
	<u>-</u>		····		 			
	<mark></mark>				 			
	<mark></mark>				 			
								
Total DSEs			0.25	Total DSEs			0.00	
Gross Receipts First G	iroup	\$ 88	2,054.00	Gross Receipts Secon	d Group	\$	37,009.00	
Base Rate Fee First G	roup	\$	2,346.26	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	DUP		FOURTH	SUBSCRIBER GRO)UP	
COMMUNITY/ AREA	TILDEN			COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
KETV	0.25			KETV	0.25			
WOWT	0.25			KOLN	0.25			
				WOWT	0.25			
				-	*			
						-		
						-		
					†			
					†			
Total DSEs	"		0.50	Total DSEs			0.75	
Gross Receipts Third (Group	s 2	5,564.00	Gross Receipts Fourth	Group	\$	99,916.00	
2.200 Nossipto Tiliu C	- · • • p	<u>-</u>			. J. C.P	T	1	
Base Rate Fee Third (sase Rate Fee Third Group \$ 136.00		136.00	Base Rate Fee Fourth	Group	\$	797.33	
Base Rate Fee: Add th	ne hase rat	e fees for each subs	scriber group	as shown in the boxes a	hove			
Enter here and in block			onser group	as shown in the boxes a		\$	3,718.68	

LEGAL NAME OF OWNE		E SYSTEM:				S	YSTEM ID# 014552	Name
В	LOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	FIFTH	SUBSCRIBER GRO	UP		SIXTH	I SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA		R/WEST POINT/I	••••••	COMMUNITY/ ARE	9 Computati			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
KOLN	0.25							Base Rate
								and
								Syndicate
								Exclusivi
								Surcharg
								for
								Partially
								Distant
								Stations

		-						
Γotal DSEs			0.25	Total DSEs			0.00	
						-	-	
Gross Receipts First G	Group	\$ 165	5,069.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	iroup	\$	439.08	Base Rate Fee Sec	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO	UP		FIGHTE	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	OLVEITIII	ODDOG NIBER ORO	0	COMMUNITY/ ARE		- COBCONIBER CITO	0	
SOMMONT IT AREA				COMMONT IT ARE	^			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
		-						
Гotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
		· *			Стоир			
	_							
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				<u> </u>				
Base Rate Fee: Add th	ne base rat	e fees for each subs	criber group	as shown in the boxe	s above.			
Enter here and in block			334		- -	\$		

CABLE ONE, IN		E SYSTEM:				S	YSTEM ID# 014552	Name
		COMPUTATION OF SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP	UP	•
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	A		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							<u></u>	Base Rate Fee and
								Syndicated
								Exclusivity Surcharge
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GRO	JP 0	COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	
COMMONT IT AREA	······································			COMMONT 17 AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	d Crows	.	0.00	Total DSEs	th Crave	•	0.00	
Gross Receipts Third	и Group	\$	0.00	Gross Receipts Four	uı Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWN CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 014552	Name
B	SLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
	RTEENTH	SUBSCRIBER GRO		H		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 Fee
								and
	<u></u>							Syndicated
	<u></u>					-		Exclusivity
						 		Surcharge for
	···		···				····	Partially
								Distant
								Stations
	<u></u>							
	<u></u>					-		
		H				-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First C		\$	0.00	Base Rate Fee Sec		\$	0.00	
	IFIEENIH	SUBSCRIBER GRO				SUBSCRIBER GROU)P	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
			···					
	···		···				····	
	<u></u>					-		
			····			-		
			•••			-		
	<u></u>		<u></u>			-		
			<u> </u>			 		
Total DSEs	<u> </u>		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.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 014552	Name
E	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
		SUBSCRIBER GRO		tt -		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
0,122 0.0.1	332	07.22 0.0.1	302	37.EE 373.T	302	07.122.01.01.1	332	Base Rate Fee
								and
			<u></u>					Syndicated
			<u></u>			-		Exclusivity
	····				·····	-		Surcharge for
			<u></u>			-		Partially
								Distant
								Stations
			<u></u>					
			<u></u>			-		
			<u></u>			-	<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	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		11		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<mark></mark>		<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	es above.	\$		

CABLE ONE, IN		E SYSTEM:				S	YSTEM ID# 014552	Name
				ATE FEES FOR EACH			ID	
COMMUNITY/ AREA		SUBSCRIBER GROU	0	COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
OALL SIGIV	DOL	GALL GIGIN	DOL	OALL GIGIT	DOL	CALL GIGIT	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
					···			for
								Partially
								Distant
		-						Stations
					···			
		-						
			0.00	T			0.00	
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	
TWE	NTY-THIRD	SUBSCRIBER GROU	JP	III		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	٩		0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
					<mark></mark>			
					•••			
					···			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	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, IN		LE SYSTEM:				S	YSTEM ID# 014552	Name
				ATE FEES FOR EAC				
COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		I 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
								I
					····			I
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00	
		SUBSCRIBER GRO		11		I SUBSCRIBER GRO		
COMMUNITY/ AREA	٩		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			-	-	·····			
		-						
								I
					····			I
		-						
								I
	·····	-			<mark></mark>			
								I
Total DSEs	_		0.00	Total DSEs	_		0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

UTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP CRIBER GROUP O COMMUNITY/ AREA O Computation LI SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant
0 COMMUNITY/ AREA 0 Computation L SIGN DSE CALL SIGN DSE CALL SIGN DSE of Base Rate Ference and Syndicated Exclusivity Surcharge for Partially
L SIGN DSE CALL SIGN DSE CALL SIGN DSE Gase Rate Fe and Syndicated Exclusivity Surcharge for Partially
L SIGN DSE CALL SIGN DSE CALL SIGN DSE of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially
and Syndicated Exclusivity Surcharge for Partially
Syndicated Exclusivity Surcharge for Partially
Exclusivity Surcharge for Partially
Surcharge for Partially
Partially
Distant
Stations
······································
0.00 Total DSEs 0.00
0.00 Gross Receipts Second Group \$ 0.00
Gloss Receipts Second Gloup \$ 0.00
0.00 Base Rate Fee Second Group \$ 0.00
CRIBER GROUP THIRTY-SECOND SUBSCRIBER GROUP
0 COMMUNITY/ AREA 0
LL SIGN DSE CALL SIGN DSE CALL SIGN DSE
······································
······································
0.00 Gross Receipts Fourth Group \$ 0.00
0.00 Base Rate Fee Fourth Group \$ 0.00

CABLE ONE, IN		E SYSTEM:				S	YSTEM ID# 014552	Name
				ATE FEES FOR EACH				
COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	Y-FOURTE	I SUBSCRIBER GROU	JP 0	9
		I			T ===	П		Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
	·····							and
								Syndicated
								Exclusivity
								Surcharge
					<mark></mark>			for Partially
								Distant
		-			<u>-</u>			Stations
					<u> </u>			
					<u></u>			
Total DSEs			0.00	Total DSEs		11	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	
TH	IRTY-FIFTH	SUBSCRIBER GROU	JP	THI	RTY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	٠		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
					<u> </u>			
								
		-			•			
					<u> </u>			
					<u></u>			
					<u> </u>			
					-			
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	o as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 014552	Name
E	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCE	RIBER GROUP		
	-SEVENTH	SUBSCRIBER GRO		ii e		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
			<u></u>					and
	···			·	······			Syndicated Exclusivity
								Surcharge
								for
								Partially
	<mark></mark>	<u> </u>	<u></u>		·····			Distant Stations
	···			1		•		Stations
	<u></u>		<u></u>					
Total DSEs		11	0.00	Total DSFo			0.00	
Total DSEs	_			Total DSEs			_	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THIF	RTY-NINTH	SUBSCRIBER GRO	DUP		FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<mark></mark>		<u></u>		·····			
	···		···		•••••			
	···				······			
	•••							
	···				·····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
Date Date 5 - Title	0		0.00	D D /			2.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	irin Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNI		E SYSTEM:				S	YSTEM ID# 014552	Name
				TE FEES FOR EACH				
	RTY-FIRST	SUBSCRIBER GROU		II	Y-SECONE	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
	<u></u>				<u></u>			Syndicated Exclusivity
					-			Surcharge
								for
					<u></u>			Partially
					<u></u>			Distant Stations
					<u></u>			Stations
								I
	···				<u></u>			
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-THIRD	SUBSCRIBER GROU		ii .	Y-FOURTH	I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
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					<u></u>			
	···				<u></u>			
					<u></u>	-		I
	···				. 			I
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourti	n Group	\$	0.00	
	- ·/F	<u> </u> *	3.50			l _t		
Base Rate Fee: Add to Enter here and in block			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC.	R OF CABI	LE SYSTEM:				Sì	O14552	Name
				TE FEES FOR EACH				
	Y-FIFTH	SUBSCRIBER GROU		Ħ	RTY-SIXTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
						_		Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Otations
Total DCF			0.00	Total DOFa			0.00	
Total DSEs			0.00	Total DSEs	d Casus	•	•	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	a Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
FORTY-S	EVENTH	SUBSCRIBER GROU	JP	FORT	Y-EIGHTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							<u></u>	
								
						H		
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$		

CABLE ONE, IN		LE SYSTEM:				S	YSTEM ID# 014552	Name
				ATE FEES FOR EAC				
FO 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>		····			and Syndicated
			<u>-</u>		····			Exclusivity
								Surcharge
			<u> </u>					for Partially
			<u>-</u>					Distant
								Stations
			<u></u>					
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GRO		iii —		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-	<u> </u>					
					····			
	·····		<u></u>	-				
			. 		····			
			<u> </u>					
			<u>-</u>					
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 014552	Name
				ATE FEES FOR EAC				
F COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	11		SUBSCRIBER GROU	JP 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
					<u></u>			for Partially
					<u></u>			Distant
								Stations
					<u></u>			
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROU		iii .		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
	·····			-				
								
					<u></u>			
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, IN		E SYSTEM:				S	YSTEM ID# 014552	Name	
				ATE FEES FOR EAC					
		SUBSCRIBER GROU		11		SUBSCRIBER GROU		9	
COMMUNITY/ AREA	٩		0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
	·····	-						Syndicated Exclusivity	
								Surcharge	
								for	
								Partially	
		-						Distant	
								Stations	
					<u></u>				
					<u></u>				
					<u></u>				
Total DSEs			0.00	Total DSEs		11	0.00		
	0						-		
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	na Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
F	IFTY-NINTH	SUBSCRIBER GROU	JP		SIXTIETH	I SUBSCRIBER GROU	JP		
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	·····								
					 				
	·····								
									
									
									
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$			

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 014552	Name	
				ATE FEES FOR EAC					
S 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	
					····			and Syndicated	
					····			Exclusivity	
								Surcharge	
								for Partially	
								Distant	
								Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00		
		SUBSCRIBER GRO		iii —		SUBSCRIBER GRO	UP		
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
					<u></u>				
			-						
				-	····				
					····				
		-							
					····				
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$			

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 014552	Name
				ATE FEES FOR EACH				
S COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	II		1 SUBSCRIBER GROU	JP 0	9
COMMUNITY AREA				COMMUNITY/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					···			and Syndicated
					···			Exclusivity
								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 Secon	nd Group	\$	0.00	
SIXTY	/-SEVENTH	SUBSCRIBER GROU	JP	SIX	TY-EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<mark>.</mark>			
					····			
					······································			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
2.555 . 1550ipto 11iii 0	- 3.00p				. С. Сир	·*		
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, INC		E SYSTEM:				S	YSTEM ID# 014552	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GROU	JP 0	ii e		1 SUBSCRIBER GRO	UP 0	9
COMMUNITY/ AREA				COMMUNITY/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					<u></u>			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	
SEVE	NTY-FIRST	SUBSCRIBER GROU	JP	SEVENT	Y-SECONE	SUBSCRIBER GRO	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		11	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	the base rat	e fees for each subso	riber group	as shown in the boxes	above.			
Enter here and in blo						\$		

CABLE ONE, IN		E SYSTEM:				S	YSTEM ID# 014552	Name	
				ATE FEES FOR EAC			LID.		
COMMUNITY/ AREA		SUBSCRIBER GROU	0 0	COMMUNITY/ AREA		1 SUBSCRIBER GRO	0	9	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGIN	DOL	CALL SIGN	DOL	Base Rate Fee	
								and	
					<u></u>			Syndicated	
	·····			-				Exclusivity	
								Surcharge for	
					<u></u>			Partially	
								Distant	
		-						Stations	
					<u></u>				
							<u></u>		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
SEVE	ENTY-FIFTH	SUBSCRIBER GROU	JP	SEVE	NTY-SIXTH	SUBSCRIBER GRO	UP		
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	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	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$			

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 014552	Name
B	LOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	SEVENTH	SUBSCRIBER GRO	UP	SEVE	NTY-EIGHTH	SUBSCRIBER GROU	JP	٥
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<mark></mark>					Base Rate Fe
	···		···					Syndicated
			···	·				Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Otations
	···				·····			
T-4-1 DOE-			0.00	T-t-I DOF-		11	0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVEN	TY-NINTH	SUBSCRIBER GRO	UP		EIGHTIETH	I SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					·····			
			···		•••••			
					·····			
		-						
								
			···			<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	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 OWNE CABLE ONE, INC.	R OF CABI	LE SYSTEM:				S	YSTEM ID# 014552	Name
		COMPUTATION OF SUBSCRIBER GRO		TE FEES FOR EACH		IBER GROUP SUBSCRIBER GROU	UP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					<u></u>			Base Rate Fee and
								Syndicated
								Exclusivity
					·····			Surcharge for
								Partially
					<u></u>			Distant Stations
								Otations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	ond Group	\$	0.00	
	TY-THIRD	SUBSCRIBER GRO		Ti .		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		<u> </u>			····			
		_						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
	r	ľ.	2.34			<u> </u>	3.55	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 014552	Name
				TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	TY-FIFTH	SUBSCRIBER GRO		Ħ		SUBSCRIBER GROU		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 Syndicated
								Exclusivity
								Surcharge
								for
								Partially
	···							Distant Stations
		-	<u></u>					Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
EIGHTY-	SEVENTH	SUBSCRIBER GRO	UP	ii ee		SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
	···	-	···				·····	
		-						
	···						····	
	···		<mark></mark>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	I.				· r			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
·	Group	\$ te fees for each subs	0.00	Base Rate Fee Fou	rth Group			

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 014552	Name	
				TE FEES FOR EACH					
		SUBSCRIBER GROU				I SUBSCRIBER GROU		9	
COMMUNITY/ AREA	······································		0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
		-			<u> </u>			and Syndicated	
								Exclusivity	
								Surcharge	
								for	
	·····			-				Partially Distant	
		-						Stations	
					<u>-</u>				
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00		
NIN	NETY-FIRST	SUBSCRIBER GROU	JP	NINET	Y-SECONE	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA	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		II	0.00		
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourtl	n Group	\$	0.00		
	 r	·				<u>·</u>			
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourti	า 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	YSTEM ID# 014552	Name	
				ATE FEES FOR EACH					
		SUBSCRIBER GRO		II		I SUBSCRIBER GROU		9	
COMMUNITY/ AREA	٩		0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
	·····				<u></u>			and	
								Syndicated Exclusivity	
			·				····	Surcharge	
								for	
								Partially	
	·····		<u>.</u>		 			Distant Stations	
								Stations	
								I	
									
			<u>-</u>						
Total DSEs		.!	0.00	Total DSEs		**	0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00		
Gross recorpts rillot	Стоир		0.00	Cross receipts occor	на Огоар	*	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00		
		SUBSCRIBER GRO		II		SUBSCRIBER GROU	UP -		
COMMUNITY/ AREA	٩ 		0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	·····		<u>.</u>		<u></u>				
									
			<u>-</u>		···				
			<u>.</u>		<u></u>			I	
			<u>-</u>		···				
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00		
Base Rate Fee Third 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# 014552	Name	
				TE FEES FOR EACH					
NINETY- COMMUNITY/ AREA	SEVENTH	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	
	<u></u>							for Partially	
					•••			Distant	
								Stations	
	<u></u>								
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00		
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00		
NINE	TY-NINTH	SUBSCRIBER GROU	JP	ONE HU	JNDREDTH	I SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	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 Fourth	h Group	\$	0.00		
- 300 / (500) 111114		.*			С. Сир				
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00		
Base Rate Fee: Add t Enter here and in bloo			riber group	o as shown in the boxes	above.	\$			

LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABL	E SYSTEM:				SY	STEM ID# 014552	Name
				TE FEES FOR EACH	SUBSCR	BER GROUP		
	DFIRST	SUBSCRIBER GROU	JP	ONE HUNDRED	SECOND	SUBSCRIBER GROUP)	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
							<u>-</u>	Surcharge
								for
								Partially
								Distant
								Stations
							<u> </u>	
Total DSEs	<u>. </u>		0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro		\$	0.00	Base Rate Fee Second		\$	0.00	
ONE HUNDRE	D THIRD	SUBSCRIBER GROU		ONE HUNDRED	FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			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 Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	ibove.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 014552	Name
		COMPUTATION OI SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE			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>		<u></u>			Distant Stations
			<u> </u>			-		Stations
			<u></u>					
			<u> </u>		····	1		
Total DSEs	-		0.00	Total DSEs		Į Į	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED S	SEVENTH	SUBSCRIBER GRO	UP	ONE HUNDI	RED EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u>. </u>		<u></u>		·····	-		
			 			-		
			<u></u>					
			<u> </u>					
T. / I D. O. F.			0.00	T			0.00	
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 014552	Name
		COMPUTATION OF SUBSCRIBER GRO		ATE FEES FOR EACH		RIBER GROUP I SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			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
								İ
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Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	İ
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GRO		II		I SUBSCRIBER GRO		1
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	İ
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	1
		-						İ
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Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	1
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, INC		LE SYSTEM:				S	YSTEM ID# 014552	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER GROUP I SUBSCRIBER GROU	JP	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
				-	<u></u>			Exclusivity Surcharge
		-						for
								Partially Distant
		-						Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROU	JP 0	ii .		I SUBSCRIBER GRO	JP 0	
COMMUNITY/ AREA			u	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	огоир	\$	0.00	Gross Receipts Fourt	п Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

CABLE ONE, IN		E SYSTEM:				S	YSTEM ID# 014552	Name
				ATE FEES FOR EACH				
		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
								and
					 			Syndicated Exclusivity
					···			Surcharge
								for
								Partially
		-						Distant Stations
								Stations
								I
					<u></u>			I
								
Total DSEs	<u> </u>	!	0.00	Total DSEs		11	0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	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	
	·····							
					···			
		-						
					···			
					···			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thire	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.	\$		

LEGAL NAME OF OWNER OF CAB CABLE ONE, INC.	LE SYSTEM:				SY	STEM ID# 014552	Name
BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED TWENTY-FIRST	SUBSCRIBER GROU		ONE HUNDRED TWENT	Y-SECOND	SUBSCRIBER GROUP		9
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	Computation
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate Fee
							and
							Syndicated Exclusivity
			-				Surcharge
							for
							Partially
							Distant
						<u> </u>	Stations
				<u> </u>			
Total DSEs	ļļ.	0.00	Total DSEs	4	! 	0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED TWENTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWENT	Y-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u>.</u>	
					 	<u>.</u>	
						<u> </u>	
	H				H	<u>-</u>	
				<u></u>			
						<u> </u>	
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	
Base Rate Fee: Add the base ra Enter here and in block 3, line 1,		riber group	as shown in the boxes a	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 014552	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GROU		††		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	····		 					Base Rate Fe
		H						Syndicated
		=						Exclusivity
								Surcharge
								for
	····							Partially Distant
	····							Stations
	····	-	<u></u>					
	<mark></mark>							
	····					- -		
Total DSEs		<u> </u>	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	
NE HUNDRED TWENT	Y-SEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRED TW	ENTY-EIGHTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
	····	 		-				
		-						
	<mark></mark>							
	····		···					
	····							
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts Third	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.	\$		

014552 Na						EM:	E SYSTE	F CABLI		NAME OF OWNI
A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP)R	FEES F	RATE F	BASE RA						
ITH SUBSCRIBER GROUP ONE HUNDRED THIRTIETH SUBSCRIBER GROUP O COMMI INITY/ ARFA O					ROUP	RIBER GR	SUBSCR	-NINTH S		
Comp			CO	U						MUNITY/ AREA
			Ξ C,	DSE		L SIGN	CALL	DSE		L SIGN
Base R										
ai Synd			<mark></mark>							
Exclu		•••••	····· <mark></mark>							
Surc										
Pari Dis										
Stat	•••••									
			<mark></mark>							
		•••••								
	•••••	•••••								
		tal DSEs)_ Tota	0.00						OSEs
\$ 0.00 Gross Receipts Second Group \$ 0.00	pts	oss Rec) Gro	0.00			\$	p .	Group	Receipts First G
\$ 0.00 Base Rate Fee Second Group \$ 0.00	:ee	se Rate) Bas	0.00			\$	p [Group	Rate Fee First G
SST SUBSCRIBER GROUP ONE HUNDRED THIRTY-SECOND SUBSCRIBER GROUP	RED	NE HUNI	ON		ROUP	RIBER GR	SUBSCR	-FIRST S	HIRTY-F	E HUNDRED THI
O COMMUNITY/ AREA O	Y/ /	OMMUNI	0 COI	0					4	/IUNITY/ AREA
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	N	CALL SIG	<u> </u>	DSE		L SIGN	CALL	OSE	DS	L SIGN
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		•••••				••••••				
	•••••									
		tal DSEs) Tota	0.00						OSEs
\$ 0.00 Gross Receipts Fourth Group \$ 0.00	pts	oss Rec) Gro	0.00			\$	ıp	d Group	Receipts Third
ll ·			コロ							

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 014552	Name
		COMPUTATION OF SUBSCRIBER GROUP		ATE FEES FOR EACH		RIBER GROUP H 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 Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
		SUBSCRIBER GROUP		ii e		SUBSCRIBER GROUP	_	
COMMUNITY/ AREA	······································		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	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# 014552	Name
				ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED THIRT		SUBSCRIBER GROU				H SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
	····						<u> </u>	Exclusivity Surcharge
	····	-		·	·····			for
								Partially
								Distant
								Stations
					<u></u>			
		 						
	····	H						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
						· ·		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TH	IRTY-NINTH	SUBSCRIBER GROU	IP	ONE HUNDRE	D FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
	Group	•	0.00		rth Group	•	0.00	
Gross Receipts Third	Oroup	\$	0.00	Gross Receipts Fou	iai Gioup	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 014552	Name
				ATE FEES FOR EACH				
COMMUNITY/ AREA		SUBSCRIBER GROUP	0	COMMUNITY/ AREA	ı r-SECONE) SUBSCRIBER GROUP	0	9
CALL SICN	DSE	CALLSION	DSE	CALL SICN	DSE	I CALL SIGN	DOE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
								and
		-						Syndicated
								Exclusivity
		-						Surcharge
	···							for Partially
								Distant
								Stations
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		-						I
		-						I
							••••	1
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First C	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	
ONE HUNDRED FO	RTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED FOR	TY-FOURTH	I SUBSCRIBER GROUP	1	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								1
	···							1
								1
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	<u></u>	-						1
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		-						1
								1
								1
	<u>.</u>							I
								1
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 014552	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GROUP				H SUBSCRIBER GROUF		9
COMMUNITY/ AREA	······································		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
					<u></u>			Syndicated Exclusivity
					<u></u>		••••	Surcharge
								for
								Partially
					<u></u>			Distant Stations
						•		Stations
					<u></u>			
					<u></u>			
Total DSEs	<u> </u>		0.00	Total DSEs	_	!!	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
	·							
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROUP		II		H SUBSCRIBER GROUF		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
					<u></u>			
					<u></u>			
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					<u></u>			
	····				<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	:h Group	\$	0.00	
Base Rate Fee Third	i 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# 014552	Name
E ONE HUNDRED FOR				TE FEES FOR EAC		IBER GROUP SUBSCRIBER GROU	UP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
						-		Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
						-		
						<u> </u>		
Total DSEs			0.00	Total DSEs		Į Į	0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (\$	0.00	Base Rate Fee Sec		\$	0.00	
ONE HUNDRED FII COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	ONE HUNDRED FIF		SUBSCRIBER GRO	UP 0	
				- Commont 17,7 title				
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 the Enter here and in blood			criber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 014552	Name
				TE FEES FOR EAC				
ONE HUNDRED FIF	TY-THIRD	SUBSCRIBER GRO		ONE HUNDRED FIF		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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Total DSEs		I I	0.00	Total DSEs		<u> </u>	0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First 0		\$	0.00	Base Rate Fee Sec		\$	0.00	
	FTY-FIFTH	SUBSCRIBER GRO		İ		SUBSCRIBER GRO	_	
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			criber group	as shown in the boxe	s above.			
Enter here and in bloc	κο, iiile 1, i	space L (page /,				\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 014552	Name
В	LOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED FIFTY	/-SEVENTH	SUBSCRIBER GROU				SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	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	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	FTY-NINTH	SUBSCRIBER GROU		Ħ		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 Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add to Enter here and in bloc			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.		LE SYSTEM:	-			S	014552	Name
BI				TE FEES FOR EACH			LID.	
		SUBSCRIBER GRO	UP			SUBSCRIBER GRO		9
COMMUNITY/ AREA)LK 		COMMUNITY/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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Total DSEs			0.00	Total DSEs		11	0.00	
Gross Receipts First G	roup	\$ 882	2,054.00	Gross Receipts Secon	d Group	\$	37,009.00	
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			-		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	TILDEN	<u> </u>		COMMUNITY/ AREA	PIERCE	/RANDOLPH/HAI	DAR/HOSK	
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 C	Group	\$ 25	,564.00	Gross Receipts Fourth	Group	\$	99,916.00	
								
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				•				
		te fees for each subs space L (page 7)	criber group	as shown in the boxes a	above.	\$	0.00	

LEGAL NAME OF OWNE		LE SYSTEM:	•			S	YSTEM ID# 014552	Name
В				TE FEES FOR EACH				
		SUBSCRIBER GROU				SUBSCRIBER GRO		9
COMMUNITY/ AREA		R/WEST POINT/B		COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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Total DSEs			0.00	Total DSEs		11	0.00	
Gross Receipts First G	Group	\$ 165 _.	,069.00	Gross Receipts Seco	nd Group	\$	0.00	
·	·			·	·			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	SEVENTH	SUBSCRIBER GROU	JP		EIGHTH	I SUBSCRIBER GRO	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 DSFs			0.00	
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Gross Receipts Third (roup	\$	U.UU	Gross Receipts Fourt	n Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
	\$ te fees for each s				h Group	\$ \$	0.00	

Name								
		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
•	Р	SUBSCRIBER GROUP	TENTH:		JP	SUBSCRIBER GROU	NINTH	
9 Computati	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	\$		Base Rate Fee Second	0.00	\$		Base Rate Fee First Gr
		\$ SUBSCRIBER GROUP			_	\$ SUBSCRIBER GROU		
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	P 0	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	EL COMMUNITY/ AREA
	P 0	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	EL COMMUNITY/ AREA
	P 0	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	EL COMMUNITY/ AREA
	P 0	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	EL COMMUNITY/ AREA
	P 0	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	EL COMMUNITY/ AREA
	P 0	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	EL COMMUNITY/ AREA
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	P 0	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	EL COMMUNITY/ AREA
	DSE	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	EVENTH	CALL SIGN
	DSE 0.00	SUBSCRIBER GROUI	DSE	CALL SIGN CALL SIGN Total DSEs	DSE O.00	SUBSCRIBER GROU	DSE	CALL SIGN CALL SIGN Cotal DSEs
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		TE FEES FOR EACH				
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H SUBSCRIBER GROUP			JP			FI
H SUBSCRIBER GROUP		5	JP			FI
H SUBSCRIBER GROUP 0	XTEENTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROL	FTEENTH	FI COMMUNITY/ AREA
H SUBSCRIBER GROUP 0	XTEENTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROL	FTEENTH	FI OMMUNITY/ AREA
H SUBSCRIBER GROUP 0	XTEENTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROL	FTEENTH	FI COMMUNITY/ AREA
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H SUBSCRIBER GROUP 0	XTEENTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROL	FTEENTH	FI COMMUNITY/ AREA
H SUBSCRIBER GROUP 0	XTEENTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROL	FTEENTH	FI COMMUNITY/ AREA
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H SUBSCRIBER GROUP 0	XTEENTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROL	FTEENTH	FI COMMUNITY/ AREA
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H SUBSCRIBER GROUP CALL SIGN DSE O.00	DSE	CALL SIGN CALL SIGN Total DSEs	DSE O.00	CALL SIGN	DSE	CALL SIGN CALL SIGN Cotal DSEs
H SUBSCRIBER GROUP CALL SIGN DSE	DSE	CALL SIGN	JP 0	SUBSCRIBER GROL	DSE	CALL SIGN CALL SIGN Total DSEs
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	YSTEM ID# 014552	S'			· 	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
				TE FEES FOR EACH				
9	IP	SUBSCRIBER GROU	HTEENTH			SUBSCRIBER GRO	NTEENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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			1 0	Total DSEs	0.00	•		Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	IP	SUBSCRIBER GROU	VENTIETH	TV	JP	SUBSCRIBER GRO	NTEENTH	NIN
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	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
	0.00							
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	014552	S			•	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
				TE FEES FOR EACH				
9	JP	SUBSCRIBER GROU	-SECOND	TWENTY		SUBSCRIBER GRO	TY-FIRST	TWEN
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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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
	JP	SUBSCRIBER GROU	'-FOURTH	TWENT	JP	SUBSCRIBER GRO	TY-THIRD	TWENT
)	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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_ 1	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
_	0.00							

Name	YSTEM ID# 014552	S`				LE SYSTEM:	ER OF CABL	CABLE ONE, INC.
				TE FEES FOR EACH				
9	JP	SUBSCRIBER GROU	ITY-SIXTH			SUBSCRIBER GRO	ITY-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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Base Rate Fe					<u> </u>			
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Syndicated								
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	Group	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G
1	JP	SUBSCRIBER GROU	Y-EIGHTH	TWENT	UP	SUBSCRIBER GRO	SEVENTH	TWENTY-S
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third C

Name	O14552	S			•	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	HIRTIETH			SUBSCRIBER GRO	TY-NINTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	3ase Rate Fee First Gr
	IP	SUBSCRIBER GROU	'-SECOND	THIRTY	JP	SUBSCRIBER GRO	TY-FIRST	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

0	ROUP	IBER GROUP	SUBSCR	TE EEES EOD EACH				
Computation SE of	ROUP					COMPUTATION OF		
Computation SE of		SUBSCRIBER GRO	Y-FOURTH			SUBSCRIBER GRO	TY-THIRD	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Base Rate Fe	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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00	0.00			Total DSEs	0.00			Total DSEs
00_	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
00	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	ROUP	SUBSCRIBER GRO	RTY-SIXTH	THIF	JP	SUBSCRIBER GRO	TY-FIFTH	THIR
0	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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00	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third (
00	0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	Group	Base Rate Fee Third 0

LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABI	LE SYSTEM:				S	YSTEM ID# 014552	Name
				TE FEES FOR EACH				
	EVENTH	SUBSCRIBER GROU			Y-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
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								Surcharge
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		-			<u>.</u>		<u></u>	Distant
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Total DSEs	-		0.00	Total DSEs	1		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	
THIRT	Y-NINTH	SUBSCRIBER GROU	JP		FORTIETH	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 DCCs			0.00	Total DCC-	1		0.00	
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	

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Base Rate
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Partially Distant
Stations

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 014552	Name
				TE FEES FOR EACH				
	TY-FIFTH	SUBSCRIBER GRO			RTY-SIXTH	SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-			<u> </u>			and
								Syndicated
					<u></u>	 		Exclusivity Surcharge
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Total DSEs	<u> </u>		0.00	Total DSEs		ĮI.	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	
FORTY-S	SEVENTH	SUBSCRIBER GRO	UP	FOR ⁻	TY-EIGHTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
								
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
		e fees for each subs	criber group	as shown in the boxes	above.	\$		

	+							
	ID			TE FEES FOR EACH				
9)P	SUBSCRIBER GROU	rir i IE I H	COMMUNITY/ AREA	ار	SUBSCRIBER GROU	I T-ININI H	COMMUNITY/ AREA
Computati								
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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and Syndicate	····						<u></u>	
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	0.00			Total DSEs	0.00	_		otal 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	ase Rate Fee First G
	JP	SUBSCRIBER GROU	-SECOND			SUBSCRIBER GROU	TY-FIRST	
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	<u></u>						<u></u>	
								
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	otal DSEs Gross Receipts Third (
	_	\$	Group		,	\$	Group	

						COMPUTATION OF		
9		SUBSCRIBER GROU	-FOURTH			SUBSCRIBER GROU	Y-THIRD	
_	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate	DOL	O/ ILL GIGIT	DOL	O/ LEE OIOIV	DOL	Of the GIGIT	DOL	O/ LE GIGIT
and		 						
Syndicat	····							
Exclusiv	<mark></mark>							
Surchar								
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	0.00			Total DSEs	0.00			otal DSEs
				Gross Receipts Second Group \$ 0.00		\$ 0.00		oup
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	0.00		Croup	Page Bate Fee Socons	0.00		· · · · · · · · · · · · · · · · · · ·	Rose Bote Ese First Cr
	0.00	\$		Base Rate Fee Second	0.00	\$	oup	3ase Rate Fee First Gr
	•	\$ SUBSCRIBER GROU			_	\$ SUBSCRIBER GROU		
	•				_			FIF
	P			FIF	JP			FIF
	P 0	SUBSCRIBER GROU	TY-SIXTH	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	FIF
	P 0	SUBSCRIBER GROU	TY-SIXTH	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	FIF
	P 0	SUBSCRIBER GROU	TY-SIXTH	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	FIF
	P 0	SUBSCRIBER GROU	TY-SIXTH	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	FIF
	P 0	SUBSCRIBER GROU	TY-SIXTH	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	FIF
	P 0	SUBSCRIBER GROU	TY-SIXTH	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	FIF
	P 0	SUBSCRIBER GROU	TY-SIXTH	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	FIF
	P 0	SUBSCRIBER GROU	TY-SIXTH	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	FIF
	P 0	SUBSCRIBER GROU	TY-SIXTH	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	FIF
	P 0	SUBSCRIBER GROU	TY-SIXTH	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	FIF
	P 0	SUBSCRIBER GROU	TY-SIXTH	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	FIF
	P 0	SUBSCRIBER GROU	TY-SIXTH	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	FIF
	P 0	SUBSCRIBER GROU	TY-SIXTH	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	TY-SIXTH	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	FIF
	P 0	SUBSCRIBER GROU	TY-SIXTH	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	FIF
	P 0	SUBSCRIBER GROU	TY-SIXTH	CALL SIGN	DSE	SUBSCRIBER GROU	TY-FIFTH	CALL SIGN
	DSE	SUBSCRIBER GROU	DSE	CALL SIGN CALL SIGN Total DSEs	DSE O.00	CALL SIGN	DSE	CALL SIGN CALL SIGN Total DSEs
	DSE	SUBSCRIBER GROU	DSE	CALL SIGN	DSE	SUBSCRIBER GROU	DSE	CALL SIGN CALL SIGN Total DSEs
	DSE	SUBSCRIBER GROU	DSE	CALL SIGN CALL SIGN Total DSEs	DSE O.00	CALL SIGN	DSE	FIF
	0.00 0.00	SUBSCRIBER GROU CALL SIGN *	DSE OGroup	CALL SIGN CALL SIGN Total DSEs Gross Receipts Fourth	DSE 0.00 0.00	SUBSCRIBER GROU	DSE DSE	CALL SIGN CALL SIGN Fotal DSEs Gross Receipts Third G
	DSE	SUBSCRIBER GROU	DSE OGroup	CALL SIGN CALL SIGN Total DSEs	DSE O.00	CALL SIGN	DSE DSE	CALL SIGN CALL SIGN Total DSEs

<u> </u>	014552								LEGAL NAME OF OWNE CABLE ONE, INC.
Δ.	JP	SUBSCRIBER GROU	Y-EIGHTH	FIFT		SUBSCRIBER GRO	SEVENTH	FIFTY-S	
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe							ļĪ		
and									
Syndicated									
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	0.00			Total DSEs	0.00			Total DSEs	
		\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr	
		\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr	
]	JP	SUBSCRIBER GROU	SIXTIETH		JP	SUBSCRIBER GRO	ΓΥ-NINTH	FIFT	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
1	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00			Total DSEs	0.00			Total DSEs	
		•	Croup	Cross Bossints Fourth	0.00	•	roup	Gross Receipts Third G	
	0.00	3	Group	Gross Receipts Fourth	0.00	\$	лоар		

LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABL	E SYSTEM:				S'	YSTEM ID# 014552	Name
				TE FEES FOR EACH				
	Y-FIRST	SUBSCRIBER GROU			-SECOND	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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Total DSEs			0.00	Total DSEs	ļ.	H-	0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$		
SIXT	Y-THIRD	SUBSCRIBER GROUP		İİ	/-FOURTH	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	I		0.00	Total DSEs	1	11	0.00	
Gross Receipts Third G	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
	e fees			Base Rate Fee Fourth		\$	0.00	

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		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EACH		IBER GROUP SUBSCRIBER GROUND	IID	
OMMUNITY/ AREA	-i II ⁻ I	OODOORIDER GROU	<u> </u>	COMMUNITY/ AREA		GOBGORIBER GROU	0	9
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CALL SIGN C	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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								and
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otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First Group	р	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
ase Rate Fee First Group	n	•				•	0.00	
	Ρ	\$	0.00	Base Rate Fee Secon	na Group	\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GRO	•	
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SIXTY-SEV OMMUNITY/ AREA			JP	SIX			UP	
SIXTY-SEV OMMUNITY/ AREA	/ENTH	SUBSCRIBER GROI	JP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SEV OMMUNITY/ AREA	/ENTH	SUBSCRIBER GROI	JP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SEV OMMUNITY/ AREA	/ENTH	SUBSCRIBER GROI	JP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SEV OMMUNITY/ AREA	/ENTH	SUBSCRIBER GROI	JP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SEV OMMUNITY/ AREA	/ENTH	SUBSCRIBER GROI	JP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SEV OMMUNITY/ AREA	/ENTH	SUBSCRIBER GROI	JP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SEV OMMUNITY/ AREA	/ENTH	SUBSCRIBER GROI	JP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SEV OMMUNITY/ AREA	/ENTH	SUBSCRIBER GROI	JP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SEV OMMUNITY/ AREA	/ENTH	SUBSCRIBER GROI	JP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SEV OMMUNITY/ AREA	/ENTH	SUBSCRIBER GROI	JP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SEV OMMUNITY/ AREA	/ENTH	SUBSCRIBER GROI	JP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SEV OMMUNITY/ AREA	/ENTH	SUBSCRIBER GROI	JP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SEV OMMUNITY/ AREA	/ENTH	SUBSCRIBER GROI	JP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SEV OMMUNITY/ AREA	/ENTH	SUBSCRIBER GROI	JP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY-SEV OMMUNITY/ AREA CALL SIGN E	/ENTH	SUBSCRIBER GROI	DSE	SIX COMMUNITY/ AREA	TY-EIGHTH DSE	SUBSCRIBER GRO	DSE	
SIXTY-SEV OMMUNITY/ AREA CALL SIGN C	/ENTH	CALL SIGN	DSE DSE	SIX' COMMUNITY/ AREA CALL SIGN Total DSEs	TY-EIGHTH DSE	SUBSCRIBER GROU	DSE O.00	
SIXTY-SEV OMMUNITY/ AREA CALL SIGN C	/ENTH	CALL SIGN	DSE DSE	SIX' COMMUNITY/ AREA CALL SIGN Total DSEs	TY-EIGHTH DSE	SUBSCRIBER GROU	DSE O.00	

	YSTEM ID# 014552	S				LE SYSTEM:	ER OF CABL	CABLE ONE, INC.
				TE FEES FOR EACH				
9	JP	SUBSCRIBER GROU	VENTIETH	SE		SUBSCRIBER GRO	TY-NINTH	SIX
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
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Surcharge	····	-	.					
for Partially		-	<u>.</u>				·	
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	0.00			Total DSEs	0.00			Total DSEs
		\$	d Group	Gross Receipts Secor	0.00	\$	roup	Gross Receipts First G
		\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	/-SECOND	SEVENT	UP	SUBSCRIBER GRO	TY-FIRST	SEVEN
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	CALL SIGN	DSE	Total DSEs	DSE	CALL SIGN	DSE	
		\$				CALL SIGN		Total DSEs Gross Receipts Third C

Name	YSTEM ID# 014552	S			•	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION O	LOCK A: (BL
0	IP	SUBSCRIBER GROU	/-FOURTH	SEVENTY	JP	SUBSCRIBER GRO	TY-THIRD	SEVENT
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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		\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
		\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First Gr
	IP	SUBSCRIBER GROU	NTY-SIXTH	SEVEN	JP	SUBSCRIBER GRO	TY-FIFTH	SEVEN [*]
	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	<u> </u>	Group	Total DSEs Gross Receipts Third G

<u> </u>								CABLE ONE, INC.
0 9				TE FEES FOR EACH				
0 3	JP	SUBSCRIBER GROU	Y-EIGHTH	SEVENT		SUBSCRIBER GROU	SEVENTH	SEVENTY-S
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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Base Rate Fe								
and								
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0	0.00		<u> </u>	Total DSEs	0.00		<u> </u>	Total DSEs
<u>o</u>	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
0		\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	IGHTIETH	E	JP	SUBSCRIBER GROU	ΓΥ-NINTH	SEVENT
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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		\$		Base Rate Fee Fourth	0.00	\$	Group	Base Rate Fee Third G

. NAME OF OWNER OF CABLE SYSTEM: LE ONE, INC.		SYSTEM ID# 014552
BLOCK A: COMPUTATION OF BASE RATE FEES FO		2011
EIGHTY-FIRST SUBSCRIBER GROUP MUNITY/ AREA 0 COMMUNITY	EIGHTY-SECOND SUBSCRIBER GF AREA	0
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	YSTEM ID# 014552					LE SYSTEM:	R OF CABL	CABLE ONE, INC.
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LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABI	LE SYSTEM:				S	014552	Name
BL	OCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED TWEN	TY-FIRST	SUBSCRIBER GROU	Р	ONE HUNDRED TWE	NTY-SECONE	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
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Γotal DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
3ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWEN	TY-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	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
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Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	<u>[</u> \$	0.00	Base Rate Fee Fou	rtn Group	\$	0.00	

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 014552	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	RIBER GROUP		
ONE HUNDRED TWEN	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
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
NE HUNDRED TWENTY-	SEVENTH	SUBSCRIBER GROUP)	ONE HUNDRED TWEN	ITY-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	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
	e base rat	e fees for each subso		Base Rate Fee Fourth		\$	0.00	

		IBER GROUP	SUBSCR	· · · · · · · · · · · · · · · · · · ·				
Computation of			0000011	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (BL
Computation of		SUBSCRIBER GROUP	THIRTIETH	ONE HUNDRED	1	SUBSCRIBER GROUP	TY-NINTH	ONE HUNDRED TWEN
E of	0						COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated								
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0	0.00			Total DSEs	0.00		 	Total DSEs
0	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
0	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
)	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIRT		SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIF
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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<u>u</u>	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
	0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	roup	Base Rate Fee Third G

ONE HUNDRED THIRTY-THIR OMMUNITY/ AREA	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
			11		SUBSCRIBER GROUP	P	9		
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CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of		
							Base Rate Fo		
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							Syndicated		
							Exclusivity		
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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			
						T			
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00			
NE HUNDRED THIRTY-FIFT	H SUBSCRIBER GRO	DUP	ONE HUNDRED T	HIRTY-SIXTH	I SUBSCRIBER GRO	UP			
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
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otal DSEs		0.00	Total DSEs			0.00			
		0.00		urth Group		0.00			
otal DSEs	\$	0.00	Total DSEs Gross Receipts Fou	irth Group	\$	0.00			
	\$ \$				\$ \$	-			

	014552	S			•	LE SYSTEM:	R OF CABL	LEGAL NAME OF OWNER CABLE ONE, INC.
7		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
_)	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED THIR		SUBSCRIBER GROUP	SEVENTH	ONE HUNDRED THIRTY-
0 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fed								
and								
Syndicated								
Exclusivity								
Surcharge								
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Partially								
Distant								
Stations								
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	•••••							
0	0.00		-	Total DSEs	0.00			Total DSEs
0_	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
0	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	UP	SUBSCRIBER GROU	FORTIETH	ONE HUNDRED	JP	SUBSCRIBER GROU	Y-NINTH	ONE HUNDRED THIRT
0	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
<u> </u>	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			Total DSEs
<u>o</u>								
_	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G

and Syndicated Exclusivity Surcharge for Partially Distant Stations
O COMMUNITY/ AREA O Computation OF DSE CALL SIGN DSE CALL SIGN DSE OF Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
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Syndicated Exclusivity Surcharge for Partially Distant Stations
Exclusivity Surcharge for Partially Distant Stations
Surcharge for Partially Distant Stations
for Partially Distant Stations
Partially Distant Stations
Distant Stations
Stations
0.00 Total DSEs 0.00
0.00 Gross Receipts Second Group \$ 0.00
0.00 Base Rate Fee Second Group \$ 0.00
R GROUP ONE HUNDRED FORTY-FOURTH SUBSCRIBER GROUP
O COMMUNITY/ AREA O
GN DSE CALL SIGN DSE CALL SIGN DSE
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0.00 Total DSEs
0.00 Gross Receipts Fourth Group \$ 0.00
0.00 Base Rate Fee Fourth Group \$ 0.00

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				s	YSTEM ID# 014552	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED FOR	RTY-FIFTH	SUBSCRIBER GROUP)	ONE HUNDRED FO	RTY-SIXTH	SUBSCRIBER GROUP		•
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 Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
C. 000 . 1000,p.0	oup			erese resseipte essei	.u 0.0up	<u>.</u>		
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	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 DSFa			0.00	Total DSEs			0.00	
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	
	e base rat	e fees for each subsc		as shown in the boxes		\$	0.00	

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 014552	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCF	RIBER GROUP		
ONE HUNDRED FORT	Y-NINTH	SUBSCRIBER GRO	JP	ONE HUNDREI	D FIFTIETH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
						<u> </u>		Exclusivity
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Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Second Group \$ 0.00			0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIFT	ΓY-FIRST	SUBSCRIBER GRO	JP	ONE HUNDRED FIFT	Y-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fourth	h Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Rate Fee: Add the here and in block			criber group	as shown in the boxes	above.	\$		

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				TE FEES FOR EACH					
9		SUBSCRIBER GROU	r-FOURTH	ONE HUNDRED FIFTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	TY-THIRD	ONE HUNDRED FIF	
Computation	COMMUNITY/ AREA 0								
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate F									
and									
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	0.00			Total DSEs	0.00			otal DSEs	
	0.00	Gross Receipts Second Group \$ 0.00				\$	Group	Gross Receipts First G	
	0.00	\$		Base Rate Fee Secon	0.00	\$		ase Rate Fee First G	
	_	SUBSCRIBER GROU	TY-SIXTH		JP 0	SUBSCRIBER GRO	TY-FIFTH	ONE HUNDRED FIF	
	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	S	Group		0.00		Group		
	_	\$	Group	Total DSEs Gross Receipts Fourth		\$	Group	otal DSEs	

LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 014552	Name
				TE FEES FOR EACH	SUBSCR	RIBER GROUP		
ONE HUNDRED FIFTY-S	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP				0
COMMUNITY/ AREA 0				COMMUNITY/ AREA	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
					<mark>.</mark>			and
					<mark>.</mark>			Syndicated Exclusivity
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Total DSEs	ļ		0.00	Total DSEs	1		0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Second Group \$ 0.00			0.00	
							1	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FIFT	Y-NINTH	SUBSCRIBER GROU	JP	ONE HUNDRED	SIXTIETH	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	ı		0.00	
		0.00	Gross Receipts Fourth Group \$ 0.00			0.00		
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Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
eipts Third Gr	·		0.00	Gross Receipts Fourth	·		0.00	

FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CARLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 014552 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CARLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 014552 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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