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					
2-28-20	\$ 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	2019/2			
B	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the busine If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account. Check here if this is the system's first filing. If not, enter the system's ID LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	ess of the cable system on the last day of the counting perion	em the accounting period should s	
	CABLE ONE, INC.			00383820192
				003838 2019/2
	210 E,. EARLL DRIVE PHOENIX, AZ 85012-2626			
С	INSTRUCTIONS: In line 1, give any business or trade names used to ic names already appear in space B. In line 2, give the mailing address of			
System	1 IDENTIFICATION OF CABLE SYSTEM: SPARKLIGHT			
	MAILING ADDRESS OF CABLE SYSTEM: 7501 NITA PLACE NE (Number, street, rural route, apartment, or suite number) RIO RANCHO, NM 87144 (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 Served	with all communities. CITY OR TOWN	STATE		
First	RIO RANCHO	NM		
Community	Below is a sample for reporting communities if you report multiple cha	ınnel 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 SAJE. PAGE 1D.			OVOTEM ID#						
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#						
CABLE ONE, INC.			003838						
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.									
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.									
If all communities receive the same complement of television broadcast stations (i.e., all communities with the channel line-up "A" in the appropriate column below or leave to on a partially distant or partially permitted basis in the DSE Schedule, associate each designated by a number (based on your reporting from Part 9).	he column blank. I	f you report any st	ations						
When reporting the carriage of television broadcast stations on a community-by-comm channel line-up designated by an alpha-letter(s) (based on your Space G reporting) are (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns	d a subscriber gro								
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#						
RIO RANCHO	NM			First					
SANDOVAL COUNTY	NM			Community					
				See instructions for					
				additional information					
				on alphabetization.					
				Add rows as necessary.					

Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

003838

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 	2,325	\$	40.00	BULK RESIDENTIAL	854	\$	23.50
 Service to additional set(s) 							
 FM radio (if separate rate) 							
Motel, hotel	118	\$	11.03				
Commercial	43	\$	73.00				
Converter							
Residential	2,325	\$	2.75				
Non-residential	212	\$	1.00				
	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.

		BLOCK	2				
CATEGORY OF SERVICE	F	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVIO	CE RATE	
Continuing Services:			Installation: Non-residential				
Pay cable	\$	18.00	Motel, hotel			TIER	\$ 44.00
 Pay cable—add'l channel 	\$	12.00	Commercial				
Fire protection			• Pay cable				
Burglar protection			Pay cable-add'l channel				
Installation: Residential			Fire protection				
First set	\$	90.00	Burglar protection				
Additional set(s)	\$	30.00	Other services:				
• FM radio (if separate rate)	***********		Reconnect	\$	90.00		
Converter			Disconnect				
			Outlet relocation	\$	30.00		
			Move to new address	\$	30.00		

LEGAL NAME OF	OWNER OF CABLE SY	STEM:			SYSTEM ID#	
CABLE ON	E, INC.				003838	Name
PRIMARY TRANSI	MITTERS: TELEVISIO	DN .				
n General: In sp	ace G, identify ever	y television st	ation (including	translator stations	s and low power television stations)	
carried by your ca	able system during t	he accounting	g period, except	(1) stations carri	ed only on a part-time basis under	G
	•			•	ain network programs [sections	Drimon
. , . ,	m basis, as explaine	,	-	r(e)(2) and (4))],	and (2) certain stations carried on a	Primary Transmitters:
				s carried by your	cable system on a substitute program	Television
	ifc FCC rules, regula			- 0	ant and Donous I am State	
	tation nere in space irried only on a subs		st it in space i (tr	ie Speciai Statem	ent and Program Log)—if the	
	•		ation was carried	d both on a subst	tute basis and also on some other	
		erning substi	tute basis statio	ns, see page (v) o	of the general instructions located	
in the paper SA Column 1: Lis		sian. Do not i	report origination	n program service	es such as HBO, ESPN, etc. Identify	
		-			ition. For example, report multi-	
		streams must	t be reported in	column 1 (list eac	h stream separately; for example	
VETA-simulcast) Column 2: Giv		per the FCC h	nas assigned to	the television stat	ion for broadcasting over-the-air in	
			-		may be different from the channel	
	ble system carried th		tation is a	urk ototiam !- !	anandant atation are management at	
					ependent station, or a noncommercial cast), "I" (for independent), "I-M"	
	• •	,	,.		ommercial educational multicast).	
	of these terms, see					
	he station is outside service area, see pa			,.	es". If not, enter "No". For an ex-	
					stating the basis on which your	
able system carr	ried the distant station	on during the	accounting period	•	tering "LAC" if your cable system	
•		-				
	t station on a part-ti					
For the retrans	smission of a distant	multicast stre	eam that is not s	subject to a royalt	y payment because it is the subject	
For the retrans of a written agree he cable system	smission of a distant ment entered into o and a primary trans	multicast stre n or before Ju mitter or an a	eam that is not s une 30, 2009, be essociation repre	subject to a royalt etween a cable sy esenting the prima	y payment because it is the subject stem or an association representing rry transmitter, enter the designa-	
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FORM SA3E. PAGE		(0.7.5.4			SYSTEM ID#	4
	INC	YSIEM:				Namo
		DN .			000000	,
CABLE ONE RIMARY TRANSMI In General: In space carried by your cable of CC rules and regulation of Column 1: List the station was carried by station was carried by the basis. For further in the paper SAC Column 1: List the station her basis. For further in the paper SAC Column 1: List of Column 2: Give station was carried the multicast stream as "WE VETA-simulcast). Column 2: Give station in the paper SAC Column 3: Indicated the multicast stream as "WE VETA-simulcast). Column 3: Indicated the multicast stream as "Indicated the meaning of Column 5: If the station of local searched the distant searched the distant searched the distant searched system carried the distant searched system and on "E" (exempt). For the retransmin of "E" (exempt). For the cable system and on "E" (exempt). For the retransmin of "E" (exempt). For the "Exempt".	TTERS: TELEVISION TERS: TELEVISION TELEVISION TERS: TELEVISION TELEV	y television state accounting in June 24, 19 4), or 76.63 (in the next respect to any ations, or auth G—but do list titute basis. ace I, if the state rang substitute basis is ign. Do not I in a station ac streams must be the FCC has whether the station. Whether the station accommercial page (v) of the the local sendage (v) of the the local sendage (v) of the es" in column on during the me basis becar multicast streams in or before Jumitter or an accenter "E". If	g period, except 81, permitting the referring to 76.6 paragraph. It is distant stations or it is a sassigned to annel 4 in Wash tation is a network to the reported in the sassigned to annel 4 in Wash tation is a network), "N-M" (In educational), control of the reported in the sassigned to annel 4 in Wash tation is a network), "N-M" (In educational), control of the reported in the sassigned to annel 4 in Wash tation is a network), "N-M" (In educational), control of the reported in the saccounting perionaccounting perionaccountin	t (1) stations carrine carriage of certifice (2) and (4))]; is carried by your one Special Statem d both on a substitute, see page (v) on program service rer-the-air designation of the television statington, D.C. This pork station, an indictor metwork multipor "E-M" (for nonections located in the television stating or "E-M" (for nonections located in the television stating the primal could be the television of the televisions located in the televisions located by enactivated channel subject to a royalte television of the television of te	s and low power television stations) ed only on a part-time basis under tain network programs [sections and (2) certain stations carried on a cable system on a substitute program tent and Program Log)—if the fittle basis and also on some other of the general instructions located tes such as HBO, ESPN, etc. Identify ation. For example, report multi- the stream separately; for example tion for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial cast), "I" (for independent), "I-M" commercial educational multicast). the paper SA3 form. tes". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your stering "LAC" if your cable system capacity. The ypayment because it is the subject testem or an association representing try transmitter, enter the designa- other basis, enter "O." For a further	Namo
For the meaning of Column 4: If the planation of local se Column 5: If you cable system carried the distant se For the retransm of a written agreem the cable system all	these terms, see a station is outside ervice area, see pu have entered "Yed the distant station on a part-tinission of a distant ent entered into ond a primary trans	page (v) of the the local senage (v) of the es" in column on during the me basis because the multicast street or before Jumitter or an a	e general instruct vice area, (i.e. "o general instruct 4, you must co accounting periouse of lack of a eam that is not sune 30, 2009, be association represervant vice are area.	ctions located in the distant"), enter "Y tions located in the mplete column 5, od. Indicate by eractivated channel subject to a royaltetween a cable syesenting the prima	the paper SA3 form. es". If not, enter "No". For an exect paper SA3 form. stating the basis on which your stering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing any transmitter, enter the designa-	
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SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
KWBQ	29	I	No		ALBUQUERQUE, NM	
KWBQ-2	29	I-M	No		ALBUQUERQUE, NM	See instructions for
KWBQ-3	29	I-M	No		ALBUQUERQUE, NM	additional information alphabetization.
KASY-2	45	I-M	No		ALBUQUERQUE, NM	on alphabetization.
KNMD	9	E	No		SANTA FE, NM	
KUPT	29	I			ALBUQUERQUE, NM	
KASY3	45	I-M	No		ALBUQUERQUE, NM	
KRTN	39	1	No		ALBUQUERQUE, NM	"
KASY4	45	I-M	No		ALBUQUERQUE, NM	

FURM SAJE. PAGE 3.					21/2	
CABLE ONE, II		'STEM:			SYSTEM ID# 003838	Name
PRIMARY TRANSMITT	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during the consine system during the consideration of the consistence of the consi	ne accounting n June 24, 198 4), or 76.63 (r d in the next p	period, except 81, permitting the referring 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	Primary Transmitters:
basis under specifc FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give th its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried t carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these th Column 6: Give the	CC rules, regular here in space only on a substand also in spatformation concurn. The station's call associated with a channel numbers. For example, as the channel numbers are channel numbers are channel numbers. For example, as the channel numbers are care, see patron is outside the coast, "E" (for not experted "Ye entered "Ye entered "Ye entered "Ye entered "Ye entered "Ye entered into on a part-tirition of a distant are entered into on a primary transis simulcasts, also are categories, elocation of eatered into one a primary transis is elocation of eatered into one a primary transis is elocation of eatered into one a primary transis is elocation of eatered into one a primary transis elocation of eatered into one a primary transis is elocation of eatered into one a primary transis eloc	ations, or auth G—but do list titute basis. Ince I, if the state erning substitute sign. Do not read a station acceptate a station acceptate a station. In a station acceptate a station are basis because a light a station and uning the acceptate a station and uning the acceptate a station are basis because a station are basis because a station are a station. For a station are station. For a station are station.	orizations: It it in space I (the space I (e Special Statemer I both on a substitus, see page (v) of a program services er-the-air designal column 1 (list each the television stati- ington, D.C. This in rk station, an inde- for network multicar "E-M" (for nonco- stions located in the instant"), enter "Ye ons located in the inglete column 5, s od. Indicate by ent ctivated channel of ubject to a royalty tween a cable sys- senting the primar channel on any of instructions locate list the community	is". If not, enter "No". For an expaper SA3 form. Istating the basis on which your ering "LAC" if your cable system capacity. It payment because it is the subject stem or an association representing 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	Television
Note: If you are utilizing		nnel line-ups,		space G for each	which the station is identifed. channel line-up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FURIN SAJE. PAGE 3.					OVOTEM ID#	
CABLE ONE, IN		/STEM:			SYSTEM ID# 003838	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 ions in effect or 5.61(e)(2) and (sis, as explaine	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 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	G Primary Transmitters:
Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	Stations: With a CC rules, regular here in space only on a substand also in spatformation concurrent. The station's call associated with associated with a channel numbers. For example yetem carried the in each case we entering the least), "E" (for no esse terms, see pation is outside ce area, see pation is outside ce area, see pation is outside in on a part-time in on a part-time in the control of a distant station of a distant is entered into on a primary transismulcasts, also ree categories in canadian station.	respect to any ations, or auth G—but do list titute basis. ace I, if the staterning substit sign. Do not read a streams must be the FCC has, WRC is Chane station. Whether the station. Whether the station acque (v) of the the local servage (v) of the es" in column on during the ame basis becar multicast stream or before Jumitter or an accumulation of the control of the station. For the page (v) ch station.	r distant stations orizations: at it in space I (the stion was carried ute basis station report origination cording to its over be reported in compart of the state of the sta	e Special Statemer by the television statisticularly the te	s". If not, enter "No". For an expaper SA3 form. stating the basis on which your ering "LAC" if your cable system sapacity. payment because it is the subject stem or an association representing the transmitter, enter the designation has 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
,	-		EL LINE-UP		<u>'</u>	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OWN	VER OF CABLE S	YSTEM:			SYSTEM ID#	
CABLE ONE, I					003838	Name
PRIMARY TRANSMITTI	ERS: TELEVISIO	N				
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under 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 multice.) For the meaning of the Column 4: If the step planation of local service. Column 5: If you heable system carried the distant state. For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	cast), "E" (for no ese terms, see ation is outside ice area, see pa ave entered "You he distant static icon on a part-tirision of a distant t entered into on a primary trans simulcasts, also ree categories e location of ea Canadian statio	oncommercial page (v) of the the local servage (v) of the es" in column on during the ame basis becar in or before Jumitter or an amo enter "E". If a see page (v) ich station. Foons, if any, given see page (v) ons, if any, given see page (v) on see page	I educational), of e general instructivice area, (i.e. "congeneral instruction 4, you must conformation of the counting period accounting period ause of lack of a seam that is not some 30, 2009, be association repreyou carried the conformation of the general in U.S. stations, in the the name of the general in the congeneration of the general in the conformation of the general instruction of the general in	or "E-M" (for nonco- ctions located in the distant"), enter "Ye- ions located in the mplete column 5, so- od. Indicate by enti- ctivated channel co- cubject to a royalty steween a cable sys- senting the primal channel on any of instructions locate list the community me community with	mmercial educational multicast). The paper SA3 form. The paper SA3	
		CHANN	EL LINE-UP	AD		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FURM SAJE. PAGE 3.					OVOTEM ID#	
CABLE ONE, IN		/STEM:			SYSTEM ID# 003838	Name
PRIMARY TRANSMITTI	RS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during the ions in effect or 5.61(e)(2) and (sis, as explaine	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 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	G Primary Transmitters:
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Note: If you are utilizing	ig multiple char		EL LINE-UP		channel line-up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FURIN SAJE. PAGE 3.					OVOTEM ID#	
CABLE ONE, IN		/STEM:			SYSTEM ID# 003838	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 ions in effect or 5.61(e)(2) and (sis, as explaine	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 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	G Primary Transmitters:
Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	Stations: With a CC rules, regular here in space only on a substand also in spatformation concurred. The station's call associated with associated with a channel numbers. For example system carried the in each case we entering the least), "E" (for no esse terms, see part of a distant station on a part-ting ion on a part-ting ion of a distant acceptance in the casts, also a primary transismulcasts, also a canadian station.	respect to any ations, or auth G—but do list titute basis. ace I, if the staterning substit sign. Do not read a streams must be the FCC has, WRC is Chane station. Whether the station. Whether the station accommercial page (v) of the the local servage (v) of the es" in column and uring the comment or basis becan multicast stream or before Jumitter or an accomment of the control of the station. For the page (v) ch station.	r distant stations orizations: at it in space I (the stion was carried ute basis station between the properties of the station was carried ute basis station be reported in compart of the station of the stations of t	e Special Statemer by the television statistical special speci	s". If not, enter "No". For an expaper SA3 form. stating the basis on which your ering "LAC" if your cable system sapacity. payment because it is the subject stem or an association representing y transmitter, enter the designation the paper SA3 form. to which the station is licensed by the which the station is identifed.	Television
Note: If you are duite!	ig multiple chai		EL LINE-UP		опапнот што-чр.	
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	
					000000000000000000000000000000000000000	
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FURIN SAJE. PAGE 3.					OVOTEM ID#			
CABLE ONE, IN		/STEM:			SYSTEM ID# 003838	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								
		-		. •	ion. For example, report multi-			
cast stream as "WETA WETA-simulcast).	-2". Simulcast	streams must	be reported in o	column 1 (list each	stream separately; for example			
Column 2: Give the			•		on for broadcasting over-the-air in			
on which your cable sy	stem carried th	ne station.			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.								
		CHANN	EL LINE-UP	AG				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FURM SAJE. PAGE 3.					OVOTEM ID#			
CABLE ONE, INC		STEM:			SYSTEM ID# 003838	Name		
PRIMARY TRANSMITTERS	S: 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 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-N" (for network multicast), "I" (for independent), "I-N" (for independent 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 enter								
FCC. For Mexican or Car Note: If you are utilizing r		nel line-ups,	use a separate	space G for each	which the station is identifed. channel line-up.			
SIGN	B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FURIN SAJE. PAGE 3.					OVOTEM ID#			
CABLE ONE, IN		/STEM:			SYSTEM ID# 003838	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								
Note: If you are utilizing	ng multiple char		EL LINE-UP		спаппен ше-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			

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				003838	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Substitute Pasis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 for Column 1: List ead each multicast stream cast stream as "WETA-Simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multiper the meaning of the Column 5: If you heable system carried the carried the distant state For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the FCC. For Mexican or Column 6: Give the FCC. For Mexican or Column 6: Give the FCC.	G, identify even- system during ti- ions in effect or 6.61(e)(2) and (6.6	y television standard y television standard y television standard y television standard y televisions, or auth G—but do listitute basis. In the standard y television substitute basis. In the standard y television	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried that the station was carried that the station was carried to the period of the station was carried to the report origination cording to its own be reported in the station is a network as assigned to the station is a network work, "N-M" (I educational), one general instruction of the station is a network of the station is a network work with the station is a network work with the station is a network work with the station is a network with the station is a network with the station with the station with the station is a network with the station with the stat	(1) stations carried to carriage of certail (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on a program services the television statification, D.C. This light of the television statification, D.C. This lark station, an indefor network multicute. Te-M" (for noncontions located in the special point of the television statification. The station of the station of the special point of the s	paper SA3 form. stating the basis on which your stating the basis on which your sering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing transmitter, enter the designaher 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	9		•			
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	
					011111111111111111111111111111111111111	
		ļ				

LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#		
CABLE ONE, IN		TSTEW.			003838	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 on a part-time basis because of lack of activated channel capacity. For th							
Note: If you are utilizing		•	EL LINE-UP		charmer ime-up.		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FURIN SA3E. PAGE 3.			OVOTEM ID#					
CABLE ONE, INC.	SYSTEM:		SYSTEM ID# 003838	Name				
PRIMARY TRANSMITTERS: TELEVISI	ON							
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.								
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. 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 you								
Note: If you are utilizing multiple cha		'	channel line-up.					
1. CALL 2. B'CAST SIGN CHANNEL NUMBER	3. TYPE 4. DISTA OF (Yes o	ANT? 5. BASIS OF	6. LOCATION OF STATION					

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	IC.				003838	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 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 tis community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast). "E" (for independent), "I-M" (for in							
				•	•		
Note: If you are utilizing		. ,		•			
		CHANN	EL LINE-UP	AM			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
CABLE ONE, I	NC.				003838	
PRIMARY TRANSMITT	ERS: TELEVISION	ON				
In General: In space carried by your cable: FCC rules and regular 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis: basis under specifc FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA-simulcast). Column 2: Give th its community of licenson which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you h cable system carried the distant state For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify ever system during to ions in effect on 6.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a substand also in spanformation concorn. ch station's call associated with a-2". Simulcast e channel numbers, For example system carried the in each case of entering the lecast), "E" (for noise terms, see ation is outside ice area, see prave entered "Y he distant staticion on a part-tilision of a distant tentered into o a primary trans simulcasts, also ree categories e location of each	y television standard y television y te	g period, except 81, permitting the 181, permitting the 181, permitting the 181, permitting the 181, permitting to 76.6 paragraph. If distant stations orizations: It it in space I (the 181 tinn was carried the 181 tinn was carried to 181 tinn was carried to 181 tinn was station to 181 tinn was assigned to 181 tinn was	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on program services the television statification, D.C. This limit that the station, an indefor network multicure. "E-M" (for noncontions located in the special point of the station o	s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system	Primary Transmitters: Television
Note: If you are utilizing	ig multiple chai		•		Charmer line-up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	NC.				003838		
PRIMARY TRANSMITTERS: TELEVISION							
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. *List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational) multica							
				•			
		CHANN	EL LINE-UP	AO			
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		

FURIN SAJE. PAGE 3.					OVOTEM ID#			
CABLE ONE, IN		/STEM:			SYSTEM ID# 003838	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-N" (for network multicast), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational station, by entering the letter "N" (for network), "independent 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 on a part-time basis becau								
,	-		EL LINE-UP		<u>'</u>			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
		<u> </u>						

ECOL. NAME OF CAME OF CAME ENTER CABLE ONE, INC. O03838 PRIMARY TRANSMITTERS: ELEXISTON In General: In grade o, C. (Jestify every television station (including translator stations and low gover television stations) of General: In grade o, C. (Jestify every television station (including translator stations and low gover television stations) To Schild (22) and (4), 76 51 (e(2)) and (4), 07 76 53 (e(2)) and (4), 07 65 (e(2)) and (4),	FURM SA3E. PAGE 3.					OVOTEM ID#			
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 carried enterwork programs [sections 76.59(q)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: **Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis stations sation was carried only on a substitute basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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 is a network station, an independent multicast). "For for hemostring the letter 1" (For network), "N-M" (for network multicast), "For independent), "I-M" (for independent multicast), "For of independent multicast), 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.			/STEM:			SYSTEM ID# 003838	Name		
Carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4)), 76.61(e)(2) and (4)); and (2) certain stations carried on a substitute program basis under specific FCC rules, regulations, or authorizations: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here, and also in space I, if the station was carried by for general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicasts tream associated with a station according to its over-the-air designation. For example, report multicasts as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-3 inclicate in each case whether the station is a network station, an independent station, or a noncommercial educational multicast). The following the station is a network station, an independent station, or a noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have ent	PRIMARY TRANSMITTERS: TELEVISION								
basis under specife FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For (for noncommercial educational into 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 6: If you have entered "Yes" in column 4, you must complete column 6, stating the basis on which 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 stre	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.								
CHANNEL LINE-UP AQ 1. CALL SIGN 2. B'CAST CHANNEL 3. TYPE 4. DISTANT? (Yes or No) CARRIAGE 6. LOCATION OF STATION CARRIAGE	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: 1. 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. 1. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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-N" (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 on a part-time basis because of lack of activated channel								
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL OF (Yes or No) CARRIAGE	,					<u>'</u>			
		CHANNEL	3. TYPE OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			

FURM SAJE. PAGE 3.					OVOTEM ID#			
CABLE ONE, IN		/STEM:			SYSTEM ID# 003838	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								
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		-		. •	ion. For example, report multi-			
cast stream as "WETA WETA-simulcast).	-2". Simulcast	streams must	be reported in o	column 1 (list each	stream separately; for example			
Column 2: Give the			•		on for broadcasting over-the-air in			
on which your cable sy	stem carried th	ne station.			may be different from the channel			
educational station, by	entering the le	tter "N" (for n	etwork), "N-M" (for network multication	pendent 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	mmercial educational multicast). le paper SA3 form. s". If not, enter "No". For an ex-			
planation of local servi	ce area, see pa	age (v) of the	general instructi	ions located in the	paper SA3 form.			
	ne distant statio	on during the	accounting perio	od. Indicate by ent	stating the basis on which your ering "LAC" if your cable system sapacity.			
of a written agreement	entered into o	n or before Ju	ine 30, 2009, be	tween a cable sys	payment because it is the subject tem or an association representing			
tion "E" (exempt). For	simulcasts, also	o enter "E". If	you carried the	channel on any ot	y transmitter, enter the designa- her basis, enter "O." For a further			
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	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. channel line-up.			
		CHANN	EL LINE-UP	AR				
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			

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#						
CABLE ONE, INC. 003838						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 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 multi-						
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Note: If you are utilizing	.9	• •	EL LINE-UP			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	NER OF CABLE S	/STEM:			SYSTEM ID#	Name
CABLE ONE, INC. 003838						
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.						G Primary Transmitters: Television
		CHANN	EL LINE-UP	AT		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FURINI SAJE. PAGE 3.					21/2			
LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 003838								
PRIMARY TRANSMITTERS: TELEVISION								
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.								
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Note: If you are utilizing	ng multiple char	•	use a separate :		channel line-up.			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name	
CABLE ONE, INC. 003838 PRIMARY TRANSMITTERS: TELEVISION							
PRIMARY TRANSMITT	ERS: TELEVISION	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.						Primary Transmitters: Television	
Note. II you are utilizii	ig multiple chai	•	•		спаппетше-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		
		†					

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name	
CABLE ONE, INC. 003838 PRIMARY TRANSMITTERS: TELEVISION							
PRIMARY TRANSMITT	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.						Primary Transmitters: Television	
Note: If you are utilizing			•		Gharmer inte-up.		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 003838 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: 2019/2
LEGAL NAME OF OWNER OF	CABLE SYST	ΓΕ <mark>Μ</mark> :					SYSTEM ID#	Name
CABLE ONE, INC.							Hante	
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEN	NT AND PROGRAM LOG					1
substitute basis during the a	n General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.						Substitute	
	SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE						Carriage:	
	During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program						Special Statement and	
Note: If your answer is "No	", leave the	rest of this pag	ge blank. If your answer is '	'Yes," you mu	ust complet		e. e.	Program Log
period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love L Column 2: If the prograr Column 3: Give the call Column 4: Give the broathe case of Mexican or Car Column 5: Give the mor first. Example: for May 7 gir Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progratice, please a of every no distant state gulations, oution. Do no Lucy" or "NE m was broad addeast stationation and day we "5/7." es when the Example: a er "R" if the and regulation or gramming	am on a separa attach additional attach additional attach additional and that your authorization of use general of BA Basketball: deast live, entestation broadca on's location (thous, if any, the when your system of a program carrillisted program ons in effect du	al pages. ision program (substitute pour cable system substitute pour cable system substitute so See page (vi) of the gencategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the tem carried the substitute purposed by a system from 6:01: was substituted for programing the accounting period	rogram) that, d for the progeral instructio "basketball". lo." m. station is licenstation is idenorogram. Use cable system. I5 p.m. to 6:2 mming that ye; enter the leti	during the ramming ones located List specified). numerals, List the tir. 8:30 p.m. sour system ter "P" if the	accounting of another sta in the paper fic program e FCC or, in with the mode mes accurate should be n was require e listed pro	nth ely	
		TE DROCRAM	1		EN SUBST		7. REASON	
TITLE OF PROGRAM	2. LIVE?	TE PROGRAM 3. STATION'S		5. MONTH	IAGE OCC	TIMES	FOR DELETION	
	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM	<u>— то</u>		
					 			
								
	 				 			
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ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 6.

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

003838

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."

Т		DAT	ΓES A	AND HOURS (OF PA	ART-TIME CAR	RIAGE		
CALL SIGN	WHEN	I CARRIAGE O				CALL SIGN	WHEN	CARRIAGE OC	
	DATE	FROM	OUR	S TO			DATE	FROM	URS TO
			_						_
			-=						
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LEG	L NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID# 003838	Name
	BLE ONE, INC.		003030	
Install a all a (as pag	ructions: The figure you give in this space determines the form you fle and the amoun mounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service(s) during the accounting period. For a further explanation of how to ce (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	ondary transmission sompute this amount,	service see 723,749.06	K Gross Receipts
		() unount of grood i	(Cocipio)	
• Cor • Cor • If your fee • If your	CRIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. Our system did not carry any distant television stations, leave block 3 blank. Enter the autifrom block 1 on line 1 of block 4, and calculate the total royalty fee. Our system did carry any distant television stations, you must complete the applicable prompanying this form and attach the schedule to your statement of account.			Copyright Royalty Fee
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b k 3 below.	e entered on line 1 of	f	
-	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low.	entered on line 2 in b	lock	
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be entered on line	е	
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period.	e is 1.064 percent of	the	
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064	\$ 7	723,749.06	
	Enter the result here. This is your minimum fee.	\$	7,700.69	
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 perix Yes—Complete the DSE schedule. No—Leave block 3 below blank and complete the DSE schedule.	nn 4, you must check	(
Block	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	\$		
3	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		0.00	
	Line 3. Add lines 1 and 2 and enter here	\$	-	
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,	\$	7,700.69	Cable avatama
	whichever is larger Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente	r	0.00	Cable systems submitting additional
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	deposits under Section 111(d)(7) should contact
	Line 4. FILING FEE	<u></u> \$	725.00	the Licensing additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	8,425.69	appropriate form for submitting the additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See page (i) of the		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 003838
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)
Be Contacted for Further Information	Name EMERSON YEARWOOD Telephone 602-364-6195
	Address 210 E. EARLL DRIVE (Number, street, rural route, apartment, or suite number) PHOENIX, AZ 85012-2626
	(City, town, state, zip) Email emerson.yearwood@cableone. Biz Fax (optional) 602-364-6013
O Certification	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations. • I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)
Continuation	(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or
	 【Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or 【X】(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings. Typed or printed name: RAYMOND STORCK Title: VICE PRESIDENT (Title of official position held in corporation or partnership)
	Date: February 28, 2020

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.	003838	- Tunio
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding a lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the beservice of providing secondary transmissions of primary broadcast transmitters, the system shall not include scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section. For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmit made by satellite carriers to satellite dish owners?	basic lude sub- 119."	Special Statement Concerning Gross Receipts Exclusion
X NO		
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underproperty. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	payment.	Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-	
Line 3 Multiply line 2 by the number of days late and enter the sum here	days 	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	-	
(interest c	harge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	e please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce please list below the owner, address, first community served, accounting period, and ID number as given in the filling.		
Owner Address		
First community served Accounting period ID number		

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

ACCOUNTING PERIOD: 2019/2

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

• Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that lead stations are not counted at all in computing DSEs	

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

- 1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
- 2) A station first carried after June 24, 1981, which could have beer 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.

Santa Rosa	Stations A and C 35 mile zone
\ an	Bodega Bay ns B, D, id E le zone

	Distant Stations Carried		Identification	Identification of Subscriber Groups		
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS	
n	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	

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x .01064
 \$6.384.00

Ψ0,00 1100								
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	<u>.</u>			
(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: 2019/2

DSE SCHEDULE. PAG	E 11. (CONTINUED)											
4	SY	STEM ID#										
1	CABLE ONE, INC.		003838									
		V "O" STATION	NC:									
	SUM OF DSEs OF CATEGORY "O" STATIONS: • Add the DSEs of each station.											
	Enter the sum here and in line		0.00									
2	Instructions:											
	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3).											
Computation	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-											
of DSEs for	mercial educational station, give the DSE as ".25."											
Category "O"	CATEGORY "O" STATIONS: DSEs											
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
Add rows as												
necessary.												
Remember to copy												
all formula into new												
rows.												
10W3.												

Name			EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. 003838										
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2: figure should of Column 3: Column 4: be carried out Column 5: give the type-v Column 6:	t the call sign of all distated for each station, give to correspond with the information of the formation of the figure in column at least to the third decirate for each independent calue as ".25."	he number of hours mation given in spa he total number of umn 2 by the figure mal point. This is the station, give the "tylolumn 4 by the figur	s your cable syster ace J. Calculate on hours that the stati in column 3, and g e "basis of carriago pe-value" as "1.0." e in column 5, and	n carried the sta ly one DSE for e on broadcast ov jive the result in e value" for the s For each networ give the result in	tion during the accountine each station. er the air during the accordecimals in column 4. Ti	ounting period. his figure must ucational station,						
Capacity		CATEGORY LAC STATIONS: COMPUTATION OF DSEs											
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	R 3. N JRS C ED BY S	NUMBER DF HOURS STATION DN AIR	4. BASIS OF CARRIAG VALUE	5. TYPE		iΕ					
			÷ ÷			x x x	=						
			÷ ÷			x x x	=						
	Add the DSEs of	OF CATEGORY LAC S of each station. on here and in line 2 of p		lle,		0.00	=						
Computation of DSEs for Substitute-Basis Stations	• Was carried tions in effer efformations from the Broadcast or space I). Column 2: Fat your option. The Column 3: Each of Column 4: Each of the Broadcast of	ct on October 19, 1976 (ne or more live, nonnetw for each station give the This figure should correse Enter the number of days Divide the figure in colum	itution for a prograr as shown by the le ork programs during number of live, no spond with the infor is in the calendar ye on 2 by the figure in	m that your system tter "P" in column is that optional carri nnetwork programs rmation in space I. ear: 365, except in a column 3, and give	was permitted to for space I); and age (as shown by as carried in substance the result in control of the substance the result in control of the substance the result in control of the substance that substance the substance the substance that substance the	to delete under FCC rule	2 of t were deleted es than the third	·m).					
	Ţ.	SU	BSTITUTE-BAS	SIS STATIONS	S: COMPUTA	ATION OF DSEs							
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE					
		-		= = = = = =			÷	= = = = = = = = = = = = = = = = = = = =					
	Add the DSEs of	OF SUBSTITUTE-BAS of each station. on here and in line 3 of p		lle,	▶	0.00							
5 Total Number of DSEs	number of DSEs 1. Number of 2. Number of	R OF DSEs: Give the am applicable to your syster DSEs from part 2 ● DSEs from part 3 ● DSEs from part 4 ●		es in parts 2, 3, and	4 of this schedule	e and add them to provide	0.00 0.00 0.00						
	TOTAL NUMBER	R OF DSEs					•	0.00					

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2019/2

CABLE ONE, I		SYSTEM:					S	YSTEM ID# 003838	Name			
Instructions: Bloc In block A: • If your answer if schedule.			part 6 and part	7 of the DSE sche	edule blank aı	nd complete pa	art 8, (page 16) of	f the	6			
If your answer if	"No," complete blo				ADICETO				Computation of			
I <u> </u>	1981?	outside of all i	major and sma	ELEVISION M iller markets as de	efined under s			gulations in	Computation of 3.75 Fee			
		BLOC	CK B: CARR	IAGE OF PERI	MITTED DS	Es						
Column 1: CALL SIGN List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.)												
Column 2: BASIS OF PERMITTED CARRIAGE	Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station 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	ntified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet 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				
	1		1	I		1		0.00				
		В	LOCK C: CO	MPUTATION O	F 3.75 FEE							
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule				-				
Line 2: Enter the	sum of permitte	ed DSEs from	n block B ab	ove								
Line 3: Subtract (If zero, I				r of DSEs subjec 7 of this schedu		rate.		0.00				
Line 4: Enter gro	oss receipts from	ı space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially			
Line 5: Multiply li	ine 4 by 0.0375	and enter su	ım here						partially permited/ partially nonpermitted			
Line 6: Enter tota	al number of DS	Es from line	3				x		carriage? If yes, see part 9 instructions.			
Line 7: Multiply li	ine 6 by line 5 aı	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00				

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 003838 **BLOCK A: TELEVISION MARKETS (CONTINUED)** 6 3. DSE 1. CALL 2. PERMITTED 3. DSE 1. CALL 2. PERMITTED 1. CALL 2. PERMITTED 3. DSE BASIS SIGN BASIS SIGN SIGN BASIS Computation of 3.75 Fee

Name	CABLE ONE, IN		E SYSTEM:						<u> </u>	003838				
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED													
	PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS													
	1. CALL													
l	SIGN	DSE	P	ERIOD		CARRIAGE	[OSE		DSE				

7	Instructions: Block A	must be com	pleted.											
Computation	In block A:	"Yes " comple	ete blocks B and C	: helow										
of the	1			,	ра	art 8 of the DSE sched	ule.							
Syndicated	-		BLOC	K A: MAJOR	TE	ELEVISION MARK	ET							
Exclusivity														
Surcharge	Is any portion of the o	able system w	vithin a top 100 maj	or television mar	ket	as defned by section 7	6.5 of FCC	rules in effect J	une 24,	1981?				
	X Yes—Complete	blocks B and	IC.			No—Proceed to	part 8							
	BLOCK B: Ca	arriage of VHI	-/Grade B Contou	Stations		BLOCK	C: Compu	tation of Exem	pt DSEs	.				
	Is any station listed in	block B of pa	art 6 the primary st	ream of a		Was any station listed								
	commercial VHF stati	ion that places				nity served by the cab to former FCC rule 76	le system p							
	l'	•	th its appropriate pe	mitted DSE		Yes—List each st	,	vith its appropria	ate permi	tted DSE				
	X No—Enter zero a					X No—Enter zero a			·					
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	:NI	DSE				
	OALL GIGIT	DOL	OALL GIGIT	DOL		CALL GIGIN	DOL	OALL OIC	714	DOL				

			TOTAL DSEs	0.00				TOTAL DS	Es	0.00				

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC.	SYSTEM ID# 003838	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	723,749.06	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	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
3b	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)		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	Yes—Complete part 9 of this schedule. X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name			SYSTEM ID#
	(CABLE ONE, INC.	003838
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$	
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ _\$	
Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ \$	
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here	
		F. Multiply line D by line E and enter here	
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)	
		Syndicated Exclusivity Surcharge	<u></u> .
8 Computation of Base Rate Fee	You m 6 was In blo If you If you blank What i	ctions: nust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. are answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. are answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belock. are a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.	ow
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	your cable system retransmit the signals of any partially distant television stations during the accounting period?	
		Yes—Complete part 9 of this schedule. X No—Complete the 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) ▶ _\$ 723,749.0	<u> 6</u>
	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.)	<u>00</u>
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts	
		(the amount in section 1)▶ \$ -	
		B. Enter 0.00701 of gross receipts (the amount in section 1)	
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	_
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	
		Base Rate Fee	<u></u> .

LEGAL N	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nome
CABL	E ONE, INC.	003838	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 5 4 0 04004 5		8
	A. Enter 0.01064 of gross receipts (the amount in section 1) **S		
	B. Enter 0.00701 of gross receipts	_	Computation
	(the amount in section 1) \$		Computation of
	C. Multiply line B by 3.000 and enter here ▶\$		Base Rate Fee
		_	
	D. Enter 0.00330 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs		
	(the figure in section 2) and enter here ▶		
	F. Multiply line D by line E and enter here ▶ \$		
	G. Add lines A, C, and F. This is your base rate fee.		
	Enter here and in block 3, line 1, space L (page 7)		
	Base Rate Fee	0.00	
IMPOR	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast	st signals shall	
instead Space	be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channe G.	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:	vantage 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.	eacn group.	Surcharge
	If any portion of your cable system is located within the top 100 television market and the station is not exempt in p		for Partially
	mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B bel cable system is wholly located outside all major television markets, complete block A only.	ow. However,	Distant Stations, and
-	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 stati to that community.	on you	Stations
	to that community. For each wholly distant and each partially distant station you carried, determine which of your subscribers were loc	cated	
	the station's local service area. A subscriber located outside the local service area of a station is distant to that state to the 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. I	≣ach	
	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that will have only one subscriber group when the distant stations it carried have local service areas that coincide.	ıt a cable	
	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	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 bl	lock B	
, .	6 of this schedule.	- 51, -,	
	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 p		
DSEs f	In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (tha or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need calculations on the form.		

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 003838 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 OV CABLE ONE, IN		LE SYSTEM:				S	003838	Nam
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE	Α		0	Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
								Syndicat
								Exclusiv Surchar
		-						for
								Partiall
								Distan
								Station
		-						
otal DSEs			0.00	Total DSEs			0.00	
Bross Receipts Firs	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	DUP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				Ш				
Base Rate Fee: Adenter here and in bl			scriber group	as shown in the boxes	s above.	4	0.00	
inci liele allu ill Di	OUR S, IIIIE I,	space L (page 1,				\$	0.00	

CABLE ONE, INC.	LE SYSTEM:				S	YSTEM ID# 003838
			TE FEES FOR EACH			
	SUBSCRIBER GRO		001441117//4554		SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	-					
	 -				-	
	-					
		<u>"</u>			• • • • • • • • • • • • • • • • • • • •	
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00
						
ase Rate Fee First Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00
	SUBSCRIBER GRO				SUBSCRIBER GROU	
	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0
DMMUNITY/ AREA	SUBSCRIBER GRO		COMMUNITY/ AREA		SUBSCRIBER GROU	
DMMUNITY/ AREA		0				0
DMMUNITY/ AREA		0				0
DMMUNITY/ AREA		0				0
OMMUNITY/ AREA		0				0
OMMUNITY/ AREA		0				0
OMMUNITY/ AREA		0				0
OMMUNITY/ AREA		0				0
OMMUNITY/ AREA		0				0
OMMUNITY/ AREA		0				0
OMMUNITY/ AREA		0				0
OMMUNITY/ AREA		0				0
OMMUNITY/ AREA		0				0
CALL SIGN DSE		0				0
CALL SIGN DSE CALL SIGN DSE Cotal DSEs		DSE	CALL SIGN	DSE		DSE
COMMUNITY/ AREA	CALL SIGN	DSE DSE	Total DSEs	DSE	CALL SIGN	DSE O.00
CALL SIGN DSE CALL SIGN DSE	CALL SIGN	DSE DSE	Total DSEs	DSE	CALL SIGN	DSE O.00

	EGAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. SYSTEM ID# 003838								
		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAG		IBER GROUP SUBSCRIBER GRO	UP		
COMMUNITY/ AREA	A		0	COMMUNITY/ ARE	Α		0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								Syndicated	
								Exclusivity	
						-		Surcharge	
								for Partially	
								Distant	
								Stations	
						•			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
		SUBSCRIBER GRO				SUBSCRIBER GRO	UP		
COMMUNITY/ AREA	4		0	COMMUNITY/ ARE	A		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						·			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$			

CABLE ONE, INC.	BLE SYSTEM:					YSTEM ID# 003838
			TE FEES FOR EAC			
THIRTEENT COMMUNITY/ AREA	H SUBSCRIBER GRO)UP 0	COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0
		<u> </u>				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs		-	0.00
ross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00
			Dase Nate i ee Sect	ond Group	Ψ	0.00
	H SUBSCRIBER GRO	-			SUBSCRIBER GRO	
FIFTEENT	L'	-		SIXTEENTH		
FIFTEENT DMMUNITY/ AREA	L'	DUP		SIXTEENTH		UP
FIFTEENT DMMUNITY/ AREA	H SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0
FIFTEENT DMMUNITY/ AREA	H SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0
FIFTEENT DMMUNITY/ AREA	H SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0
FIFTEENT OMMUNITY/ AREA	H SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0
FIFTEENT OMMUNITY/ AREA	H SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0
FIFTEENT OMMUNITY/ AREA	H SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0
FIFTEENT OMMUNITY/ AREA	H SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0
FIFTEENT COMMUNITY/ AREA	H SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0
FIFTEENT COMMUNITY/ AREA	H SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0
FIFTEENT COMMUNITY/ AREA	H SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0
FIFTEENT OMMUNITY/ AREA	H SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0
CALL SIGN DSE	H SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0
CALL SIGN DSE	H SUBSCRIBER GRO	DSE	CALL SIGN	SIXTEENTH	SUBSCRIBER GRO	DSE
FIFTEENT COMMUNITY/ AREA	H SUBSCRIBER GRO	DUP DSE DOUBLE	COMMUNITY/ ARE/	SIXTEENTH	CALL SIGN	DSE DSE D.00

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 003838								
				TE FEES FOR EACH				
	ITEENTH	SUBSCRIBER GROU			HTEENTH	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
								Syndicated
		-						Exclusivity
						_		Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			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 Second	d Group	\$	0.00	
NIN	ITEENTH	SUBSCRIBER GROU	IP	TV	VENTIETH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						•		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third 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 th Enter here and in block			riber group	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 003838								
				ATE FEES FOR EAC				
TWE		SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		SUBSCRIBER GRO	UP 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	Base Rate Fee
								and
								Syndicated
		_						Exclusivity Surcharge
								for
								Partially
								Distant Stations
		_						
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	
TWE	NTY-THIRD	SUBSCRIBER GRO	DUP	TWEN	ITY-FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	\		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo	the base ra	te fees for each subs space L (page 7)	scriber group	as shown in the boxe	es above.	\$		

CABLE ONE, INC		E SYSTEM:				S	003838	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		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	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00	
TWENTY COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA		I SUBSCRIBER GRO	UP 0	
COMMONT IT AREA				OOMMONT IT AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
B B-4 F - T' '	0		0.00	D D. (5 . 5	#l- O		0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	ın Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	s above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 003838	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		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
								1
								1
								1
								1
								I
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
THI	RTY-FIRST	SUBSCRIBER GRO	UP	THIR	TY-SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								I
								I
								I
								I
		_						1
		+						I
								1
								I
		_						1
								I
								1
								I
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Foul	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo	the base ra ck 3, line 1,	te fees for each subs space L (page 7)	criber group	as shown in the boxe	s above.	\$		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP THIRTY-THIRD SUBSCRIBER GROUP THIRTY-FOURTH SUBSCRIBER GROUP	03838
INITY/ AREA COMMUNITY/ AREA	0 Com
SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE
	Base
	Syn
	Exc Sur
	Pa
	D
	St
SES Total DSEs	0.00
eceipts First Group \$ 0.00 Gross Receipts Second Group \$	0.00
ate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	0.00
THIRTY-FIFTH SUBSCRIBER GROUP THIRTY-SIXTH SUBSCRIBER GROUP	
INITY/ AREA 0 COMMUNITY/ AREA	0
SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE
SES 0.00 Total DSES	0.00
SES 0.00 Total DSEs eceipts Third Group \$ 0.00 Gross Receipts Fourth Group \$	0.00

CABLE ONE, INC.	BLE SYSTEM:					YSTEM ID# 003838	Na
			TE FEES FOR EAC				·
	I SUBSCRIBER GRO				I SUBSCRIBER GRO		Ç
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				Comp
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Oomp
							Base I
							а
							Synd
							Exclu Surc
							f
							Par
							Dis
							Stat
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Seco		\$	0.00	
THIRTY-NINTI	I SUBSCRIBER GRO	II IP		FORTIETI	LOUDOODIDED ODO		
					SUBSCRIBER GRO		
COMMUNITY/ AREA		0	COMMUNITY/ ARE		I SUBSCRIBER GRO	0 0	
COMMUNITY/ AREA CALL SIGN DSE	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
		0		4		0	
		0		4		0	
		0		4		0	
		0		4		0	
		0		4		0	
		0		4		0	
		0		4		0	
		0		4		0	
		0		4		0	
		0		4		0	
		0		4		0	
		0		4		0	
CALL SIGN DSE		0		4		0	
CALL SIGN DSE		DSE	CALL SIGN	DSE		DSE	
CALL SIGN DSE	CALL SIGN	DSE DSE	CALL SIGN Total DSEs	DSE	CALL SIGN	DSE O.00	
CALL SIGN DSE CALL SIGN DSE Total DSEs Gross Receipts Third Group	CALL SIGN	DSE DSE	CALL SIGN Total DSEs	DSE	CALL SIGN	DSE O.00	

SYSTE 00				3131EM.	R OF CABLE	EGAL NAME OF OWNE CABLE ONE, INC.
N OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP						
	ECOND SUBSCRIBE			JBSCRIBER GROU	ry-first s	
0 COMMUNITY/ AREA		JNITY/ AREA	0 0			COMMUNITY/ AREA
DSE CALL SIGN DSE CALL SIGN	OSE CALL SIG		DSE	CALL SIGN	DSE	CALL SIGN
					ļ	
					ļ	
					 -	
0.00 Total DSEs		SEs	0.00 T		-	otal DSEs
0.00 Oraca Descripto Oceana d Oraca	Group \$	Receipts Second	0.00		roup <u>s</u>	ross Receipts First G
0.00 Gross Receipts Second Group \$						
U.UU Gross Receipts Second Group \$					ſ	
0.00 Base Rate Fee Second Group \$						
0.00 Base Rate Fee Second Group \$ (GROUP FORTY-FOURTH SUBSCRIBER GROUP		FORTY	IP	JBSCRIBER GROU		FOR
0.00 Base Rate Fee Second Group \$		FORTY	IP	JBSCRIBER GROU		FOR
0.00 Base Rate Fee Second Group \$ (GROUP FORTY-FOURTH SUBSCRIBER GROUP	OURTH SUBSCRIBE	FORTY JNITY/ AREA	0 C	JBSCRIBER GROU		FORTOMMUNITY/ AREA
0.00 Base Rate Fee Second Group \$ (GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA	OURTH SUBSCRIBE	FORTY JNITY/ AREA	0 C		TY-THIRD S	FORT
0.00 Base Rate Fee Second Group \$ (GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA	OURTH SUBSCRIBE	FORTY JNITY/ AREA	0 C		TY-THIRD S	FORT
0.00 Base Rate Fee Second Group \$ (GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA	OURTH SUBSCRIBE	FORTY JNITY/ AREA	0 C		TY-THIRD S	FORT
0.00 Base Rate Fee Second Group \$ (GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA	OURTH SUBSCRIBE	FORTY JNITY/ AREA	0 C		TY-THIRD S	FORTOMMUNITY/ AREA
0.00 Base Rate Fee Second Group \$ (GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA	OURTH SUBSCRIBE	FORTY JNITY/ AREA	0 C		TY-THIRD S	FORTOMMUNITY/ AREA
0.00 Base Rate Fee Second Group \$ (GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA	OURTH SUBSCRIBE	FORTY JNITY/ AREA	0 C		TY-THIRD S	FORTOMMUNITY/ AREA
0.00 Base Rate Fee Second Group \$ (GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA	OURTH SUBSCRIBE	FORTY JNITY/ AREA	0 C		TY-THIRD S	FORTOMMUNITY/ AREA
0.00 Base Rate Fee Second Group \$ (GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA	OURTH SUBSCRIBE	FORTY JNITY/ AREA	0 C		TY-THIRD S	FORTOMMUNITY/ AREA
0.00 Base Rate Fee Second Group \$ (GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA	OURTH SUBSCRIBE	FORTY JNITY/ AREA	0 C		TY-THIRD S	FOR
0.00 Base Rate Fee Second Group \$ (GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA	OURTH SUBSCRIBE	FORTY JNITY/ AREA	0 C		TY-THIRD S	FORT
0.00 Base Rate Fee Second Group \$ (GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA	OURTH SUBSCRIBE	FORTY JNITY/ AREA	0 C		TY-THIRD S	FORTOMMUNITY/ AREA
0.00 Base Rate Fee Second Group \$ (GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA	OURTH SUBSCRIBE	FORTY JNITY/ AREA	0 C		TY-THIRD S	FORTOMMUNITY/ AREA
0.00 Base Rate Fee Second Group \$ (GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA	OURTH SUBSCRIBE	FORTY JNITY/ AREA SIGN	DSE C		TY-THIRD S	FORTOMMUNITY/ AREA
O.00 Base Rate Fee Second Group \$ (GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA DSE CALL SIGN DSE CALL SIGN	OURTH SUBSCRIBE	FORTY JNITY/ AREA SIGN	DSE	CALL SIGN	Y-THIRD S	COMMUNITY/ AREA
0.00 Base Rate Fee Second Group \$ (0) GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	OURTH SUBSCRIBE	FORTY JNITY/ AREA SIGN	DSE	CALL SIGN	Y-THIRD S	CALL SIGN CALL SIGN Cotal DSEs

CABLE ONE, IN		E SYSTEM:				S	YSTEM ID# 003838	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GRO	UP	
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 Seco	nd Group	\$	0.00	
		SUBSCRIBER GROU		iii —		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			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			riber group	o as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 003838	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCF	RIBER GROUP		
	Y-NINTH	SUBSCRIBER GRO			FIFTIETH	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
		31.122.21.01.						Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
		-						Partially
		-						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	Y-FIRST	SUBSCRIBER GRO	JP	ii e		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		_						
		=						
		•						
Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e fees for each subso	criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	003838	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GRO	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
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
		•						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00	
F COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA		I SUBSCRIBER GRO	UP 0	
COMMONT IT AREA			<u>U</u>	COMMONT IT AREA	···			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		•						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	E SYSTEM:				SY	STEM ID# 003838	Name
		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EACH		IBER GROUP SUBSCRIBER GROUI	D .	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
						 -		Syndicated
		_						Exclusivity
								Surcharge
								for Partially
						-		Distant
						-		Stations
		-						
		•				•		
T			0.00				0.00	
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
FIFT	Y-NINTH	SUBSCRIBER GROU	JP		SIXTIETH	SUBSCRIBER GROUI)	
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 G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

						YSTEM ID# 003838
			TE FEES FOR EAC			
	SUBSCRIBER GRO				SUBSCRIBER GRO	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	4		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
				·		
ase Rate Fee First Group	\$	0.00	Base Rate Fee Second	ond Group	\$	0.00
SIXTY-THIRI	SUBSCRIBER GRO	DUP	ii		SUBSCRIBER GRO	UP
OMMUNITY/ AREA		0	COMMUNITY/ ARE	4		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00
Gross Receipts Third Group						<u> </u>
Gross Receipts Third Group	ı		4.4		1	
Gross Receipts Third Group Base Rate Fee Third Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00

CABLE ONE, INC.	LE SYSTEM:				S	YSTEM ID# 003838		
			TE FEES FOR EAC					
	SUBSCRIBER GROU	JP 0			I SUBSCRIBER GRO	JP 0		
COMMUNITY/ AREA		0 COMMUNITY/ AREA 0						
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	-							
otal DSEs	-	0.00	Total DSEs		1	0.00		
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00		
1033 Neccipis i list Gloup	Ψ	0.00	Gross Receipts occo	na Oroup	<u> </u>	0.00		
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
SIXTY-SEVENTH	SUBSCRIBER GROU	JP	††		SUBSCRIBER GRO	JP		
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	,							
otal DSEs		0.00	Total DSEs	L		0.00		
Gross Receipts Third Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00		
	i		П					
ase Rate Fee Third Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00		

CABLE ONE, INC		LE SYSTEM:				S	003838	Name
		COMPUTATION C SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP H SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	A		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
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		††		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	4		0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo	the base ra	te fees for each subspace L (page 7)	scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OW CABLE ONE, IN		LE SYSTEM:				S	003838	Name
SEVE		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN DSE CALL SIGN DSE				of
								Base Rate Fee
		_						and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
		_						Distant
								Stations
		+						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVI	ENTY-FIFTH	SUBSCRIBER GRO	UP	SEV	ENTY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
		-						
						•		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Thire	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

CABLE ONE, INC		E SYSTEM:				S	003838	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GRO	UP	Ω.
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs		•	0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00	
SEVEI COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA		I SUBSCRIBER GRO	UP 0	
COMMONT IT AREA				COMMONITY AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	-							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxe	s above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: SABLE ONE, INC. SYSTEM ID# 003838							
	GHTY-FIRST	COMPUTATION O SUBSCRIBER GRO	UP	11	ITY-SECOND	IBER GROUP SUBSCRIBER GRO	UP	9
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA 0				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
		_						Exclusivity
								Surcharge
								for
								Partially Distant
		_						Stations
						•		
						•		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Firs	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO		11		SUBSCRIBER GRO	UP 0	
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

CABLE ONE, IN		E SYSTEM:				S	003838	Name
EIC	GHTY-FIFTH	COMPUTATION OF SUBSCRIBER GROU		III .	SHTY-SIXTH	RIBER GROUP I SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA 0				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GROU	<u>JP</u>	COMMUNITY/ AREA		I SUBSCRIBER GRO	UP 0	
OOMMONT IT AREA				OOMMONT I/ ALCA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 003838							
				TE FEES FOR EACH				
	Y-NINTH	SUBSCRIBER GROU			NINTIETH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Gtationio
Total DSEs	!		0.00	Total DSEs	!	''	0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Second		\$	0.00	
	TY-FIRST	SUBSCRIBER GROU		11	-SECOND	SUBSCRIBER GROU		
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 G	iroup	\$	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 th Enter here and in block			riber group	as shown in the boxes a	above.	\$		

OWNER OF CABLE SYSTEM: INC.	STEM ID# 003838
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
NINETY-THIRD SUBSCRIBER GROUP NINETY-FOURTH SUBSCRIBER GROUP	
REA COMMUNITY/ AREA	0
DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE
	<u>.</u>
0.00	0.00
	0.00
First Group \$ 0.00 Gross Receipts Second Group \$	0.00
First Group \$ 0.00 Base Rate Fee Second Group \$	0.00
	l
irst Group \$ 0.00 Base Rate Fee Second Group \$ NINETY-FIFTH SUBSCRIBER GROUP REA 0 COMMUNITY/ AREA	l
NINETY-FIFTH SUBSCRIBER GROUP REA COMMUNITY/ AREA COMMUNITY/ AREA	0
NINETY-FIFTH SUBSCRIBER GROUP NINETY-SIXTH SUBSCRIBER GROUP))
NINETY-FIFTH SUBSCRIBER GROUP REA COMMUNITY/ AREA COMMUNITY/ AREA	0
NINETY-FIFTH SUBSCRIBER GROUP REA COMMUNITY/ AREA COMMUNITY/ AREA	0
NINETY-FIFTH SUBSCRIBER GROUP REA COMMUNITY/ AREA COMMUNITY/ AREA	0
NINETY-FIFTH SUBSCRIBER GROUP REA COMMUNITY/ AREA COMMUNITY/ AREA	0
NINETY-FIFTH SUBSCRIBER GROUP REA COMMUNITY/ AREA COMMUNITY/ AREA	0
NINETY-FIFTH SUBSCRIBER GROUP REA COMMUNITY/ AREA COMMUNITY/ AREA	0
NINETY-FIFTH SUBSCRIBER GROUP REA COMMUNITY/ AREA COMMUNITY/ AREA	0
NINETY-FIFTH SUBSCRIBER GROUP REA COMMUNITY/ AREA COMMUNITY/ AREA	0
NINETY-FIFTH SUBSCRIBER GROUP REA COMMUNITY/ AREA COMMUNITY/ AREA	0
NINETY-FIFTH SUBSCRIBER GROUP REA COMMUNITY/ AREA COMMUNITY/ AREA	0
NINETY-FIFTH SUBSCRIBER GROUP REA COMMUNITY/ AREA COMMUNITY/ AREA	0
NINETY-FIFTH SUBSCRIBER GROUP REA COMMUNITY/ AREA COMMUNITY/ AREA	0
NINETY-FIFTH SUBSCRIBER GROUP REA COMMUNITY/ AREA COMMUNITY/ AREA	0
NINETY-FIFTH SUBSCRIBER GROUP REA DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN COMMUNITY/ AREA COMMUNITY/ AREA	DSE
NINETY-FIFTH SUBSCRIBER GROUP REA DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN Total DSEs	0 DSE

CABLE ONE, INC.	ABLE SYSTEM:				S	903838 003838
	: COMPUTATION O					
	H SUBSCRIBER GRO		Ħ		H SUBSCRIBER GROU	
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 First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
Base Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
NINETY-NINT	H SUBSCRIBER GRO	OUP	ONE H	IUNDREDTH	I SUBSCRIBER GROU	JP
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		0.00	Total DSEs			0.00
Total DSEs						
	\$	0.00	Gross Receipts Four	rth Group	\$	0.00
Total DSEs Gross Receipts Third Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 003838	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	IBER GROUP		
	ED FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0				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 Exclusivity
						•		Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRE	D THIRD	SUBSCRIBER GROU	JP	ONE HUNDRE	ED FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block	e base rat 3, line 1, s	te fees for each subso	criber group	as shown in the boxes	above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 003838							
		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA	Α		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 Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		SUBSCRIBER GRO	0 P	
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 Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add	I the hase re	te fees for each subs	scriber group	as shown in the boxe	es ahove			
Enter here and in blo			.c.iboi group	as onomi in the boxe	45010.	\$		

LEGAL NAME OF OW CABLE ONE, IN		LE SYSTEM:				S	003838	Name
		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA	Α		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 Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED	ELEVENTH	SUBSCRIBER GRO)UP	ONE HUNDRE	D TWELVTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	A		0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

WNER OF CABLE SYSTEM: NC. 0038	ID# 338 Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
THIRTEENTH SUBSCRIBER GROUP ONE HUNDRED FOURTEENTH SUBSCRIBER GROUP	9
EA O COMMUNITY/ AREA	0 Computa
DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DS	
	Base Rate
	and
	Syndica: Exclusiv
	Surchar
	for
	Partiall
	Distan Station
	Station
st Group \$ 0.00 Gross Receipts Second Group \$ 0.0	00_
st Group \$ 0.00 Base Rate Fee Second Group \$ 0.0	00
) FIFTEENTH SUBSCRIBER GROUP ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP	
EA 0 COMMUNITY/ AREA	0
DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DS	SE .
	00
0.00 Total DSEs 0.00 Gross Receipts Fourth Group \$ 0.0	

CABLE ONE, IN		E SYSTEM:				S	003838	Name
ONE HUNDRED SEV	/ENTEENTH	COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER GROUP I SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA	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
					<u></u>			for Partially
					<u></u>			Distant
								Stations
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	: Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROU		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>			
		-						
Total DSEs			0.00	Total DSEs		Ш	0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW CABLE ONE, IN		LE SYSTEM:				S	003838	Name
	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
		SUBSCRIBER GRO		T I		SUBSCRIBER GROU	Р	0
COMMUNITY/ ARE	4		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
Total DOCa			0.00	Total DSEs			0.00	
Total DSEs Gross Receipts First	Group	¢	0.00	Gross Receipts Sec	eand Group	\$	0.00	
Gross (Vecelpts i list	. Огоир	\$	0.00	Gross Neceipts Geo	ona Group	•	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TW	ENTY-THIRD	SUBSCRIBER GROU	Р	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUI	Р	
COMMUNITY/ AREA	Α		0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
						-		
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWI		E SYSTEM:				S	003838	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GROUP		ii e		SUBSCRIBER GROUI		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
								Stations
Total DSEs			0.00	Total DSEs	!		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
,						<u>*</u>		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NE HUNDRED TWENT		SUBSCRIBER GROUP		ii e		SUBSCRIBER GROUI	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Page Pate For Think	Crown		0.00	Page Pate Fee Fee	th Crous	6	0.00	
Base Rate Fee Third		\$	0.00	Base Rate Fee Four	Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWN		LE SYSTEM:				S	003838	Name
	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
		SUBSCRIBER GROU		П		SUBSCRIBER GROUP	Р	^
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
		H						Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
	•			'		·		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TH	HIRTY-FIRST	SUBSCRIBER GROU	Р	ONE HUNDRED TH	IRTY-SECOND	SUBSCRIBER GROUP	Р	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u> </u>		
		_						
			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNER OF CABLE ONE, INC.	ADEL OTOTEM.					003838
	A: COMPUTATION O		П			
ONE HUNDRED THIRTY-THII COMMUNITY/ AREA	RD SUBSCRIBER GROU		††		1 SUBSCRIBER GROUP	0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs	•		0.00
	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
Gross Receipts First Group	<u>*</u>		'			
		0.00		and Group	¢	0.00
Base Rate Fee First Group	\$	0.00	Base Rate Fee Seco		\$	0.00
Base Rate Fee First Group ONE HUNDRED THIRTY-FIF	\$	JP	Base Rate Fee Seco	HIRTY-SIXTH	\$	
Base Rate Fee First Group ONE HUNDRED THIRTY-FIF	\$		Base Rate Fee Seco	HIRTY-SIXTH		
Base Rate Fee First Group ONE HUNDRED THIRTY-FIF	\$ TH SUBSCRIBER GROU	JP	Base Rate Fee Seco	HIRTY-SIXTH		
ONE HUNDRED THIRTY-FIF	\$ TH SUBSCRIBER GROU	JP 0	Base Rate Fee Seco	HIRTY-SIXTH	I SUBSCRIBER GROUF	0
ONE HUNDRED THIRTY-FIF	\$ TH SUBSCRIBER GROU	JP 0	Base Rate Fee Seco	HIRTY-SIXTH	I SUBSCRIBER GROUF	0
ONE HUNDRED THIRTY-FIF	\$ TH SUBSCRIBER GROU	JP 0	Base Rate Fee Seco	HIRTY-SIXTH	I SUBSCRIBER GROUF	0
ONE HUNDRED THIRTY-FIF	\$ TH SUBSCRIBER GROU	JP 0	Base Rate Fee Seco	HIRTY-SIXTH	I SUBSCRIBER GROUF	0
Base Rate Fee First Group ONE HUNDRED THIRTY-FIF COMMUNITY/ AREA	\$ TH SUBSCRIBER GROU	JP 0	Base Rate Fee Seco	HIRTY-SIXTH	I SUBSCRIBER GROUF	0
ONE HUNDRED THIRTY-FIF	\$ TH SUBSCRIBER GROU	JP 0	Base Rate Fee Seco	HIRTY-SIXTH	I SUBSCRIBER GROUF	0
ONE HUNDRED THIRTY-FIF	\$ TH SUBSCRIBER GROU	JP 0	Base Rate Fee Seco	HIRTY-SIXTH	I SUBSCRIBER GROUF	0
Base Rate Fee First Group ONE HUNDRED THIRTY-FIF COMMUNITY/ AREA	\$ TH SUBSCRIBER GROU	JP 0	Base Rate Fee Seco	HIRTY-SIXTH	I SUBSCRIBER GROUF	0
Base Rate Fee First Group ONE HUNDRED THIRTY-FIF COMMUNITY/ AREA	\$ TH SUBSCRIBER GROU	JP 0	Base Rate Fee Seco	HIRTY-SIXTH	I SUBSCRIBER GROUF	0
Base Rate Fee First Group ONE HUNDRED THIRTY-FIF COMMUNITY/ AREA	\$ TH SUBSCRIBER GROU	JP 0	Base Rate Fee Seco	HIRTY-SIXTH	I SUBSCRIBER GROUF	0
Base Rate Fee First Group ONE HUNDRED THIRTY-FIF COMMUNITY/ AREA	\$ TH SUBSCRIBER GROU	JP 0	Base Rate Fee Seco	HIRTY-SIXTH	I SUBSCRIBER GROUF	0
Base Rate Fee First Group ONE HUNDRED THIRTY-FIF COMMUNITY/ AREA	\$ TH SUBSCRIBER GROU	JP 0	Base Rate Fee Seco	HIRTY-SIXTH	I SUBSCRIBER GROUF	0
ONE HUNDRED THIRTY-FIF COMMUNITY/ AREA CALL SIGN DSE	\$ TH SUBSCRIBER GROU	JP 0	Base Rate Fee Seco	HIRTY-SIXTH	I SUBSCRIBER GROUF	0
ONE HUNDRED THIRTY-FIF COMMUNITY/ AREA CALL SIGN DSE	\$ TH SUBSCRIBER GROU	DSE	Base Rate Fee Second ONE HUNDRED TO COMMUNITY/ AREA	DSE	I SUBSCRIBER GROUF	DSE
COMMUNITY/ AREA	TH SUBSCRIBER GROU	DSE O.00	Base Rate Fee Second ONE HUNDRED TO COMMUNITY AREA	DSE	CALL SIGN	DSE

CABLE ONE, IN		E SYSTEM:				S	003838	Name
		COMPUTATION OF SUBSCRIBER GROUP		ATE FEES FOR EAC		RIBER GROUP		
COMMUNITY/ AREA	Α		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
								1
								1
								I
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED TI	HIRTY-NINTH	SUBSCRIBER GROUP		ONE HUNDRED	FORTIETH	I SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								1
								1
								1
								1
								1
								1
								1
								1
								I
								1
Total DSEs	<u>'</u>		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			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW CABLE ONE, IN		E SYSTEM:				S	003838	Name
	BLOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
		SUBSCRIBER GROUP		ONE HUNDRED FOR	RTY-SECONE	SUBSCRIBER GROUP)	9
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DSL	CALL SIGN	DOL	CALL SIGN	DOL	Base Rate Fee
		-						and
								Syndicated
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								Partially Distant
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED F	ORTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED FOR	RTY-FOURTH	SUBSCRIBER GROUF)	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA				
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 Thire	d Group	\$	0.00	Gross Receipts Fourt	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			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW CABLE ONE, IN		E SYSTEM:				S	003838	Name
	BLOCK A: 0	COMPUTATION OF	BASE RA	ATE FEES FOR EAC			-	
		SUBSCRIBER GROUP		III .		H SUBSCRIBER GROUI)	9
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA	4		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DSL	CALL SIGN	DOL	CALL SIGN	DOL	Base Rate Fee
		-						and
								Syndicated
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FOR	TY-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FO	ORTY-EIGHTI	SUBSCRIBER GROUI	>	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA				
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thire	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
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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			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABL	E SYSTEM:				SY	STEM ID# 003838	Name
BL ONE HUNDRED FORT				ATE FEES FOR EACH		IBER GROUP SUBSCRIBER GROUP	D	
COMMUNITY/ AREA	1-14114111	OODOONBLIK OROC	0	COMMUNITY/ AREA		OODOCKIDEK GROOT	0	9
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIFT	Y-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIFT	Y-SECOND	SUBSCRIBER GROUP	ס	
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	
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Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW CABLE ONE, IN		LE SYSTEM:				S	003838	Name
				TE FEES FOR EAC			LID	
COMMUNITY/ AREA		SUBSCRIBER GRO	0	COMMUNITY/ ARE		SUBSCRIBER GRO	0P	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED F	IFTY-FIFTH	SUBSCRIBER GRO)UP	ONE HUNDRED	FIFTY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Α		0	COMMUNITY/ ARE	A		0	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

CABLE ONE, IN		E SYSTEM:				S	003838	Name
	BLOCK A: 0	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
		SUBSCRIBER GROUP		it .		H SUBSCRIBER GROUP		9
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	Computation
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED	FIFTY-NINTH	SUBSCRIBER GROUP		ONE HUNDR	ED SIXTIETH	H SUBSCRIBER GROUP	0	
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
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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.	\$		

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otal DSEs			0.00	Total DSEs			0.00	
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ase Rate Fee First G	roun	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
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Name	YSTEM ID# 003838							CABLE ONE, INC.
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FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 003838 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 computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 003838 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 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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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 003838 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. NINTH SUBSCRIBER GROUP TENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE Second Group **ELEVENTH SUBSCRIBER GROUP** TWELVTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 003838 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market **Base Rate Fee INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. THIRTEENTH SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group FIFTEENTH SUBSCRIBER GROUP SIXTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 003838 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market **Base Rate Fee INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. SEVENTEENTH SUBSCRIBER GROUP EIGHTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group NINEENTH SUBSCRIBER GROUP TWENTYTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation 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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