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					
2/27/2020	\$ ALLOCATION NUMBER					

Return completed workbook by email to:

coplicsoa@copyright.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 subsidiary of another corporation, give the full corpo rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the business of the cable system If there were different owners during the accounting period, only the owner on the last day of the accounting period should submi a single statement of account and royalty fee payment covering the entire accounting perioa Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. 63167 LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM Armstrong Utilities, Inc.									
				6316720192						
				63167 2019/2						
	One Armstrong Place Butler, PA 16001									
С	INSTRUCTIONS: In line 1, give any business or trade nan names already appear in space B. In line 2, give the mailir									
System	1 IDENTIFICATION OF CABLE SYSTEM: Rising Sun Head End	· · · · · · · · · · · · · · · · · · ·	<u> </u>							
	MAILING ADDRESS OF CABLE SYSTEM: 122 South Queen Street (Number, street, rural route, apartment, or suite number) Rising Sun, MD 21911 (City, town, state, zip code)									
D	Instructions: For complete space D instructions, see page	e 1b. Identify only the frst comn	nunity served below and rel	ist on page 1b						
Area Served	with all communities. CITY OR TOWN	STATE								
First	Abingdon	MD								
Community	Below is a sample for reporting communities if you repor	t multiple channel line-ups in S	pace G.							
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#						
Sample	Alda	MD	Α	1						
	Alliance	MD	В	2						
	Gering	MD	В	3						

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

FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 63167 Armstrong Utilities, Inc. Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# Abingdon AD MD First Bel Air North MD AD 4 Community Cardiff MD AD Castleton MD AD 4 **CECIL COUNTY** AB 2 MD 3 CHANCEFORD TOWNSHIP AC PA See instructions for 3 **CROSS ROADS BOROUGH** PA AC additional information on alphabetization. Darlington MD AD 4 **DELTA BOROUGH** PA AC 3 4 **Dublin** MD AD 3 **EAST HOPEWELL TOWNSHIP** AC PA Add rows as necessary. **EAST NOTTINGHAM TOWNSHIP** PA 1 AA **ELK TOWNSHIP** PA AA **FAWN GROVE BOROUGH** PA AC 3 **FAWN TOWNSHIP** 3 PA AC 4 **Forest Hills** MD AD **HIGHLAND TOWNSHIP** PA AA PA 3 HOPEWELL TOWNSHIP AC 4 **Jarrettsville** MD AD LONDONDERRY TOWNSHIP PA AA LOWER CHANCEFORD TOWNSHIP PA AC 3 LOWER OXFORD TOWNSHIP PA AA Norrisville AD MD NORTH HOPEWELL TOWNSHIP PA 3 AC OXFORD BOROUGH PA AA 1 PEACH BOTTOM BOROUGH 3 PA AC 4 **Pvlesville** MD AD SHREWSBURY BOROUGH PA AC 3 3 STEWARTSTOWN BOROUGH PA AC STREET MD AD 4 TOWN OF RISING SUN 2 MD AB UPPER OXFORD TOWNSHIP PA AA 1 WEST FALLOWFIELD TOWNSHIP PA AA **WEST NOTTINGHAM TOWNSHIP** PA AA Whiteford MD **AD** 4 WINTERSTOWN BOROUGH PA 3 AC

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ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 2. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 63167 Armstrong Utilities, Inc. SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES Ε 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 Secondary Transmission 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 Service: Subscribers and down by categories of secondary transmission service. In general, you can compute the number of subscribers in Rates 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. BLOCK 1 **BLOCK 2** NO. OF NO. OF CATEGORY OF SERVICE CATEGORY OF SERVICE **RATE** RATE **SUBSCRIBERS SUBSCRIBERS** Residential: · Service to first set 16,578 \$ 33.45 · Service to additional set(s) • FM radio (if separate rate) Motel, hotel Commercial

F

ConverterResidentialNon-residential

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

		BLOCK 2			
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
• Pay cable	\$ 20.95	Motel, hotel			
 Pay cable—add'l channel 	7.95, \$14.95	Commercial			
Fire protection		• Pay cable			
•Burglar protection		Pay cable-add'l channel			
Installation: Residential		Fire protection			
First set		Burglar protection			
 Additional set(s) 		Other services:			
• FM radio (if separate rate)		Reconnect	\$ 20.00		
Converter		Disconnect			
		Outlet relocation			
		Move to new address			

Armstrong Util		CTELL			CVCTEM ID#	
Aillistiong out		/SIEM:			SYSTEM ID# 63167	Namo
		N. I			03107	
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis s basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 fc Column 1: List eace each multicast stream cast stream as "WETA	G, identify ever system during triions in effect on 6.61(e)(2) and (sis, as explaine Stations: With CC rules, regulant here in space only on a substant also in spanformation concorm.	y television st he accounting n June 24, 19 4), or 76.63 (I d in the next respect to any ations, or auth G—but do lis titute basis. ace I, if the sta terning substit sign. Do not I h a station ac	g period, except 81, permitting the referring to 76.6 paragraph. y distant stations norizations: t it in space I (the ation was carried tute basis station report origination cording to its ov	(1) stations carrine carriage of certificity (2) and (4))]; is carried by your the Special Statem d both on a substans, see page (v) on program service er-the-air designal	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 nent and Program Log)—if the itute basis and also on some other of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi- ch stream separately; for example	G Primary Transmitters: Television
WETA-simulcast).	e channel numl	ner the FCC h	nas assigned to	the television sta	tion for broadcasting over-the-air in	
its community of licens on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the st planation of local serv Column 5: If you h cable system carried t carried the distant stat For the retransmiss of a written agreemen the cable system and	se. For example ystem carried the in each case way entering the lecast), "E" (for nese terms, see tation is outside ice area, see priave entered "Yhe distant station on a part-tission of a distant tentered into oa primary trans	e, WRC is Che station. whether the stater "N" (for noncommercial page (v) of the local sendage (v) of the es" in column on during the me basis becamulticast stren or before Jumitter or an a	annel 4 in Wash tation is a netwo etwork), "N-M" (il educational), o e general instru- vice area, (i.e. "o general instruct 4, you must col accounting perio ause of lack of a eam that is not s une 30, 2009, be ssociation repre	ork station, an indifer network multi- or "E-M" (for nonections located in the distant"), enter "Y- cions located in the mplete column 5, and. Indicate by eractivated channel subject to a royalte tween a cable system in the prima estimate the prima estimate of the prima estimate in the prima estimate of the	ependent station, or a noncommercial cast), "I" (for independent), "I-M" ommercial educational multicast). the paper SA3 form. es". If not, enter "No". For an exepaper SA3 form. stating the basis on which your ottering "LAC" if your cable system	
Column 6: Give the FCC. For Mexican or 0	e location of ea	ch station. Fo			ed in the paper SA3 form.	
Note: If you are utilizing		nnel line-ups,	use a separate	ne community wit space G for each	y to which the station is licensed by the h which the station is identifed. n channel line-up.	
,	ng multiple chai	CHANN	use a separate	ne community wit space G for each	h which the station is identifed. n channel line-up.	
Note: If you are utilizing the street of the		nnel line-ups,	EL LINE-UP 4. DISTANT? (Yes or No)	ne community wit space G for each	h which the station is identifed.	
1. CALL SIGN	2. B'CAST CHANNEL	CHANN 3. TYPE OF	EL LINE-UP 4. DISTANT? (Yes or No)	AA 5. BASIS OF CARRIAGE	h which the station is identifed. n channel line-up.	-
1. CALL SIGN KJW	2. B'CAST CHANNEL NUMBER	CHANN 3. TYPE OF STATION	EL LINE-UP 4. DISTANT? (Yes or No)	AA 5. BASIS OF CARRIAGE	h which the station is identifed. n channel line-up. 6. LOCATION OF STATION	"See instructions for
1. CALL SIGN KJW KJW-HD	2. B'CAST CHANNEL NUMBER	CHANN 3. TYPE OF STATION	EL LINE-UP 4. DISTANT? (Yes or No)	AA 5. BASIS OF CARRIAGE	h which the station is identifed. channel line-up. 6. LOCATION OF STATION Philadelphia, PA	additional information
1. CALL SIGN KJW KJW-HD KYW	2. B'CAST CHANNEL NUMBER 2.1	CHANN 3. TYPE OF STATION I	L LINE-UP 4. DISTANT? (Yes or No) No No	AA 5. BASIS OF CARRIAGE	h which the station is identifed. channel line-up. 6. LOCATION OF STATION Philadelphia, PA Philadelphia, PA	
1. CALL SIGN KJW KJW-HD KYW-HD KYW-HD	2. B'CAST CHANNEL NUMBER 2 2.1 3 3.1 3.2	CHANN 3. TYPE OF STATION I N	EL LINE-UP 4. DISTANT? (Yes or No) No No No	AA 5. BASIS OF CARRIAGE	h which the station is identifed. In channel line-up. 6. LOCATION OF STATION Philadelphia, PA	additional information
1. CALL SIGN KJW KJW-HD KYW-HD KYW-DT2	2. B'CAST CHANNEL NUMBER 2 2.1 3 3.1 3.2 34	CHANN 3. TYPE OF STATION I N N	use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No	AA 5. BASIS OF CARRIAGE	h which the station is identifed. In channel line-up. 6. LOCATION OF STATION Philadelphia, PA Philadelphia, PA Philadelphia, PA Philadelphia, PA Philadelphia, PA Lancaster, PA	additional information
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1. CALL SIGN KJW KJW-HD KYW-HD KYW-DT2 WCAU-DT2 WCAU-DT2 WCAU-HD	2. B'CAST CHANNEL NUMBER 2 2.1 3 3.1 3.2 34 10.2 10.1	CHANN 3. TYPE OF STATION I N N I-M N I-M N	use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	AA 5. BASIS OF CARRIAGE	h which the station is identifed. In channel line-up. 6. LOCATION OF STATION Philadelphia, PA Philadelphia, PA Philadelphia, PA Philadelphia, PA Lancaster, PA Lancaster, PA Lancaster, PA Lancaster, PA Wilmington, DE	additional information
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1. CALL SIGN KJW KJW-HD KYW-HD KYW-DT2 WCAU WCAU-DT2 WCAU-DT2 WCAU-DT2 WCAU-DT2 WCAU-DT2 WCAU-DT2	2. B'CAST CHANNEL NUMBER 2.11 3.1 3.2 34 10.2 10.1 12 12.2 12.3	CHANN 3. TYPE OF STATION I N N I-M N I-M N E E E-M	use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	AA 5. BASIS OF CARRIAGE	h which the station is identifed. In channel line-up. 6. LOCATION OF STATION Philadelphia, PA Philadelphia, PA Philadelphia, PA Philadelphia, PA Lancaster, PA Lancaster, PA Lancaster, PA Wilmington, DE Wilmington, DE	additional information
1. CALL SIGN KJW KJW-HD KYW-DT2 WCAU WCAU-DT2 WCAU-HD WHYY WHYY-DT3 WHYY-HD	2. B'CAST CHANNEL NUMBER 2 2.1 3 3.1 3.2 34 10.2 10.1 12 12.2 12.3 12.1	The state of the s	use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	AA 5. BASIS OF CARRIAGE	h which the station is identifed. In channel line-up. 6. LOCATION OF STATION Philadelphia, PA Philadelphia, PA Philadelphia, PA Philadelphia, PA Lancaster, PA Lancaster, PA Lancaster, PA Wilmington, DE Wilmington, DE Wilmington, DE Wilmington, DE	additional information
1. CALL SIGN KJW KJW-HD KYW KYW-HD KYW-DT2 WCAU-DT2 WCAU-DT2 WCAU-DT2 WHYY-DT3 WHYY-HD WMPB	2. B'CAST CHANNEL NUMBER 2.11 3.1 3.2 34 10.2 10.1 12 12.2 12.3 12.1 29	CHANN 3. TYPE OF STATION I N N N I-M N I-M N E E-M N N	use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	AA 5. BASIS OF CARRIAGE	h which the station is identifed. In channel line-up. 6. LOCATION OF STATION Philadelphia, PA Philadelphia, PA Philadelphia, PA Philadelphia, PA Lancaster, PA Lancaster, PA Lancaster, PA Wilmington, DE Wilmington, DE Wilmington, DE Wilmington, DE Baltmore, MD	additional information
1. CALL SIGN KJW KJW-HD KYW-HD KYW-DT2 WCAU-DT2 WCAU-DT2 WCAU-HD WHYY WHYY-DT3 WHYY-HD WMPB WPHL	2. B'CAST CHANNEL NUMBER 2 2.1 3 3.1 3.2 34 10.2 10.1 12 12.2 12.3 12.1 29 17	The state of the s	use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	AA 5. BASIS OF CARRIAGE	h which the station is identifed. In channel line-up. 6. LOCATION OF STATION Philadelphia, PA Philadelphia, PA Philadelphia, PA Philadelphia, PA Philadelphia, PA Lancaster, PA Lancaster, PA Luncaster, PA Wilmington, DE Wilmington, DE Wilmington, DE Wilmington, DE Baltmore, MD Philadelphia, PA	additional information
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1. CALL SIGN KJW KJW-HD KYW KYW-HD KYW-DT2 WCAU-DT2 WCAU-DT2 WCAU-HD WHYY WHYY-DT3 WHYY-DT3 WHYY-HD WMPB WPHL WPHL-DT2	2. B'CAST CHANNEL NUMBER 2 2.1 3 3.1 3.2 34 10.2 10.1 12 12.2 12.3 12.1 29 17 17.2 17.3	CHANN 3. TYPE OF STATION I N N N I-M N E E-M E-M N I-M I	use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	AA 5. BASIS OF CARRIAGE	h which the station is identifed. In channel line-up. 6. LOCATION OF STATION Philadelphia, PA Philadelphia, PA Philadelphia, PA Philadelphia, PA Lancaster, PA Lancaster, PA Lancaster, PA Wilmington, DE Wilmington, DE Wilmington, DE Wilmington, DE Baltmore, MD Philadelphia, PA Philadelphia, PA Philadelphia, PA Philadelphia, PA Philadelphia, PA	additional information
1. CALL SIGN KJW KJW-HD KYW-HD KYW-DT2 WCAU-DT2 WCAU-HD WHYY-DT3 WHYY-DT3 WHYY-HD WMPB WPHL-DT2	2. B'CAST CHANNEL NUMBER 2.11 3.3.1 3.2 34 10.2 10.1 12 12.2 12.3 12.1 29 17 17.2	CHANN 3. TYPE OF STATION I N N N I-M N I-M N E E-M N N	use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	AA 5. BASIS OF CARRIAGE	h which the station is identifed. In channel line-up. 6. LOCATION OF STATION Philadelphia, PA Philadelphia, PA Philadelphia, PA Philadelphia, PA Lancaster, PA Lancaster, PA Luncaster, PA Luncaster, PA Wilmington, DE Wilmington, DE Wilmington, DE Wilmington, DE Wilmington, DE Baltmore, MD Philadelphia, PA Philadelphia, PA Philadelphia, PA Philadelphia, PA	additional informatio

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Armstrong Utilities, Inc.

PRIMARY TRANSMITTERS: TELEVISION

SYSTEM ID#
Name

Name

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

Transmitters: Television

G

Primary

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

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

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

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

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

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

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

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

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

CHANNEL LINE-UP AA									
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				
WPPX	31	I-M	No		Philadelphia, PA				
WPPX-HD	31.1	I	No		Philadelphia, PA				
WPSG	57	I	No		Philadelphia, PA				
WPSG-HD	57.1	I	No		Philadelphia, PA				
WPVI	6	I	No		Philadelphia, PA				
WPVI-DT2	6.2	I	No		Philadelphia, PA				
WPVI-DT3	6.3	N	No		Philadelphia, PA				
WPVI-HD	6.1	I-M	No		Philadelphia, PA				
WTXF	29	I-M	No		Baltimore, MD				
WTXF-DT2	29.2	N	No		Baltimore, MD				
WTXF-HD	29.1	I	No		Baltimore, MD				

G

Primary

Transmitters:

Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Armstrong Utilities, Inc.

SYSTEM ID#
Name

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

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

	CHANNEL LINE-UP AB									
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION					
WBAL	11	N	No		Baltimore, MD					
WBAL-DT2	11.2	I-M	No		Baltimore, MD					
WBAL-HD	11.1	N	No		Baltimore, MD					
WBFF	45	I-M	No		Baltimore, MD					
WBFF-HD	45.1	I-M	No		Baltimore, MD					
WBFF-DT3	45.3	N	No		Baltimore, MD					
WGAL	8	N	No		Landcaster, PA					
WGAL-HD	8.1	N	No		Landcaster, PA					
WHYY	12	N	No		Wilmington, DE					
WHYY-DT2	12.2	E	No		Wilmington, DE					
WHYY-DT3	12.3	E-M	No		Wilmington, DE					
WHYY-HD	12.1	E-M	No		Wilmington, DE					
WJZ	13	N	No		Lancaster, PA					
WJZ-HD	13.1	N	No		Lancaster, PA					
WMAR	2	N	No		Baltimore, MD					
WMAR-HD	2.1	I-M	No		Baltimore, MD					
WMPB	29	N	No		Baltmore, MD					
WMPB-DT2	29.2	N	No		Baltmore, MD					

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Armstrong Utilities, Inc.

SYSTEM ID#
Name

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

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

	CHANN	EL LINE-UP	AB			
2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
29.3	Е	No		Baltmore, MD		
29.1	E-M	No		Baltmore, MD		
40	E-M	No		Baltimore, MD		
40.2	E	No		Baltimore, MD		
40.3	I	No		Baltimore, MD		
40.1	I-M	No		Baltimore, MD		
6	I	No		Philadelphia, PA		
6.1	I-M	No		Philadelphia, PA		
29	I-M	No		Baltimore, MD		
29.1	I	No		Baltimore, MD		
41	I-M	No		Baltimore, MD		
41.1	I	No		Baltimore, MD		
	CHANNEL NUMBER 29.3 29.1 40 40.2 40.3 40.1 6 6.1 29 29.1 41	2. B'CAST CHANNEL NUMBER STATION 29.3 E 29.1 E-M 40 E-M 40.2 E 40.3 I 40.1 I-M 6 I 6.1 I-M 29 I-M 29.1 I 41 I-M	2. B'CAST CHANNEL NUMBER STATION 29.3 E NO 29.1 E-M NO 40 E-M NO 40.2 E NO 40.3 I NO 40.1 I-M NO 6 I NO 6.1 I-M NO 29.1 I NO 29.1 I NO 29.1 I NO 41 I-M NO	CHANNEL NUMBER OF STATION (Yes or No) CARRIAGE (If Distant) 29.3 E No 29.1 E-M No 40 E-M No 40.2 E No 40.3 I No 40.1 I-M No 6 I No 6.1 I-M No 29 I-M No 41 I-M No		

G

Primary Transmitters: Television

G

Primary

Transmitters:

Television

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Armstrong Utilities, Inc. 63167 PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

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

CHANNEL LINE-UP AC									
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				
WGAL	8	N	No		Landcaster, PA				
WGAL-DT2	8.2	I-M	No		Landcaster, PA				
WGAL-HD	8.1	N	No		Landcaster, PA				
WHP	21	I	No		Harrisburg, PA				
WHP-DT2	21.2	N	No		Harrisburg, PA				
WHP-DT3	21.3	I-M	No		Harrisburg, PA				
WHP-DT3-HD	21.3	I-M	No		Harrisburg, PA				
WHP-HD	21.1	I-M	No		Harrisburg, PA				
WHTM	27	N	No		Harrisburg, PA				
WHTM-DT3	27.3	N	No		Harrisburg, PA				
WHTM-DT4	27.4	I-M	No		Harrisburg, PA				
WHTM-HD	27.1	I-M	No		Harrisburg, PA				
WITF	36	E	No		Lancaster, PA				
WJZ	13	N	No		Lancaster, PA				
WJZ-HD	13.1	N	No		Lancaster, PA				
WMPB-HD	29.1	E-M	No		Baltmore, MD				
WPMT-HD	43.1	I	No		York, PA				
WPMT-DT2	43.2	I	No		York, PA				

FORM SA3E. PAGE 3.						,	
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name	
Armstrong Util	ities, Inc.				63167		
PRIMARY TRANSMITTE	ERS: TELEVISIO)N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I' (for independent), "I-M" (for in							
Note: If you are utilizing	-	•	EL LINE-UP	•			
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		
CICIV	NUMBER	STATION	(103 01 140)	(If Distant)			
WPMT-HD	43.1	ı	No	,	York, PA		
WLYH	49.1	 	No		Red Lion, PA		
WXBU	54.3	I	No		Lancaster, PA		

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Armstrong Utilities, Inc.

SYSTEM ID#
Name

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	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
WBAL	11	N	No		Baltimore, MD
WBAL-DT2	11.2	I-M	No		Baltimore, MD
WBAL-HD	11.1	N	No		Baltimore, MD
WBFF	45	I-M	No		Baltimore, MD
WBFF-HD	45.1	I-M	No		Baltimore, MD
WBFF-DT3	45.3	N	No		Baltimore, MD
WJZ	13	N	No		Lancaster, PA
WJZ-HD	13.1	N	No		Lancaster, PA
WMAR	2	N	No		Baltimore, MD
WMAR-HD	2.1	I-M	No		Baltimore, MD
WMPB	29	N	No		Baltmore, MD
WMPB-DT2	29.2	N	No		Baltmore, MD
WMPB-DT3	29.3	E	No		Baltmore, MD
WMPB-HD	29.1	E-M	No		Baltmore, MD
WNUV	40	E-M	No		Baltimore, MD
WNUV-DT2	40.2	E	No		Baltimore, MD
WNUV-DT3	40.3	I	No		Baltimore, MD
WNUV-HD	40.1	I-M	No		Baltimore. MD

G

Primary Transmitters: Television

FORM SA3E. PAGE 3.						·
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
Armstrong Util	ities, Inc.				63167	
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
In General: In space of carried by your cable's FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program base Substitute Pasis Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA-Simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by	G, identify even by stem during the ions in effect or rules, regular here in space only on a substand also in sparformation concurr. In the station's call associated with each case we entering the least), "E" (for no	y television state accounting in June 24, 194, or 76.63 (r d in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the state ring substitusing. Do not represent the FCC has been station accounter the FCC has been station. Whether the state "N" (for ne concommercial)	g period, except 81, permitting the referring to 76.6 paragraph. It is a distant stations paragraph. It is in space I (the referring to station was carried that basis station report origination cording to its over the period of the report o	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of both on a substitution, see page (v) on program service the er-the-air designation of the television statistington, D.C. This work station, an indefor network multicor "E-M" (for noncontext)	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a stable system on a substitute program ent and Program Log)—if the tute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example sion for broadcasting over-the-air in may be different from the channel expendent station, or a noncommercial ast), "I" (for independent), "I-M" become pager SA2 form	G Primary Transmitters: Television
Column 4: If the st planation of local servi Column 5: If you had cable system carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these the	ation is outside ce area, see pa ave entered "Yohe distant static ion on a part-tiricion of a distant entered into or a primary trans simulcasts, also aree categories e location of ea	the local servage (v) of the es" in column on during the ame basis becamulticast strength or before Jumitter or an aspect of enter "E". If , see page (v) ch station. Fo	vice area, (i.e. "o general instructi 4, you must cor accounting perion ause of lack of a eam that is not so une 30, 2009, be association repre- you carried the of of the general in trus.	distant"), enter "Yeions located in the mplete column 5, sod. Indicate by entertivated channel of subject to a royalty etween a cable system and the primal channel on any of instructions locate list the community	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	
Note: If you are utilizing	ng multiple char	nel line-ups,	use a separate	space G for each	channel line-up.	
	1	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	
WUTB	41	I-M	No		Baltimore, MD	
WUTB-HD	41.1	I	No		Baltimore, MD	

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63167 Armstrong Utilities, Inc. PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.						ACCOUNTING	PERIOD: 2019/2		
Armstrong Utilities, In		EM:				SYSTEM ID# 63167	Namo		
SUBSTITUTE CARRIAGE In General: In space I, identi					a that your cable system	o carried on a	I		
substitute basis during the ac explanation of the programm	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regula	ations, or authorizations	. For a further	Substitute Carriage:		
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? — Yes — No									
Note: If your answer is "No		rest of this paç	ge blank. If your answer is	'Yes," you mu		• •	Program Log		
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the program Column 3: Give the call Column 4: Give the broathe case of Mexican or Can Column 5: Give the monfirst. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progra ce, please a of every no distant stati gulations, o tion. Do no Lucy" or "NE n was broad sign of the s adcast static atth and day we "5/7." es when the Example: a er "R" if the and regulatic ogramming	am on a separa attach additional network televition and that your authorizational truse general of the secondary of the secon	al pages. ision program (substitute pour cable system substitute some scategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programs is community to which the community with which the tem carried the substitute programs was carried by your ded 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 licer station is iden program. Use cable system. 15 p.m. to 6:2 mming that ye; enter the leti	during the accounting ramming of another stans located in the paper List specific program need by the FCC or, in tiffied). numerals, with the mount of the times accurate 8:30 p.m. should be our system was require ter "P" if the listed pro	nth ely			
	LI IRSTITI IT	E PROGRAM	<u> </u>		EN SUBSTITUTE IAGE OCCURRED	7. REASON			
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN		5. MONTH AND DAY	6. TIMES FROM — TO	FOR DELETION			
					<u> </u>				
	 								
					_				
					<u> </u>				
					<u> </u>				
					<u> </u>				
					_				
					_				
					<u> </u>				
									

ACCOUNTING PERIOD: 2019/2 FORM SA3E, PAGE 6.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	Armstrong Utilities, Inc.	63167
	DART TIME CARRIAGE LOC	_

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 parttime 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."

DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS HOURS** DATE **FROM** TO DATE **FROM** TO

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

	AL NAME OF OWNER OF CABLE SYSTEM:			SYSTE	M ID#					
Arı	mstrong Utilities, Inc.			6	3167	Name				
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identifed in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)										
IMF	during the accounting period. PORTANT: You must complete a statement in space P concerning gross receipts.		\$ (Amount o	3,393,145 f gross receipts)	.00					
• Cor • Cor • If your fee • If your	PRIGHT ROYALTY FEE Juctions: Use the blocks in this space L to determine the royalty fee you owe: Implete block 1, showing your minimum fee. Implete block 2, showing whether your system carried any distant television stations. In system did not carry any distant television stations, leave block 3 blank. Enter the art from block 1 on line 1 of block 4, and calculate the total royalty fee. In system did carry any distant television stations, you must complete the applicable prompanying this form and attach the schedule to your statement of account.					Copyright Royalty Fee				
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b ck 3 below.	e enter	ed on line	e 1 of						
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.	entered	d on line 2	2 in block						
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	ould be	entered o	on line						
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K		•		00					
	Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.		Ψ	3,333,143	.00					
	This is your minimum fee.	\$		36,103	.06					
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 colun "Yes" in this block. • Did your cable system carry any distant television stations during the accounting peri Yes—Complete the DSE schedule. X No—Leave block 3 below blank and one of the state of the st	nn 4, yo	ou must o	check						
Block 3	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	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee									
4	from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger		\$	36,103	.06_	Cable systems				
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente	r		C	0.00	submitting additional deposits under				
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)									
						should contact the Licensing				
	Line 4. FILING FEE		<u>\$</u>	725	.00_	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	\$		36,828	.06	appropriate form for submitting the additional fees.				
	EFT Trace # or TRANSACTION ID #									
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form and the Excel instructions to									

Nama	LEGAL NAME OF OWNER	OF CABLE S	YSTEM:	SYSTEM ID:
Name	Armstrong Utilitie	s, Inc.		63167
	CHANNELS			
M	Instructions: You m	nust give	(1) the number of channels on which the cable system carried television broadcas	t stations
		-	cable system's total number of activated channels, during the accounting period.	
Channels		()	, ,	
			hannels on which the cable	66
	system carried tele	evision br	padcast stations	
	O Enter the total num	mahar af a	etivated abanyala	
	Enter the total nur which the cable		carried television broadcast stations	
		-	annot television producest stations	381
N	INDIVIDUAL TO BE	CONTA	CTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual	
N	we can contact abou		` •	
Individual to			·	
Be Contacted				
for Further	Name Ken Pr	oudfoo	It Telephone	(724) 283-0925
Information				
	Address One Ar	mstro	ng Place	
	(Number, st	reet, rural r	oute, apartment, or suite number)	
	Butler,		001	
	(City, town,	state, zip)		
	Email	kprou	dfoot@agoc.com Fax (optional)	
	OFFICION (TI			1.6
•	CERTIFICATION (Thi	is statem	ent of account must be certifed and signed in accordance with Copyright Office req	gulations.
0				
Certifcation	• I, the undersigned, h	nereby ce	tify that (Check one, but only one, of the boxes.)	
	(Owner other tha	n corpor	ntion or partnership) I am the owner of the cable system as identifed in line 1 of space	e B· or
	(omer date: and		or or parameter py (and all of or	2, 0.
	(Agent of owner	other tha	n corporation or partnership) I am the duly authorized agent of the owner of the cabl	e system as identified
			that the owner is not a corporation or partnership; or	o oyotom do idominiod
	X (Officer or partne	or) I om o	n officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as o	wher of the cable system
	in line 1 of spa	-	Tollicer (if a corporation) of a partier (if a partiership) of the legal entity identified as o	wher of the cable system
			It of account and hereby declare under penalty of law that all statements of fact contain to the best of my knowledge, information, and belief, and are made in good faith.	ned herein
	[18 U.S.C., Section 1			
		X	/s/ Mark Rankin	
			electronic signature on the line above using an "/s/" signature to certify this statement. John Smith). Before entering the first forward slash of the /s/ signature, place your cursor	r in the box and press the
		"F2" but	on, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotu	s compatibility settings.
		Typed	or printed name: Mark Rankin	
		. Jpcu		
		Title:	Chief Financial Officer	
			(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#	Nome
Armstrong Utilitie	es, Inc.	63167	Name
The Satellite Home lowing sentence: "In determin service of properties and service of properties and service of properties and paper SA3 form. During the account made by satellite comparing the service of properties and service and	FEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the total number of subscribers and the gross amounts paid to the cable system for the roviding secondary transmissions of primary broadcast transmitters, the system shall not in a amounts collected from subscribers receiving secondary transmissions pursuant to section on when to exclude these amounts, see the note on page (vii) of the general instruction in the general did the cable system exclude any amounts of gross receipts for secondary transmisers to satellite dish owners?	e basic nclude sub- on 119."	P Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address	Name Mailing Address		
INTEREST ASS	SESSMENTS		
You must complete	e this worksheet for those royalty payments submitted as a result of a late payment or undo of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	erpayment.	Q
Line 1 Enter the a	mount of late payment or underpayment		Interest Assessment
Line 2 Multiply line	e 1 by the interest rate* and enter the sum here	- days	
Line 3 Multiply line	e 2 by the number of days late and enter the sum here	- 00274	
	e 3 by 0.00274** enter here and on line 3, block 4, ace L, (page 7)	- t charge)	
	terest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistacensing Division at (202) 707-8150 or licensing@copyright.gov.	ince please	
** This is the de	ecimal equivalent of 1/365, which is the interest assessment for one day late.		
•	ing this worksheet covering a statement of account already submitted to the Copyright Off e owner, address, first community served, accounting period, and ID number as given in t		
Owner Address			
First community se Accounting period ID number	rved		

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

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

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

ACCOUNTING PERIOD: 2019/2

DSE SCHEDULE. PAG	E 11. (CONTINUED)											
4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			SY	STEM ID#						
1	Armstrong Utilities, Inc.	•			63167							
	SUM OF DSEs OF CATEGOR	RY "O" STATIO	NS:									
	Add the DSEs of each station											
	Enter the sum here and in line	1 of part 5 of this	s schedule.		0.00							
	Instructions:											
2	In the column headed "Call S	Sign": list the ca	II signs of all distant stations	identified by	the letter "O" in column 5							
	of space G (page 3).			- "4 0" -								
Computation of DSEs for	In the column headed "DSE" mercial educational station, give	: for each indep	endent station, give the DSE 25 "	= as 1.0; for	each network or noncom-							
Category "O"	CATEGORY "O" STATIONS: DSEs											
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN DSE							
Gialiono	3, LE 31311	302	07 KEE 01011	562	07 KEE 01011							
Add rows as												
necessary.												
Remember to copy												
all formula into new												
rows.												

Name	Armstrong U	Jtilities, Inc.					S	63167				
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper											
Capacity		C	CATEGORY LAC	STATIONS: (COMPUTATION	ON OF DSEs						
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	ER 3. N URS O ED BY S	UMBER F HOURS TATION N AIR	4. BASIS OF CARRIAGE VALUE	5. TYPE	6. DS	iΕ				
			÷ ÷	=		x x	<u>=</u>					
			÷	=		x						
			÷ ÷			x x						
			÷	=		x x	<u>=</u>					
			÷	=		x	=					
	Add the DSEs	OF CATEGORY LAC Sof each station. Im here and in line 2 of p		e,	▶	0.00						
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efferations in efferations of the Broadcast of Space I). Column 2: at your option. Column 3: Column 4:	e the call sign of each st I by your system in subst lect on October 19, 1976 (one or more live, nonnetw For each station give the This figure should corre Enter the number of days Divide the figure in colun This is the station's DSE	titution for a program (as shown by the lett ork programs during e number of live, non spond with the inforr s in the calendar yea nn 2 by the figure in	that your system rer "P" in column 7 that optional carrie network programs nation in space I. ir: 365, except in a column 3, and giv	was permitted to of space I); and age (as shown by the carried in substitute a leap year. The the result in column is the carried in substitute a leap year.	delete under FCC rules the word "Yes" in column 2 tution for programs that	of were deleted	rm).				
		SU	IBSTITUTE-BAS	IS STATIONS		TION OF DSEs		T.				
	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	s OF SUBSTITUTE-BAS of each station. Im here and in line 3 of p	IS STATIONS:	= 9,		0.00		=				
5		ER OF DSEs: Give the ams applicable to your system		s in parts 2, 3, and	4 of this schedule	and add them to provide	the tota					
Total Number		f DSEs from part 2			>		0.00					
of DSEs		f DSEs from part 3 ● f DSEs from part 4 ●			>	·	0.00					
	TOTAL NUMBE	R OF DSEs	TOTAL NUMBER OF DSEs 0.00									

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

LEGAL NAME OF OWNER OF CA Armstrong Utilities, Inc.	BLE SYSTEM:					S'	YSTEM ID# 63167	Name		
							03107			
Instructions: Block A must be In block A:			7 (4 505 1			10 (10) (6		
• If your answer if "Yes," leave the remainder of part 6 and part 7 of the DSE schedule blank and complete part 8, (page 16) of the schedule.										
If your answer if "No," complete blocks B and C below. BLOCK A: TELEVISION MARKETS										
Is the cable system located wholly outside of all major and smaller markets as defined under section 76.5 of FCC rules and regulations in										
	effect on June 24, 1981? Yes—Complete part 8 of the schedule—DO NOT COMPLETE THE REMAINDER OF PART 6 AND 7									
X No—Complete blocks B	and C below.									
	BLO	CK B: CARR	IAGE OF PERI	MITTED DS	Es					
CALL SIGN under FCC r instructions	ules and regulati or the DSE Sche	ons prior to Ju edule. (Note: Tl	part 2, 3, and 4 or ne 25, 1981. For fune letter M below r	urther explana	ation of permitt	ed stations, see t	he			
Column 2: Enter the ap BASIS OF (Note the FO PERMITTED A Stations CARRIAGE 76.61(b)(C rules and regu carried pursuant c)]	dicating the ba llations cited b to the FCC ma	sis on which you o	ose in effect of 76.57, 76.59(b	n June 24, 198), 76.61(b)(c),	76.63(a) referring	j tc			
C Noncomn D Grandfath instructio E Carried p	nerical education ered station (76. ns for DSE schedursuant to individ	al station [76.5 65) (see parag dule). ual waiver of F	9(c), 76.61(d), 76. raph regarding su	63(a) referring bstitution of g	g to 76.61(d) randfathered s	. , ,				
G Commerc		vithin grade-B	contour, [76.59(d)	•		erring to 76.61(e)	(5)			
*(Note: For		entified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on pag	e 14 of			
1. CALL 2. PERMIT SIGN BASIS	ED 3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE			
							0.00			
	Е	SLOCK C: CO	MPUTATION O	F 3.75 FEE						
Line 1: Enter the total number	r of DSEs from	part 5 of this	schedule				_			
Line 2: Enter the sum of perr	nitted DSEs fro	m block B ab	ove				_			
Line 3: Subtract line 2 from li (If zero, leave lines 4			•		rate.	,	0.00			
Line 4: Enter gross receipts	rom space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially		
Line 5: Multiply line 4 by 0.03	75 and enter s	um here						permited/ partially		
Line 6: Enter total number of	DSEs from line	e 3				Х	-	nonpermitted carriage? If yes, see part		
Line 7: Multiply line 6 by line	5 and onter her	re and on line	2 block 3 cacc	-al (naca 7)			0.00	9 instructions.		

Name	YSTEM ID# 63167	S					SYSTEM:	WNER OF CABLE	AL NAME OF C	
6	3. DSE	2. PERMITTED	1. CALL	3. DSE	2. PERMITTED	1. CALL	BLOCK 3. DSE	2. PERMITTED	1. CALL	
Computation		BASIS	SIGN		BASIS	SIGN		BASIS	SIGN	
3.75 Fee										
								•		
								•		
					•			•		
								•		
								•		

Name	Armstrong Util		/STEM:						SYS	63167
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	A—Part-time sp 76.59(B—Late-night pr 76.61(S—Substitute ca genera Column 5: Indicate Column 6: Compan	or to June 25, 196 call sign for each the DSE for this the accounting p the basis of carric CC rules and reg ecialty programm (d)(1),76.61(e)(1) rogramming: Car (e)(3)). arriage under ceral instructions in the station's DSE e the DSE figures B, column 3 of p information you gentle the station of the station of the post of the po	31, under former distant station is station for a sing eriod and year i age on which the ulations cited be hing: Carriage, o, or 76.63 (referriage under FCC tain FCC rules, the paper SA3 fet is listed in column art 6 for this station in the station of the current of the curre	r FCC rules gov dentifed by the gle accounting p n which the can e station was or elow pertain to t in a part-time baring to 76.61(e) C rules, sections regulations, or a form. accounting per ns 2 and 5 and tion. 2, 3, and 4 mus	erning part-tir etter "F" in co eriod, occurr iage and DSI urried by listir iose in effect sis, of specia 1)). 76.59(d)(3), uthorizations od as compu ist the smalle	me and sub plumn 2 of p ring between E occurred ng one of th t on June 2- alty program 76.61(e)(3) s. For furthe uted in parts er of the two	estitute carri- coart 6 of the n January 1 (e.g., 1981/ e following 4, 1981. nming under), or 76.63 (i) er explanation 5 2, 3, and 4 o figures her	age. DSE schedule, 1978 and Juri 1) etters FCC rules, so referring to on, see page (v of this schedule. This figure	ene 30, 1987 ections vi) of the should be e	entere
		PERMITTED	DSE FOR STA	TIONS CARRIE	D ON A PAR	RT-TIME AN	ND SUBSTI	TUTE BASIS		
	1. CALL	2. PRIOR	3. ACC	COUNTING	4. BASI	IS OF	5. PF	RESENT	6. PER	RMITTED
	SIGN	DSE	PE	ERIOD	CARRI	AGE	[OSE	D	SE
7 Computation	Instructions: Block A In block A: If your answer is	"Yes," complete	blocks B and C,		part 9 of the	DSE ashad	ulo			
of the Syndicated	If your answer is	"No," leave block		•						
Exclusivity			BLUCI	(A: MAJOR	I ELEVISIC	IN WARK	<u>E I </u>			
Surcharge	Is any portion of the oxide X Yes—Complete	,		or television marl		by section 7 -Proceed to		rules in effect J	une 24, 198	31?
	BLOCK B: C	arriage of VHF/G	rade B Contour	Stations		BLOCK	K C: Compu	tation of Exem	pt DSEs	
	Is any station listed in commercial VHF stati or in part, over the ca	ion that places a			nity served		ole system p	of part 7 carrie		
	l <u>===</u>	tation below with it and proceed to part		mitted DSE			tation below water	with its appropri o part 8.	ate permitted	d DSE
	CALL SIGN	DSE	CALL SIGN	DSE	CAL	L SIGN	DSE	CALL SIG	SN	DSE
		 								
		 								
		<u> </u>								
		ļ								
		 	TOTAL DOS	0.00				TOTAL 5	YF-	0.00
			TOTAL DSEs	0.00				TOTAL DS	o∟S	0.00

	ME OF OWNER OF CABLE SYSTEM: Armstrong Utilities, Inc.	SYSTEM ID# 63167	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	3,393,145.00	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated
	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	Exclusivity Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? X 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? 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	E	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on	_	
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ <u>\$</u>		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Yes—Complete part 9 of this schedule. X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	E	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name		ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	<u> </u>	Armstrong Utilities, Inc.	63167
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: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of packed "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. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B beck. is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers occated within that station's local service area and others were located outside that area. For the definition of a station's "local service area and others were located outside that area.	elow
		e area," see page (v) of the general instructions.	cal
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		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) ▶ \$ 3,393,145	.00_
	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.).	0.00
	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	_
		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> l.

LEGAL N	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Marra
Arms	trong Utilities, Inc.	63167	Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4			8
	A. Enter 0.01064 of gross receipts (the amount in section 1) **State		•
		_	
	B. Enter 0.00701 of gross receipts (the amount in section 1) \$		Computation of
			Base Rate Fee
	C. Multiply line B by 3.000 and enter here \$	_	
	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	
	Dase Rate Fee		
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast	•	
instead Space	be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channe G.	l line-ups in	9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee		Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take ac on, you must:	Ivantage of this	of
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to	the same	Base Rate Fee and
station	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine	the number of	Syndicated Exclusivity
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	each group.	Surcharge
	If any portion of your cable system is located within the top 100 television market and the station is not exempt in p	art 7, you must	for Partially
also co	mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B bel		Distant
	cable system is wholly located outside all major television markets, complete block A only.		Stations, and for Partially
	Identify a Subscriber Group for Partially Distant Stations For each community served, determine the local service area of each wholly distant and each partially distant stations.	ion you	Permitted
carried	to that community.	,	Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were loc the station's local service area. A subscriber located outside the local service area of a station is distant to that sta- ne token, the station is distant to the subscriber.)		
	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant.	Each	
subscri	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Compu groups	tting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your syst	em's subscriber	
In each	section:		
	y the communities/areas represented by each subscriber group. he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all	of the	
	bers in the group.	or the	
• If:			
, ,	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it ir f this schedule; or,	parts 2, 3,	
2) any	cortion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in bi 6 of this schedule.	lock B,	
	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in paper SA3 form.	structions	
Comp page. DSEs f	ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the p n making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need calculations on the form.	at is, the total	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63167 Armstrong Utilities, Inc. Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNE Armstrong Utilitie		LE SYSTEM:				S	YSTEM ID# 63167	Name
В		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER GROUP SUBSCRIBER GROUP	JP	
COMMUNITY/ AREA				COMMUNITY/ AREA				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant Stations
		-						
Total DSEs		II.	0.00	Total DSEs		1	0.00	
Gross Receipts First G	roun	\$ 845	,604.56	Gross Receipts Seco	nd Group	\$ 1,1	10,917.17	
Gioss Receipts i list c	поир	- 043	,004.30	Gross Neceipis Seco	ila Gloup	Ψ 1,1	10,517.17	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
2014411117// 4854		SUBSCRIBER GROU	IP			SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	rawn	srove, PA		COMMUNITY/ AREA	Harrord	i, MD		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs	_	. =	0.00	Total DSEs			0.00	
Gross Receipts Third (≟roup	\$ 743	,220.11	Gross Receipts Four	th Group	\$ 6	93,403.16	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
				II				
			riber group	as shown in the boxes	above.	¢	0.00	
Enter here and in block	くろ, line 1,	space ∟ (page /)				\$	0.00	

В				TE FEES FOR EAC				
		SUBSCRIBER GRO	UP			SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA	Lower	Oxford, PA		COMMUNITY/ AREA	Rising	Sun, MD		_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computati of
0,122 0.0.1	702	07.22 0.0.1	232	07.122 01011	332	07.22 0.011	302	Base Rate I
		_				.=		and
								Syndicate
		_						Exclusivit
								Surcharge
								for
								Partially
								Distant
								Stations
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roun	s 845	,604.56	Gross Receipts Seco	and Group	s 1,1	10,917.17	
noso recocipis i noi C	топр	*************************************	,004.00	Cross receipts cose	па Стоар	<u> </u>	10,017.17	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Fawn G	Prove PA						
		olove, i A		COMMUNITY/ AREA	Harford	, MD		
		Jiove, i A		COMMUNITY/ AREA	Harford	, MD		
CALL SIGN	DSE	CALL SIGN	DSE	COMMUNITY/ AREA	Harford DSE	, MD	DSE	
CALL SIGN			DSE				DSE	
CALL SIGN			DSE				DSE	
CALL SIGN			DSE				DSE	
CALL SIGN			DSE				DSE	
CALL SIGN			DSE				DSE	
CALL SIGN			DSE				DSE	
CALL SIGN			DSE				DSE	
CALL SIGN			DSE				DSE	
CALL SIGN			DSE				DSE	
CALL SIGN			DSE				DSE	
CALL SIGN			DSE				DSE	
CALL SIGN			DSE				DSE	
CALL SIGN			DSE				DSE	
CALL SIGN			DSE				DSE	
CALL SIGN			DSE				DSE	
			DSE				DSE	
Fotal DSEs	DSE	CALL SIGN	0.00	CALL SIGN Total DSEs	DSE	CALL SIGN	0.00	
Fotal DSEs	DSE	CALL SIGN		CALL SIGN	DSE	CALL SIGN		
Fotal DSEs Gross Receipts Third C	DSE	CALL SIGN	0.00	Total DSEs Gross Receipts Four	DSE	\$ 6	0.00	
Fotal DSEs	DSE	CALL SIGN	0.00	CALL SIGN Total DSEs	DSE	CALL SIGN	0.00	
otal DSEs Foross Receipts Third C	DSE	CALL SIGN	0.00	Total DSEs Gross Receipts Four	DSE	\$ 6	0.00	
otal DSEs Gross Receipts Third (DSE	CALL SIGN \$ 743	0.00	Total DSEs Gross Receipts Four	DSE th Group	\$ 6	0.00	

ACCOUNTING PERIOD: 2019/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Armstrong Utilities, Inc. 63167 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