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.

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					
	\$					
2-27-20	ALLOCATION NUMBER					

SA3E Long Form

Return completed workbook by email to:

coplicsoa@loc.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting Period	2019/2				
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines of these were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account of the country of the covering the entire accounts.	ss of the cable syster on the last day of to	em. he accounting period should so		6623
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM				
	AVENUE BROADBAND COMMUNICATIONS, LLC				
					20192 2019/2
	21 E. EARLL DRIVE PHOENIX, AZ 85012				
С	INSTRUCTIONS: In line 1, give any business or trade names used to	•			
	names already appear in space B. In line 2, give the mailing address of	or the system, if ai	Trerent from the address gi	ven in space	В.
System	1 IDENTIFICATION OF CABLE SYSTEM: AVENUE BROADBAND COMMUNICATIONS, LLC D/I	B/A NEWWAV	E COMMUNICATIONS	3	
	MAILING ADDRESS OF CABLE SYSTEM: 604 E. NATIONAL AVENUE (Number, street, rural route, apartment, or suite number) BRAZIL, IN 47834 (City, town, state, zip code)				
D	Instructions: For complete space D instructions, see page 1b. Identify	y only the frst com	nmunity served below and r	relist on page	- ∋ 1b
Area	with all communities.		·		
Served	CITY OR TOWN	STATE			
First	WESTVILLE	IL			
Community	Below is a sample for reporting communities if you report multiple ch	annel line-ups in	Space G.		
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB G	RP#
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 Office to collect the personally identifying information (PII) requested on this 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 Office'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.

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

FORM SA3E. PAGE 1b. **SYSTEM ID#** LEGAL NAME OF OWNER OF CABLE SYSTEM: 6623 **AVENUE BROADBAND COMMUNICATIONS, LLC** 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 filings. 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# **WESTVILLE** IL AA **First BELGIUM** IL **AA** 1 Community **CATLIN** IL **AA** 1 **DANVILLE** IL 1 AA **GEORGETOWN** IL AA 1 IL 1 **TILTON** AA See instructions for **UNIC. VERMILLION COUNTY** IL AA 1 additional information on alphabetization. **HEGELER** IL AA 1 **HOOPESTON** IL AA 1 **ROSSVILLE** IL AA 1 **MILFORD** IL AA 1 Add rows as necessary. **WELLINGTON** IL **AA** 1 **UNINC. EDGAR COUNTY** 2 IL AB **PARIS** IL **AB** 2

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

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

AVENUE BROADBAND COMMUNICATIONS, LLC

6623

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLO	OCK 1			BLOCK 2			
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE		CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE
Residential:				Ħ			
 Service to first set 	4,176	\$	27.00				
 Service to additional set(s) 							
 FM radio (if separate rate) 				1			
Motel, hotel	102	\$	47.00	1			
Commercial							
Converter							
 Residential 		ļ					
Non-residential							
		1				I	

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

		BLO	CK 1			BLOCK 2		
CATEGORY OF SERVICE	R	ATE	CATEGORY OF SERVICE	CATEGORY OF SERVICE	F	RATE		
Continuing Services:			Installation: Non-residential					
 Pay cable 		\$9-\$18	Motel, hotel			EXTENDED BASIC	\$	62.00
 Pay cable—add'l channel 			Commercial			DIGITAL FAMILY PLUS	\$	13.00
 Fire protection 			• Pay cable			STARZ SUPER PAK	\$	18.00
Burglar protection			• Pay cable-add'l channel			SHOWTIME UNLIMITED	\$	18.00
Installation: Residential			Fire protection			CINEMAX	\$	18.00
First set	\$	35.00	Burglar protection			НВО	\$	18.00
Additional set(s)			Other services:					
 FM radio (if separate rate) 			Reconnect	\$	4.00			
 Converter 		•••••••••••••••••••••••••••••••••••••••	Disconnect					
			Outlet relocation	\$	30.00			
			 Move to new address 	\$	30.00			

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name AVENUE BROADBAND COMMUNICATIONS, LLC 6623 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. **Transmitters:** Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program **Television** basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 3. TYPE 1. CALL 4. DISTANT? 2. B'CAST 5. BASIS OF 6. LOCATION OF STATION **SIGN CHANNEL** OF (Yes or No) **CARRIAGE NUMBER STATION** (If Distant) **WCIA** 48 CHAMPAIGN, IL Ν No WCIA-2 48.2 I-M No CHAMPAIGN, IL See instructions for additional information WEIU **50** Ε 0 Yes CHARLESTON, IL on alphabetization. **WICD** 41 Ν CHAMPAIGN, IL No WAND 17 Ν No DECATUR, IL **WBUI** 22 I No DECATUR, IL WAND-2 17.2 I-M No DECATUR, IL Ε WILL-TV 9 No URBANA, IL WCCU 26 ı No URBANA, IL WCCU-2 26.2 I-M No URBANA, IL WBUI-2 22.2 I-M CHAMPAIGN, IL No WICD-2 41.2 I-M CHAMPAIGN, IL No WICD-3 CHAMPAIGN, IL 41.3 I-M No **WICS** 42 I SPRINGFIELD, IL No

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **AVENUE BROADBAND COMMUNICATIONS, LLC** 6623 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. **Transmitters:** Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program **Television** basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AB 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION **SIGN CHANNEL** (Yes or No) **CARRIAGE** OF **NUMBER STATION** (If Distant) **WCIA** 48 CHAMPAIGN, IL Ν No WEIU **50** Ε No CHARLESTON, IL **WICD** 41 Ν No CHAMPAIGN, IL **WAND** N DECATUR, IL 17 No **WBUI 22** ı No DECATUR, IL WCIA-2 48.2 I-M No CHAMPAIGN, IL **WILL-TV** URBANA, IL 9 Ε No **WCCU** 26 ı No URBANA, IL WCCU-2 26.2 I-M URBANA, IL No TERRE HAUTE, IN WTHI 10 Ν No WBUI-2 22.2 I-M CHAMPAIGN, IL No WAND-2 17.2 I-M DECATUR, IL No WICD-2 41.2 CHAMPAIGN, IL I-M No WICD-3 41.3 CHAMPAIGN, IL I-M No

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **AVENUE BROADBAND COMMUNICATIONS, LLC** 6623 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. **Transmitters:** Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program **Television** basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AC 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

	SYSTEM ID#								
AVENUE BROADBAND COMMUNICATIONS, LLC	6623	Name							
PRIMARY TRANSMITTERS: TELEVISION									
In General: In space G, identify every television station (including translator stations and low power telecarried by your cable system during the accounting period, except (1) stations carried only on a part-time FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network program	e basis under [*]	G							
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 static	-	Primary							
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 su	ıbstitute program	Transmitters: Television							
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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 of basis. For further information concerning substitute basis stations, see page (v) of the general instruction in the paper SA3 form.									
Column 1: List each station's call sign. Do not report origination program services such as HBO, ES each multicast stream associated with a station according to its over-the-air designation. For example, re-	-								
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately									
WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting									
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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 i	t is the subject								
of a written agreement entered into on or before June 30, 2009, between a cable system or an association	on representing								
the cable system and a primary transmitter or an association representing the primary transmitter, enter tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O."	Ü								
explanation of these three categories, see page (v) of the general instructions located in the paper SA3 to Column 6: Give the location of each station. For U.S. stations, list the community to which the station	orm.								
FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is	•								
Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.									
CHANNEL LINE-UP AE									
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF 9	1 CALL 2 B'CAST 2 TYPE 4 DISTANTS IS BASIS OF 16 LOCATION OF STATION								
L CIONI L CHANNELL OF L (Margaret) L CARRIAGE L	STATION								
SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER STATION (If Distant)	STATION								
SIGN CHANNEL OF (Yes or No) CARRIAGE (If Distant)	STATION								
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SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **AVENUE BROADBAND COMMUNICATIONS, LLC** 6623 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. **Transmitters:** Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program **Television** basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AF 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL** SIGN OF (Yes or No) CARRIAGE **NUMBER STATION** (If Distant)

LEGAL NAME OF OWN	NER OF CABLE S	/STEM:			SYSTEM ID#	!			
AVENUE BROA	ADBAND CO	MMUNICA	TIONS, LLC		6623	Name			
PRIMARY TRANSMITT	ERS: TELEVISI	ON							
carried by your cable	system during t	he accounting	g period, except	(1) stations carrie	s and low power television stations) ed only on a part-time basis under tain network programs [sections	G			
76.59(d)(2) and (4), 76 substitute program ba	6.61(e)(2) and sis, as explaine	(4), or 76.63 (ed in the next	referring to 76.6 paragraph.	61(e)(2) and (4))];	and (2) certain stations carried on a	Primary Transmitters: Television			
 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 spanformation con	ace I, if the st			tute basis and also on some other of the general instructions located				
Column 1: List each multicast stream	ch station's call associated wit	h a station ac	cording to its ov	er-the-air designa	es such as HBO, ESPN, etc. Identify ation. For example, report multi- ch stream separately; for example				
WETA-simulcast). Column 2: Give th	e channel num	ber the FCC	has assigned to	the television sta	tion for broadcasting over-the-air in smay be different from the channel				
on which your cable sy Column 3: Indicate	ystem carried t e in each case	he station. whether the s	tation is a netwo	ork station, an ind	ependent station, or a noncommercial cast), "I" (for independent), "I-M"				
(for independent multi For the meaning of the	cast), "E" (for r ese terms, see	noncommercia page (v) of th	al educational), one general instru	or "E-M" (for nonc ections located in t	ommercial educational multicast).				
planation of local serv Column 5: If you h	ice area, see p ave entered "Y	age (v) of the es" in columr	general instruc n 4, you must co	tions located in th mplete column 5,					
carried the distant state For the retransmiss	tion on a part-ti sion of a distan	me basis bec t multicast str	ause of lack of a eam that is not	activated channel subject to a royalt	, ,				
the cable system and tion "E" (exempt). For	a primary trans simulcasts, als	mitter or an a o enter "E". If	ssociation repression you carried the	esenting the prima channel on any o	ary transmitter, enter the designa- other basis, enter "O." For a further ed in the paper SA3 form.				
Column 6: Give th	e location of ea Canadian station	ach station. Fo ons, if any, giv	or U.S. stations, re the name of t	list the communit he community with	y to which the station is licensed by the handle had been station is identifed.				
Troise in you are aiming		•	EL LINE-UP	•	- chamber into up.				
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION				
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		-			

LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM I	D#
AVENUE BROA	ADBAND CO	MMUNICA	TIONS, LLC		662	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable	system during t	he accounting	g period, except	(1) stations carrie	s and low power television stations) ed only on a part-time basis under tain network programs [sections	G
76.59(d)(2) and (4), 76 substitute program ba	6.61(e)(2) and easis, as explaine	(4), or 76.63 (ed in the next	referring to 76.6 paragraph.	61(e)(2) and (4))];	and (2) certain stations carried on a cable system on a substitute program	Primary Transmitters: Television
basis under specifc F0Do not list the station station was carried	n here in space	G—but do lis		ne Special Statem	ent and Program Log)—if the	
• List the station here,	and also in spa nformation cond	ace I, if the st			tute basis and also on some other of the general instructions located	
each multicast stream cast stream as "WETA	associated wit	h a station ac	cording to its ov	er-the-air designa	es such as HBO, ESPN, etc. Identify ation. For example, report multich stream separately; for example	
			-		tion for broadcasting over-the-air in may be different from the channel	
on which your cable sy Column 3: Indicate	ystem carried the in each case	ne station. whether the s	tation is a netwo	ork station, an ind	ependent station, or a noncommercial cast), "I" (for independent), "I-M"	
(for independent multi For the meaning of the	cast), "E" (for r ese terms, see	oncommercia page (v) of th	al educational), o ne general instru	or "E-M" (for nonc ections located in t	ommercial educational multicast).	
planation of local serv Column 5: If you h	ice area, see p ave entered "Y	age (v) of the es" in columr	general instruct a 4, you must co	tions located in th mplete column 5,		
	sion of a distan	t multicast str	eam that is not	subject to a royalt	capacity. y payment because it is the subject stem or an association representing	
tion "E" (exempt). For	simulcasts, als	o enter "E". If	you carried the	channel on any o	ary transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form.	
Column 6: Give th	e location of ea Canadian statio	ach station. Fo ons, if any, giv	or U.S. stations, re the name of t	list the communit he community with	y to which the station is licensed by the hy which the station is identifed.	
		CHANN	EL LINE-UP	АН		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER		(Yes or No)	CARRIAGE (If Distant)	o. Looming of Girmon	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **AVENUE BROADBAND COMMUNICATIONS, LLC** 6623 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. **Transmitters:** Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program **Television** basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AI 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL** SIGN OF (Yes or No) CARRIAGE **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **AVENUE BROADBAND COMMUNICATIONS, LLC** 6623 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. **Transmitters:** Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program **Television** basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AJ 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL** SIGN OF (Yes or No) CARRIAGE **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **AVENUE BROADBAND COMMUNICATIONS, LLC** 6623 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. **Transmitters:** Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program **Television** basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AK 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **AVENUE BROADBAND COMMUNICATIONS, LLC** 6623 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. **Transmitters:** Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program **Television** basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AL 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

LEGAL NAME OF OWNER	OF CABLE SY	STEM:			SYSTEM IC)#
AVENUE BROAD	BAND CO	MMUNICA	TIONS, LLC		662	Name
PRIMARY TRANSMITTERS	S: TELEVISIO	ON				
carried by your cable sys	tem during th	ne accounting	g period, except	(1) stations carrie	s and low power television stations) ed only on a part-time basis under eain network programs [sections	G
76.59(d)(2) and (4), 76.66 substitute program basis, Substitute Basis Sta	1(e)(2) and (, as explaine tions: With	4), or 76.63 (d in the next respect to an	referring to 76.6 paragraph. y distant station	51(e)(2) and (4))];	and (2) certain stations carried on a cable system on a substitute program	Primary Transmitters: Television
 basis under specifc FCC Do not list the station he station was carried on 	ere in space	G—but do lis		ne Special Statem	ent and Program Log)—if the	
 List the station here, and basis. For further infor in the paper SA3 form 	d also in spa rmation conc	ce I, if the state erning substi	tute basis statio	ns, see page (v) o	tute basis and also on some other of the general instructions located	
each multicast stream as	sociated with	n a station ac	cording to its ov	er-the-air designa	es such as HBO, ESPN, etc. Identify ation. For example, report multich stream separately; for example	
Column 2: Give the c			-		ion for broadcasting over-the-air in may be different from the channel	
	each case v	whether the s			ependent station, or a noncommercial cast), "I" (for independent), "I-M"	
(for independent multicas For the meaning of these	st), "E" (for no e terms, see p	oncommercia page (v) of th	al educational), d e general instru	or "E-M" (for nonc ctions located in t	ommercial educational multicast).	
-	e entered "Ye	es" in column	4, you must co	mplete column 5,	e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	
of a written agreement er	n of a distant ntered into or	multicast str n or before Ju	eam that is not s une 30, 2009, be	subject to a royalt etween a cable sy	y payment because it is the subject stem or an association representing	
tion "E" (exempt). For sime explanation of these three	nulcasts, also e categories,	o enter "E". If , see page (v	you carried the of the general	channel on any o		
	nadian statio	ns, if any, giv	e the name of the	he community with	y to which the station is licensed by the n which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AM		
1. CALL 2.	B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **AVENUE BROADBAND COMMUNICATIONS, LLC** 6623 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. **Transmitters:** Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program **Television** basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AN 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM I	D#			
AVENUE BROA	ADBAND CO	MMUNICA	TIONS, LLC		66	Name			
PRIMARY TRANSMITT	ERS: TELEVISI	ON							
carried by your cable	system during t	he accounting	g period, except	(1) stations carrie	s and low power television stations) ed only on a part-time basis under tain network programs [sections	G			
76.59(d)(2) and (4), 76 substitute program ba	6.61(e)(2) and (sis, as explaine	(4), or 76.63 (ed in the next	referring to 76.6 paragraph.	61(e)(2) and (4))];	and (2) certain stations carried on a cable system on a substitute program	Primary Transmitters: Television			
 basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. 									
• List the station here,	and also in spa nformation cond	ace I, if the sta			tute basis and also on some other of the general instructions located				
each multicast stream cast stream as "WETA	associated wit	h a station ac	cording to its ov	er-the-air designa	es such as HBO, ESPN, etc. Identify ation. For example, report multich stream separately; for example				
			-		tion for broadcasting over-the-air in may be different from the channel				
on which your cable sy Column 3: Indicate	ystem carried the in each case	he station. whether the s	tation is a netwo	ork station, an ind	ependent station, or a noncommercial cast), "I" (for independent), "I-M"				
(for independent multi For the meaning of the	cast), "E" (for n ese terms, see	noncommercia page (v) of th	al educational), o ne general instru	or "E-M" (for nonc ections located in t	ommercial educational multicast).				
planation of local serv Column 5: If you h	ice area, see p ave entered "Y	age (v) of the 'es" in columr	general instruct a 4, you must co	tions located in th mplete column 5,					
	sion of a distan	t multicast str	eam that is not	subject to a royalt	capacity. y payment because it is the subject stem or an association representing				
tion "E" (exempt). For	simulcasts, als	o enter "E". If	you carried the	channel on any o	ary transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form.				
Column 6: Give th	e location of ea Canadian statio	ach station. Fo ons, if any, giv	or U.S. stations, re the name of t	list the communit he community with	y to which the station is licensed by the hy which the station is identifed.				
		CHANN	EL LINE-UP	AO					
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION				
SIGN	CHANNEL NUMBER		(Yes or No)	CARRIAGE (If Distant)	o. Looming of Gimien				
				•					

LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#				
AVENUE BROA	ADBAND CO	MMUNICA	TIONS, LLC		6623	Name			
PRIMARY TRANSMITT	ERS: TELEVISI	ON							
carried by your cable	system during t	he accounting	g period, except	(1) stations carrie	s and low power television stations) ed only on a part-time basis under tain network programs [sections	G			
76.59(d)(2) and (4), 76 substitute program ba	6.61(e)(2) and easis, as explaine	(4), or 76.63 (ed in the next	referring to 76.6 paragraph.	61(e)(2) and (4))];	and (2) certain stations carried on a	Primary Transmitters: Television			
 Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. 									
• List the station here,	and also in spa nformation cond	ace I, if the st			tute basis and also on some other of the general instructions located				
Column 1: List each multicast stream	ch station's call associated wit	h a station ac	cording to its ov	er-the-air designa	es such as HBO, ESPN, etc. Identify ation. For example, report multich stream separately; for example				
WETA-simulcast). Column 2: Give th	e channel num	ber the FCC	has assigned to	the television stat	tion for broadcasting over-the-air in smay be different from the channel				
on which your cable sy Column 3: Indicate	ystem carried the in each case	he station. whether the s	tation is a netwo	ork station, an inde	ependent station, or a noncommercial cast), "I" (for independent), "I-M"				
(for independent multi For the meaning of the	cast), "E" (for r ese terms, see	noncommercia page (v) of th	al educational), one general instru	or "E-M" (for nonc ections located in t	ommercial educational multicast).				
planation of local serv Column 5: If you h	ice area, see p ave entered "Y	age (v) of the es" in columr	general instruc n 4, you must co	tions located in the mplete column 5,					
carried the distant state For the retransmiss	tion on a part-ti sion of a distan	me basis bec t multicast str	ause of lack of a eam that is not	activated channel subject to a royalt	, ,				
the cable system and tion "E" (exempt). For	a primary trans simulcasts, als	mitter or an a o enter "E". If	ssociation repression you carried the	esenting the prima channel on any o	ary transmitter, enter the designa- other basis, enter "O." For a further ed in the paper SA3 form.				
Column 6: Give th	e location of ea Canadian statio	ach station. Fo ons, if any, giv	or U.S. stations, re the name of t	list the communit he community with	y to which the station is licensed by the h which the station is identifed.				
		•	EL LINE-UP	•					
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION				
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)					

LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM I	D#
AVENUE BROA	ADBAND CO	MMUNICA	TIONS, LLC		66	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable	system during t	he accounting	g period, except	(1) stations carrie	s and low power television stations) ed only on a part-time basis under tain network programs [sections	G
76.59(d)(2) and (4), 76 substitute program ba	6.61(e)(2) and (sis, as explaine	(4), or 76.63 (ed in the next	referring to 76.6 paragraph.	61(e)(2) and (4))];	and (2) certain stations carried on a cable system on a substitute program	Primary Transmitters: Television
basis under specifc F0Do not list the station station was carried	n here in space	G—but do lis		ne Special Statem	ent and Program Log)—if the	
• List the station here,	and also in spa nformation cond	ace I, if the sta			tute basis and also on some other of the general instructions located	
each multicast stream cast stream as "WETA	associated wit	h a station ac	cording to its ov	er-the-air designa	es such as HBO, ESPN, etc. Identify ation. For example, report multich stream separately; for example	
			-		tion for broadcasting over-the-air in may be different from the channel	
on which your cable sy Column 3: Indicate	ystem carried the in each case	he station. whether the s	tation is a netwo	ork station, an ind	ependent station, or a noncommercial cast), "I" (for independent), "I-M"	
(for independent multi For the meaning of the	cast), "E" (for n ese terms, see	noncommercia page (v) of th	al educational), o ne general instru	or "E-M" (for nonc ections located in t	commercial educational multicast).	
planation of local serv Column 5: If you h	ice area, see p ave entered "Y	age (v) of the 'es" in columr	general instruct a 4, you must co	tions located in th mplete column 5,		
	sion of a distan	t multicast str	eam that is not	subject to a royalt	capacity. y payment because it is the subject stem or an association representing	
tion "E" (exempt). For	simulcasts, als	o enter "E". If	you carried the	channel on any o	ary transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form.	
Column 6: Give th	e location of ea Canadian statio	ach station. Fo ons, if any, giv	or U.S. stations, re the name of t	list the communit he community with	y to which the station is licensed by the hy which the station is identifed.	
		CHANN	EL LINE-UP	AQ		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER		(Yes or No)	CARRIAGE (If Distant)	o. Looming of Change	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **AVENUE BROADBAND COMMUNICATIONS, LLC** 6623 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. **Transmitters:** Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program **Television** basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AR 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM I	D#
AVENUE BROA	ADBAND CO	MMUNICA	ATIONS, LLC		662	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable	system during t	he accounting	g period, except	(1) stations carrie	s and low power television stations) ed only on a part-time basis under tain network programs [sections	G
76.59(d)(2) and (4), 76 substitute program ba Substitute Basis \$	6.61(e)(2) and e sis, as explaine Stations: With	(4), or 76.63 (ed in the next respect to an	referring to 76.6 paragraph. by distant station	61(e)(2) and (4))];	and (2) certain stations carried on a cable system on a substitute program	Primary Transmitters: Television
basis under specifc F0Do not list the station station was carried	n here in space	G—but do lis		ne Special Statem	ent and Program Log)—if the	
 List the station here, basis. For further in in the paper SA3 for 	and also in spanformation concorm.	ace I, if the sta cerning subst	itute basis statio	ons, see page (v)	tute basis and also on some other of the general instructions located	
each multicast stream cast stream as "WETA	associated wit	h a station ac	cording to its ov	er-the-air designa	es such as HBO, ESPN, etc. Identify ation. For example, report multich stream separately; for example	
			-		tion for broadcasting over-the-air in a may be different from the channel	
	e in each case	whether the s			ependent station, or a noncommercial cast), "I" (for independent), "I-M"	
(for independent multi For the meaning of the	cast), "E" (for r ese terms, see	noncommercia page (v) of th	al educational), one general instru	or "E-M" (for nonc ections located in t	ommercial educational multicast).	
-	ave entered "Y	es" in column	n 4, you must co	mplete column 5,	e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	
of a written agreemen	sion of a distan t entered into o	t multicast str n or before Ju	eam that is not s une 30, 2009, be	subject to a royalt etween a cable sy	y payment because it is the subject stem or an association representing	
tion "E" (exempt). For explanation of these the	simulcasts, als	so enter "E". If s, see page (v	you carried the of the general	channel on any o	ary transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form.	
	Canadian statio	ons, if any, giv	ve the name of t	he community wit	y to which the station is licensed by the handle ha	
		CHANN	EL LINE-UP	AS		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		

LEGAL NAME OF OWN	NER OF CABLE S	/STEM:			SYSTEM ID#	!
AVENUE BROA	ADBAND CO	MMUNICA	ATIONS, LLC		6623	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable	system during t	he accounting	g period, except	(1) stations carrie	s and low power television stations) ed only on a part-time basis under tain network programs [sections	G
76.59(d)(2) and (4), 76 substitute program ba	6.61(e)(2) and sis, as explaine	(4), or 76.63 (ed in the next	referring to 76.6 paragraph.	61(e)(2) and (4))];	and (2) certain stations carried on a cable system on a substitute program	Primary Transmitters: Television
basis under specifc F0	CC rules, regul n here in space	ations, or autl G—but do lis	horizations:		ent and Program Log)—if the	
• List the station here,	and also in spanformation con	ace I, if the st			itute basis and also on some other of the general instructions located	
Column 1: List each multicast stream	ch station's call associated wit	h a station ac	cording to its ov	er-the-air designa	es such as HBO, ESPN, etc. Identify ation. For example, report multi- ch stream separately; for example	
WETA-simulcast). Column 2: Give th	e channel num	ber the FCC	has assigned to	the television sta	tion for broadcasting over-the-air in smay be different from the channel	
on which your cable sy Column 3: Indicate	ystem carried to e in each case	he station. whether the s	tation is a netwo	ork station, an ind	ependent station, or a noncommercial cast), "I" (for independent), "I-M"	
(for independent multi For the meaning of the	cast), "E" (for r ese terms, see	noncommercia page (v) of th	al educational), one general instru	or "E-M" (for nonc ections located in t	commercial educational multicast).	
planation of local serv Column 5: If you h	ice area, see p ave entered "Y	age (v) of the es" in columr	general instruc n 4, you must co	tions located in th mplete column 5,		
carried the distant state For the retransmiss	tion on a part-ti sion of a distan	me basis bec t multicast str	ause of lack of a eam that is not	activated channel subject to a royalt	, ,	
the cable system and tion "E" (exempt). For	a primary trans simulcasts, als	mitter or an a o enter "E". If	association repre	esenting the prima channel on any o	ary transmitter, enter the designa- other basis, enter "O." For a further ed in the paper SA3 form.	
Column 6: Give th	e location of ea Canadian statio	ach station. Fo ons, if any, giv	or U.S. stations, ve the name of t	list the communit he community with	ty to which the station is licensed by the handle had been station is identifed.	
		•	EL LINE-UP	•		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		-

LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	
AVENUE BROA	ADBAND CO	MMUNICA	TIONS, LLC		6623	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable	system during t	he accounting	g period, except	(1) stations carrie	s and low power television stations) ed only on a part-time basis under tain network programs [sections	G
76.59(d)(2) and (4), 76 substitute program ba	6.61(e)(2) and easis, as explaine	(4), or 76.63 (ed in the next	referring to 76.6 paragraph.	61(e)(2) and (4))];	and (2) certain stations carried on a	Primary Transmitters: Television
basis under specifc F0	CC rules, regul n here in space	ations, or autl G—but do lis	norizations:		ent and Program Log)—if the	
• List the station here,	and also in spa nformation cond	ace I, if the st			tute basis and also on some other of the general instructions located	
Column 1: List each multicast stream	ch station's call associated wit	h a station ac	cording to its ov	er-the-air designa	es such as HBO, ESPN, etc. Identify ation. For example, report multich stream separately; for example	
WETA-simulcast). Column 2: Give th	e channel num	ber the FCC	has assigned to	the television stat	tion for broadcasting over-the-air in smay be different from the channel	
on which your cable sy Column 3: Indicate	ystem carried the in each case	he station. whether the s	tation is a netwo	ork station, an inde	ependent station, or a noncommercial cast), "I" (for independent), "I-M"	
(for independent multi For the meaning of the	cast), "E" (for r ese terms, see	noncommercia page (v) of th	al educational), one general instru	or "E-M" (for nonc ections located in t	ommercial educational multicast).	
planation of local serv Column 5: If you h	ice area, see p ave entered "Y	age (v) of the es" in columr	general instruc a 4, you must co	tions located in the mplete column 5,		
carried the distant state For the retransmiss	tion on a part-ti sion of a distan	me basis bec t multicast str	ause of lack of a eam that is not	activated channel subject to a royalt	, ,	
the cable system and tion "E" (exempt). For	a primary trans simulcasts, als	mitter or an a o enter "E". If	ssociation repression you carried the	esenting the prima channel on any o	ary transmitter, enter the designa- other basis, enter "O." For a further ed in the paper SA3 form.	
Column 6: Give th	e location of ea Canadian statio	ach station. Fo ons, if any, giv	or U.S. stations, re the name of t	list the communit he community with	y to which the station is licensed by the h which the station is identifed.	
		•	EL LINE-UP	•		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		

LEGAL NAME OF OWN	NER OF CABLE SY	YSTEM:			SYSTEM I	D#
AVENUE BRO	ADBAND CO	OMMUNICA	TIONS, LLC		662	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable	system during t	he accounting	g period, except	(1) stations carrie	s and low power television stations) ed only on a part-time basis under tain network programs [sections	G
76.59(d)(2) and (4), 70 substitute program ba	6.61(e)(2) and easies, as explaine	(4), or 76.63 (ed in the next	referring to 76.6 paragraph.	61(e)(2) and (4))];	and (2) certain stations carried on a cable system on a substitute program	Primary Transmitters: Television
basis under specifc F0Do not list the station station was carried	n here in space	G—but do lis		ne Special Statem	ent and Program Log)—if the	
• List the station here,	and also in spa nformation cond	ace I, if the st			tute basis and also on some other of the general instructions located	
each multicast stream cast stream as "WETA	associated wit	h a station ac	cording to its ov	er-the-air designa	es such as HBO, ESPN, etc. Identify ation. For example, report multich stream separately; for example	
			-		tion for broadcasting over-the-air in may be different from the channel	
	e in each case	whether the s			ependent station, or a noncommercial cast), "I" (for independent), "I-M"	
(for independent multi For the meaning of the	cast), "E" (for r ese terms, see	noncommercia page (v) of th	al educational), d le general instru	or "E-M" (for nonc ections located in t	ommercial educational multicast).	
planation of local serv Column 5: If you h	rice area, see p nave entered "Y	age (v) of the 'es" in columr	general instruct 4, you must co	tions located in th mplete column 5,		
	sion of a distan	t multicast str	eam that is not	subject to a royalt	capacity. y payment because it is the subject stem or an association representing	
tion "E" (exempt). For	simulcasts, als	so enter "E". If	you carried the	channel on any o	ary transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form.	
Column 6: Give th	e location of ea Canadian station	ach station. Fo ons, if any, giv	or U.S. stations, e the name of t	list the communit he community with	y to which the station is licensed by the hy which the station is identifed.	
		CHANN	EL LINE-UP	AV		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER		(Yes or No)	CARRIAGE (If Distant)	o. Looming of Girmon	

LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	
AVENUE BROA	ADBAND CO	MMUNICA	ATIONS, LLC		6623	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable s	system during t	he accounting	g period, except	(1) stations carrie	s and low power television stations) ed only on a part-time basis under tain network programs [sections	G
76.59(d)(2) and (4), 76	6.61(e)(2) and	(4), or 76.63 (referring to 76.6	•	and (2) certain stations carried on a	Primary
substitute program ba Substitute Basis \$				s carried by your	cable system on a substitute program	Transmitters: Television
basis under specifc F0	CC rules, regul	ations, or autl	horizations:			
station was carried	•		st it in space i (tr	ie Speciai Statem	ent and Program Log)—if the	
	nformation con				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	
WETA-simulcast). Column 2: Give th	e channel num	ber the FCC	has assigned to	the television sta	tion for broadcasting over-the-air in	
its community of licens	se. For exampl	e, WRC is Ch	-		s may be different from the channel	
on which your cable sy Column 3: Indicate			tation is a netwo	ork station, an ind	ependent station, or a noncommercial	
-	-	•	,	•	cast), "I" (for independent), "I-M"	
For the meaning of the	ese terms, see	page (v) of th	ne general instru	ctions located in t		
					es". If not, enter "No". For an ex-	
planation of local serv Column 5: If you h					stating the basis on which your	
cable system carried t carried the distant stat		-		•	tering "LAC" if your cable system	
For the retransmiss	sion of a distan	t multicast str	eam that is not	subject to a royalt	y payment because it is the subject	
_				•	stem or an association representing ary transmitter, enter the designa-	
tion "E" (exempt). For	simulcasts, als	o enter "E". If	you carried the	channel on any c	other basis, enter "O." For a further	
					ed in the paper SA3 form. by to which the station is licensed by the	
FCC. For Mexican or	Canadian statio	ons, if any, giv	ve the name of t	he community wit	h which the station is identifed.	
Note: If you are utilizing	ng multiple cha	nnel line-ups,	, use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AW		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
	NOMBER	OTATION		(II Distant)		1
						"
						"

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 6623 AVENUE BROADBAND COMMUNICATIONS, LLC 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. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary 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** AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION FORM SA3E. PAGE 5. ACCOUNTING PERIOD: 2019/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: AVENUE BROADBAND COMMUNICATIONS, LLC							SYSTEM ID# 6623				
SUBSTITUTE CARRIAGE	E- SDECIA	I STATEME	NT AND PROGRAM LO	3							
In General: In space I, ident substitute basis during the a explanation of the programm form.	ify every no ccounting pe	nnetwork televi eriod, under spe	sion program broadcast by ecific present and former F0	a distant stati CC rules, regu	ılations, or author	izations.	. For a further	Substitute			
1. SPECIAL STATEMENT	CONCER	NING SUBST	TITUTE CARRIAGE					Carriage:			
During the accounting per broadcast by a distant stat	-	ır cable system	n carry, on a substitute bas	is, any nonne		progran Yes		Special Statement and Program Log			
Note: If your answer is "No log in block 2. 2. LOG OF SUBSTITUTE			ge blank. If your answer is	"Yes," you m	ust complete the	prograi	m				
period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love L Column 2: If the program Column 3: Give the call Column 4: Give the broathe case of Mexican or Car 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."	ice, please of every no distant state gulations, cution. Do not be ucey" or "NE in was broad sign of the educast stationadian stationation and day we "5/7." es when the Example: a cut in and regulation of the education of the education in the e	attach addition nnetwork televion and that your authorization of use general as A Basketball: deast live, enterstation broadcaton's location (thous, if any, the when your system of a program carrolisted program ons in effect described and the station broadcaton's location (the when your system).	rision program (substitute pour cable system substitute pour cable system substitute is. See page (vi) of the gencategories like "movies", or 76ers vs. Bulls." or "Yes." Otherwise enter "Pasting the substitute programe community to which the community with which the tem carried the substitute or gram was carried by your fied by a system from 6:01:	program) that ed for the program of the program of the program. We station is lice the program. Use the program of the program	ensed by the FCG entified). List the times a 28:30 p.m. should your system was etter "P" if the list	ounting other stands paper rogram C or, in the more accurated be a required ted pro	ntion nth				
S	UBSTITUT	E PROGRAM	1		EN SUBSTITUTI		7. REASON				
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES		FOR DELETION				
					_						
					_						
					_						
					_						
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					_						

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name AVENUE BROADBAND COMMUNICATIONS, LLC 6623 **PART-TIME CARRIAGE LOG** In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-J time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in **Part-Time** column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred 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 FROM FROM** TO DATE TO DATE

LEGA	L NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Name
AVE	NUE BROADBAND COMMUNICATIONS, LLC		6623	Name
Inst all a (as i	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount mounts (gross receipts) paid to your cable system by subscribers for the system's second dentified in space E) during the accounting period. For a further explanation of how to be (vii) of the general instructions.	ondary transmission	on service	K Gross Receipts
	Gross receipts from subscribers for secondary transmission service(s)	_		
	during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	\$ (Amount of gr	920,164.39 ross receipts)	
InstructionCommonIf you fee for the second of the second of	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: plete block 1, showing your minimum fee. plete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the arrom block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable pampanying this form and attach the schedule to your statement of account.			L Copyright Royalty Fee
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b	e entered on line	1 of	
▶ If pa	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be	entered on line 2 i	n block	
	ow. rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be entered on	line	
1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K			
	Line 2. Multiply the amount in line 1 by 0.01064		020,104100	
	Enter the result here. This is your minimum fee.	C	9,790.55	
	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. No—Leave block 3 below blank and continued to the proper	nn 4, you must ch	eck	
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	\$	1,719.32	
	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	\$	1,719.32	
4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$	9,790.55	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 zero.	r	0.00	submitting additional deposits under
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	Section 111(d)(7) should contact the Licensing
	Line 4. FILING FEE	\$	725.00	additional fees. Division for the appropriate
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	10,515.55	form for submitting the
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See page (i) of the	e 	additional fees.

ACCOUNTING PERIOD: 2019/2
FORM SA3E. PAGE 8.

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	AVENUE BROADBAND COMMUNICATIONS, LLC	6623
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	
Channels	Enter the total number of channels on which the cable system carried television broadcast stations	
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
Be Contacted for Further Information	Name EMERSON YEARWOOD Telephone 602-364-6195	
	Address 210 E. EARLL DRIVE (Number, street, rural route, apartment, or suite number)	
	PHOENIX, AZ 85012 (City, town, state, zip)	
	Email emerson.yearwood@cableone.biz Fax (optional) 602-364-6013	
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)	
O Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.	em
	• I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	
	X /s/ RAYMOND STORCK	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	: "F2"
	Typed or printed name: RAYMOND STORCK	
	Title: VICE PRESIDENT (Title of official position held in corporation or partnership)	
	Date: February 27, 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 this 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.

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	STEM ID#	
AVENUE BROADBAND COMMUNICATIONS, LLC	6623	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include s scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmission made by satellite carriers to satellite dish owners? X NO	ub-	Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Name Mailing Address		
INTEREST ACCECOMENTS		
INTEREST ASSESSMENTS You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment for an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	nt.	Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- days	
Line 3 Multiply line 2 by the number of days late and enter the sum here		
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,		
space L, (page 7)	 rge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assistance plea contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	,	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.	al	
Owner Address		
First community served		
Accounting period ID number		
ID HUITIDE		

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 this 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

DSE SCHEDULE, PAGE 11. (CONTINUED)

	1				01	/OTEN 10 "
1	LEGAL NAME OF OWNER OF CABL				51	STEM ID#
•	AVENUE BROADBAND	COMMUNICA	ATIONS, LLC			6623
	SUM OF DSEs OF CATEGOR	RY "O" STATION	NS:			
	Add the DSEs of each station					
	Enter the sum here and in line		s schedule.		0.25	
2	Instructions:	Sieum?!. liet the ee	Il aigna of all distant stations	idontifical by th	a letter "O" in column F	
_	In the column headed "Call Sof space G (page 3).	sign: list the ca	il signs of all distant stations	s identified by t	ne letter O in column 5	
Computation	In the column headed "DSE"	: for each indep	endent station, give the DSF	as "1.0": for e	each network or noncom-	
of DSEs for	mercial educational station, give					
Category "O"	7.6		CATEGORY "O" STATION	NS: DSEs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	WEIU	0.250			51.1251511	
	***	0.200				
Add rows as						
necessary.						
Remember to copy						(*************************************
all formula into new						
rows.						
	,					
l		I				Ī

,			= 111111111111111111111111111111111111

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

Name	AVENUE BROADBAND COMMUNICATIONS, LLC							YSTEM ID# 6623
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.							
Capacity	CATEGORY LAC STATIONS: COMPUTATION OF DSEs							
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEN	JRS OF	IMBER HOURS ATION I AIR	4. BASIS OF CARRIAGE VALUE	5. TYPE VALUE	6. DS	E
			÷	=		x	=	
			÷			<u>x</u>	<u> </u>	
			÷	=		x x	=	
			-	=		x	=	
			÷	=		X	=	
			÷ ÷	=		x x	=	
	SUM OF DSEs OF CATEGORY LAC STATIONS: Add the DSEs of each station. Enter the sum here and in line 2 of part 5 of this schedule,							
Computation of DSEs for Substitute-Basis Stations	 Instructions: Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station: Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulartions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I). Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I. Column 3: Enter the number of days in the calendar year: 365, except in a leap year. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form). 							
	SUBSTITUTE-BASIS STATIONS: COMPUTATION OF DSEs							
	1. CALL 2. NUMBER		3. NUMBER	4. DSE	1. CALL	2. NUMBER	3. NUMBER	4. DSE
	SIGN	OF PROGRAMS	OF DAYS IN YEAR		SIGN	OF PROGRAMS	OF DAYS IN YEAR	
		÷				÷	INTEAN	=
		<u>.</u>				÷		=
		÷				÷		=
						÷		=
		-	=			÷		=
	Add the DSEs of	OF SUBSTITUTE-BASI of each station. on here and in line 3 of pa		,		0.00		
5	TOTAL NUMBER OF DSEs: Give the amounts from the boxes in parts 2, 3, and 4 of this schedule and add them to provide the total number of DSEs applicable to your system.							
Total Number	1. Number of DSEs from part 2 ●							
of DSEs	2. Number of DSEs from part 3 ●							
	3. Number of DSEs from part 4 ● D.00							
	TOTAL NUMBER	R OF DSEs				 ►		0.25

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

LEGAL NAME OF O	WNER OF CABLE S	SYSTEM:					S	YSTEM ID#	
AVENUE BRO	ADBAND COM	MUNICAT	IONS, LLC					6623	Name
Instructions: Bloc	ck A must be comp	leted.							
 If your answer if 	"Yes," leave the re	mainder of pa	art 6 and part 7	of the DSE sched	lule blank and	complete part	8, (page 16) of th	е	6
schedule. If your answer if	"No," complete blo	cks B and C	below.						
			BLOCK A: 7	TELEVISION MA	ARKETS				Computation of 3.75 Fee
effect on June 24,			·				CC rules and regu	lations in	0.70100
<u>=</u>	plete part 8 of the solete blocks B and		O NOT COMP	LETE THE REMAI	NDER OF PA	RI 6 AND 7.			
No—Comp	nete blocks B and	C below.							
		BLO	CK B: CARR	IAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN	under FCC rules	and regulation	ons prior to Jun dule. (Note: Th	part 2, 3, and 4 of t e 25, 1981. For fur e letter M below re Act of 2010.)	ther explanati	ion of permitte	d stations, see the		
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carried 76.61(b)(c)] B Specialty station C Noncommerication D Grandfathered instructions for E Carried pursuation *F A station previous and the previous and the pursuation is the previous and the pre	les and reguled pursuant to as defined al educational station (76.6 r DSE schedant to individuviously carrier HF station w	lations cited be to the FCC mar I in 76.5(kk) (76 I station [76.59 55) (see paragiule). Jual waiver of FC d on a part-tim tithin grade-B c	e or substitute bas ontour, [76.59(d)(5	e in effect on .57, 76.59(b),)(1), 76.63(a) 3(a) referring stitution of gra-	June 24, 1981 76.61(b)(c), 76 referring to 76 to 76.61(d)] andfathered state	6.63(a) referring to		
Column 3:		stations ide	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			rksheet on page 1	I4 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
								0.00	
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of	DSEs from _I	part 5 of this	schedule					
Line 2: Enter the	sum of permitted	d DSEs fron	n block B abo	ve			IF.		
	line 2 from line 1 eave lines 4–7 bl			-		ate.	ı <u>. </u>		
Line 4: Enter gro	oss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ine 4 by 0.0375 a	nd enter su	m here						permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	Es from line	3				x		carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 and	d enter here	e and on line 2	2, block 3, space	L (page 7)			0.00	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:

	ADBAND CON		TIONS, LLC	;				6623	N
	1			SION MARKETS					6
 1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	Computation of 3.75 Fee

Name	AVENUE BROA			ONS, LLC					S	4STEM ID: 6623	
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried prior Column 1: List the or Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the Formal A—Part-time spinal Telephone) To 6.59 B—Late-night prior To 6.61 S—Substitute car gener Column 5: Indicate Column 6: Compare in block	or to June 25, call sign for eathe DSE for the accounting the basis of call the call the programming: (d)(1),76.61(erogramming: (e)(3)). Carriage under all instructions the station's Eathe DSE figures B, column 3 call information you information you information you information the station's call the basis information you in	1981, under form ach distant station for a sign period and yea arriage on which regulations cited mming: Carriage, (1), or 76.63 (recentain FCC rules in the paper SAC DSE for the curre ares listed in column per form of part 6 for this second give in column a Licensing Division.	er FCC rules gover identifed by the ingle accounting in which the care the station was obelow pertain to on a part-time bearing to 76.61(e) CC rules, section as, regulations, or a form. In accounting perms 2 and 5 and station.	ver let per ria carritho asi e)(1 s 7 au lis	76.59(d)(3), 76.61(e)(3) thorizations. For furthed as computed in parts the smaller of the two be accurate and is subject to the subject to t	stitute carria part 6 of the n January 1, (e.g., 1981/ e following I 1, 1981.) ming under , or 76.63 (r r explanation 2, 3, and 4 of figures her ect to verifor	age.) DSE schedule, 1978 and Jun 1). etters: FCC rules, se referring to on, see page (v of this schedu e. This figure s	e 30, 19 ections i) of the	81. e entered	
	1. CALL	PERMITT 2. PRIC			ED	ON A PART-TIME AN		TUTE BASIS RESENT	6 D	ERMITTED	
	1. CALL SIGN	2. PRIC DSE		CCOUNTING PERIOD		4. BASIS OF CARRIAGE		DSE	6. P	DSE	
Computation of the Syndicated Exclusivity Surcharge		"Yes," comple "No," leave bl	ete blocks B and ocks B and C bla BLO0	nk and complete	TI	art 8 of the DSE schedone ELEVISION MARK et as defined by section	ET	rules in effect	June 24,	1981?	
	X Yes—Complete	blocks B and	C .			No—Proceed to	part 8				
	BLOCK B: Ca	arriage of VHF	-/Grade B Conto	ur Stations		BLOCK	C: Compu	itation of Exem	not DSEs	•	
	Is any station listed in commercial VHF stati or in part, over the ca	block B of pa on that places	ort 6 the primary s	tream of a		Was any station listed nity served by the cab to former FCC rule 76	I in block B le system p	of part 7 carrie	ed in any	commu-	
	Yes—List each st		h its appropriate popart 8.	ermitted DSE		Yes—List each st X No—Enter zero a			ate permi	tted DSE	
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	SN	DSE	
							-				
							-				
					$\left\{ \ \right $						
		<u> </u>	TOTAL DSEs	0.00	1		<u> </u>	TOTAL DS	SEs	0.00	

ACCOUNTING PERIOD: 2019/2

DSF SCHEDULE PAGE 16

Name		ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	4	AVENUE BROADBAND COMMUNICATIONS, LLC	6623
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)	
of the Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$	
Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ \$	
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here	
		F. Multiply line D by line E and enter here	
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)	
		Syndicated Exclusivity Surcharge	<u></u>
	Inctric	ctions:	
8	You m	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of pachecked "Yes," use the total number of DSEs from part 5.	art
	• In blo	ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation of	1	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 bel	OW
Base Rate Fee	blank		O W
		is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "loc	ol.
		e area," see page (v) of the general instructions.	aı
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	_	rour cable system retransmit the signals of any partially distant television stations during the accounting period?	
	L	Yes—Complete part 9 of this schedule. No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶\$	
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	
	Section		
	3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts (the amount in section 1)▶ _\$	
		B. Enter 0.00701 of gross receipts	
		(the amount in section 1)	
		C. Subtract 1.000 from total DSEs	
		(the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	
		E. Add lines A, and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7)	0.00
		Base Rate Fee	0.00

U.S. Copyright Office

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2019/2

	AME OF OWNER OF CABLE SYSTEM: UE BROADBAND COMMUNICATIONS, LLC	SYSTEM ID# 6623	Name
	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4	A. Enter 0.01064 of gross receipts (the amount in section 1) **State of the image		8
	B. Enter 0.00701 of gross receipts (the amount in section 1) \$		Computation
	C. Multiply line B by 3.000 and enter here \$	<u> </u>	Base Rate Fee
	D. Enter 0.00330 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here \$		
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee	0.00	
IMPOR	TANT: It is no longer personally to report tolevision signals on a system wide basis. Carriage of tolevision brees	locat signala	
shall in	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broad stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple Space G.	-	9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate f s from subscribers located within the station's local service area, from your system's total gross receipts. To take		Computation
	clusion, you must:	· ·	of Base Rate Fee
station DSEs a	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determinant the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee at add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	ne the number of	and Syndicated Exclusivity Surcharge
NOTE: must a	If any portion of your cable system is located within the top 100 television market and the station is not exempt i so compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A are, if your cable system is wholly located outside all major television markets, complete block A only.		for Partially Distant Stations, and
	Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
-	For each community served, determine the local service area of each wholly distant and each partially distant s to that community.	tation you	Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were the station's local service area. A subscriber located outside the local service area of a station is distant to that ne token, the station is distant to the subscriber.)		
Step 3 subscr	Divide your subscribers into subscriber groups according to the complement of stations to which they are distart ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
-	Iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your sber groups.	ystem's	
	section:		
	fy 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	
subscr	bers in the group.		
• If: 1) your	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave	it in parts 2_3	
and 4 of 2) any	ortion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in	•	
•	6 of this schedule.		
	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.	al instructions	
in the	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general paper SA3 form.		
page.	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group for that group's complement of stations and total gross receipts from the subscribers in that group). You do not r	(that is, the total	

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your actual calculations on the form.

LEGAL NAME OF OWNE AVENUE BROADE			LLC			S	6623	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GROU	Р		SECONE	SUBSCRIBER GROU	JP	^
COMMUNITY/ AREA	VERMIL	LION AND IROQ	JOIS CO	COMMUNITY/ ARE	A EDGAR	COUNTY		9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
WEIU	0.25							Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Γotal DSEs			0.25	Total DSEs		11	0.00	
Total DSES							_	
Gross Receipts First G	roup	\$ 646	,361.82	Gross Receipts Sec	ond Group	\$ 2	273,802.57	
Base Rate Fee First G	roup	\$ 1	,719.32	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	Р		FOURTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Proup.	•	0.00	Gross Receipts Fou	rth Group	c	0.00	
orosa Neceipia Tilliu e	J. Oup	<u>*</u>	<u> </u>	TOTOSS Neceipis Fou	rai Oloup	\$	J.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				<u> </u>				
Base Rate Fee: Add th Enter here and in block			iber group a	as shown in the boxes	above.	\$	1,719.32	

		BER GROUP	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (
	Р	SUBSCRIBER GROU				SUBSCRIBER GROU		
9	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computa of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate	DOL	O'NEE GIGIT	DOL	CALL GIGIT		CALL GIGIT	DOL	CALL GIGIN
and						-		
Syndica								
Exclusiv								
Surcha								
for								
Partial			-					
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Otation						-		
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	ross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oun	ase Rate Fee First Gr
	0.00	Ψ		Dago Mato 1 00 000011				400 Mato 1 00 Mat 61
	Р	SUBSCRIBER GROU	EIGHTH		IP	SUBSCRIBER GROU	SEVENTH	5
	O_			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
			-					
							•	
					1	``		
						-		
	0.00			Total DSEs	0.00			otal DSEs
	0.00			Total DSEs	0.00			
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	roup	
		\$	Group			\$	roup	Total DSEs Gross Receipts Third G

LEGAL NAME OF OWNER AVENUE BROADB			, LLC		SYSTEM ID# 6623		Name			
В	LOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EACH	TE FEES FOR EACH SUBSCRIBER GROUP					
		SUBSCRIBER GRO				SUBSCRIBER GROUP)			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
	<mark></mark>					_		Syndicated		
						_		Exclusivity		
								Surcharge		
								for		
	<mark></mark>						<u></u>	Partially Distant		
								Stations		
		—								
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00			
FI	I EVENTH	SUBSCRIBER GRO	IP		TWELVTH	SUBSCRIBER GROUP				
COMMUNITY/ AREA		- CODOGNIBLIN GNO	0	COMMUNITY/ AREA			0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
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		_				_				
Total DSEs			0.00	Total DSEs	•		0.00			
Gross Receipts Third G	roup		0.00	Gross Receipts Fourth	Group	\$	0.00			
	\ F				- -					
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00			
				П						
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	bove.	\$				

			TE FEEO FOO F 4 O' '	COMPUTATION OF BASE RAT			<u> </u>	
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9 Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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and						-		
Syndica								
Exclusiv								
Surcha								
for								
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	ase Rate Fee First Gr
	P	SUBSCRIBER GROU	SIXTEENTH	S	 JP	SUBSCRIBER GROU	TEENTH	FIF
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	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			Total DSEs
	0.00			Total DSEs	0.00			
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	roup	
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		\$			0.00	\$	·	

F	BLOCK A: COMPUTATION OF BASE RA							
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
								Syndicate
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								for
								Partially
								Distant
								Stations
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
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ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	and Group	\$	0.00	
		Ψ	0.00	Base Nate 1 ee 3ec	она Огоар	a	0.00	
N	NTEENTH	SUBSCRIBER GROU	JP		TWENTIETH	SUBSCRIBER GRO	UP	
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		П				II		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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otal DSEa			0.00	Total DSEs			0.00	
			0.00	Total DSEs			0.00	
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	Group	\$			rth Group	\$		
Fotal DSEs Gross Receipts Third C		\$			·	\$		
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ross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group		0.00	

		סבר פריים		COMPUTATION OF BASE RAT		0014 1 1		
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and								
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	ase Rate Fee First Gr
	Р	SUBSCRIBER GROU	Y-FOURTH	TWENT	IP	SUBSCRIBER GROU	Y-THIRD	TWEN
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
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		\$		Base Rate Fee Fourth	0.00			Base Rate Fee Third G

		S, LLC	6623				
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ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	•	\$	0.00	
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d Group	\$			·	\$ \$		

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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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ase Rate Fee First G		\$	0.00	Base Rate Fee Sec	ona Group	\$	0.00	
THIF	TY-FIRST	SUBSCRIBER GRO	UP	THIF	RTY-SECOND	SUBSCRIBER GRO	P	
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	<u> </u>							
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otal DSEs			0.00	Total DSEs			0.00	
	Froup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
ross Receipts Third C								
Gross Receipts Third (
Gross Receipts Third G Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	 \$	0.00	
·	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
·	Group	\$	0.00	Base Rate Fee Fou	rth Group		0.00	

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	ID	BER GROUP SUBSCRIBER GROU		TE FEES FOR EACH		SUBSCRIBER GROU		
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Computa								
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			otal DSEs
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	ase Rate Fee First G
	ID	CLIBSCRIBER CROLL	DTV CIVTU	TUI	ID	CLIBCODIDED CDOL	JIDTV EIETU	TUI
		SUBSCRIBER GROU	RTY-SIXTH			SUBSCRIBER GROL		
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THI COMMUNITY/ AREA	JP 0	SUBSCRIBER GROL		
		SUBSCRIBER GROU	RTY-SIXTH DSE			SUBSCRIBER GROU		OMMUNITY/ AREA
	0			COMMUNITY/ AREA	0		A	OMMUNITY/ AREA
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O Computat		555 656115						
Computat	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP THIRTY-SEVENTH SUBSCRIBER GROUP THIRTY-EIGHTH SUBSCRIBER GROUP							
Computat		SUBSCRIBER GROU	TY-EIGHTH	H		SUBSCRIBER GRO		
	O			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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)UP	SUBSCRIBER GROU	FORTIETH			SUBSCRIBER GRO		
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		SUBSCRIBER GROU	FORTIETH		JP		IIRTY-NINTH	THIF
0		SUBSCRIBER GROU	FORTIETH		JP		IIRTY-NINTH	THIF
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DSE of Base Rat and Syndica Exclusi Surcha for Partia Distai	CRIBER GROUP	SUBSCRIBER GROUP -SECOND SUBSCRIBE DSE CALL SIG	COMMUNITY/ AREA		COMPUTATION OF SUBSCRIBER GROUNDS CALL SIGN		
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	CRIBER GROUP	/-FOURTH SUBSCRIBE	FORTY-F	JP	SUBSCRIBER GRO	TY-THIRD	FOR
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ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	CALL SIGN CALL SIGN Dital DSEs	DSE	SUBSCRIBER GRO	DSE O.00	CALL SIGN CALL SIGN Total DSEs	DSE	CALL SIGN	JP O DSE O O O O O O O O O O O O O O O O O O	
ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	CALL SIGN CALL SIGN Dital DSEs	DSE	SUBSCRIBER GRO	DSE O.00	CALL SIGN CALL SIGN Total DSEs	DSE	CALL SIGN	JP O DSE O O O O O O O O O O O O O O O O O O	
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LEGAL NAME OF OWNER AVENUE BROADB			, LLC			S	6623	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
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3ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
SIX	TY-THIRD	SUBSCRIBER GROL	JP	SIXT	Y-FOURTH	SUBSCRIBER GROU	JP	
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Gross Receipts Third G	roun	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
2.000 Noooipio Tiliia O	чр	·		S. 333 Mediplo Fourth	J. 54p	*		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
e l	base rate	e fees for each subsc pace L (page 7)		as shown in the boxes a		\$	3.30	

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LEGAL NAME OF OWNER OF CABLE SYSTEM: AVENUE BROADBAND COMMUNICATIONS, LLC 6623								Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
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LEGAL NAME OF OWNE AVENUE BROADE		S'	YSTEM ID# 6623	Name				
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
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