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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT	OFFICE USE ONLY
DATE RECEIVED	AMOUNT
2-28-20	\$ ALLOCATION NUMBER

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:			
Accounting Period	2019/2			
B	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the busine If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account. Check here if this is the system's first filing. If not, enter the system's ID LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM CABLE ONE, INC.	ss of the cable system on the last day of the counting perion	em the accounting period should s	
				00672620192
				006726 2019/2
	210 E. EARLL DRIVE PHOENIX, AZ 85012-2626			
С	INSTRUCTIONS: In line 1, give any business or trade names used to ic names already appear in space B. In line 2, give the mailing address of			
System	1 IDENTIFICATION OF CABLE SYSTEM: SPARKLIGHT			
	MAILING ADDRESS OF CABLE SYSTEM: 1525 SHERRY AVENUE (Number, street, rural route, apartment, or suite number) IDAHO FALLS, ID 83401 (City, town, state, zip code)			
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and rel	ist on page 1b
Area Served	with all communities. CITY OR TOWN	STATE		
First	IDAHO FALLS	ID		
Community	Below is a sample for reporting communities if you report multiple cha	nnel line-ups in S	pace G.	
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#
Sample	Alda	MD	Α	1
-	Alliance	MD	B	2
	Gering	MD	В	3

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

FORM SA3E. PAGE 1b.									
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#						
CABLE ONE, INC.			006726						
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.									
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.									
If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).									
When reporting the carriage of television broadcast stations on a community-by-community channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns be a second or some content of the properties of the prop	a subscriber grou								
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#						
IDAHO FALLS	ID			First					
AMMON	ID			Community					
BASALT	ID ID								
BINGHAM COUNTY BLACKFOOT	ID								
BONNEVILLE COUNTY	ID ID								
FIRTH	ID			See instructions for additional information					
FREMONT COUNTY	ID			on alphabetization.					
IONA	ID								
JEFFERSON COUNTY	ID								
MADISON COUNTY	ID								
REXBURG	ID			Add rows as necessary.					
RIGBY	ID								
RIRIE	ID								
ROCKFORD	ID								
SHELLEY	ID								
ST. ANTHONY	ID 								
SUGAR CITY	ID								
TETON	ID ID								
UCUN	ID								

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 006726 CABLE ONE, INC.

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.

BL	OCK 1		BLOCK 2				
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE		
Residential:							
 Service to first set 	5,407	\$ 40.00					
 Service to additional set(s) 							
 FM radio (if separate rate) 							
Motel, hotel							
Commercial							
Converter							
Residential							
Non-residential							
ſ		T		T	•		

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2					
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	(CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential				
Pay cable	\$ 17.0	• Motel, hotel		E	EXPANDED BASIC	\$ 44.00
 Pay cable—add'l channel 	\$ 9.0	• Commercial				
Fire protection		• Pay cable				
•Burglar protection		Pay cable-add'l channel				
Installation: Residential		Fire protection				
• First set	\$ 90.0	Burglar protection				
 Additional set(s) 		Other services:				
• FM radio (if separate rate)		Reconnect				
Converter		Disconnect				
		Outlet relocation	\$ 30.00			
		Move to new address				

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 006726 CABLE ONE, INC. PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER STATION (If Distant) KIDK-DT1 36 Ν No **IDAHO FALLS, ID** KIFI-DT1 8 Ν No IDAHO FALLS, ID See instructions for additional information KIFI-DT2 I-M 8 No IDAHO FALLS, ID on alphabetization. 8 I-M No KIFI-DT3 IDAHO FALLS, ID KIFI-DT4 8 I-M No IDAHO FALLS, ID KISU-DT1 17 Ε No POCATELLO, ID KISU-DT2 17 E-M No POCATELLO, ID **KISU-DT3** 17 E-M No POCATELLO, ID 17 E-M KISU-DT4 No POCATELLO, ID **KPIF** 15 ı No POCATELLO, ID **KPVI-DT1** 23 I-M No POCATELLO, ID **KPVI-DT2** 23 ı No POCATELLO, ID **KVUI** 31 ı No POCATELLO, ID **KXPI** 34 ı Yes POCATELLO, ID **KPVI-DT2** 23 ı No POCATELLO. ID

FURINI SAJE. PAGE 3.					OVOTEM ID#					
CABLE ONE, IN		/STEM:			SYSTEM ID# 006726	Name				
PRIMARY TRANSMITTE	RS: TELEVISIO	ON								
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program										
basis under specifc FC	CC rules, regula here in space	ations, or auth G—but do lis	orizations:		ent and Program Log)—if the	Television				
 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. 										
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			•		on for broadcasting over-the-air in may be different from the channel					
on which your cable sy Column 3: Indicate	stem carried the in each case v	ne station. whether the st	ation is a netwo	rk station, an inde	pendent station, or a noncommercial					
(for independent multic For the meaning of the Column 4: If the st planation of local servi	cast), "E" (for no ese terms, see pation is outside ce area, see pa	oncommercia page (v) of the the local serv age (v) of the	l educational), o e general instruc vice area, (i.e. "d general instructi	r "E-M" (for nonco ctions located in th listant"), enter "Ye ions located in the	s". If not, enter "No". For an ex- paper SA3 form.					
cable system carried the carried the distant stat	ne distant statio ion on a part-tir	on during the me basis beca	accounting perions	od. Indicate by ent ctivated channel c	stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject					
of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	entered into or a primary trans simulcasts, also aree categories e location of ea	n or before Ju mitter or an a o enter "E". If , see page (v) ch station. Fo	ine 30, 2009, be ssociation repre- you carried the of the general in U.S. stations, l	tween a cable system in a cable system in a channel on any ot on structions locate list the community	stem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.					
Note: If you are utilizing	ng multiple char		use a separate		channel line-up.					
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION					

FURIN SAJE. PAGE 3.					OVOTEM ID#					
CABLE ONE, IN		/STEM:			SYSTEM ID# 006726	Name				
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON								
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.										
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes" if not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you										
Note: If you are utilizing			EL LINE-UP		<u> </u>					
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION					
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FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	NER OF CABLE SY	YSTEM:			SYSTEM ID#	Name		
CABLE ONE, II	NC.				006726			
PRIMARY TRANSMITT	ERS: TELEVISIO	ON						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "F (for independent)," I-M" (for independent multicast), "E" (for noncommercial educational), or "E-								
		CHANN	EL LINE-UP	ΔD				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		YSTEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				006726	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis is basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 fc Column 1: List ead each multicast stream cast stream as "WETA-simulcast). Column 2: Give th its community of licens on which your cable is Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you h cable system carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these th Column 6: Give th	G, identify ever system during to ions in effect on 6.61(e)(2) and (6.61(e)(2)	y television standard y television y television standard y television y television y television y television y television y televisi	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried that the station was carried that the station was carried to the period of the station was carried to the report origination cording to its own be reported in the station is a network as assigned to the station is a network work, "N-M" (I educational), one general instruction of the station is a network of the station is a network work with the station is a network work with the station is a network work with the station is a network with the station is a network with the station with the station with the station is a network with the station with the station with the station is a network with the station	(1) stations carried to carriage of certail (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on a program services the television statification, D.C. This light of the television statification, D.C. This lark station, an indefor network multicute. Te-M" (for noncontions located in the special point of the television statification. The station of the station of the special point of the s	paper SA3 form. stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	Primary Transmitters: Television
		CLIANN	EL LINE UD	٨٦	·	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		YSTEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				006726	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis is basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 fc Column 1: List ead each multicast stream cast stream as "WETA-simulcast). Column 2: Give th its community of licens on which your cable is Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you h cable system carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these th Column 6: Give th	G, identify ever system during to ions in effect on 6.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a substand also in spanformation concorn. ch station's call associated with a-2". Simulcast e channel numbers. For example system carried the in each case of the concorn and concorn a	y television standard y television y television standard y television y television y television y television y television y televisi	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried that the station was carried that the station was carried to the period of the station was carried to the report origination cording to its own be reported in the station is a network as assigned to the station is a network work, "N-M" (I educational), one general instruction of the station is a network of the station is a network work with the station is a network work with the station is a network work with the station is a network with the station is a network with the station with the station with the station is a network with the station with the station with the station is a network with the station	(1) stations carried to carriage of certail (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on a program services the television statification, D.C. This light of the television statification, D.C. This lark station, an indefor network multicute. Te-M" (for noncontions located in the special point of the television statification. The station of the station of the special point of the s	paper SA3 form. stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	Primary Transmitters: Television
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FURINI SAJE. PAGE 3.					OVOTEM ID#					
CABLE ONE, IN		/STEM:			SYSTEM ID# 006726	Name				
PRIMARY TRANSMITTE	RS: TELEVISIO	ON								
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program										
Substitute Basis States basis under specific FC				carried by your c	able system on a substitute program	Television				
 Do not list the station 	here in space	G-but do list		e Special Stateme	ent and Program Log)—if the					
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Column 2: Give the			•		on for broadcasting over-the-air in					
its community of licens on which your cable sy	•		annel 4 in Wash	ington, D.C. This	may be different from the channel					
Column 3: Indicate	in each case v	whether the st			pendent station, or a noncommercial					
(for independent multion For the meaning of the	cast), "E" (for no se terms, see ation is outside	oncommercial page (v) of the the local serv	l educational), o e general instruc vice area, (i.e. "c	r "E-M" (for nonco ctions located in th listant"), enter "Ye	s". If not, enter "No". For an ex-					
Column 5: If you ha	ave entered "Y	es" in column	4, you must cor	nplete column 5, s	stating the basis on which your					
carried the distant stat	ion on a part-tir	me basis beca	ause of lack of a	ctivated channel of	ering "LAC" if your cable system capacity. payment because it is the subject					
the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the FCC. For Mexican or 0	a primary trans simulcasts, also tree categories e location of ea Canadian statio	mitter or an as o enter "E". If , see page (v) ch station. Fo ns, if any, giv	ssociation repre you carried the of the general in U.S. stations, the the name of the	senting the primar channel on any ot nstructions locate list the community ne community with	stem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.					
Note: If you are utilizing	ig multiple char		use a separate		channel line-up.					
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION					

FORM SA3E. PAG					OVOTEM ID#	
	FOWNER OF CABLE S	/STEM:			SYSTEM ID# 006726	Name
CABLE ON					006726	
	MITTERS: TELEVISIO					
carried by your ca FCC rules and re 76.59(d)(2) and (a substitute progran Substitute Ba basis under speci • Do not list the si station was ca • List the station h basis. For furth in the paper S.	able system during to gulations in effect of 4), 76.61(e)(2) and (and basis, as explained is is Stations: With life FCC rules, regulated in the space rried only on a substance, and also in spaner information concads form.	he accounting n June 24, 194, 4), or 76.63 (r d in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the sta	period, except 81, permitting th referring to 76.6 paragraph. distant stations orizations: t it in space I (th ation was carried ute basis station	(1) stations carried carriage of certal (e)(2) and (4))]; as carried by your case Special Statement both on a substitute, see page (v) or	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a stable system on a substitute program ent and Program Log)—if the state basis and also on some other f the general instructions located s such as HBO, ESPN, etc. Identify	Primary Transmitters: Television
cast stream as "V WETA-simulcast) Column 2: Giv its community of I on which your cal Column 3: Inc educational static (for independent For the meaning Column 4: If t planation of local Column 5: If y cable system carr carried the distan For the retrans of a written agree the cable system tion "E" (exempt). explanation of the Column 6: Giv FCC. For Mexical	VETA-2". Simulcast in the channel number of the channel number of the channel number of the channel number of the system carried the channel number of these terms, see the station is outside service area, see payou have entered "Y ried the distant station on a part-tip smission of a distant station on a part-tip smission of a distant station on a part-tip smission of a distant station on and a primary trans. For simulcasts, also see three categories we the location of earn or Canadian station.	streams must over the FCC hear the FCC hear the station. Whether the state "N" (for noncommercial page (v) of the the local service in column on during the ame basis because multicast stream or before Jumitter or an amount of the service in or before Jumitter or an amount of the station. For the station. For the station. For the station is the service in the station. For the station is the station in the service in the station.	be reported in or as assigned to the annel 4 in Wash attion is a network, "N-M" ('I educational), or a general instructive area, (i.e. "or general instructive area, (i.e. "or general instructive accounting periodause of lack of a sam that is not some 30, 2009, be association repreyou carried the profit of the general in the control of the general in	the television stati- ington, D.C. This irk station, an inde- for network multic ir "E-M" (for nonco- ctions located in the distant"), enter "Ye ion located in the insplete column 5, so iod. Indicate by ent ctivated channel of cubject to a royalty etween a cable sys senting the primal channel on any of instructions locate list the community ine community with	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further d in the paper SA3 form. y to which the station is licensed by the m which the station is identifed.	
Note: If you are u	ıtilizing multiple chai	•	•		cnannei line-up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FURINI SAJE. PAGE 3.					OVOTEM ID#	
CABLE ONE, IN		/STEM:			SYSTEM ID# 006726	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program base	system during the cons in effect or i.61(e)(2) and (sis, as explaine	he accounting n June 24, 19 4), or 76.63 (r d in the next p	period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary Transmitters:
Substitute Basis States basis under specific FC				carried by your c	able system on a substitute program	Television
 Do not list the station 	here in space	G-but do lis		e Special Stateme	ent and Program Log)—if the	
basis. For further in in the paper SA3 fo	and also in spa formation cond rm.	ace I, if the staterning substit	ute basis statior	ns, see page (v) o	ute basis and also on some other fithe general instructions located	
		-		. •	s such as HBO, ESPN, etc. Identify ion. For example, report multi-	
cast stream as "WETA WETA-simulcast).	-2". Simulcast	streams must	be reported in o	column 1 (list each	stream separately; for example	
Column 2: Give the			•		on for broadcasting over-the-air in	
its community of licens on which your cable sy	•		annel 4 in Wash	ington, D.C. This	may be different from the channel	
					pendent station, or a noncommercial	
(for independent multion For the meaning of the Column 4: If the st	cast), "E" (for no se terms, see ation is outside	oncommercia page (v) of the the local serv	l educational), o e general instruc vice area, (i.e. "d	r "E-M" (for nonco ctions located in th listant"), enter "Ye	s". If not, enter "No". For an ex-	
planation of local servi					paper SA3 form. stating the basis on which your	
carried the distant stat	ion on a part-tir	me basis beca	ause of lack of a	ctivated channel of	ering "LAC" if your cable system apacity. payment because it is the subject	
the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	a primary trans simulcasts, also tree categories e location of ea	mitter or an a o enter "E". If , see page (v) ch station. Fo	ssociation repre- you carried the o of the general in U.S. stations, l	senting the primar channel on any ot nstructions locate list the community	tem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing	g multiple char		•		channel line-up.	
			EL LINE-UP			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
					000000000000000000000000000000000000000	

FURINI SAJE. PAGE 3.					21/2	
CABLE ONE, IN		/STEM:			SYSTEM ID# 006726	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program base	system during the ions in effect or 5.61(e)(2) and (sis, as explaine	he accounting n June 24, 199 4), or 76.63 (r d in the next p	period, except 31, permitting the eferring to 76.6 paragraph.	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	Primary Transmitters:
basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the FCC. For Mexican or Column 6:	CC rules, regular here in space only on a substand also in spatformation concern. The station's call associated with a channel number of the station's call associated with a channel number of the station of the station of a distant static in on a part-time of a primary transistence categories a canadian station of a distant the entered into on a part-time of a primary transistence categories a canadian station of a	ations, or auth G—but do list titute basis. Ince I, if the state erning substit sign. Do not real a station acceptate a station acceptate a station. In a station are station. In a station are a station and uring the same basis becament a station and uring the same basis becament a station and uring the same basis becament a station are station. In a see page (v) ch station. For no, if any, given a station are station.	orizations: it in space I (the tion was carried ute basis station eport origination cording to its own be reported in coas assigned to the tannel 4 in Wash ation is a netwoetwork), "N-M" (if educational), or egeneral instructive area, (i.e. "or general instructive, you must correct out in the tion of a sam that is not some 30, 2009, be association repression of the general in true." Output Description of the general in true, it is not some 30, 2009, be sociation repression of the general in true. Stations, let the name of the same of the	e Special Statemer I both on a substitus, see page (v) of a program services er-the-air designal column 1 (list each the television statington, D.C. This in the telev	s". If not, enter "No". For an expaper SA3 form. stating the basis on which your ering "LAC" if your cable system sapacity. payment because it is the subject stem or an association representing ty transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	Television
Note: If you are utilizing	ig multiple char		use a separate :		cnannei line-up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGI					OVOTEM ID#	
	OWNER OF CABLE SY	YSTEM:			SYSTEM ID# 006726	Name
CABLE ON	•				006726	
	MITTERS: TELEVISIO					
carried by your ca FCC rules and req 76.59(d)(2) and (4 substitute prograr Substitute Ba basis under speci • Do not list the st station was cal • List the station h	able system during to gulations in effect on the properties of the properties of the sis Stations: With fic FCC rules, regular ation here in space pried only on a subspace, and also in spa	he accounting n June 24, 1944), or 76.63 (red in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the sta	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: t it in space I (the attion was carried	(1) stations carried carriage of certal (e)(2) and (4))]; as carried by your case Special Statemed both on a substitution of the statement of the substitution of the statement of the substitution of the sub	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other f the general instructions located	Primary Transmitters: Television
each multicast str cast stream as "W WETA-simulcast) Column 2: Giv its community of I on which your cat Column 3: Ind educational statio (for independent r For the meaning of Column 4: If tl planation of local Column 5: If y cable system carried the distant For the retrans of a written agree the cable system tion "E" (exempt). explanation of the	t each station's call eam associated wit /ETA-2". Simulcast / ethe channel numl icense. For example ole system carried the licate in each case on, by entering the lemulticast), "E" (for not these terms, see ne station is outside service area, see pou have entered "Y ied the distant station that is tation on a part-timent entered into o and a primary trans. For simulcasts, also see three categories	h a station accepted by the station accepted by the station. Whether the station accepted by the station accepted by the local servage (v) of the ser in column and using the ser in column accepted by the local servage (v) of the ser in column accepted by the local servage (v) of the ser in column accepted by the ser in column accepted by the ser in column accepted by the ser in or before Jumitter or an accepted by the servage (v), see page (v)	cording to its over be reported in or as assigned to annel 4 in Wash ation is a network), "N-M" (I educational), or a general instructive area, (i.e. "cogeneral instruct 4, you must correct accounting period ac	er-the-air designal column 1 (list each column 1 (list each the television statistington, D.C. This erk station, an indefor network multicor "E-M" (for noncotions located in the interest of the column 5, so do Indicate by endicativated channel or cubic etween a cable system of the primal channel on any of instructions located in the interest of the column 5, so do Indicate by endicativated channel or cubic etween a cable system of the primal channel on any of instructions located instructions located instructions located in the endicated channel on any of instructions located instructions l	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your ering "LAC" if your cable system	
	n or Canadian station tilizing multiple chai	nnel line-ups,		space G for each	which the station is identifed. channel line-up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

CABLE ONE, INC. PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.	10
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the	
carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the	
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	ary itters:
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 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 befor	sion
CHANNEL LINE-UP AL	
1. CALL SIGN 2. B'CAST CHANNEL OF (Yes or No) CARRIAGE (If Distant) 6. LOCATION OF STATION CARRIAGE (If Distant)	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				006726	
PRIMARY TRANSMITT	ERS: TELEVISION	N				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List ead each multicast stream cast stream as "WETA-Simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multiper the meaning of the Column 5: If you heable system carried the carried the distant state For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the FCC. For Mexican or Column 6: Give the FCC. For Mexican or Column 6: Give the FCC.	G, identify ever system during to ions in effect on 6.61(e)(2) and (6.61(e)(2)	y television state he accounting in June 24, 196 (4), or 76.63 (red) in the next prespect to any attions, or auth G—but do list titute basis. ace I, if the state erning substitions in the station account of the station account of the station. Whether the station. Whether the station. Whether the station account on during the attention on during the attention of the station or before Junitter or an account of the station. The station is seen the station of the station. The station of the station of the station of the station of the station. For the station of the station of the station of the station of the station. For the station of the stati	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried that the station was carried that the station was carried to the period of the station was carried to the report origination cording to its own be reported in the station is a network as assigned to the station is a network work, "N-M" (I educational), one general instruction of the station is a network of the station is a network work with the station is a network work with the station is a network work with the station is a network with the station is a network with the station with the station with the station is a network with the station with the station with the station is a network with the station	(1) stations carried to carriage of certail (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on a program services the television statification, D.C. This light of the television statification, D.C. This lark station, an indefor network multicute. Te-M" (for noncontions located in the special point of the television statification. The station of the station of the special point of the s	paper SA3 form. stating the basis on which your stating the basis on which your sering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing transmitter, enter the designaher basis, enter "O." For a further d in the paper SA3 form. To which the station is licensed by the which the station is identifed.	G Primary Transmitters: Television
Note: If you are utilizing	.9	•	•			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				006726	
PRIMARY TRANSMITT	ERS: TELEVISIO	N				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Program Program 1: List the station here, basis. For further ir in the paper SA3 for Column 1: List ead each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give thits community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multiper the meaning of the Column 5: If you cable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify ever system during to ions in effect on 6.61(e)(2) and (6.61(e)(2)	y television standard by television standard by television standard by television standard by televisions, or auth G—but do list titute basis. The standard by the standard by the station acceptance of the station acceptance of the station. The station whether the station whether the station acceptance of the station on during the standard by the station or before Jumitter or an acceptance of the station. The station or before Jumitter or an acceptance of the station. The station of the station or before Jumitter or an acceptance of the station. The station on station or station or station. The station on station on station on station on station on station on station. The station on station of the station on station of the sta	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried that the station was carried that the station was carried to the period of the station was carried to the report origination cording to its own be reported in the station is a network as assigned to the station is a network work, "N-M" (I educational), one general instruction of the station is a network of the station is a network work with the station is a network work with the station is a network work with the station is a network with the station is a network with the station with the station with the station is a network with the station with the station with the station is a network with the station	(1) stations carried to carriage of certail (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on a program services the television statification, D.C. This light of the television statification, D.C. This lark station, an indefor network multicute. Te-M" (for noncontions located in the special point of the television statification. The station of the station of the special point of the s	paper SA3 form. stating the basis on which your stating the basis on which your sering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing transmitter, enter the designaher basis, enter "O." For a further d in the paper SA3 form. To which the station is licensed by the which the station is identifed.	G Primary Transmitters: Television
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				006726	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulate 76.59(d)(2) and (4), 76 substitute program base Substitute Pasis Substitute Pasis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If your cable system carried the distant stat For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the Column 6: Give the	G, identify even- system during the consistence of	y television standard by television standard	period, except 81, permitting the seferring to 76.6 paragraph. It is space I (the stion was carried ute basis station to the seferring to 76.6 paragraph. It is in space I (the stion was carried ute basis station to the sefer to see the see	(1) stations carried et carriage of certa 1(e)(2) and (4))]; as carried by your context of the carried by your carried by y	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your dering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing				•		
		CHANN	EL LINE-UP	AO		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FURM SAJE. PAGE 3.					0)/0751418#	
CABLE ONE, IN		/STEM:			SYSTEM ID# 006726	Name
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during the system during the system during the system of the syst	he accounting n June 24, 199 4), or 76.63 (r d in the next p	period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie the carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program	Primary Transmitters:
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		CHANN	EL LINE-UP	AP		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

RABLE ONE, INC. RIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs (sections 76.59(4)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))); and (2) certain stations carried on a substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space ((the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space i, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station is a network station, an independent station, or a noncommercial educational instructions located in the paper SA3 form. Column 3: Indicate in each case whether the station is a network station, an independent station, or an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside	
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: 10 not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. 1 List the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. 1 List the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. 1 List the station here in space G—but do list it in space I (the Special Statement and Program Log)—if 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 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 2: List each station is outsit streams must be reported in column 1 (list each stream separately; for example WETA-simuleast). 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. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "Yes"	
Carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "VETA-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, "I-M" (for independent multicast), "E" (for noncommercial educational station, by entering the letter") (for network), "N-M" (for network multicast), "I' (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational station, or a station or a station o	PRIMARY TRANSMITTI
basis under specific FCC rules, regulations, or authorizations: * Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. * List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. **Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). **Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. **Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), ""-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. **Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. **Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station on a part-time basis because of lack of activated channel ca	carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas
CHANNEL LINE-UP AQ	basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the FCC. For Mexican or C
	Trote. If you are utilizing
SIGN CHANNEL OF (Yes or No) CARRIAGE (If Distant)	1. CALL SIGN

FORM SASE, PAGE 3.	
LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 006726	Name
PRIMARY TRANSMITTERS: TELEVISION	
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Pasis Stations: With respect to any distant stations carried by your cable system on a substitute program.	Primary Transmitters:
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for network 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 syste	Television
CHANNEL LINE-UP AR	
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CHANNEL OF (Yes or No) CARRIAGE (If Distant) 6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				006726	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Program bas Substitute Program bas Substitute Program bas Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 for Column 1: List eac each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give thits community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multiper the meaning of the Column 5: If you cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify even- system during ti- ions in effect or 6.61(e)(2) and (6.6	y television standard y television standard y television standard y television standard y televisions, or auth G—but do listitute basis. In the standard y television y televi	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried that the station was carried that the station was carried to the period of the station was carried to the report origination cording to its own be reported in the station is a network as assigned to the station is a network work, "N-M" (I educational), one general instruction of the station is a network of the station is a network work with the station is a network work with the station is a network work with the station is a network with the station is a network with the station with the station with the station is a network with the station with the station with the station is a network with the station	(1) stations carried to carriage of certail (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on a program services the television statification, D.C. This light of the television statification, D.C. This lark station, an indefor network multicute. Te-M" (for noncontions located in the special point of the television statification. The station of the station of the special point of the s	paper SA3 form. stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	Primary Transmitters: Television
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
				• • • • • • • • • • • • • • • • • • • •		

IER OF CABLE S'	YSTEM:			SYSTEM ID#	Name
NC.				006726	Nume
ERS: TELEVISION	ON				
G, identify ever eystem during to ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and also in spartion concern. The station's call associated with a station and cast of the concern. The change of the concern and a same a same a same a same a same a same a cast of the concern.	y television st he accounting n June 24, 19 4), or 76.63 (noted in the next description of authors, or	g period, except 81, permitting the referring to 76.6 paragraph. If the distance of the second secon	(1) stations carried carriage of certain (e)(2) and (4))]; as carried by your case Special Statement of both on a substitutions, see page (v) on program service er-the-air designal column 1 (list each the television statistics).	d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other af the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multinatream separately; for example on for broadcasting over-the-air in	Primary Transmitters: Television
entering the lecast), "E" (for no ese terms, see ation is outside ce area, see plave entered "Yene distant static ion on a part-tipion of a distant centered into of a primary transsimulcasts, also ree categories de location of ea Canadian static	etter "N" (for noncommercial page (v) of the the local sendage (v) of the es" in column on during the me basis becar multicast stranor before Jumitter or an accenter "E". If , see page (v) ch station. Foons, if any, giv	etwork), "N-M" (I educational), of e general instruct vice area, (i.e. "or general instruct 4, you must corraccounting perioduse of lack of a geam that is not some 30, 2009, be association repreyou carried the of the general in U.S. stations, ethe name of the	for network multic or "E-M" (for nonce ctions located in the distant"), enter "Ye ions located in the mplete column 5, so d. Indicate by enterior to a royalty ettivated channel of subject to a royalty ettween a cable sys- senting the prima channel on any of instructions locate list the community	ast), "I" (for independent), "I-M" mmercial educational multicast). ne paper SA3 form. sis". If not, enter "No". For an ex- expaper SA3 form. stating the basis on which your sering "LAC" if your cable system capacity. expayment because it is the subject stem or an association representing ry transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. et to which the station is licensed by the multiple station is identifed.	
	CHANN	EL LINE LID	AT	·	
2. B'CAST CHANNEL NUMBER	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
	RC. ERS: TELEVISIO G, identify ever system during to ions in effect of 3.61(e)(2) and (isis, as explained stations: With CC rules, regular in here in space only on a substant also in spanformation conditions. Chancel in each case with a case of the case of	G, identify every television staystem during the accounting ions in effect on June 24, 19 (3.61(e)(2) and (4), or 76.63 (19 (8)), as explained in the next stations: With respect to any CC rules, regulations, or author here in space G—but do list only on a substitute basis, and also in space I, if the stationment of the station concerning substitutes as and also in space I, if the stationment of the station is call sign. Do not a sasociated with a station activate. Simulcast streams must be channel number the FCC hase. For example, WRC is Chaystem carried the station, and in each case whether the sign cast), "E" (for noncommercial ese terms, see page (v) of the attention is outside the local service area, see page (v) of the ave entered "Yes" in column the distant station during the sign of a distant multicast streat entered into on or before Julia primary transmitter or an a simulcasts, also enter "E". If the categories, see page (v) el location of each station. For Canadian stations, if any, giving multiple channel line-ups, CHANNEL 2. B'CAST CHANNEL 3. TYPE CHANNEL	ERS: TELEVISION G, identify every television station (including system during the accounting period, except ions in effect on June 24, 1981, permitting the 5.61(e)(2) and (4), or 76.63 (referring to 76.6 sis, as explained in the next paragraph. Stations: With respect to any distant stations: Occuries, regulations, or authorizations: In here in space G—but do list it in space I (the only on a substitute basis. and also in space I, if the station was carried formation concerning substitute basis station associated with a station according to its owa-2". Simulcast streams must be reported in one of the carried the station. The channel number the FCC has assigned to see. For example, WRC is Channel 4 in Wash system carried the station. 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(Yes or No)	G. identify every television station (including translator stations system during the accounting period, except (1) stations carrier ions in effect on June 24, 1981, permitting the carriage of certs (5.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; a sis, as explained in the next paragraph. Stations: With respect to any distant stations carried by your of CC rules, regulations, or authorizations: In here in space G—but do list it in space I (the Special Stateme only on a substitute basis. In an also in space I, if the station was carried both on a substitute formation concerning substitute basis stations, see page (v) on form. In the station's call sign. Do not report origination program service: In associated with a station according to its over-the-air designary. In echannel number the FCC has assigned to the television station are carried the station. In each case whether the station is a network station, an index of entering the letter "N" (for network), "N-M" (for network multic cast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational), or "E-M" (for noncommercial educations), or "E-M" (for noncommercial educations	CRS: TELEVISION G. identify every television station (including translator stations and low power television stations) system during the accounting period, except (1) stations carried only on a part-time basis under lons in effect on June 24, 1981, permitting the carriage of certain network programs [sections 561(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a sis, as explained in the next paragraph. Stations: With respect to any distant stations carried by your cable system on a substitute program Scrules, regulations, or authorizations: In here in space G—but do list it in space I (the Special Statement and Program Log)—If the only on a substitute basis. and also in space I, if the station was carried both on a substitute basis and also on some other information concerning substitute basis stations, see page (v) of the general instructions located orm. Ch station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify associated with a station according to its over-the-air designation. For example, report multi-v2". Simulcast streams must be reported in column 1 (list each stream separately; for example e channel number the FCC has assigned to the television station for broadcasting over-the-air in se. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel ystem carried the station. In each case whether the station is a network station, an independent station, or a noncommercial eventering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" cast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), see terms, see page (v) of the general instructions located in the paper SA3 form. ave entered "Yes" in column 4, you must complete column 5, stating the basis on which your he distant station during the accounting period. Indicate by entering "LAC" if your cable system ion on a part-time basis because of lack of activ

FURINI SAJE. PAGE 3.					2./2==== //				
CABLE ONE, II		/STEM:			SYSTEM ID# 006726	Name			
PRIMARY TRANSMITTERS: TELEVISION									
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program.									
Substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of 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 network), "I" or network multicast). "I" (for independent)," I" (For the meaning of these terms, 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 and part-time basis because of lack of activated channel c									
Note: If you are utilizing	.9		EL LINE-UP						
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				

FURIN SAJE. PAGE 3.					OVOTEM ID#			
CABLE ONE, IN		/STEM:			SYSTEM ID# 006726	Name		
PRIMARY TRANSMITTERS: TELEVISION								
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.								
Substitute Program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of 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 network 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 com								
,		CHANN	EL LINE-UP	AV	·			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
						I		

FORM SA3E. PAGE 3.								
LEGAL NAME OF OW	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name		
CABLE ONE, I	NC.				006726			
PRIMARY TRANSMITT	ERS: TELEVISIO	ON						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 1: List each station are reported in column 1 (list each stream separately; for example weta-air designation of the order and 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 lefter "N" (for network), "N-M" (for network multicast), "" (for independent), "-M" (for independent multicast), "E" (for noncommercial educational instructions located in the paper SA3 form. Column 4: If								
Note: If you are utilizi				•				
		CHANN	EL LINE-UP	ΔW				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 006726 CABLE ONE. INC. PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.						ACCOUNTING	6 PERIOD: 2019/2	
LEGAL NAME OF OWNER OF	CABLE SYS	ГЕМ:				SYSTEM ID#	Nome	
CABLE ONE, INC. 006726								
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEN	NT AND PROGRAM LOG					
							I	
In General: In space I, ident							_	
	substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.							
1. SPECIAL STATEMENT	CONCER	NING SUBST	TTUTE CARRIAGE				Carriage: Special	
	During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program proadcast by a distant station?							
Note: If your answer is "No	", leave the	rest of this pag	ge blank. If your answer is '	Yes," you mu	ist complete the progra	am	Program Log	
log in block 2. 2. LOG OF SUBSTITUTE	BBOCBA	MC					-	
In General: List each subs			ite line. Use abbreviations v	wherever pos	sible. if their meaning	is		
clear. If you need more spa	ice, please	attach addition	al pages.					
Column 1: Give the title period, was broadcast by a			ision program (substitute p					
under certain FCC rules, re	gulations, o	r authorization	s. See page (vi) of the gen	eral instructio	ns located in the pape	r		
SA3 form for futher informatitles, for example, "I Love I				"basketball".	List specific program			
			r "Yes." Otherwise enter "N	o."				
			asting the substitute progra		naad by tha FOO as is			
the case of Mexican or Car			ne community to which the community with which the			1		
Column 5: Give the mor	nth and day		tem carried the substitute p			onth		
first. Example: for May 7 giv		substitute nro	gram was carried by your o	able system	List the times accurat	elv		
to the nearest five minutes.						o.y		
stated as "6:00–6:30 p.m."	or "D" if the	listed program	was substituted for progra	mming that w	our evetem was requir	ad		
to delete under FCC rules a			was substituted for progra iring the accounting period			eu		
gram was substituted for pr	ogramming					ı		
effect on October 19, 1976.								
				WHE	N SUBSTITUTE	7. REASON]	
S	UBSTITUT	E PROGRAM			IAGE OCCURRED	FOR		
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	DELETION		
							1	
	 							
	 							
	 							
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ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 6.

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

006726

J

Part-Time Carriage Log

PART-TIME CARRIAGE LOG

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

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

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

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

1		DAT	TES	AND HOURS (OF F	PART-TIME CAR	RIAGE				
CALL SIGN	WHEN CARRIAGE OCCURRED					CALL SIGN	WHEN	WHEN CARRIAGE OCCURRED			
0,122 01011	DATE	FROM	OUF	RS TO		CALL SIGN	DATE	HOURS FROM		RS TO	
			_						_		
			_						_		
			-=								
			-=-						=-		
									_		
									_		
			_						_		
			_						_		
			_						_		
									=-		
									=		

LEGA	L NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	Name					
CA	BLE ONE, INC.			006726	Name					
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)										
IMP	during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts. \$ 1,845,584.31 (Amount of gross receipts)									
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.										
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b k 3 below.	e ente	ered on li	ne 1 of						
	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low.	entere	ed on line	2 in block						
▶ If pa	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be	e entered	on line						
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.		064 perc	ent of the						
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064		\$	1,845,584.31						
	Enter the result here. This is your minimum fee.	\$		19,637.02						
2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block. • Did your cable system carry any distant television stations during the accounting peri X Yes—Complete the DSE schedule. No—Leave block 3 below blank and column television.	mn 4, ; od?	you mus	check block 4.						
Block 3	4, or part 9, block A of the DSE schedule. If none, enter zero			18,408.56						
	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	\$		18,408.56						
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE : Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger		\$	19,637.02	Cable systems					
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter	r		0.00	submitting additional					
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)			0.00	deposits under Section 111(d)(7) should contact 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	\$		20,362.02	form for submitting the additional fees.					
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See p	age (i) of	the						

Namo	LEGAL NAME OF OWNER OF CABLE SYSTEM:	YSTEM ID#
Name	CABLE ONE, INC.	006726
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations.	
	System carried television broadcast stations	
	Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
Be Contacted for Further Information	Name EMERSON YEARWOOD Telephone 602-364-6195	
	Address 210 E. EARLL DRIVE	
	(Number, street, rural route, apartment, or suite number)	
	PHOENIX, AZ 85012-2626 (City, town, state, zip)	
	Email emerson.yearwood@cableone.biz Fax (optional) 602-364-6013	
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.	
0	SERVINGATION (This statement of account must be defined and signed in accordance with copyright office regulations.	
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 identified in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or	
	(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.	m
	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)]	
	/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 "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	е
	Typed or printed name: RAYMOND STORCK	
	Title: VICE PRESIDENT	
	(Title of official position held in corporation or partnership)	
	Date: February 28, 2020	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 006726	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 subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the	Special Statement Concerning Gross Receipts
paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below	Exclusion
Name Mailing Address Mailing Address	
INTEREST ASSESSMENTS	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
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)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.	
Owner Address	
First community served Accounting period ID number	

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

ACCOUNTING PERIOD: 2019/2

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

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

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

EXAMPLE:

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

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

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

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

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x .01064
 \$6.384.00

40,00						
First Subscriber Group		Second Subscriber Group		Third Subscriber Group		
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)		
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00	
DSEs	2.472	DSEs	1.083	DSEs	1.389	
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03	
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80	
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23	
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03	

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

ACCOUNTING PERIOD: 2019/2

DSE SCHEDULE. PAG	E 11. (CONTINUED)											
4	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 006726											
ı												
	SUM OF DSEs OF CATEGORY "O" STATIONS:											
	Add the DSEs of each station											
	Enter the sum here and in line	1.00										
•	Instructions:											
2	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3)											
Computation	of space G (page 3). In the column headed "DSE"	": for each indep	endent station, give the DSF	as "1.0": for	each network or noncom-							
of DSEs for	mercial educational station, gi			,								
Category "O"												
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
	KXPI	1.000										
A -l -l												
Add rows as												
necessary. Remember to copy												
all formula into new												
rows.												
10W3.												

Name		WNER OF CABLE SYSTEM:						SY	STEM ID# 006726			
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	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. CATEGORY LAC STATIONS: COMPUTATION OF DSEs 1. CALL 2. NUMBER 3. NUMBER 4. BASIS OF 5. TYPE 6. DSE											
	SIGN	OF HOU CARRIE SYSTEN	D BY S	F HOURS TATION N AIR	CARRIAG VALUE	JC	VALUE					
			÷ ÷ ÷ ÷ ÷ ÷ ÷			x 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, ▶ 0.00											
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).											
		SUE	BSTITUTE-BAS	SIS STATION:	S: COMPUTA	ATION OF D	SEs					
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBI OF PROGI		NUMBER OF DAYS IN YEAR	4. DSE			
				=			÷ ÷		=			
		÷ ÷		= =			÷ ÷		=			
		÷		= =			÷ ÷	=	<mark></mark>			
	Add the DSEs of	OF SUBSTITUTE-BASI of each station. m here and in line 3 of pa		e,	▶		0.00					
5 Total Number of DSEs	number of DSEs 1. Number of 2. Number of	R OF DSEs: Give the ame applicable to your system DSEs from part 2 ● DSEs from part 3 ● DSEs from part 4 ●		s in parts 2, 3, and	4 of this schedul	e and add them	1. 0.	00 00 00				
	TOTAL NUMBER	R OF DSEs					>		1.00			

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

CABLE ONE,	OWNER OF CABLE	SYSTEM:					S	YSTEM ID# 006726	Name
In block A: • If your answer if	ck A must be com	•	part 6 and part	7 of the DSE sche	edule blank aı	nd complete pa	art 8, (page 16) of	the •	6
schedule. If your answer if	"No," complete blo	ocks B and C	below.						
,	, 1			TELEVISION M	ARKETS				Computation of 3.75 Fee
effect on June 24	m located wholly on the control of the control of the control of the color of the c	schedule—[•					gulations in	3.73 Fee
		BLO	CK B: CARR	IAGE OF PERI	MITTED DS	Es			
Column 1: CALL SIGN	under FCC rules	s of distant st and regulation ne DSE Sche	ations listed in ons prior to Ju dule. (Note: T	part 2, 3, and 4 o ne 25, 1981. For fo he letter M below r	f this schedule urther explana	e that your sys	ed stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rt. A Stations carri- 76.61(b)(c)] B Specialty stati C Noncomeric D Grandfathered instructions fc E Carried pursus *F A station pre	ules and regued pursuant on as defined al education (76. or DSE schedant to individually carries JHF station w	ulations cited b to the FCC ma d in 76.5(kk) (7 al station [76.5 65) (see parag dule). ual waiver of F ed on a part-tir vithin grade-B	ne or substitute ba contour, [76.59(d)(ose in effect of 76.57, 76.59(b re)(1), 76.63(a 63(a) referring bstitution of g	n June 24, 198 i), 76.61(b)(c), ii) referring to 7 g to 76.61(d) irandfathered s	76.63(a) referring 76.61(e)(1 stations in the		
Column 3:		e stations ide	entified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on pag	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
			1			1		0.00	
		В	SLOCK C: CC	MPUTATION OF	F 3.75 FEE				
Line 1: Enter the	e total number of						,	_	
Line 2: Enter the	e sum of permitte	ed DSEs fro	m block B ab	ove					
	line 2 from line 1 leave lines 4–7 b			,		rate.	,		
Line 4: Enter gro	oss receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply	line 4 by 0.0375	and enter s	um here				x		permited/ partially nonpermitted
Line 6: Enter tot	al number of DS	Es from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply	line 6 by line 5 ar	nd enter her	re and on line	2, block 3, spac	e L (page 7)	ı		0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 006726 **BLOCK A: TELEVISION MARKETS (CONTINUED)** 6 3. DSE 1. CALL 2. PERMITTED 3. DSE 1. CALL 2. PERMITTED 1. CALL 2. PERMITTED 3. DSE BASIS SIGN BASIS SIGN SIGN BASIS Computation of 3.75 Fee

Name	CABLE ONE, IN		E SYSTEM:						S	906726				
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the of Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the Fr A—Part-time sp 76.59(B—Late-night pr 76.61(S—Substitute ca genera Column 5: Indicate Column 6: Comparin block	or to June 25, call sign for eather DSE for the DSE for the accounting the basis of CC rules and ecialty progra (d)(1),76.61(e rogramming: (e)(3)). Comparing the station's I ether DSE figures and the station's I ether DSE figures and information you call information you information you call instructions the station's I ether DSE figures and I ether D	1981, under forme ach distant station i his station for a sing period and year i carriage on which the regulations cited be mming: Carriage, col(1), or 76.63 (refer Carriage under FCC certain FCC rules, in the paper SA3 fo DSE for the current ures listed in column of part 6 for this state ou give in columns	r FCC rules gov dentifed by the gle accounting p in which the car ne station was co elow pertain to the apart-time bar ring to 76.61(e) C rules, sections regulations, or a form. accounting per ns 2 and 5 and tion. 2, 3, and 4 mus	verriet per riag arri thos asis (1) s 70 aut riod list	entifed by the letter "F" ning part-time and subter "F" in column 2 of priod, occurring between ge and DSE occurred ied by listing one of the se in effect on June 24 s, of specialty program.) 6.59(d)(3), 76.61(e)(3) chorizations. For further is as computed in parts to the smaller of the two e accurate and is subjection.	stitute carri part 6 of the n January 1 (e.g., 1981) e following 4, 1981. nming unde n, or 76.63 (r explanation 2, 3, and 4 o figures he	age. DSE schedule, 1978 and Jun 1) letters r FCC rules, se referring to on, see page (v of this schedule, This figure	ections vi) of the should be	981 se enterer				
		PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED												
	1. CALL	2. PRIC				4. BASIS OF			6. P	ERMITTED				
	SIGN	DSE	Pl	ERIOD		CARRIAGE		OSE		DSE				
		•												
		•												
		•												
7	Instructions: Block A In block A:	nust be con	npleted.											
Computation		"Yes," comple	ete blocks B and C	, below.										
of the	If your answer is	"No," leave b	locks B and C blan	k and complete	ра	art 8 of the DSE sched	ule.							
Syndicated			BLOCK	K A: MAJOR	TE	ELEVISION MARK	ET							
Exclusivity	. la any nartion of the	aabla ayatam y	uithin a tan 100 mais	or talassiaian mark	leat	an defend by contine 7	'6 F of FOO	mulaa in affaat l	24	10010				
Surcharge	l <u>—</u> * · ·	•	, ,	or television man	кеі	as defned by section 7 X No—Proceed to		rules in ellect J	urie 24,	1901?				
	Yes—Complete	DIOCKS D and	10.			No—Proceed to	рапто							
	BLOCK B: Ca	arriage of VHI	F/Grade B Contour	Stations		BLOCK	C: Compu	tation of Exem	pt DSE	3				
	Is any station listed in commercial VHF stati or in part, over the ca	ion that places				Was any station listed nity served by the cab to former FCC rule 76	le system p							
	Yes—List each s X No—Enter zero a		th its appropriate peri part 8.	mitted DSE		Yes—List each st X No—Enter zero a			ate permi	tted DSE				
	CALL CICN	Doc 1	CALL CION	Dec		CALL CICN	DOE	0411 010	,, I	Dec				
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	DIN	DSE				
		-												
		-												
		·	TOTAL DSEs	0.00			•	TOTAL DS	SEs	0.00				

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC.	SYSTEM ID# 006726	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,845,584.31	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? X Yes—Complete section 3 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the Dis 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here	_	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge.		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ \$		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge.		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	Yes—Complete part 9 of this schedule. X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the Dis 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name		ME OF OWNER OF CABLE SYSTEM: SYSTEI										
	(CABLE ONE, INC.	6726									
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.										
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$										
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ _\$										
Surcharge		C. Multiply line B by 3.000 and enter here										
		D. Enter 0.00089 of gross receipts (the amount in section 1)										
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here										
		F. Multiply line D by line E and enter here										
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)										
		Syndicated Exclusivity Surcharge	<u></u> .									
8 Computation of Base Rate Fee	You m 6 was In blo If you If you blank What i	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below it. is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.										
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS										
	• Did y	BEOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS Did your cable system retransmit the signals of any partially distant television stations during the accounting period?										
	Yes—Complete part 9 of this schedule. X No—Complete the following sections.											
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE										
	Section 1	Enter the amount of gross receipts from space K (page 7)										
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)										
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts										
		(the amount in section 1)										
		B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ _ \$ 12,937.55										
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here										
		D. Multiply line B by line C and enter here										
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)										
		Base Rate Fee	· !									

LEGAL N	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nama
CABL	E ONE, INC.	006726	Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4	A 5 4 0 04004 5		8
	A. Enter 0.01064 of gross receipts (the amount in section 1) **S		
	B. Enter 0.00701 of gross receipts	_	Computation
	(the amount in section 1) \$		of
	C. Multiply line B by 3.000 and enter here ▶\$		Base Rate Fee
	D. Enter 0.00330 of gross receipts	_	
	(the amount in section 1) \$		
	E. Subtract 4.000 from total DSEs		
	(the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your base rate fee.		
	Enter here and in block 3, line 1, space L (page 7)	0.00	
	Dase Nate Fee		
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca: be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channe	•	
Space		illie-ups III	9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee s from subscribers located within the station's local service area, from your system's total gross receipts. To take ac		Computation
•	on, you must:	variage of the	of Base Rate Fee
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to		and Syndicated
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for		Exclusivity
-	: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		Surcharge for
	If any portion of your cable system is located within the top 100 television market and the station is not exempt in p mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B be	, ,	Partially Distant
	cable system is wholly located outside all major television markets, complete block A only.	,	Stations, and
	Identify a Subscriber Group for Partially Distant Stations For each community served, determine the local service area of each wholly distant and each partially distant stati	ion vou	for Partially Permitted
	to that community.	on you	Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were loud the station's local service area. A subscriber located outside the local service area of a station is distant to that state token, the station is distant to the subscriber.)		
-	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant.		
	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.	it a cable	
Compu	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your syst	em's subscriber	
-	section:		
• Give	fy the communities/areas represented by each subscriber group. the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all bers in the group.	of the	
• If:			
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in fithis schedule; or,	parts 2, 3,	
, .	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b 6 of this schedule.	ock B,	
•	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in paper SA3 form.	structions	
 Compage. DSEs f 	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the plant making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need calculations on the form.	it is, the total	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 006726 CABLE ONE, INC. Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNE		E SYSTEM:					006726	Name
B	LOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GROU	IP		SECOND	SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA	IDAHO	FALLS/AMMON/E	BASALT	COMMUNITY/ AREA	BLACK	FOOT	9 Computat	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
KXPI	1.00							Base Rate
								and
								Syndicate
								Exclusivi
								Surcharg
								for
								Partially
								Distant
								Stations
								ĺ
								ĺ
Total DSEs			1.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 1,730	,127.89	Gross Receipts Secon	d Group	\$ 1	15,456.42	
Base Rate Fee First G	roup	\$ 18	,408.56	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	IP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
		-						
		-						
						H		
		•						
Total DSEs			0.00	Total DSEs		Ш	0.00	
	Na	•			0			
Gross Receipts Third C	ыоир	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				<u> </u>				
				as shown in the boxes a		-		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 006726									
	FIFTH	COMPUTATION C SUBSCRIBER GRO	DUP	ATE FEES FOR EAC	SIXTI	RIBER GROUP I SUBSCRIBER GRO	UP 0	9	
COMMUNITY/ AREA	4		0	COMMUNITY/ ARE	Computation				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and Syndicated	
		_						Exclusivity	
								Surcharge	
								for	
								Partially Distant	
								Stations	
Total DSEs	•	-	0.00	Total DSEs			0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
		SUBSCRIBER GRO				H SUBSCRIBER GRO	_		
COMMUNITY/ AREA	4		0	COMMUNITY/ ARE	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
222 1 200 1 11110	~p	<u></u>	0.00		5.546	<u> </u>	0.00		
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$			

LEGAL NAME OF OWNER OF CAB CABLE ONE, INC.	LE SYSTEM:				S	YSTEM ID# 006726		
			TE FEES FOR EAC					
NINTH COMMUNITY/ AREA	SUBSCRIBER GRO		OOMMUNUTY/ARE		SUBSCRIBER GROU			
		0	COMMUNITY/ AREA 0					
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	_							
	_							
otal DSEs	'	0.00	Total DSEs	<u>.</u>	••	0.00		
ross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
	SUBSCRIBER GRO				SUBSCRIBER GROU			
OMMUNITY/ AREA		0	COMMUNITY/ AREA	4		0		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
otal DSEs		0.00	Total DSEs			0.00		
	\$	0.00	Total DSEs Gross Receipts Four	th Group	\$	0.00		
Fotal DSEs Gross Receipts Third Group				th Group	\$			
	\$			·	\$			

	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 006726										
		COMPUTATION C		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP				
COMMUNITY/ AREA	Α		0	COMMUNITY/ ARE	9 Computation						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of			
								Base Rate Fee			
								and			
								Syndicated Exclusivity			
		_						Surcharge			
								for			
								Partially			
								Distant Stations			
		-						Otations			
Total DSEs	•		0.00	Total DSEs	<u> </u>		0.00				
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00				
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00				
COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		SUBSCRIBER GRO	UP 0				
COMMONT I/ AREA				COMMONT T/ ARE							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Total DSEs			0.00	Total DSEs			0.00				
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00				
Base Rate Fee Third	ase Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fou	rth Group	\$	0.00				
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$					

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 006726									
QE\		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GRO	I IP		
COMMUNITY/ ARE			0	COMMUNITY/ AREA	0	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	Computation of				
								Base Rate Fee	
								and	
								Syndicated Exclusivity	
		_						Surcharge	
								for	
		-						Partially	
								Distant	
								Stations	
		•							
		•							
T			0.00	T / 1 DOE			0.00		
Total DSEs			0.00	Total DSEs		-	0.00		
Gross Receipts Firs	t Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
	NINTEENTH	SUBSCRIBER GROU	JP	-	TWENTIETH	I SUBSCRIBER GRO	UP		
COMMUNITY/ ARE	A		0	COMMUNITY/ AREA	4		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-							
		-							
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Thir	rd Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
			criber group	as shown in the boxes	s above.	•			
Enter here and in bl	ock a, iirie 1, s	phace L (page /)				\$		I	

EGAL NAME OF OWNE	R OF CABI	LE SYSTEM:				S	YSTEM ID# 006726		
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH SUBSCRIBER GROUP					
	Y-FIRST	SUBSCRIBER GRO		l		SUBSCRIBER GROU			
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
							<u></u>		
otal DSEs			0.00	Total DSEs			0.00		
ross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
ise Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
TWENT	Y-THIRD	SUBSCRIBER GRO	UP	TWEN	TY-FOURTH	I SUBSCRIBER GRO	UP		
DMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		_							
otal DSEs			0.00	Total DSEs			0.00		
ross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
lase Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee Third G Base Rate Fee: Add the	e base rat					\$	0.00		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 006726									
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GRO	LIP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
								Syndicated	
								Exclusivity Surcharge	
								for	
								Partially	
								Distant	
								Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
TWENTY	-SEVENTH	SUBSCRIBER GROU	JP	TWEN	NTY-EIGHTH	I SUBSCRIBER GRO	UP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
								1	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add Enter here and in bloo			riber group	as shown in the boxes	s above.	\$			

LEGAL NAME OF OWI		E SYSTEM:				S	006726	Name	
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GRO	UP	9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	COMMUNITY/ AREA0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fee	
								and Syndicated	
								Exclusivity	
								Surcharge	
								for Partially	
								Distant	
								Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
		SUBSCRIBER GROU		ii —		SUBSCRIBER GRO	UP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			0.00	Total DSEs		I	0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
		<u> </u>			г	Γ.			
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$			

					_	YSTEM ID# 006726
			TE FEES FOR EAC			
	SUBSCRIBER GRO				I SUBSCRIBER GRO	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	.					
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
THIRTY-FIFT	I SUBSCRIBER GRO)UP	TI	HIRTY-SIXTH	I SUBSCRIBER GRO	UP
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00
	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 006726	Name
				ATE FEES FOR EAG				
		SUBSCRIBER GRO				H SUBSCRIBER GRO		9
COMMUNITY/ AREA	······		0	COMMUNITY/ ARE	EA			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
		_						Surcharge
								for
								Partially
								Distant Stations
								I
								I
Total DSEs	· ·	! !	0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
	•				·			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
		SUBSCRIBER GRO				H SUBSCRIBER GRO	_	
COMMUNITY/ AREA	4		0	COMMUNITY/ ARE	:A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								I
								I
								I
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo	the base ra	te fees for each subs	scriber group	as shown in the boxe	es above.	\$		

CABLE ONE, INC.	SLE SYSTEM:				S	YSTEM ID# 006726
			TE FEES FOR EAC			
FORTY-FIRST	SUBSCRIBER GRO	FOR COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	
		0				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
Base Rate Fee First Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00
FORTY-THIRD	SUBSCRIBER GRO	UP	FOR	TY-FOURTH	SUBSCRIBER GRO	UP
OMMUNITY/ AREA		0	COMMUNITY/ AREA	4		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
				••••		
	-					
otal DSEs		0.00	Total DSEs			0.00
Gross Receipts Third Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00
, , , , , , , , , , , , , , , , , , ,						I

CABLE ONE, INC.	LE SYSTEM:				S	YSTEM ID# 006726
			TE FEES FOR EAC			
FORTY-FIFTH COMMUNITY/ AREA	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		I SUBSCRIBER GRO	JP 0
		<u> </u>				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	-					
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
	SUBSCRIBER GRO		TT .		SUBSCRIBER GROU	
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
O/ILL GIGIT DOL						
JALE GIGIN BOL						
THE GOV BOLL						
THE GION BOE						
JAC STONE BOLL						
		0.00	Total DSEs			0.00
Total DSEs	\$	0.00	Total DSEs Gross Receipts Four	th Group	\$	0.00
Fotal DSEs	\$			th Group	\$	_
Fotal DSEs Gross Receipts Third Group Base Rate Fee Third Group	\$				\$	_

EGAL NAME OF OWNER OF CAE CABLE ONE, INC.	BLE SYSTEM:				S	YSTEM ID# 006726
			TE FEES FOR EACH			
	SUBSCRIBER GRO				H SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	•					
otal DSEs		0.00	Total DSEs	•		0.00
ross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00
	SUBSCRIBER GRO		li		SUBSCRIBER GROU	
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
ross Receipts Third Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00
					i i	
ase Rate Fee Third Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP FIFTY-HIRD SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE D.00 Gross Receipts First Group S D.00 FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 DSE CALL SIGN DSE CALL SIG	ABLE ONE, INC.	LE SYSTEM:					YSTEM ID# 006726
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs D.00 Total DSEs Gross Receipts First Group \$ 0.00 FIFTY-FIFTH SUBSCRIBER GROUP FIFTY-SIXTH SUBSCRIBER GROUP COMMUNITY/AREA 0 COMMUNITY/AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs 0.00 Total DSEs 0.00 Total							
CALL SIGN DSE CA		SUBSCRIBER GROU		i i		SUBSCRIBER GRO	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE			U				U
Gross Receipts First Group Base Rate Fee First Group FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL		CALL SIGN	DSE			CALL SIGN	DSE
Siross Receipts First Group Siross Receipts First Group Siross Receipts First Group Siross Receipts Second Group Siross Re		-					
Gross Receipts First Group Base Rate Fee First Group FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL							
Gross Receipts First Group Base Rate Fee First Group FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL							
Gross Receipts First Group Base Rate Fee First Group FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL							
Siross Receipts First Group Siross Receipts First Group Siross Receipts First Group Siross Receipts Second Group Siross Re		 					
STORM RECEIPTS FIRST Group SOLUTION SOLUTION							
ross Receipts First Group s							
ross Receipts First Group ase Rate Fee First Group FIFTY-FIFTH SUBSCRIBER GROUP OMMUNITY/ AREA OCCIMINATIVE AREA CALL SIGN DSE CALL SIG							
ross Receipts First Group s							
ross Receipts First Group ase Rate Fee First Group FIFTY-FIFTH SUBSCRIBER GROUP OMMUNITY/ AREA OCCIMINATIVE AREA CALL SIGN DSE CALL SIG							
STORM RECEIPTS FIRST Group SOLUTION SOLUTION							
ross Receipts First Group s							
Base Rate Fee First Group FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE	otal DSEs		0.00	Total DSEs			0.00
FIFTY-FIFTH SUBSCRIBER GROUP OMMUNITY/ AREA OCALL SIGN DSE CALL SIGN DSE	ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
FIFTY-FIFTH SUBSCRIBER GROUP OMMUNITY/ AREA OCALL SIGN DSE CALL SIGN DSE							
OMMUNITY/ AREA O COMMUNITY/ ARE	ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
CALL SIGN DSE CA		SUBSCRIBER GROU		11		SUBSCRIBER GRO	
otal DSEs Double DSEs	OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
	CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		-					
	otal DSEs		0.00	Total DSEs			0.00
ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	ross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00			0.00	Base Rate Fee Four	rth Group	s	0.00

LEGAL NAME OF OW CABLE ONE, IN		E SYSTEM:				S	006726	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GRO	UP	
COMMUNITY/ ARE			0	COMMUNITY/ AREA	0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant
		-						Stations
		-						
		•						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	: Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
F	IFTY-NINTH	SUBSCRIBER GRO	JP		SIXTIETH	I SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA	\		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		_						
		-						
		•						
		•						
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Thire	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Thire	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

CABLE ONE, IN		LE SYSTEM:				S	006726	Name
		COMPUTATION C		ATE FEES FOR EAC		RIBER GROUP D SUBSCRIBER GRO	LIP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
S	IXTY-THIRD	SUBSCRIBER GRO	DUP	SIX	(TY-FOURT	H SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo	I the base ra ock 3, line 1,	te fees for each subs space L (page 7)	scriber group	as shown in the boxe	es above.	\$		

DI OCIC A						YSTEM ID# 006726
			TE FEES FOR EAC	H SUBSCF	RIBER GROUP	
	SUBSCRIBER GRO				H SUBSCRIBER GRO	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	+					
etal DCFe	Ш	0.00	Total DCCs		П	0.00
otal DSEs		0.00	Total DSEs		-	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
SIXTY-SEVENTH	I SUBSCRIBER GRO	UP	SI	XTY-EIGHTH	H SUBSCRIBER GRO	UP
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
111111111111111111111111111111111111111						
otal DSEs		0.00	Total DSEs			0.00
ross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00
•			·	•		
	i					

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 006726	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCF	RIBER GROUP		
SIXT	Y-NINTH	SUBSCRIBER GRO	JP	SI	EVENTIETH	I SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fee
		-						and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs	<u> </u>		0.00	Total DSEs		11	0.00	
Gross Receipts First Gr	าดเมท	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Cross resource river or	оцр			Cross resolpts esse	na Oroup	<u>*</u>		
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Second		\$	0.00	
	ry-first	SUBSCRIBER GROU		ii e		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e fees for each subsc space L (page 7)	criber group	as shown in the boxes	above.	\$		

BLOCK A: COMPUTATION OF SEVENTY-THIRD SUBSCRIBER GROCOMMUNITY/ AREA CALL SIGN DSE CALL SIGN CALL SIGN CALL SIGN CALL SIGN CALL SIGN CALL SIGN CALL SIGN			TY-FOURTH	RIBER GROUP I SUBSCRIBER GROU	JP 0
COMMUNITY/ AREA	0	COMMUNITY/ ARE	Α		
				CALL SIGN	
CALL SIGN DSE CALL SIGN	DSE	**		CALL SIGN	
					DSE
				1	
otal DSEs	0.00	Total DSEs			0.00
oss Receipts First Group \$	0.00	Gross Receipts Sec	ond Group	\$	0.00
se Rate Fee First Group \$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
SEVENTY-FIFTH SUBSCRIBER GRO	UP	SEV	ENTY-SIXTH	SUBSCRIBER GROU	JP
DMMUNITY/ AREA	0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	<u> </u>				
otal DSEs	0.00	Total DSEs			0.00
Fross Receipts Third Group \$	0.00	Gross Receipts Fou	rth Group	\$	0.00
Base Rate Fee Third Group \$	0.00	Base Rate Fee Fou	rth Group	\$	0.00

CABLE ONE, INC.	BLE SYSTEM:				S	YSTEM ID# 006726	
			TE FEES FOR EAC				
	I SUBSCRIBER GRO		SEVENTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA		0	COMMUNITY/ ARE	4		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	STATE SIGN						
otal DSEs		0.00	Total DSEs			0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	Rate Fee First Group \$ 0.00			ond Group	\$	0.00	
	0.00	Dase Nate i ee occ		r.			
SEVENTY-NINTH	I SUBSCRIBER GRO	-	Dase Nate Fee Occ		SUBSCRIBER GRO	UP	
	1 SUBSCRIBER GRO	-	COMMUNITY/ AREA	EIGHTIETH		UP 0	
OMMUNITY/ AREA	SUBSCRIBER GRO	DUP		EIGHTIETH			
DMMUNITY/ AREA		0 0	COMMUNITY/ AREA	EIGHTIETH	SUBSCRIBER GRO	0	
DMMUNITY/ AREA		0 0	COMMUNITY/ AREA	EIGHTIETH	SUBSCRIBER GRO	0	
DMMUNITY/ AREA		0 0	COMMUNITY/ AREA	EIGHTIETH	SUBSCRIBER GRO	0	
DMMUNITY/ AREA		0 0	COMMUNITY/ AREA	EIGHTIETH	SUBSCRIBER GRO	0	
OMMUNITY/ AREA		0 0	COMMUNITY/ AREA	EIGHTIETH	SUBSCRIBER GRO	0	
OMMUNITY/ AREA		0 0	COMMUNITY/ AREA	EIGHTIETH	SUBSCRIBER GRO	0	
OMMUNITY/ AREA		0 0	COMMUNITY/ AREA	EIGHTIETH	SUBSCRIBER GRO	0	
OMMUNITY/ AREA		0 0	COMMUNITY/ AREA	EIGHTIETH	SUBSCRIBER GRO	0	
OMMUNITY/ AREA		0 0	COMMUNITY/ AREA	EIGHTIETH	SUBSCRIBER GRO	0	
OMMUNITY/ AREA		0 0	COMMUNITY/ AREA	EIGHTIETH	SUBSCRIBER GRO	0	
OMMUNITY/ AREA		0 0	COMMUNITY/ AREA	EIGHTIETH	SUBSCRIBER GRO	0	
CALL SIGN DSE		DUP DSE	CALL SIGN	EIGHTIETH	SUBSCRIBER GRO	DSE	
CALL SIGN DSE		DUP O DSE O O O O O O O O O O O O O	COMMUNITY/ AREA	EIGHTIETH	SUBSCRIBER GRO	DSE O.00	
CALL SIGN DSE CALL SIGN DSE		DUP DSE	CALL SIGN	DSE	SUBSCRIBER GRO	DSE	
COMMUNITY/ AREA	CALL SIGN	DUP O DSE O O O O O O O O O O O O O	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE Th Group	CALL SIGN	DSE O.00	

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABI	LE SYSTEM:				S	YSTEM ID# 006726
BL	OCK A: (COMPUTATION O	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP	
	ΓY-FIRST	SUBSCRIBER GRO		EIGHTY-SECOND SUBSCRIBER GROUP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
etal DSEs			0.00	Total DSEs			0.00
otal DSEs				Total DSEs			
oss Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	and Group	\$	0.00
ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
EIGHT	Y-THIRD	SUBSCRIBER GRO	UP	EIGH	TY-FOURTH	SUBSCRIBER GROU	UP
OMMUNITY/ AREA			0	COMMUNITY/ AREA 0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
			···				
otal DSEs			0.00	Total DSEs			0.00
ross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00
Base Rate Fee: Add the Enter here and in block	e base rat	te fees for each subs				\$	0.00

LEGAL NAME OF OW CABLE ONE, IN		LE SYSTEM:				S	006726	Name
El		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	OMMUNITY/ AREA 0			COMMUNITY/ ARE	0	9 Computation		
CALL SIGN DSE		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and Syndicated
								Exclusivity
		_						Surcharge
								for
								Partially
								Distant Stations
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts Firs	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec				
		SUBSCRIBER GRO		ii ee		SUBSCRIBER GRO	UP 0	
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 006726									
				TE FEES FOR EACH		IBER GROUP SUBSCRIBER GROU			
	Y-NINTH	SUBSCRIBER GROU	JP 0			9			
COMMUNITY/ AREA				COMMUNITY/ AREA			0	Computation	
CALL SIGN	CALL SIGN DS CALL SIGN DS				DSE	CALL SIGN	DSE	of	
								Base Rate Fed	
								Syndicated	
								Exclusivity	
								Surcharge	
								for	
								Partially Distant	
								Stations	
Total DSEs			0.00	Total DSEs		-	0.00		
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00		
Base Rate Fee First Group \$ 0.00				Base Rate Fee Second	d Group	\$	0.00		
NINE	TY-FIRST	SUBSCRIBER GROU	IP	NINETY					
COMMUNITY/ AREA			0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						-			
Total DSEs 0.00		0.00	Total DSEs			0.00			
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth Group \$ 0.00					
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes a	above.	\$			

CABLE ONE, INC.	BLE SYSTEM:					YSTEM ID# 006726	
BLOCK A	COMPUTATION O	F BASE RA					
	O SUBSCRIBER GRO		NINETY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN DSE CALL SIGN DSE				
	O'ALL GIGHT BGL						
	an						
otal DSEs		0.00	Total DSEs	•		0.00	
Fross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	H SUBSCRIBER GRO		Ti .		SUBSCRIBER GROU		
OMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	1.1			·····			
otal DSEs		0.00	Total DSEs			0.00	
	\$	0.00	Total DSEs Gross Receipts Fou	urth Group	\$	0.00	
Total DSEs Gross Receipts Third Group Base Rate Fee Third Group	\$			·	\$		

EGAL NAME OF OWNER OF CAB CABLE ONE, INC.	LE SYSTEM:				S	YSTEM ID# 006726	
			TE FEES FOR EACH				
	SUBSCRIBER GROU		NINETY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	,						
	,,						
otal DSEs	!!	0.00	Total DSEs		!!	0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
				О. очр			
ase Rate Fee First Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
NINETY-NINTH	SUBSCRIBER GROU	JP	ii .		SUBSCRIBER GRO	JP	
OMMUNITY/ AREA		0	COMMUNITY/ AREA				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	·						
otal DSEs		0.00	Total DSEs	•		0.00	
ross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fourth	h Group	\$	0.00	
ross Receipts Third Group			11			-	
cross Receipts Third Group						1	
iross Receipts Third Group ase Rate Fee Third Group	\$	0.00	Base Rate Fee Fourti	h Group	\$	0.00	

LEGAL NAME OF OW CABLE ONE, IN		E SYSTEM:				S	006726	Name
				ATE FEES FOR EAC				<u> </u>
		SUBSCRIBER GROU		ONE HUNDRE	9			
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
		-				H		Surcharge
								for
								Partially
								Distant Stations
		-						Otations
		•						
Total DSEs	•		0.00	Total DSEs	-		0.00	
Gross Receipts First	Gross Receipts First Group \$ 0.00			Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00	
		SUBSCRIBER GROU		II		I SUBSCRIBER GRO	_	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

Δ		IBER GROUP	0110000						
O COMMUNITY/ AREA O COMPUTATION O COMPUTATION OF COMPUTATION OF COMPUTATION OF OF		IDEN ONOO	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION O	LOCK A: (В	
DSE CALL SIGN DSE CALL SIGN DSE Of	DUP	SUBSCRIBER GROU	ONE HUNDF	JP	ONE HUNDRED FIFTH SUBSCRIBER GROUP				
DSE CALL SIGN DSE CALL SIGN DSE of	0			0	MMUNITY/ AREA 0				
Base Rate Fo	DSE	CALL SIGN	DSE	Til .	DSE	CALL SIGN DSE CALL SIGN			
and									
Syndicated									
Syndroutes Exclusivity									
Surcharge									
for									
Partially Polytrate									
Distant Stations									
0.00 Total DSEs 0.00	0.00			Total DSEs	0.00			Total DSEs	
		¢	d Group			e	Proup	Gross Receipts First G	
Group \$ 0.00 Gross Receipts Second Group \$ 0.00	0.00	3	u Group	Gloss Receipts Secon	0.00	4	лоир	oloss Neceipis Filsi C	
Group \$ 0.00 Base Rate Fee Second Group \$ 0.00	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G	
O SEVENTH SUBSCRIBER GROUP ONE HUNDRED EIGHTH SUBSCRIBER GROUP	DUP	SUBSCRIBER GROU	D EIGHTH	11	JP	SUBSCRIBER GRO	SEVENTH		
A O COMMUNITY/ AREA O	COMMUNITY/ AREA 0							COMMUNITY/ AREA	
DSE CALL SIGN DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
						•••••••••••			
	0.00			Total DSEs	0.00		l	Total DSEs	
d Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	0.00	\$	Group	Gross Receipts Fourth	0.00	Gross Receipts Third Group \$ 0.00			
Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	0.00	Base Rate Fee Fourth Group \$ 0.00			0.00	Base Rate Fee Third Group \$ 0.00			

M ID# 6726	SYS								EGAL NAME OF OWN CABLE ONE, INC	
				FEES FOR EA						
	ONE HUNDRED TENTH SUBSCRIBER GROUP					ONE HUNDRED NINTH SUBSCRIBER GROUP				
0				MMUNITY/ ARI	0			EA	COMMUNITY/ AREA	
DSE	LL SIGN		DS	CALL SIGN	DSE	LL SIGN DSE CALL SIGN DSE				
В										
0.00		_		tal DSEs	0.00				otal DSEs	
		\$	nd Gra	oss Receipts Se	0.00		\$	st Group	Gross Receipts First (
0.00		φ	na Oi			ross Receipts First Group \$ 0.00				
		_ <u>*</u>	na Ore							
				se Rate Fee Se	0.00		\$	st Group	Base Rate Fee First (
0.00	CRIBER GROUP	\$	nd Gro	se Rate Fee Se	JP	CRIBER GROU		D ELEVENTH	ONE HUNDRED E	
0.00	CRIBER GROUP	\$	nd Gro	se Rate Fee Se		CRIBER GROU		D ELEVENTH	ONE HUNDRED E	
0.00	CRIBER GROUP	\$	nd Gro	se Rate Fee Se	JP	CRIBER GROU	TH SUBS	D ELEVENTH	ONE HUNDRED E	
0.00		\$	nd Gro	se Rate Fee Se ONE HUNDR DMMUNITY/ ARI	JP 0		TH SUBS	D ELEVENTH	ONE HUNDRED E	
0.00		\$	nd Gro	se Rate Fee Se ONE HUNDR DMMUNITY/ ARI	JP 0		TH SUBS	D ELEVENTH	ONE HUNDRED E	
0.00		\$	nd Gro	se Rate Fee Se ONE HUNDR DMMUNITY/ ARI	JP 0		TH SUBS	D ELEVENTH	ONE HUNDRED E	
0.00		\$	nd Gro	se Rate Fee Se ONE HUNDR DMMUNITY/ ARI	JP 0		TH SUBS	D ELEVENTH	ONE HUNDRED E	
0.00		\$	nd Gro	se Rate Fee Se ONE HUNDR DMMUNITY/ ARI	JP 0		TH SUBS	D ELEVENTH		
0.00		\$	nd Gro	se Rate Fee Se ONE HUNDR DMMUNITY/ ARI	JP 0		TH SUBS	D ELEVENTH	ONE HUNDRED E	
0.00		\$	nd Gro	se Rate Fee Se ONE HUNDR DMMUNITY/ ARI	JP 0		TH SUBS	D ELEVENTH	ONE HUNDRED E	
0.00		\$	nd Gro	se Rate Fee Se ONE HUNDR DMMUNITY/ ARI	JP 0		TH SUBS	D ELEVENTH	ONE HUNDRED E	
0.00		\$	nd Gro	se Rate Fee Se ONE HUNDR DMMUNITY/ ARI	JP 0		TH SUBS	D ELEVENTH	ONE HUNDRED E	
0.00		\$	nd Gro	se Rate Fee Se ONE HUNDR DMMUNITY/ ARI	JP 0		TH SUBS	D ELEVENTH	ONE HUNDRED E	
0.00		\$	nd Gro	se Rate Fee Se ONE HUNDR DMMUNITY/ ARI	JP 0		TH SUBS	D ELEVENTH	ONE HUNDRED E	
0.00		\$	nd Gro	se Rate Fee Se ONE HUNDR DMMUNITY/ ARI	JP 0		TH SUBS	D ELEVENTH	ONE HUNDRED E	
0.00		\$	nd Gro	se Rate Fee Se ONE HUNDR DMMUNITY/ ARI	JP 0		TH SUBS	D ELEVENTH	ONE HUNDRED E	
0.00 0.00 DSE		\$	D TWE	SE RATE FEE SE ONE HUNDR DMMUNITY/ ARI CALL SIGN	DSE		TH SUBS	D ELEVENTHEA	ONE HUNDRED E	
0.00 0.00 DSE		\$ TTH SU	D TWE	SE RATE FEE SE ONE HUNDR DMMUNITY/ ARI CALL SIGN Lal DSEs	DSE O.00		TH SUBS	D ELEVENTHEA	ONE HUNDRED ECOMMUNITY/ AREA	

CABLE ONE, INC.	R OF CABL	E SYSTEM:				SY	STEM ID# 006726	Name	
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	1 SUBSCR	IBER GROUP			
ONE HUNDRED THIR	TEENTH	SUBSCRIBER GROU		ONE HUNDRED FO	D	9			
COMMUNITY/ AREA	COMMUNITY/ AREA 0			COMMUNITY/ AREA	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of			
ONEE CICIT	DOL	O/ LEE STOTY	202	O/ LEE GIGIT	DSE	CALL SIGN	562	Base Rate Fee	
								and	
								Syndicated	
								Exclusivity	
								Surcharge for	
								Partially	
								Distant	
		=						Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00		
ONE HUNDRED FIF	TEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED S	SIXTEENTH	SUBSCRIBER GROU)		
COMMUNITY/ AREA			0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		_							
		-							
		-				-			
						•			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourti	h Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$			

Name	YSTEM ID# 006726	S				E SYSTEM:	R OF CABL	LEGAL NAME OF OWNE CABLE ONE, INC.
		BER GROUP	SUBSCRI	TE FEES FOR EACH				
٥	JP	SUBSCRIBER GROU	HTEENTH	ONE HUNDRED EIG		SUBSCRIBER GROU	NTEENTH	NE HUNDRED SEVEN
9 Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and						-		
Syndicat Exclusiv								
Surchar								
for								
Partially		_						
Distant		_						
Stations		_						
	0.00			Total DSEs	0.00			Γotal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	3ase Rate Fee First Gr
	JP	SUBSCRIBER GROU	/ENTIETH	ONE HUNDRED TV	JP	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						-		
						-		
	0.00			Total DSEs	0.00			Total DSEs
	0.00	S	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	
	-	\$	Group			\$	Group	Total DSEs Gross Receipts Third G

CABLE ONE, INC.	R OF CABL	E SYSTEM:				SY	STEM ID# 006726	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCR	IBER GROUP		
ONE HUNDRED TWEN						SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
3.122.3.3.1								Base Rate Fee
		-						and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
		-						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWEN	TY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
		-				—		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC.	BLE SYSTEM:				S	YSTEM ID# 006726
			TE FEES FOR EAC			
ONE HUNDRED TWENTY-FIFT COMMUNITY/ AREA	1 SUBSCRIBER GROUP	0	ONE HUNDRED TV		I SUBSCRIBER GROUF	0
COMMUNITY/ AREA		U				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	1					
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
E HUNDRED TWENTY-SEVENT	1 SUBSCRIBER GROU)	ONE HUNDRED TWE	NTY-EIGHTH	I SUBSCRIBER GROUF)
OMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	T		1 I			
Total DSEs		0.00	Total DSEs			0.00
	\$	0.00	Total DSEs Gross Receipts Four	rth Group	\$	0.00
Fotal DSEs Gross Receipts Third Group	\$			rth Group	\$	

DI	OCK A· (COMPLITATION OF	BASE DA	TE FEES FOR EACH	LSURSOP	IRER GROUP		
ONE HUNDRED TWEN				H		SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
								Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
								Syndica
								Exclusiv
								Surchar for
								Partiall
								Distan
								Station
		-			<u></u>			Otation
		-	<u></u>					
		+						
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First Group \$ 0.00				Gross Receipts Secor	nd Group	\$	0.00	
ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE LILINDRED THE	TV FIDET	SUBSCRIBER GROUP		ONE HUNDRED THIS	TV CECOND	SUBSCRIBER GROUP		
	IT-FIRST	SUBSCRIBER GROUP			I Y-SECOND	SUBSCRIBER GROUP		
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			-					
		_						
		-						
otal DSEs			0.00	Total DSEs			0.00	
	roup	S			n Group		-	
iotal DSEs Gross Receipts Third G	roup	\$	0.00	Total DSEs Gross Receipts Fourth	n Group	\$	0.00	
	·	\$				\$	-	
ross Receipts Third G	·		0.00	Gross Receipts Fourth			0.00	

CABLE ONE, INC		LE SYSTEM:				S	006726	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED TH	IRTY-THIRD	SUBSCRIBER GROU	P	ONE HUNDRED TH	RTY-FOURTH	SUBSCRIBER GROUP	P	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TH	IRTY-FIFTH	SUBSCRIBER GROUI	P	ONE HUNDRED	THIRTY-SIXTH	I SUBSCRIBER GROU	P	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						H		
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	the base rat	te fees for each subs		as shown in the boxe		\$	0.00	

LEGAL NAME OF OW CABLE ONE, IN		E SYSTEM:				S	YSTEM ID# 006726	Name
				TE FEES FOR EACH				
		SUBSCRIBER GROUP		H .		I SUBSCRIBER GROUP		9
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
		_						Surcharge
								for
		-						Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs		1	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	: Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED T	HIRTY-NINTH	SUBSCRIBER GROUP		ONE HUNDRED	FORTIETH	I SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:					006726	Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED F	ORTY-FIRST	SUBSCRIBER GROU	IP	ONE HUNDRED FO	RTY-SECOND	SUBSCRIBER GROU	Р	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
		 						Syndicated
								Exclusivity
								Surcharge
		_						for Partially
						-		Distant
		-						Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED F	ORTY-THIRD	SUBSCRIBER GROU	IP	ONE HUNDRED FO	RTY-FOURTH	SUBSCRIBER GROUI	P	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						-		
						-		
						†		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	the base ra	te fees for each sub		as shown in the boxe		\$	0.00	

CABLE ONE, INC		LE SYSTEM:				S	006726	Name
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCI	RIBER GROUP		
ONE HUNDRED F	ORTY-FIFTH	SUBSCRIBER GROU	IP	ONE HUNDRED	FORTY-SIXTI	H SUBSCRIBER GROUP	0	0
COMMUNITY/ AREA	4		0	COMMUNITY/ ARE	:A		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and
								Syndicated
		_						Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FOR	TY-SEVENTH	SUBSCRIBER GROU	IP	ONE HUNDRED F	ORTY-EIGHTI	H SUBSCRIBER GROUP)	
COMMUNITY/ AREA	A		0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		H						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	o as shown in the boxe	es above.	\$		

00672					LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
DMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	RIBER GROUP	SUBSCR	TE FEES FOR EAC				
	H SUBSCRIBER GR	O FIFTIETH	i i		SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FOR
O COMMUNITY/ AREA O			COMMUNITY/ AREA	0			COMMUNITY/ AREA
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	CALL SIGN			DSE	CALL SIGN	DSE	CALL SIGN
					<u> </u>		
					<u> </u>		
					_		
					<u> </u>		
	1						
			Total DSEs	0.00			otal DSEs
Gross Receipts Second Group \$ 0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	roup	Gross Receipts First G
Base Rate Fee Second Group \$ 0.00	\$	nd Group	Base Rate Fee Seco	0.00	\$	roup	3ase Rate Fee First G
UBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP	O SUBSCRIBER GR	Y-SECOND	ONE HUNDRED FIFT	JP	SUBSCRIBER GRO	TY-FIRST	ONE HUNDRED FIF
0 COMMUNITY/ AREA 0			İ				COMMUNITY/ AREA
CALL SIGN DSE CALL SIGN DSE	CALL SIGN	DSF	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
					-		
		202					
					L		
0.00 Total DSEs 0.00			Total DSEs	0.00			Fotal DSEs
0.00	\$				\$	Group	
	\$				\$	Group	Fotal DSEs Gross Receipts Third G

LEGAL NAME OF OW CABLE ONE, IN		LE SYSTEM:				S	3YSTEM ID# 006726	Name
		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAC		RIBER GROUP	UP	
COMMUNITY/ AREA	Α		0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		_						Base Rate Fee
								and
								Syndicated Exclusivity
		_						Surcharge
								for
								Partially
		_						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED F	FIFTY-FIFTH	SUBSCRIBER GRO	UP	ONE HUNDRED	FIFTY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Α		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OW CABLE ONE, IN		LE SYSTEM:					006726	Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED FIF	TY-SEVENTH	SUBSCRIBER GROU	IP	ONE HUNDRED	FIFTY-EIGHTH	SUBSCRIBER GROU	Р	0
COMMUNITY/ AREA	Α		0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
		_						Exclusivity
								Surcharge
								for
								Partially
								Distant
		_						Stations
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED	FIFTY-NINTH	SUBSCRIBER GROU	IP	ONE HUND	RED SIXTIETH	SUBSCRIBER GROU	P	
COMMUNITY/ AREA	Α		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
							·····	
						*		
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
			scriber group	as shown in the boxe	es above.	¢		
Enter here and in blo	JON J, IIIIE I,	space L (page 7,				\$		

CALL SIGN DSE	CABLE ONE, INC.	•						006726	Name
COMMUNITY AREA DAHO FALLS AMMON/BASALT COMMUNITY AREA BLACKFOOT CALL SIGN DSE CALL SIGN C	В				TE FEES FOR EACH				
CALL SIGN DSE								OUP	9
CALL SIGN DSE	COMMUNITY/ AREA	IDAHO	FALLS/AMMON/	BASALT	COMMUNITY/ AREA	BLACK	FOOT		Computation
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
Total DSEs									Base Rate F
Total DSEs Total DSEs Total DSEs TOTAL TOT									and
Total DSEs OLOU Sase Rate Fee First Group THIRD SUBSCRIBER GROUP THIRD SUBSCRIBER GROUP CALL SIGN DSE CA									Syndicate
									Exclusivit
Total DSEs Jose Rate Fee First Group THIRD SUBSCRIBER GROUP CALL SIGN DSE									Surcharge
Total DSEs Jose Rate Fee First Group THIRD SUBSCRIBER GROUP CALL SIGN DSE									for
Total DSEs Octol									Partially
Total DSEs Octol									Distant
Since Rate Fee First Group Since Rate Fee Second Gro									Stations
Gross Receipts First Group Sase Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE									
Gross Receipts First Group Sase Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE									
Gross Receipts First Group \$ 1,730,127.89 \$ 0.00 Base Rate Fee Second Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL									
Gross Receipts First Group Sase Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE									
Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN									
Gross Receipts First Group \$ 1,730,127.89 \$ 0.00 Base Rate Fee Second Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL									
Gross Receipts First Group Sase Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE	otal DSEs	•		0.00	Total DSEs	•		0.00	
THIRD SUBSCRIBER GROUP THIRD SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DS		`roup	£ 1.730			ad Craup			
THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CA	Gross Receipts First G	oroup	\$ 1,730	, 127.09	Gross Receipts Secon	na Group	\$	115,456.42	
THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CA									
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DS	Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE		THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GRO	UP	
Total DSEs O.00 Gross Receipts Third Group Sase Rate Fee Third Group Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	COMMUNITY/ AREA			0	COMMUNITY/ AREA				
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00			_						
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	otal DSEs			0.00	Total DSEs			0.00	
\$ 0.00 Base Rate Fee Fourth Group \$ 0.00	Gross Receipts Third (Group	<u> </u>	0.00	Gross Pacainta Fourt	h Group	<u> </u>	0.00	
	noss neceipis miid (υιοαρ	<u>Ψ</u>	0.00	O 1033 Neceibis Loniii	ιι σισυρ	4	0.00	
	3ase Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourti	h Group	\$	0.00	
ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Inter here and in block 3, line 1, space L (page 7) \$ 0.00				criber group	as shown in the boxes	above.	•	0.00	

		IBFR GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPLITATION OF	OCK A· C	RI
	JP	SUBSCRIBER GROU				SUBSCRIBER GROU		DL
9	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computat of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and Syndicat								
Exclusiv		_						
Surcharg for								
Partially								
Distant Stations								
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	ross Receipts First Gr
	0.00	\$		Base Rate Fee Second	0.00	\$		ase Rate Fee First Gr
	JP	SUBSCRIBER GROU	EIGHTH		JP	SUBSCRIBER GROU	FVFNTH	S
	0			COMMUNITY/ AREA	SUBSCRIBER GROUP 0			
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	DSE	CALL SIGN	DSE	COMMUNITY/ AREA		CALL SIGN	DSE	
		CALL SIGN	DSE		0			
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	_	IBER GROUP	SUBSCRI	TE FEES FOR FACH	BASE RA	COMPUTATION OF	OCK A· (BI.
	JP	SUBSCRIBER GROU				SUBSCRIBER GROU		DL
9	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0.00			T / 1 DOE	0.00		<u> </u>	
	0.00			Total DSEs	0.00			otal DSEs
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	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	ase Rate Fee First Gr
	IP	SUBSCRIBER GROU	TWELVTH	7	JP	SUBSCRIBER GROU	EVENTH	EL
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	•	\$			_	\$	roup	

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	H SUBSCRIBER GRO				SUBSCRIBER GRO	UP	
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CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computat of
ALL SIGN DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	Base Rate
							and
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							Surcharg
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al DSEs		0.00	Total DSEs			0.00	
oss Receipts First Group	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
							
se Rate Fee First Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
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FIFTEENT	H SUBSCRIBER GRO	OUP 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0	
FIFTEENT	H SUBSCRIBER GRO	OUP 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0	
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FIFTEENT	H SUBSCRIBER GRO	OUP 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0	
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FIFTEENT	H SUBSCRIBER GRO	OUP 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0	
FIFTEENT	H SUBSCRIBER GRO	OUP 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0	
FIFTEENT	H SUBSCRIBER GRO	OUP 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0	
FIFTEENT	H SUBSCRIBER GRO	OUP 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP 0	
FIFTEENT MMUNITY/ AREA ALL SIGN DSE	H SUBSCRIBER GRO	DUP 0	COMMUNITY/ AREA CALL SIGN	SIXTEENTH	SUBSCRIBER GRO	DSE	
FIFTEENT MMUNITY/ AREA CALL SIGN DSE CALL SI	H SUBSCRIBER GRO	DUP DSE DSE 0.00	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GRO	DSE	
FIFTEENT MMUNITY/ AREA ALL SIGN DSE	H SUBSCRIBER GRO	DUP 0	COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GRO	DSE	
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DI COY	A. COMPLITATI		ATE FEES FOR EAC	H CHDCCD	IBED CDOUD		
	TH SUBSCRIBER		1		I SUBSCRIBER GRO	UP	
MMUNITY/ AREA		0	COMMUNITY/ AREA			0	9
CALL SIGN DSE	II CALL SICA	l Dec	CALL SIGN	Dec	I CALL SIGN	DEF	Computat
CALL SIGN DSE	CALL SIGN	I DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate
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al DSEs		0.00	Total DSEs			0.00	
oss Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
se Rate Fee First Group	¢	0.00	Base Rate Fee Seco	and Group	¢	0.00	
se Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
·	\$ TH SUBSCRIBER				\$ SUBSCRIBER GRO		
·	<u></u>			TWENTIETH			
NINTEEN	<u></u>	R GROUP	-	TWENTIETH		UP	
NINTEEN	TH SUBSCRIBER	R GROUP 0	-	TWENTIETH		UP	
NINTEEN MMUNITY/ AREA	TH SUBSCRIBER	R GROUP 0	COMMUNITY/ AREA	TWENTIETH	SUBSCRIBER GRO	UP 0	
NINTEEN MMUNITY/ AREA	TH SUBSCRIBER	R GROUP 0	COMMUNITY/ AREA	TWENTIETH	SUBSCRIBER GRO	UP 0	
NINTEEN MMUNITY/ AREA	TH SUBSCRIBER	R GROUP 0	COMMUNITY/ AREA	TWENTIETH	SUBSCRIBER GRO	UP 0	
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NINTEEN MMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	TH SUBSCRIBER	R GROUP DSE DOSE O.000	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GRO	DSE	
NINTEEN MMUNITY/ AREA ALL SIGN DSE	TH SUBSCRIBER	R GROUP DSE	COMMUNITY/ AREA	DSE	SUBSCRIBER GRO	UP 0 DSE	
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NI	YSTEM ID# 006726	S'				E STSTEW.		CABLE ONE, INC.
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9		SUBSCRIBER GROU	-SECOND			SUBSCRIBER GROU	TY-FIRST	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00 0.00 DSE	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon TWENT COMMUNITY/ AREA CALL SIGN	0.00	\$ SUBSCRIBER GROU	TOUP Y-THIRD DSE	Base Rate Fee First G TWENT COMMUNITY/ AREA

NI	YSTEM ID# 006726	S`						CABLE ONE, INC.
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9		SUBSCRIBER GROU	TY-SIXTH			SUBSCRIBER GROU	TY-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00 JP	\$ SUBSCRIBER GROU	d Group Y-EIGHTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	roup SEVENTH	Base Rate Fee First G TWENTY-S COMMUNITY/ AREA
	0.00 JP	\$ SUBSCRIBER GROU	d Group Y-EIGHTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	roup SEVENTH	Base Rate Fee First G TWENTY-S COMMUNITY/ AREA
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	O.00 JP OSE O.00	\$ SUBSCRIBER GROU	d Group Y-EIGHTH DSE	Total DSEs	DSE DSE O.00	SUBSCRIBER GROU	DSE	Base Rate Fee First G TWENTY-S COMMUNITY/ AREA

Name	YSTEM ID# 006726							CABLE ONE, INC.
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9		SUBSCRIBER GROU	HIRTIETH			SUBSCRIBER GROU	ΓY-NINTH :	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and						-		
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	0.00	\$	d Group	Base Rate Fee Secon	JP			THIR
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	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon THIRT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	THIR COMMUNITY/ AREA
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	0.00 JP	\$ SUBSCRIBER GROU	d Group	THIRTY COMMUNITY/ AREA CALL SIGN Total DSEs	JP O DSE O O O O O O O O O O O O O	SUBSCRIBER GROU	DSE	THIR COMMUNITY/ AREA CALL SIGN Total DSEs
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Name	YSTEM ID# 006726							CABLE ONE, INC.
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GROU	TY-THIRD	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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NI	YSTEM ID# 006726	S				LE SYSTEM:		CABLE ONE, INC.
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
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	0.00 JP 0	\$ SUBSCRIBER GROU	d Group D EIGHTH	ONE HUNDRE	JP 0	SUBSCRIBER GROU	FOUP	Base Rate Fee First G ONE HUNDRED S COMMUNITY/ AREA
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ONE HUNDRED ELEVENT	\$ H SUBSCRIBER GRO	OUP 0	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	nd Group	SUBSCRIBER GRO	UP 0	
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ONE HUNDRED ELEVENT	\$ H SUBSCRIBER GRO	OUP 0	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	nd Group	SUBSCRIBER GRO	UP 0	
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	YSTEM ID# 006726	S'				LE SYSTEM:	R OF CABL	CABLE ONE, INC.
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CABLE ONE, INC.	ABLE SYSTEM:					006726	Name
BLOCK A	: COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
ONE HUNDRED TWENTY-FIR	ST SUBSCRIBER GROU	JP	ONE HUNDRED TWE	NTY-SECOND	SUBSCRIBER GROUP)	•
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Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWENTY-THIF	D SUBSCRIBER GROU	JP	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP)	
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Name	006726	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 006726							
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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 006726								
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NI	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 006726								
		IBER GROUP	SUBSCR	TE FEES FOR EACH					
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	0.00 JP	SUBSCRIBER GROU	d Group SIXTIETH DSE	ONE HUNDREI COMMUNITY/ AREA CALL SIGN Total DSEs	DSE O.00	SUBSCRIBER GROU	Y-NINTH	COMMUNITY/ AREA	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 006726 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 006726 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 006726 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. NINTH SUBSCRIBER GROUP TENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE Second Group **ELEVENTH SUBSCRIBER GROUP** TWELVTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 006726 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. THIRTEENTH SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group FIFTEENTH SUBSCRIBER GROUP SIXTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 006726 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. SEVENTEENTH SUBSCRIBER GROUP EIGHTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group NINEENTH SUBSCRIBER GROUP TWENTYTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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