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				
	\$				
2/25/2021	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	2020/2							
B	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. 25206 LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM							
	CABLE ONE, INC. d/b/a SPARKLIGHT							
				25206202	20/2			
				25206 2020	0/2			
	210 E EARLL DRIVE PHOENIX, AZ 85012							
С	INSTRUCTIONS: In line 1, give any business or trade names used to it names already appear in space B. In line 2, give the mailing address of							
System	1 IDENTIFICATION OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT	Tallo Gyotom, ii ami	orone in our and additions give					
	MAILING ADDRESS OF CABLE SYSTEM: 3000 N. WESTWOOD BLVD. (Number, street, rural route, apartment, or suite number) POPLAR BLUFF, MO 63902 (City, town, state, zip code)							
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comn	nunity served below and rel	st on page 1b				
Area	with all communities.	I						
Served	CITY OR TOWN TAYLORVILLE	STATE						
First Community			0					
	Below is a sample for reporting communities if you report multiple cha	STATE	CH LINE UP	SUB GRP#				
SamI-	Alda	MD	A	1				
Sample	Alliance	MD	В	2				
	Gering	MD	В	3				

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

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 25206 CABLE ONE, INC. d/b/a SPARKLIGHT Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Δrea of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# **TAYLORVILLE** IL AA 1 First **HEWITTVILLE** IL 1 AA Community **OWANECO** IL AA 1 **PANA** IL AA 1 **CHRISTIAN COUNTY** IL AA 1 STONINGTON IL AA 1 See instructions for IL 1 SHELBYVILLE AA additional information on alphabetization. SHELBY COUNTY IL 1 AA IL 1 **MOWEAQUA** AA **ASSUMPTION** IL AA 1 **BETHANY** IL AA 1 Add rows as necessary. 1 **DALTON CITY** IL AA **BLUE MOUND** IL AA 1 **MACON** IL 1 AA 2 **LITCHFIELD** IL AΒ IL 2 **SCHRAM CITY** AB IL 2 **TAYLOR SPRINGS** AB 3 **RAMSEY** IL AB IL 3 **UNINC. FAYETTE COUNTY** AB IL 3 **BROWNSTOWN** AB VANDALIA IL AB 3 IL 3 **BLUFF CITY** AB 3 IL AB **VERA** IL MONTGOMERY CO. AB 4 **RAYMOND** IL AB 4 4 **FARMERSVILLE** IL AB IL **NOKOMIS** AB 4 COALTON IL AB 4 WITT IL AB 4 IL 4 **HILLSBORO** AB **GIRARD** IL AB 4 **NILWOOD** IL AB 4 IL **SUNSET LAKES** AB 4 VIRDEN IL AB 4 IL **MACOUPIN COUNTY** AB 4 **CARLINVILLE** IL AB 5 5 **EAST GILLESPIE** IL AB

IL

IL

IL

AB

AC

AC

5

6

6

GILLESPIE

AUBURN

THAYER

GREENVILLE	IL	AD	7
UNINC. BOND CO.	IL	AD	7
WHITEHALL	IL	AE	8

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#						
			25206						
CABLE ONE, INC. d/b/a SPARKLIGHT			23200						
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 fillings.									
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-commun channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns be	a subscriber grou								
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	1					
ROODHOUSE	IL	AE	8	First					
CARROLLTON	iL	AE	8	Community					
JERSEYVILLE	IL	AE	9						
BRIGHTON	iL	AE	9						
MANCHESTER	iL	AE	10						
				See instructions for					
				additional information					
				on alphabetization.					
				Add rows as necessary.					
				1					

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l		
	i '	

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC. d/b/a SPARKLIGHT

SYSTEM ID#
25206

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			
	NO. OF			П		NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS		RATE	Ш	CATEGORY OF SERVICE	SUBSCRIBERS	RATE	
Residential:								
 Service to first set 	6,092	\$	40.00					
 Service to additional set(s) 								
 FM radio (if separate rate) 								
Motel, hotel	399	\$	40.50					
Commercial		T						
Converter								
 Residential 		T						
Non-residential		T						
		• • • • • • • • • • • • • • • • • • • •		1 1				

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

BLOCK 2 BLOCK 1 CATEGORY OF SERVICE RATE CATEGORY OF SERVICE RATE CATEGORY OF SERVICE RATE Continuing Services: Installation: Non-residential \$55.00 Pav cable 9.00-18.00 · Motel. hotel EXPANDED BASIC **DIGITAL FAMILY PLUS** \$13.00 • Pay cable—add'l channel Commercial Fire protection Pay cable STARZ SUPER PAK \$18.00 SHOWTIME UNLIMITED Burglar protection • Pay cable-add'l channel \$19.00 Installation: Residential Fire protection **HBO THE WORKS** \$27.00 нво \$18.00 First set 35.00 Burglar protection \$ **CINEMAX** \$13.00 Additional set(s) Other services: • FM radio (if separate rate) 90.00 Reconnect Converter Disconnect Outlet relocation 45.00 · Move to new address \$ 30.00

ACCOUNTING PERIOD: 2020/2 FORM SA3E, PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 25206 CABLE ONE, INC. d/b/a SPARKLIGHT 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.

		CHANN	EL LINE-UP	AA		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
KSDK	35	N	Yes	0	ST. LOUIS, MO	
WICS	42	N	No		SPRINGFIELD, IL	s
WAND	18	N	No		DECATUR, IL	а
WAND-DT2	18.2	I-M	No		DECATUR, IL	······································
WRSP	44	ı	No		SPRINGFIELD, IL	
WRSP-DT2	44.2	I-M	No		SPRINGFIELD, IL	
WBUI	22	ı	No		DECATUR, IL	
WBUI-DT2	22.2	I-M	No		DECATUR, IL	
WCIX	13	ı	No		SPRINGFIELD, IL	
WCIA	48	N	No		CHAMPAIGN, IL	
WILL	9	E	No		URBANA, IL	
WICS-DT2	42.2	I-M	No		SPRINGFIELD, IL	
WICS-DT3	42.3	I-M	No		SPRINGFIELD, IL	

See instructions for additional information on alphabetization.

U.S. Copyright Office

FORM SA3E. PAGE 3.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC. d/b/a SPARKLIGHT

PRIMARY TRANSMITTERS: TELEVISION

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

76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program

basis under specific FCC rules, regulations, or authorizations:

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

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	AB	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KDNL	31	N	No		ST. LOUIS, MO
KDNL-DT2	31.2	I-M	No		ST. LOUIS, MO
KSDK	35	N	Yes	0	ST. LOUIS, MO
KMOV	24	N	No		ST. LOUIS, MO
KETC	9	E	Yes	0	ST. LOUIS, MO
WRBU	47	I	No		E. ST. LOUIS, IL
KTVI	33	I	No		ST. LOUIS, MO
KTVI-DT2	33.2	I-M	No		ST. LOUIS, MO
KPLR	26	I	No		ST. LOUIS, MO
KPLR-DT2	26.2	I-M	No		ST. LOUIS, MO
KPLR-DT3	26.3	I-M	No		ST. LOUIS, MO
WICS	42	N	Yes	О	SPRINGFIELD, IL

Primary Transmitters: Television

FORM SA3E, PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name CABLE ONE, INC. d/b/a SPARKLIGHT 25206 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 substitute program basis, as explained in the next paragraph.

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

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

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	AC	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KSDK	35	N	Yes	0	ST. LOUIS, MO
WICS	42	N	No		SPRINGFIELD, IL
WAND	18	N	Yes	0	DECATUR, IL
WAND-DT2	18.2	I-M	No		DECATUR, IL
WRSP	44	ı	No		SPRINGFIELD, IL
WRSP-DT2	44.2	I-M	No		SPRINGFIELD, IL
WBUI	22	ı	No		DECATUR, IL
WBUI-DT2	22.2	I-M	No		DECATUR, IL
WCIX	13	ı	No		SPRINGFIELD, IL
WCIA	48	N	No		CHAMPAIGN, IL
WILL	9	E	No		URBANA, IL
WICS-DT2	42.2	I-M	No		SPRINGFIELD, IL
WICS-DT3	42.3	I-M	No		SPRINGFIELD, IL

Primary Transmitters: Television

FORM SA3E, PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name CABLE ONE, INC. d/b/a SPARKLIGHT 25206 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations)

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

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

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

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	AD	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KDNL	31	N	No		ST. LOUIS, MO
KDNL-DT2	31.2	I-M	No		ST. LOUIS, MO
KSDK	35	N	No		ST. LOUIS, MO
KMOV	24	N	No		ST. LOUIS, MO
KETC	9	E	Yes	О	ST. LOUIS, MO
WRBU	47	I	No		E. ST. LOUIS, IL
KTVI	33	I	No		ST. LOUIS, MO
KTVI-DT2	33.2	I-M	No		ST. LOUIS, MO
KPLR	26	I	No		ST. LOUIS, MO
KPLR-DT2	26.2	I-M	No		ST. LOUIS, MO
KPLR-DT3	26.3	I-M	No		ST. LOUIS, MO
WICS	42	N	Yes	0	SPRINGFIELD, IL

G

Primary Transmitters: Television

Primary

Transmitters:

Television

FORM SA3E. PAGE 3.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC. d/b/a SPARKLIGHT

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

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

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

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

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

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

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

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

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

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

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

CHANNEL LINE-UP AE								
2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				
31	N	Yes	0	ST. LOUIS, MO				
31.2	I-M	Yes	0	ST. LOUIS, MO				
35	N	Yes	0	ST. LOUIS, MO				
24	N	Yes	0	ST. LOUIS, MO				
9	E	Yes	0	ST. LOUIS, MO				
47	I	Yes	0	E. ST. LOUIS, IL				
33	I	No		ST. LOUIS, MO				
33.2	I-M	No		ST. LOUIS, MO				
26	I	No		ST. LOUIS, MO				
26.2	I-M	No		ST. LOUIS, MO				
26.3	I-M	No		ST. LOUIS, MO				
	CHANNEL NUMBER 31 31.2 35 24 9 47 33 33.2 26 26.2	2. B'CAST CHANNEL NUMBER STATION 31 N 31.2 I-M 35 N 24 N 9 E 47 I 33 I 33.2 I-M 26 I 26.2 I-M	2. B'CAST CHANNEL NUMBER STATION 31 N Yes 31.2 I-M Yes 35 N Yes 24 N Yes 9 E Yes 47 I Yes 33.2 I-M No 33.2 I-M No 26 I No 26.2 I-M No	2. B'CAST CHANNEL NUMBER STATION STATI				

FORM SA3E, PAGE 3.	ACCOUNTII	NG PERIOD: 2020/2
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [see	s under otions	G
[76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations call substitute program basis, as explained in the next paragraph.	rried on a	Primary Transmitters:
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute basis under specific FCC rules, regulations, or authorizations:	te program	Television
• Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if station was carried only on a substitute basis.	the	
List the station here, and also in space I, if the station was carried both on a substitute basis and also on sort basis. For further information concerning substitute basis stations, see page (v) of the general instructions in the pager \$43 form.		

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

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

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

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

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

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

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

1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	
	NUMBER	STATION		(If Distant)	

FORM SA3E. PAGE 3.								
LEGAL NAME OF OW	NER OF CABLE SYS	TEM:			SYSTEM ID#	Name		
CABLE ONE, I	CABLE ONE, INC. d/b/a SPARKLIGHT 2520							
PRIMARY TRANSMITT	ERS: TELEVISION	l						
•			, ,		and low power television stations) only on a part-time basis under	G		
76.59(d)(2) and (4), 7 substitute program ba	6.61(e)(2) and (4) asis, as explained), or 76.63 (re in the next p	eferring to 76.61 paragraph.	(e)(2) and (4))]; ar	in network programs [sections and (2) certain stations carried on a	Primary Transmitter		
basis under specifc F	CC rules, regulation	ons, or autho	orizations:		able system on a substitute program nt and Program Log)—if the	Television		
station was carried	l only on a substitu	ute basis.	. ,	•	<i>-</i>			
basis. For further i	nformation concer				te basis and also on some other the general instructions located			
	ch station's call si	•		. •	such as HBO, ESPN, etc. Identify			
			J	U	on. For example, report multi- stream separately; for example			
WETA-simulcast).			·	`	on for broadcasting over-the-air in			
			•		nay be different from the channel			
on which your cable s Column 3: Indicat	•		ation is a networ	k station, an inder	pendent station, or a noncommercial			
educational station, b	y entering the lette	er "N" (for ne	etwork), "N-M" (fo	or network multica	st), "I" (for independent), "I-M"			
(for independent mult For the meaning of th	,		,.	,	nmercial educational multicast). e paper SA3 form			
Column 4: If the s	tation is outside th	he local serv	rice area, (i.e. "d	istant"), enter "Ye	s". If not, enter "No". For an ex-			
olanation of local services Column 5: If you					paper SA3 form. tating the basis on which your			
cable system carried	the distant station	during the a	accounting perio	d. Indicate by ente	ering "LAC" if your cable system			
carried the distant sta For the retransmis	•				apacity. payment because it is the subject			
					em or an association representing			
•			•	•	/ transmitter, enter the designa- ier basis, enter "O." For a further			
explanation of these	hree categories, s	see page (v)	of the general ir	nstructions located	I in the paper SA3 form.			
				•	to which the station is licensed by the which the station is identifed.			
Note: If you are utilize		. ,		•				
		CHANN	EL LINE-UP	AG				
1. CALL	2. B'CAST 3		1	AG 5. BASIS OF	6. LOCATION OF STATION			
1. CALL SIGN	CHANNEL	3. TYPE OF	1	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
		3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
	CHANNEL	3. TYPE OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
	CHANNEL	3. TYPE OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
	CHANNEL	3. TYPE OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
1. CALL SIGN	CHANNEL	3. TYPE OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
	CHANNEL	3. TYPE OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
	CHANNEL	3. TYPE OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
	CHANNEL	3. TYPE OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.	FD 05 015: 5 -::	OTEM			674	STEM ID#	
LEGAL NAME OF OWN					513	STEM ID#	Name
CABLE ONE, IN	C. d/b/a SP	ARKLIGHT				25206	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s FCC rules and regulation 76.59(d)(2) and (4), 76	ystem during thons in effect or .61(e)(2) and (4	ne accounting n June 24, 198 4), or 76.63 (re	period, except (1, permitting the eferring to 76.61	(1) stations carried e carriage of certa	and low power television stations) only on a part-time basis under in network programs [sections nd (2) certain stations carried on a		G Primary
substitute program bas Substitute Basis S	, I		0 1	carried by your ca	able system on a substitute progra	ım	Transmitters: Television
 basis under specifc FC Do not list the station station was carried 	here in space	G—but do list		e Special Stateme	nt and Program Log)—if the		
 List the station here, a 	and also in spa formation conc	ice I, if the sta			te basis and also on some other the general instructions located		
		sign. Do not r	eport origination	program services	such as HBO, ESPN, etc. Identify	y	
			J		on. For example, report multi-		
cast stream as "WETA WETA-simulcast).	-2 . Simulcast :	streams must	be reported in c	column 1 (list each	stream separately; for example		
,	channel numb	er the FCC h	as assigned to t	he television statio	on for broadcasting over-the-air in		
			-		nay be different from the channel		
on which your cable sy							
					pendent station, or a noncommerc	ial	
	•	,	,. ,		st), "I" (for independent), "I-M" mmercial educational multicast).		
For the meaning of the	,		,.	,	,		
•		• ,	•		s". If not, enter "No". For an ex-		
planation of local service				,.			
Column 5: If you ha	ve entered "Ye	es" in column	4, you must con	nplete column 5, s	tating the basis on which your		
					ering "LAC" if your cable system		
carried the distant stati	•						
					payment because it is the subject em or an association representing		
•				•	/ transmitter, enter the designa-	1	
•			•	•	ner basis, enter "O." For a further		
•	•	,	•		I in the paper SA3 form. to which the station is licensed by	the	
FCC. For Mexican or C	anadian statio	ns, if any, give	the name of th	e community with	which the station is identifed.		
Note: If you are utilizing	g multiple chan	nel line-ups, ı	ise a separate s	space G for each o	channel line-up.		
•				All			
		CHANN	EL LINE-UP	AH			
1 CALL	2 B'CAST	1		I	6 LOCATION OF STATION		
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		

		CHANN	EL LINE-UP	AH	
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)	
				, ,	
	······································				
		·			
		1			

	SYSTEM ID#			STEM:	ED OE CABLE SV	FORM SA3E. PAGE 3. LEGAL NAME OF OWN
Name	25206					CABLE ONE, IN
				N	RS: TELEVISIO	PRIMARY TRANSMITTE
Primary Transmitters Television	". If not, enter "No". For an ex- paper SA3 form. ating the basis on which your ring "LAC" if your cable system	1) stations carried carriage of ce (e)(2) and (4))] carried by your special State both on a subset, see page (v) program servior-the-air design blumn 1 (list ease television stangton, D.C. The station, an in or network multimetant"), enter "to plete column to the colu	period, except (1, permitting the ferring to 76.61 aragraph. distant stations rizations: it in space I (the ion was carried the basis station ording to its over the port origination ording to its over the period in color as assigned to the sassigned to the port origination ording to its over the period in color as assigned to the period in color as assigned to the period in color as assigned to the period in color as a network (i.e. "die educational), or general instruction is a network (i.e. "die eneral instruction in the period in the color as of lack of acam that is not support of the color and that is not support of the color and the color and the color arried arrived the color arried the color arried arrived the color arried arrived the color arrived arrived the color arrived arrived the color arrived arrived arrived the color arrived arrive	re accounting June 24, 198 I), or 76.63 (red in the next period in the next period in the next period in the next period in the state of the state o	ystem during the ons in effect on 61(e)(2) and (4 is, as explained in the cast of a space of of a sp	carried by your cable sy FCC rules and regulation (76.59(d)(2) and (4), 76. Substitute program bas Substitute Program of Column 4: In the paper SA3 for Column 1: List each multicast stream as "WETA-WETA-simulcast). Column 2: Give the tast community of license on which your cable system Column 4: If the state of the meaning of these Column 4: If the state of the meaning of the Column 5: If you had cable system carried the cable system carried the cable system and a stion "E" (exempt). For still the cable system and a stion "E" (exempt).
	o which the station is licensed by the which the station is identifed. hannel line-up.	community w	the name of the	ns, if any, give	anadian statior	
		Al	EL LINE-UP	CHANNI		
			4. DISTANT?	3. TYPE	2. B'CAST	

1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION
SIGN	CHANNEL	OF	(Yes or No)		
	NUMBER	STATION		(If Distant)	
	······				
		 			

CABLE ONE, INC. d/b/a SPARKLIGHT 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.	CABLE ONE, INC. d/b/a SPARKLIGHT RRMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs (sections 76.59(q)/2) and (4), 77.63 (referring to 76.51(e)/2) and (4),	FORM SA3E. PAGE 3. LEGAL NAME OF OWN	ER OF CABLE SYSTEM:			SYSTEM ID#	
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, and also in space (- If the station was carried by pour cable system on a substitute program 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 associated with a station according to its over-the-air designation. For example, report multicast 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 distant multicast). "Fig (for noncommercial educational multicast), "Fig (for independent multicast), "Fig (for noncommercial educational multicast). "Fig (for noncommercial educational multicast), and 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 syste	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 an fefect 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, and also in space (—In 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 streams will sation according to its over-the-air designation. For example, report multicast streams will will be station. Column 2: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast streams may will report to report origination program services such as HBO, ESPN, etc. Identify each multicast streams will be reported in column 1 (list each stream separately; for example, report multicast streams will be reported in column 1 (list each stream separately; for example, report multicast). The community of license. For example, WRC is Channel 1 in Washington, D.C. This may be different from the channel on which your cable system case and spirals and the station. The station is a network multicast). The fort one-tomerical education multicast). The col			г			Name
Court 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(a)(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 yeargargaph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here, and also in space I, if the station was carried 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 streams associated with a station according to its over-the-air designation. For example, report multicast streams and switch as station as a wite TA-2". Simulcast is reams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Includes 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 moncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station of uniting the accounting period. Indicate by entering "IACC" if your cable system carried the distant stati	Gramed 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(PRIMARY TRANSMITTE	RS: TELEVISION				
FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AJ 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CARRIAGE GENERAL CALL (Yes or No) CARRIAGE	FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AJ 1. CALL 2. B'CAST CHANNEL OF 4. DISTANT? (Yes or No) CARRIAGE 6. LOCATION OF STATION CARRIAGE	carried by your cable s FCC rules and regulation 76.59(d)(2) and (4), 76 substitute program bass Substitute Basis Substitute Basis Substitute Basis Subsis under specific FC on the part of the station was carried to basis. For further in in the paper SA3 for Column 1: List 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 multice For the meaning of the Column 5: If you have cable system carried the cable system carried the cable system carried the cable system and a strong "E" (exempt). For sexplanation of these the substitute of these the sexplanation of these the sexplanation of these the sexplanation of these the sexplanation of these the substitute for these these sexplanation of the sexplanation of t	ystem during the accounting one in effect on June 24, 15, 61(e)(2) and (4), or 76.63 (is, as explained in the next tations: With respect to an C rules, regulations, or autilihere in space G—but do lisonly on a substitute basis, and also in space I, if the stormation concerning substime. In station's call sign. Do not associated with a station accept. Simulcast streams must channel number the FCC e. For example, WRC is Chestem carried the station. In each case whether the sentering the letter "N" (for reast), "E" (for noncommerciase terms, see page (v) of the carea, see page (v) of the carea, see page (v) of the carea of the sentered "Yes" in column the distant station during the on on a part-time basis become of a distant multicast strentered into on or before Jistand primary transmitter or an assimulcasts, also enter "E". It ree categories, see page (v)	g period, except 81, permitting the referring to 76.6 paragraph. It is a distant stations to report origination cording to its own to be reported in contact and a sassigned to the station is a network etwork), "N-M" (If a distance area, (i.e. "cogeneral instruction is a network etwork), "N-M" (If a distance area, (i.e. "cogeneral instruction is a network etwork), "N-M" (If a distance area, (i.e. "cogeneral instruction etwork), and counting periodical etwork etwork) area of lack of a seam that is not some 30, 2009, be ssociation repreyou carried the solution of the general instruction of the general instructi	(1) stations carried e carriage of certail (e)(2) and (4))]; are carried by your case. Special Statement both on a substitute, see page (v) of a program services er-the-air designatic column 1 (list each the television static ington, D.C. This not static ington, D.C. This not static ington, an indeptor network multicat "E-M" (for noncoretions located in the listant"), enter "Yes on located in the column 5, sind. Indicate by enter citivated channel caubiject to a royalty tween a cable syst senting the primary channel on any other structions located in structions located in structions located in the subject to a royalty the primary channel on any other structions located in s	only on a part-time basis under in network programs [sections and (2) certain stations carried on a suble system on a substitute program and and Program Log)—if the stee basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multistream separately; for example on for broadcasting over-the-air in may be different from the channel opendent station, or a noncommercial st), "I" (for independent), "I-M" numercial educational multicast). The paper SA3 form. 183. If not, enter "No". For an expaper SA3 form. It is the subject em or an association representing of transmitter, enter the designater basis, enter "O." For a further I in the paper SA3 form.	
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION (Yes or No) CARRIAGE	1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION (Yes or No) CARRIAGE				•		
SIGN CHANNEL OF (Yes or No) CARRIAGE	SIGN CHANNEL OF (Yes or No) CARRIAGE		CHAN	IEL LINE-UP	AJ		
			CHANNEL OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION	
			l				

		CHANN	EL LINE-UP	AJ	
1. CALL				1	6. LOCATION OF STATION
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)	
	NOWBER	017(11014		(ii Diotaint)	

FORM SA3E. PAGE 3.	ACCOUNT	ING PERIOD: 2020/2
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	N
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television stations arried by your cable system during the accounting period, except (1) stations carried only on a part-time basis u FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section or recommendation or	nder [′]	G
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carrie substitute program basis, as explained in the next paragraph.	d on a	Primary Transmitters:
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute basis under specific FCC rules, regulations, or authorizations:	program	Television
• 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 basis. For further information concerning substitute basis stations, see page (v) of the general instructions locking the pages SA2 forms.		

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

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify

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

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

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

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

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

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

1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	
	NUMBER	STATION		(If Distant)	
		•••••			

FORM SA3E, PAGE 3.	ACCOUNTI	NG PERIOD: 2020/2
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television st carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis upport recognition of the carriage of certain network programs [section of the carriage of certain network programs].	under [′]	G
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carrie substitute program basis, as explained in the next paragraph.		Primary 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. 	е	
• List the station here, and also in space I, if the station was carried both on a substitute basis and also on some basis. For further information concerning substitute basis stations, see page (y) of the general instructions log		

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 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

in the paper SA3 form.

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

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

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

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

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

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)	

	SYSTEM ID#			STEM:	ER OF CARLE SV	FORM SA3E. PAGE 3. LEGAL NAME OF OWNI
Name	25206					CABLE ONE, IN
						PRIMARY TRANSMITTE
G Primary Transmitter Television	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system	1) stations carried carriage of certain (e)(2) and (4))]; are carried by your carried by your carried by the ca	period, except (1, permitting the eferring to 76.61 aragraph. distant stations orizations: it in space I (the tion was carried attended to the basis station ording to its overbe reported in comparison ording to its assigned to the sassigned to the deucational), or general instruction is a network of educational), or general instruction or general in	television state accounting June 24, 1984), or 76.63 (red in the next prespect to anytions, or authors—but do list itute basis. It is it is a station accounting substitute sign. Do not red a station accounterams must be referenced by the station. The station is it is in column and the station accounter "N" (for new commercial page (v) of the station in column and uning the cample sign in column and uniticast stree or before Junitter or an assenter "E". If y see page (v)	is, identify every yestem during the one in effect on 61(e)(2) and (4 is, as explained tations: With record record in the record	In General: In space Grarried by your cable sy FCC rules and regulation 76.59(d)(2) and (4), 76. Substitute program bas Substitute Program basis under specific FC Do not list the station station was carried of Damin 1: List each basis. For further infinite paper SA3 for Column 1: List each each multicast stream as "WETA-Simulcast). Column 2: Give the scommunity of licension which your cable system Column 4: If the stational station, by (for independent multice For the meaning of the Column 5: If you had cable system carried the distant station For the retransmission of a written agreement the cable system and a stion "E" (exempt). For sexplanation of these this
	channel line-up.		•	• •	g multiple chan	Note: If you are utilizino
		AM	EL LINE-UP	CHANN		
		5. BASIS OF	4. DISTANT?	3. TYPE	2. B'CAST	

	CHANNEL LINE-UP			AM	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	
	NUMBER	STATION		(If Distant)	

FORM SA3E, PAGE 3.	ACCOUNT	ING PERIOD: 2020/2
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	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 upper translation of the property	nder [′]	G
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried	d on a	Primary
substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute	program	Transmitters: Television
basis under specifc FCC rules, regulations, or authorizations:		
• Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the	;	
station was carried only on a substitute basis.	- 41	
• List the station here, and also in space I, if the station was carried both on a substitute basis and also on some	otner	

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).

basis. For further information concerning substitute basis stations, see page (v) of the general instructions located

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

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

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

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

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

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

CHANNEL LINE-UP AN								
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
	NOWBER	STATION		(II Distant)				

FORM SA3E. PAGE 3.	ACCOUNTII	NG PERIOD: 2020/2
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sec 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 car 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	s under [*] tions ried on a	G Primary Transmitters: Television
 basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if t 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 som basis. For further information concerning substitute basis stations, see page (v) of the general instructions I in the paper SA3 form. 	ne other	

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 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

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

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

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

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

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

		CHANN	EL LINE-UP	AO	
1. CALL					6. LOCATION OF STATION
SIGN	CHANNEL		(Yes or No)	CARRIAGE	
	NUMBER	STATION		(If Distant)	

FORM SA3E. PAGE 3.	ACCOUNTI	NG PERIOD: 2020/2
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	N
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television st carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis of FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section 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 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	under ons ed on a	G Primary Transmitters: Television
 basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some basis. For further information concerning substitute basis stations, see page (v) of the general instructions log in the paper SA3 form. 	other	

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

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify

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

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

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

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

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

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

		CHANN	AP		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	
	NUMBER	STATION		(If Distant)	

FORM SA3E. PAGE 3.	ACCOUNTI	NG PERIOD: 2020/2
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sec 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 can 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.	s under otions rried on a	G Primary Transmitters: Television
 basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if 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 sor basis. For further information concerning substitute basis stations, see page (v) of the general instructions in the paper SA3 form. 	me other	

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 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

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

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

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

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

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

CHANNEL LINE-UP AQ								
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
	NOWBER	STATION		(II Distant)				

FORM SA3E. PAGE 3.	ACCOUNTII	NG PERIOD: 2020/2
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	M
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television station (sarried by your cable system during the accounting period, except (1) stations carried only on a part-time basis of FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section of the carriage of certain network programs].	under	G
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carrisubstitute program basis, as explained in the next paragraph.	ed on a	Primary Transmitters:
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute basis under specific FCC rules, regulations, or authorizations:	program	Television
 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. 	е	
List the station here, and also in space I, if the station was carried both on a substitute basis and also on some basis. For further information concerning substitute basis stations, see page (v) of the general instructions lo 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	

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.

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

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

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

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

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

	CHANN	AR		
2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION
CHANNEL	OF	(Yes or No)	CARRIAGE	
NUMBER	STATION		(If Distant)	
	CHANNEL	2. B'CAST 3. TYPE CHANNEL OF	2. B'CAST 3. TYPE 4. DISTANT? CHANNEL OF (Yes or No)	CHANNEL OF (Yes or No) CARRIAGE

	ACCOUNTI	NG PERIOD: 2020/2
FORM SA3E. PAGE 3.		
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Mana
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television s carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section or content or content or content or carriage of certain network programs [section or content or content or content or carriage of certain network programs [section or content or content or content or carriage of certain network programs [section or content or content or carriage or carriage of certain network programs [section or carriage or ca	under	G
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carrisubstitute program basis, as explained in the next paragraph.		Primary 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.	ie	
• List the station here, and also in space I, if the station was carried both on a substitute basis and also on some	e other	
basis. For further information concerning substitute basis stations, see page (v) of the general instructions lo	cated	

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

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify

in the paper SA3 form.

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

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

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

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

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

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

	CHANNEL LINE-UP AS										
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION						
	NOWBER	STATION		(II Distant)							

FORM SA3E. PAGE 3.	ACCOUNTI	ING PERIOD: 2020/2
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	N
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television stations by your cable system during the accounting period, except (1) stations carried only on a part-time basis upon FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section Including translators and Including translators and Including translators and Including translator stations and low power television station (including translator stations and low power television stations (including translator stations and Including translator stations and Including translators (including translators) and Including translators (including tra	nder	G
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carrie substitute program basis, as explained in the next paragraph.	d on a	Primary 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 basis. For further information concerning substitute basis stations, see page (v) of the general instructions located the page (A2 farms).		

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 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

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

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

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

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

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

		CHANN	EL LINE-UP	AT	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION
SIGN	CHANNEL		(Yes or No)	CARRIAGE	
	NUMBER	STATION		(If Distant)	
				,	
	······				
	·····				
	·····				
	·····				
	······				
	·····				

FORMOMOR PAGE 0	ACCOUNTI	ING PERIOD: 2020/2
FORM SA3E. PAGE 3. LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	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 upport of the same regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section 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 substitute program basis, as explained in the next paragraph.	nder [′] ns d on a	G Primary Transmitters:
 Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute plass 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 		Television

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).

basis. For further information concerning substitute basis stations, see page (v) of the general instructions located

in the paper SA3 form.

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

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

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

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

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

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

	CHANNEL LINE-UP AU									
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION					
	HOWBER	OTATION		(ii Diotaire)						

	ACCOUNTI	NG PERIOD: 2020/2
FORM SA3E. PAGE 3.	OVOTEM ID#	
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Nume
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television st carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis upport to the programs of the carriage of certain network programs [section of the carriage of certain network programs].	ınder	G
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carrie substitute program basis, as explained in the next paragraph.		Primary 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.	е	
• List the station here, and also in space I, if the station was carried both on a substitute basis and also on some basis. For further information concerning substitute basis stations, see page (v) of the general instructions log		

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 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

in the paper SA3 form.

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

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

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

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

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

	CHANNEL LINE-UP AV									
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)						
				l						

	ACCOUNTI	NG PERIOD: 2020/2						
FORM SA3E. PAGE 3.								
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name						
CABLE ONE, INC. d/b/a SPARKLIGHT 25206								
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 up FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section section sect	inder [´]	G						
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried	d 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	<u>د</u>							
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							

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).

basis. For further information concerning substitute basis stations, see page (v) of the general instructions located

in the paper SA3 form.

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

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

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

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

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

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

	CHANNEL LINE-UP AW										
1. CALL SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION						
	NUMBER	STATION		(If Distant)							
				.							

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 4.

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC. d/b/a SPARKLIGHT

SYSTEM ID#
25206

Н

PRIMARY TRANSMITTERS: RADIO

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 Transmitters: Radio Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form.

Column 1: Identify the call sign of each station carried.

Column 2: State whether the station is AM or FM.

Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column.

Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).

CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
							l
							l

FORM SA3E. PAGE 5.						ACCOUNTING	PERIOD: 2020/2			
LEGAL NAME OF OWNER OF (CABLE SYST	EM:			5	SYSTEM ID#	Nama			
CABLE ONE, INC. d/b/a	a SPARKL	JGHT				25206	Name			
SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	T AND PROGRAM LOG	i			ı			
In General: In space I, identiful substitute basis during the ac explanation of the programmi	counting per	riod, under spec	cific present and former FC	C rules, regula	tions, or authorizations. F	or a further	▮ Substitute			
1. SPECIAL STATEMENT				<u> </u>	' '	-	Carriage:			
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?										
Note: If your answer is "No" log in block 2.	, leave the ı	rest of this pag	e blank. If your answer is '	Yes," you mu			Program Log			
2. LOG OF SUBSTITUTE	PROGRA	MS								
In General: List each subst	itute progra	m on a separat		wherever pos	sible, if their meaning is					
clear. If you need more space					dente o de constituir					
period, was broadcast by a			sion program (substitute p ur cable system substitute			on				
under certain FCC rules, reg	gulations, or	r authorizations	s. See page (vi) of the gen	eral instructio	ns located in the paper	0.1				
SA3 form for futher informat	tion. Do not	use general c	ategories like "movies", or	"basketball".	List specific program					
titles, for example, "I Love L			/bers vs. Bulls." "Yes." Otherwise enter "N	ο."						
			sting the substitute progra							
			e community to which the							
the case of Mexican or Can Column 5: Give the mon			community with which the sem carried the substitute p			:h				
first. Example: for May 7 giv	e "5/7."	, ,	·	J						
Column 6: State the time to the nearest five minutes.			gram was carried by your o			1				
stated as "6:00–6:30 p.m."	<u> глатіріс.</u> а	program came	d by a system from 0.01.	5 p.m. to 0.2	o.oo p.m. should be					
			was substituted for progra							
to delete under FCC rules a gram was substituted for pro										
effect on October 19, 1976.	ogramming	inat your syste	in was permitted to delete	under i oo i	ales and regulations in					
s	UBSTITUT	E PROGRAM		1 1	EN SUBSTITUTE IAGE OCCURRED	7. REASON				
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	FOR DELETION				
	100 01 110	07122 01011		7.11.2 27.1						
	 									
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ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 25206 CABLE ONE, INC. d/b/a SPARKLIGHT PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-

J

Part-Time Carriage Log

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 "4/10."
- State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.- 3:15 a.m. app."
- You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.— 12:00 p.m.'

		DATES	S AND HOURS (OF P	ART-TIME CAR	RIAGE			
CALL SIGN -	WHEN CARRIAGE OCCURRED				CALL SIGN -	WHEN CARRIAGE OCCURRED HOURS			
	D.A.T.E.	HOUF				5.475		JUR	
	DATE	FROM	ТО			DATE	FROM		TO
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LEGA	L NAME OF OWNER OF CABLE SYSTEM: BLE ONE, INC. d/b/a SPARKLIGHT		SYSTEM ID# 25206	Name	
Inst all a (as i page	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) during the accounting period. [MPORTANT: You must complete a statement in space P concerning gross receipts. [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, you must complete the applicable parts of the DSE schedule accompanying this form and attach the schedule to your statement of account. If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of block 3 below. If part 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 in block 3 below.					
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shou block 4 below.	ld be 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. Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064				
	Enter the result here. This is your minimum fee.	\$	22,265.50		
Block 2	pistant television stations carried: Your answer here must agree with the ispace G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colum "Yes" in this block. • Did your cable system carry any distant television stations during the accounting perion X Yes—Complete the DSE schedule. No—Leave block 3 below blank and column television. In BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	n 4, you must cho	eck		
3	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		9,275.35		
	Line 3. Add lines 1 and 2 and enter here	\$	15,849.24		
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 Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet) 	\$	0.00 0.00	Cable systems submitting additional deposits under Section 111(d)(7) should contact	
	Line 4. FILING FEE.	\$	725.00	the Licensing additional fees.	
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ See page (i) of the	22,990.50	Division for the appropriate form for submitting the additional fees.	
	general instructions located in the paper SA3 form for more information.)	,			

ACCOUNTING PERIOD: 2020/2

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#					
Name	CABLE ONE, INC. d/b/a SPARKLIGHT	25206					
	CHANNELS						
M	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations						
011-	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.						
Channels	Enter the total number of channels on which the cable						
	system carried television broadcast stations	23					
	2. Enter the total number of activated channels						
	on which the cable system carried television broadcast stations and nonbroadcast services	243					
	and nonproduct convices						
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual						
	we can contact about this statement of account.)						
Individual to							
Be Contacted for Further	Name EMERSON YEARWOOD Telephone 602-36	4-6195					
Information							
	Address 210 E. EARLL DRIVE						
	(Number, street, rural route, apartment, or suite number)						
	PHOENIX, AZ 85012 (City, town, state, zip)						
	(oily, tomi, state, 2p)						
	Email EMERSON.YEARWOOD@CABLEONE.BIZ Fax (optional) 602-364-6013						
	CERTIFICATION (This statement of account must be partifed and signed in accordance with Convigat Office regulations.)						
0	CERTIFICATION (This statement of account must be certifed 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 in line 1 of space B and that the owner is not a corporation or partnership; or	identified					
		able southern					
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.						
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein						
	are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.						
	[18 U.S.C., Section 1001(1986)]						
	/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 ar						
	button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility setti						
	Typed or printed name: RAYMOND STORCK						
	Title: VICE PRESIDENT						
	(Title of official position held in corporation or partnership)						
	Date: February 25, 2021						
	J -,						

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTE	M ID#	Nome
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	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 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		P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address Mailing Address 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		
	lays	
Line 3 Multiply line 2 by the number of days late and enter the sum here		
x 0.00274		
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	_	
(interest charge)		
* 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 this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2020/2

DSE SCHEDULE. PAGE 10.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerical 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 account (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			
Note that local stations are not counted at all in computing DSEs.			

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

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

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

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

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

Step 2: Divide the result of step 1 by the total number of days in the calendar year (365—or 366 in a leap year). This gives you the particular 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 a 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, in whole or in part, over the cable system that would have been subject to the FCC's syndicated exclusivity rules in effect on June 24, 1981.

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

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

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

NOTE: If your cable system carried a station that you believe qualifies as a pernitted 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 station 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 Syndicated 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 pursuant to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/or
 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 in
 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

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

Base rate fee

- Calculate a separate base rate fee for each subscriber group, using (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) 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.

\$1,907.71

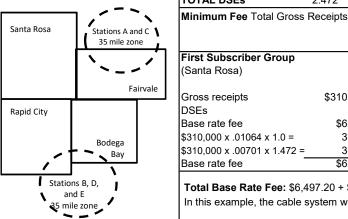
Base rate fee

\$1,604.03

EXAMPLE:

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

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



Distant Stations Carried		Identification of	of Subscriber Groups	
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
3 (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 DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00
	Distant Stations Carried STATION A (independent) B (independent) C (part-time) D (part-time) E (network) TOTAL DSES	STATION DSE A (independent) 1.0 B (independent) 1.0 C (part-time) 0.083 D (part-time) 0.139 E (network) 0.25	STATION DSE CITY A (independent) 1.0 Santa Rosa B (independent) 1.0 Santa Rosa C (part-time) 0.083 Rapid City D (part-time) 0.139 Bodega Bay E (network) 0.25 Fairvale	STATION DSE CITY OUTSIDE LOCAL A (independent) 1.0 SERVICE AREA OF B (independent) 1.0 Santa Rosa Stations A, B, C, D, E C (part-time) 0.083 Rapid City Stations A and C D (part-time) 0.139 Bodega Bay Stations A and C E (network) 0.25 Fairvale Stations B, D, and E

\$600,000.00

x .01064

\$6,384.00 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 **DSFs IDSFs** 2.472 IDSFs 1.083 1.389 \$1,604.03 Base rate fee \$6.497.20 Base rate fee \$1.907.71 Base rate fee \$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 3,198.80 327.23 \$310,000 x .00701 x 1.472 = $170,000 \times .00701 \times .083 =$ 98.91 $120,000 \times .00701 \times .389 =$

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)

Base rate fee

\$6,497.20

DSE SCHEDULE. PAGE						/OTE: / := ::				
1	LEGAL NAME OF OWNER OF CAB				S	YSTEM ID#				
<u> </u>	CABLE ONE, INC. d/b/a	a SPARKLIGHT				25206				
	SUM OF DSEs OF CATEGO									
	Add the DSEs of each station				0.05					
	Enter the sum here and in line 1 of part 5 of this schedule.									
	Instructions:					-				
2	In the column headed "Call	Sign": list the call si	gns of all distant stations	s identified by the I	etter "O" in column 5					
Commutation	of space G (page 3).	", for each independ	lant station, give the DSI	⊏ as "1 0": for ass	h natwork or nancom					
Computation of DSEs for	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."									
Category "O"	meretar edadational etation, g		CATEGORY "O" STATIC	DNS: DSFs						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	KSDK	0.250			<u> </u>					
		0.200		····						
		·····		····						
		·····		····						
				····						
Add rows as		 								
necessary.										
Remember to copy all										
formula into new		·····		·····						
rows.		····		·····						
		·····		·····						
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4	LEGAL NAME OF OWNER OF CABL	.E SYSTEM:			S'	YSTEM ID#		
1	CABLE ONE, INC. d/b/a	SPARKLIGHT	•			25206		
	SUM OF DSEs OF CATEGOR							
	Add the DSEs of each station		5:					
			schedule		0.50			
	Enter the sum here and in line 1 of part 5 of this schedule.							
	Instructions:							
2	In the column headed "Call	Sign": list the call	signs of all distant stations i	dentified by the	e letter "O" in column 5			
	of space G (page 3).							
Computation	In the column headed "DSE"	": for each indeper	ndent station, give the DSE a	as "1.0"; for ea	ach network or noncom-			
of DSEs for	mercial educational station, giv	ve the DSE as ".25						
Category "O"			CATEGORY "O" STATION	IS: DSEs				
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	KETC	0.250						
	KSDK	0.250						
								
		<mark></mark>						
Add rows as								
necessary.								
Remember to copy all						<u> </u>		
formula into new								
rows.								
		 						
								
								
		 						
								
		 						
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DSE SCHEDULE. PAGE						/OT=17:= ::		
1	LEGAL NAME OF OWNER OF CABLE				S	YSTEM ID#		
•	CABLE ONE, INC. d/b/a	SPARKLIGHT	•			25206		
	SUM OF DSEs OF CATEGOR		S:					
	Add the DSEs of each station				0.75			
	Enter the sum here and in line 1 of part 5 of this schedule.							
2	Instructions:							
_	In the column headed "Call S of space G (page 3).	ign": list the call	signs of all distant stations i	dentified by the	e letter "O" in column 5			
Computation	In the column headed "DSE"	: for each indepe	ndent station, give the DSE	as "1.0"; for ea	ach network or noncom-			
of DSEs for	mercial educational station, giv	e the DSE as ".25						
Category "O"			CATEGORY "O" STATION		П			
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	KETC	0.250						
	WICS	0.250						
	KSDK	0.250						
Add rows as								
necessary.								
Remember to copy all								
formula into new								
rows.								

4	LEGAL NAME OF OWNER OF CABL	.E SYSTEM:			S'	YSTEM ID#		
1	CABLE ONE, INC. d/b/a	SPARKLIGHT	•			25206		
	SUM OF DSEs OF CATEGOR							
	Add the DSEs of each station		5:					
			schedule		0.50			
	Enter the sum here and in line 1 of part 5 of this schedule.							
	Instructions:							
2	In the column headed "Call	Sign": list the call	signs of all distant stations i	dentified by the	e letter "O" in column 5			
	of space G (page 3).							
Computation	In the column headed "DSE"	": for each indeper	ndent station, give the DSE a	as "1.0"; for ea	ach network or noncom-			
of DSEs for	mercial educational station, giv	ve the DSE as ".25						
Category "O"			CATEGORY "O" STATION	IS: DSEs				
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	KETC	0.250						
	KSDK	0.250						
								
		<mark></mark>						
Add rows as								
necessary.								
Remember to copy all						<u> </u>		
formula into new								
rows.								
		 						
								
								
		 						
								
		 						
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DSE SCHEDULE. PAGE						/OTE:::::::				
1	LEGAL NAME OF OWNER OF CAB				S	YSTEM ID#				
•	CABLE ONE, INC. d/b/a	a SPARKLIGHT				25206				
	SUM OF DSEs OF CATEGO									
	Add the DSEs of each station				0.05					
	Enter the sum here and in line 1 of part 5 of this schedule.									
	Instructions:									
2	In the column headed "Call	Sign": list the call si	gns of all distant stations	s identified by the I	etter "O" in column 5					
Communitation	of space G (page 3).	", for each independ	lant station, give the DSI	= 00 "1 0": for 000	h notwork or noncom					
Computation of DSEs for	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."									
Category "O"	meretar edadational etation, g		CATEGORY "O" STATIC	NS: DSFs						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	KETC	0.250	0.122 0.0.1		0.122 0.011					
	IXL10			····						
		·····		····						
		·····		····						
		····		····						
Add rows as		····		····						
necessary.		····		····						
Remember to copy all										
formula into new		·····								
rows.										
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_	LEGAL NAME OF OWNER OF CABLI	E SYSTEM:			S'	YSTEM ID#		
1	CABLE ONE, INC. d/b/a		r			25206		
	SUM OF DSEs OF CATEGOR							
	Add the DSEs of each station		15:					
			schedule		0.25			
	Enter the sum here and in line 1 of part 5 of this schedule.							
	Instructions:							
2	In the column headed "Call S	Sign": list the call	signs of all distant stations i	dentified by the	e letter "O" in column 5			
	of space G (page 3).			"4 O": F				
Computation of DSEs for	In the column headed "DSE" mercial educational station, giv			as "1.0"; for ea	ach network or noncom-			
Category "O"	mercial educational station, giv	e lile DSE as .23	CATEGORY "O" STATION	IC. DCE-				
	0411 01011	T DOE T			II 0411 01041	l por		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	KSDK	0.250						
Add rows as								
necessary.		·		·				
Remember to copy all		<mark>-</mark>		·····				
formula into new								
rows.								
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4	LEGAL NAME OF OWNER OF CABI	LE SYSTEM:			S'	YSTEM ID#				
1	CABLE ONE, INC. d/b/a	SPARKLIGHT	-			25206				
	SUM OF DSEs OF CATEGO					I				
	Add the DSEs of each statio		3.							
			schedule		0.50					
	Enter the sum here and in line 1 of part 5 of this schedule.									
	Instructions:									
2	In the column headed "Call	Sign": list the call	signs of all distant stations i	dentified by the	e letter "O" in column 5					
	of space G (page 3).									
Computation	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-									
of DSEs for	mercial educational station, gi	ve the DSE as ".25								
Category "O"			CATEGORY "O" STATION	1						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	KETC	0.250								
	WICS	0.250								
		···								
		···								
Add rows as		<mark></mark>				ļ				
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Remember to copy all										
formula into new										
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DSE SCHEDULE. PAGE						/OTE:::::::				
1	LEGAL NAME OF OWNER OF CAB				S	YSTEM ID#				
•	CABLE ONE, INC. d/b/a	a SPARKLIGHT				25206				
	SUM OF DSEs OF CATEGO									
	Add the DSEs of each station				0.05					
	Enter the sum here and in line 1 of part 5 of this schedule.									
	Instructions:									
2	In the column headed "Call	Sign": list the call si	gns of all distant stations	s identified by the I	etter "O" in column 5					
Communitation	of space G (page 3).	", for each independ	lant station, give the DSI	= 00 "1 0": for 000	h notwork or noncom					
Computation of DSEs for	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."									
Category "O"	mereiar eadeateriar etation, g		CATEGORY "O" STATIC	NS: DSFs						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	KETC	0.250	0.122 0.0.1		0.122 0.011					
	IX210			····						
		·····		····						
		·····		····						
		····		····						
Add rows as		····		····						
necessary.		····		····						
Remember to copy all										
formula into new		·····								
rows.										
		<mark></mark>		<mark></mark>						
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DSE SCHEDULE. PAGE	LEGAL NAME OF OWNER OF CABLE	E SYSTEM:			6,	YSTEM ID#
1			r		3	
	CABLE ONE, INC. d/b/a					25206
	SUM OF DSEs OF CATEGOR		IS:			
	 Add the DSEs of each station Enter the sum here and in line 		schedule		0.00	
	Linter the sum here and in line	TO Part 5 OF this	Scriedule.		0.00	.]
2	Instructions:	N:	-:	-1 £:£:1 4 -	- I-H #O" i I F	
_	In the column headed "Call Sof space G (page 3).	ign": list the cal	I signs of all distant stations i	dentified by th	e letter "O" in column 5	
Computation	In the column headed "DSE"	: for each indepe	endent station, give the DSE	as "1.0"; for e	ach network or noncom-	
of DSEs for	mercial educational station, giv		5."			
Category "O"			CATEGORY "O" STATION	IS: DSEs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
\						
Add rows as						
necessary.						
Remember to copy all formula into new						
rows.						
TOWS.						
				•		• • • • • • • • • • • • • • • • • • • •
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	DSE SCHEDULE. PAGE	11. (CONTINUED)									
	1	LEGAL NAME OF OWNER OF CABLE	E SYSTEM:			S	STEM ID#				
	I	CABLE ONE, INC. d/b/a	SPARKLIGHT	•			25206				
		SUM OF DSEs OF CATEGOR	Y "O" STATION	S:							
		• Add the DSEs of each station.									
		Enter the sum here and in line 1 of part 5 of this schedule.									
		Instructions:					1				
		In the column headed "Call S	Sign": list the call	signs of all distant stations	identified by the	e letter "O" in column 5					
		of space G (page 3).	. .	adant station with the DOE	"4 0".	l l					
	Computation of DSEs for	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."									
	Category "O"	mercial educational station, give	e tile DOL as .20	CATEGORY "O" STATION	JS: DSFs						
	Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
		KDNL	0.250	O/ LEE GIGIT	DOL	O/ LEE OIOIV	DOL				
		KDNL-DT2	1.000		······································						
		KMOV	0.250		······································						
		KETC	0.250								
		WRBU	1.000		······································						
	Add rows as	KSDK	0.250		·						
	necessary.	KODK	0.230								
	Remember to copy all		·								
Reme	formula into new				·····						
	rows.				·						
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Name		WNER OF CABLE SYSTEM: , INC. d/b/a SPARKLI	GHT				S	25206
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should of Column 3 Column 4 be carried out Column 5 give the type-v Column 6	at the call sign of all distar: For each station, give the correspond with the inform: For each station, give the Divide the figure in colurn at least to the third decime: For each independent servalue as ".25." Multiply the figure in colurn.	te number of honation given in some total number mn 2 by the figural point. This is tation, give the figurann 4 by the figurann 4 by the figuran 4 by the figur	ours your cable system space J. Calculate only of hours that the statioure in column 3, and given the "basis of carriage" "type-value" as "1.0." Future in column 5, and given in colum	carried the station one DSE for each broadcast over the result in devalue" for the station each network of the result in control or each network of the result in the	n during the accounting point station. the air during the account cimals in column 4. This f	ing period. igure must onal station,	
Capacity		(CATEGORY	LAC STATIONS:	COMPLITATION	ON OF DSFs		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	R JRS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	5. TYPE	6. DS	;E
			÷		=	x	=	
			÷ ÷			x x	=	
			÷	=	••••••	x	=	
			÷			x		
			÷ ÷			x x	=	
			÷	=		x	=	
	Add the DSEs of	OF CATEGORY LAC ST of each station. m here and in line 2 of pa		edule,	▶	0.00		
Computation of DSEs for Substitute-Basis Stations	 Was carried tions in efference broadcast or space I). Column 2: Fat your option. Column 3: Ecolumn 4: I 	ct on October 19, 1976 (a ne or more live, nonnetwo For each station give the I This figure should corresp Enter the number of days Divide the figure in column	ution for a prog is shown by the rk programs dur number of live, bond with the in in the calendar in 2 by the figure	ram that your system we letter "P" in column 7 or ing that optional carriage nonnetwork programs of formation in space I. year: 365, except in a se in column 3, and give	vas permitted to d of space I); and te (as shown by the carried in substitu leap year. the result in colur	rams) if that station: elete under FCC rules an e word "Yes" in column 2 of tion for programs that we mn 4. Round to no less th general instructions in the	re deleted an the third	
		SL	JBSTITUTE-	BASIS STATION	S: COMPUTA	TION OF DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBE OF DAY IN YEAR	s	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		<u> </u>		=		÷		=
				=		÷		=
		÷		=		÷		=
		÷				÷		=
	Add the DSEs of	OF SUBSTITUTE-BASIS	S STATIONS:	edule,	▶	0.00		
5		R OF DSEs: Give the ame applicable to your system		poxes in parts 2, 3, and 4	4 of this schedule	and add them to provide th	ne total	
Total Number		of DSEs from part 2 ●				-	0.25	
of DSEs		of DSEs from part 3 ●				-	0.00	
	3. Number	of DSEs from part 4 ●			>	-	0.00	
	TOTAL NUMBE	R OF DSEs						0.25

	WNER OF CABLE S						S	YSTEM ID# 25206	Name	
In block A: • If your answer if ' schedule.	ck A must be comp "Yes," leave the rei "No," complete bloo	mainder of pa	•	of the DSE schedu	ıle blank and	complete part {	3, (page 16) of the		6	
			BLOCK A:	TELEVISION MA	ARKETS				Computation of 3.75 Fee	
effect on June 24, Yes—Com	1981?	schedule—D	•	er markets as defin LETE THE REMAIN			C rules and regula	tions in	G.1. G.1. GG	
		BLO	CK B: CARF	IAGE OF PERM	MITTED DS	Es				
Column 1: CALL SIGN	List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.)									
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommercia D Grandfathered instructions fo E Carried pursus *F A station prev G Commercial U	Enter the appropriate letter indicating the basis on which you carried a permitted station. (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)] B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1) C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)] D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule). E Carried pursuant to individual waiver of FCC rules (76.7) *F A station previously carried on a part-time or substitute basis prior to June 25, 1981 G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)] M Retransmission of a distant multicast stream.								
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 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		
				I				0.00		
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE					
ine 1: Enter the	total number of	DSEs from p	part 5 of this s	schedule						
ine 2: Enter the	sum of permitted	d DSEs from	n block B abo	ve						
ine 3: Subtract	line 2 from line 1	. This is the	total number	of DSEs subject 7 of this schedule		ate.				
ine 4: Enter gro	ess receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represen partially	
ine 5: Multiply li	ine 4 by 0.0375 a	ınd enter su	m here				x		permited/ partially nonpermitted	
Line 6: Enter tota	al number of DSE	Es from line	3						carriage? If yes, see part 9 instructions.	
ine 7: Multinly li	ine 6 hy line 5 an	d enter here	and on line	2. block 3. space	I (nage 7)			0.00		

	WNER OF CABLE S						S	YSTEM ID# 25206	Name	
In block A: • If your answer if ' schedule.	ck A must be comp "Yes," leave the rei	mainder of pa	pelow.	of the DSE schedu		complete part {	3, (page 16) of the		6	
			BLOCK A:	TELEVISION MA	ARKETS				Computation of 3.75 Fee	
effect on June 24, X Yes—Com	1981?	schedule—D	•	er markets as defin LETE THE REMAIN			C rules and regula	tions in	G.1. G.1. GG	
		BLO	CK B: CARF	IAGE OF PERM	MITTED DS	Es				
Column 1: CALL SIGN	FCC rules and re instructions for th	List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.)								
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommercia D Grandfathered instructions fo E Carried pursus *F A station prev G Commercial U	Enter the appropriate letter indicating the basis on which you carried a permitted station. (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)] B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1) C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)] D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule). E Carried pursuant to individual waiver of FCC rules (76.7) *F A station previously carried on a part-time or substitute basis prior to June 25, 1981 G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)] M Retransmission of a distant multicast stream.								
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 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		
							-			
				I				0.00		
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE					
ine 1: Enter the	total number of	DSEs from p	part 5 of this s	schedule						
ine 2: Enter the	sum of permitted	d DSEs from	n block B abo	ve						
ine 3: Subtract	line 2 from line 1	. This is the	total number	of DSEs subject 7 of this schedule		ate.				
ine 4: Enter gro	ess receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represen partially	
ine 5: Multiply li	ine 4 by 0.0375 a	ınd enter su	m here				x		permited/ partially nonpermitted	
Line 6: Enter tota	al number of DSE	Es from line	3						carriage? If yes, see part 9 instructions.	
ino 7: Multiply li	ine 6 hy line 5 an	d enter here	and on line	2. block 3. space	I (nage 7)			0.00		

	WNER OF CABLE S						S	YSTEM ID# 25206	Name	
In block A: • If your answer if ' schedule.	ck A must be comp "Yes," leave the rei "No," complete bloo	mainder of pa	pelow.	of the DSE schedu		complete part {	3, (page 16) of the		6	
			BLOCK A:	TELEVISION MA	ARKETS				Computation of 3.75 Fee	
effect on June 24, X Yes—Com	1981?	schedule—D	•	er markets as defin LETE THE REMAIN			C rules and regula	tions in	G.1. G.1. GG	
		BLO	CK B: CARF	IAGE OF PERM	MITTED DS	Es				
Column 1: CALL SIGN	FCC rules and re instructions for th	List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.)								
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommercia D Grandfathered instructions fo E Carried pursus *F A station prev G Commercial U	Enter the appropriate letter indicating the basis on which you carried a permitted station. (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)] B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1) C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)] D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule). E Carried pursuant to individual waiver of FCC rules (76.7) *F A station previously carried on a part-time or substitute basis prior to June 25, 1981 G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)] M Retransmission of a distant multicast stream.								
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 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		
							-			
				I				0.00		
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE					
ine 1: Enter the	total number of	DSEs from p	part 5 of this s	schedule						
ine 2: Enter the	sum of permitted	d DSEs from	n block B abo	ve						
ine 3: Subtract	line 2 from line 1	. This is the	total number	of DSEs subject 7 of this schedule		ate.				
ine 4: Enter gro	ess receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represen partially	
ine 5: Multiply li	ine 4 by 0.0375 a	ınd enter su	m here				x		permited/ partially nonpermitted	
Line 6: Enter tota	al number of DSE	Es from line	3						carriage? If yes, see part 9 instructions.	
ino 7: Multiply li	ine 6 hy line 5 an	d enter here	and on line	2. block 3. space	I (nage 7)			0.00		

	WNER OF CABLE S NC. d/b/a SPAI						S'	YSTEM ID# 25206	Name
n block A:	k A must be comp								C
If your answer if " chedule.	'Yes," leave the rer	mainder of pa	irt 6 and part 7	of the DSE schedu	ıle blank and	complete part 8	8, (page 16) of the		6
If your answer if "	'No," complete bloo	cks B and C b		FEL EVILOUON NA	A DIVETO				Computation o
the cable system	a located wholly ou	itside of all m		FELEVISION MA		tion 76 5 of EC	C rules and regula	tions in	3.75 Fee
ffect on June 24,	•	uside of all file	ajoi and sinan	o markets as demi	ed under sec	1011 70.3 01 1 0	C rules and regula	uons m	
_	-		O NOT COMPI	LETE THE REMAIN	NDER OF PA	ART 6 AND 7.			
X No—Comp	lete blocks B and	C below.							
		BLO	CK B: CARR	IAGE OF PERM	MITTED DS	SEs			
Column 1: CALL SIGN	FCC rules and re	gulations pric e DSE Schec	or to June 25, 1 Iule. (Note: The	part 2, 3, and 4 of the 981. For further ex the letter M below ref act of 2010.)	planation of p	permitted statio	ns, see the	•	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerica D Grandfathered instructions fo E Carried pursua *F A station prev	les and regulated pursuant to on as defined all educational station (76.6 r DSE schedunt to individuatiously carried HF station wi	ations cited be to the FCC mark in 76.5(kk) (76 I station [76.59 5) (see paragralle). al waiver of FC d on a part-time thin grade-B co	e or substitute basi ontour, [76.59(d)(5)	e in effect on 57, 76.59(b), (1), 76.63(a) 8(a) referring stitution of gra	June 24, 1981. 76.61(b)(c), 76 referring to 76. to 76.61(d)] andfathered sta	.63(a) referring to 61(e)(1) tions in the		
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	l 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	
KETC	С	0.25							
								0.25	
		Е	BLOCK C: CC	MPUTATION OF	3.75 FEE				
ine 1: Enter the	total number of	DSEs from p	part 5 of this s	schedule					
ine 2: Enter the	sum of permitted	d DSEs from	n block B abo	ve					
				of DSEs subject 7 of this schedule		rate.			
ine 4: Enter gro	ss receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represed partially
ine 5: Multiply li	ne 4 by 0.0375 a	ınd enter suı	m here				х		permited/ partially nonpermitted
ine 6: Enter tota	al number of DSE	s from line	3						carriage? If yes, see par 9 instructions
ine 7: Multinly li	ne 6 hy line 5 an	d enter here	and on line 3	2, block 3, space	I (page 7)			0.00	

	WNER OF CABLE S						S	YSTEM ID# 25206	Name	
In block A: • If your answer if ' schedule.	ck A must be comp "Yes," leave the rei "No," complete bloo	mainder of pa	pelow.	of the DSE schedu		complete part {	3, (page 16) of the		6	
			BLOCK A:	TELEVISION MA	ARKETS				Computation of 3.75 Fee	
effect on June 24, X Yes—Com	1981?	schedule—D	•	er markets as defin LETE THE REMAIN			C rules and regula	tions in	G.1. G.1. GG	
		BLO	CK B: CARF	IAGE OF PERM	MITTED DS	Es				
Column 1: CALL SIGN	FCC rules and re instructions for th	List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.)								
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommercia D Grandfathered instructions fo E Carried pursus *F A station prev G Commercial U	Enter the appropriate letter indicating the basis on which you carried a permitted station. (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)] B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1) C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)] D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule). E Carried pursuant to individual waiver of FCC rules (76.7) *F A station previously carried on a part-time or substitute basis prior to June 25, 1981 G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)] M Retransmission of a distant multicast stream.								
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 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		
							-			
				I				0.00		
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE					
ine 1: Enter the	total number of	DSEs from p	part 5 of this s	schedule						
ine 2: Enter the	sum of permitted	d DSEs from	n block B abo	ve						
ine 3: Subtract	line 2 from line 1	. This is the	total number	of DSEs subject 7 of this schedule		ate.				
ine 4: Enter gro	ess receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represen partially	
ine 5: Multiply li	ine 4 by 0.0375 a	ınd enter su	m here				x		permited/ partially nonpermitted	
Line 6: Enter tota	al number of DSE	Es from line	3						carriage? If yes, see part 9 instructions.	
ino 7: Multiply li	ine 6 hy line 5 an	d enter here	and on line	2. block 3. space	I (nage 7)			0.00		

	WNER OF CABLE S						S	YSTEM ID# 25206	Name	
n block A:	ur answer if "Yes," leave the remainder of part 6 and part 7 of the DSE schedule blank and complete part 8, (page 16) of the ule.									
If your answer if "	'No," complete blo	cks B and C I		FEL EVIIOLONI MA	ADVETO				Computation o	
s the cable system	n located wholly or	itside of all m		FELEVISION MA		tion 76.5 of EC	C rules and regula	tions in	3.75 Fee	
effect on June 24, Yes—Com	1981?	schedule—D	•	LETE THE REMAIN			o ruico ana regula	uono in		
			CK B: CARR	IAGE OF PERM	MITTED DS	Fs				
Column 1: CALL SIGN	FCC rules and re	of distant stagulations price	ations listed in porto June 25, 1	part 2, 3, and 4 of the 981. For further ex le letter M below ref	his schedule t	hat your systen	ns, see the	•		
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfatherec instructions fo E Carried pursus *F A station pre	les and reguled pursuant to on as defined al educationa distation (76.6 r DSE schedunt to individuationsly carried the station with the statio	ations cited be to the FCC mark in 76.5(kk) (76 I station [76.59 is) (see paragrule). all waiver of FCd on a part-time thin grade-B co	e or substitute basi ontour, [76.59(d)(5)	e in effect on 3.57, 76.59(b), (1), 76.63(a) (3) (a) referring the stitution of grass prior to June	June 24, 1981.) 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] ndfathered staff	.63(a) referring to 61(e)(1) tions in the			
Column 3:		e stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	l 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		
KSDK	D	0.25								
								0.25		
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE					
ine 1: Enter the	total number of	DSEs from լ	oart 5 of this s	schedule						
ine 2: Enter the	sum of permitted	d DSEs fron	n block B abo	ve						
				of DSEs subject 7 of this schedule		ate.				
ine 4: Enter gro	ss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represer partially	
ine 5: Multiply li	ine 4 by 0.0375 a	and enter su	m here				x		permited/ partially nonpermitted	
ine 6: Enter tota	S: Enter total number of DSEs from line 3									
ine 7: Multiply li	ine 6 by line 5 an	d enter here	e and on line 2	2, block 3, space	L (page 7)			0.00		

	WNER OF CABLE S						S	YSTEM ID# 25206	Name	
In block A: • If your answer if ' schedule.	ck A must be comp "Yes," leave the rei "No," complete bloo	mainder of pa	pelow.	of the DSE schedu		complete part {	3, (page 16) of the		6	
			BLOCK A:	TELEVISION MA	ARKETS				Computation of 3.75 Fee	
effect on June 24, X Yes—Com	1981?	schedule—D	•	er markets as defin LETE THE REMAIN			C rules and regula	tions in	G.1. G.1. GG	
		BLO	CK B: CARF	IAGE OF PERM	MITTED DS	Es				
Column 1: CALL SIGN	FCC rules and re instructions for th	List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.)								
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommercia D Grandfathered instructions fo E Carried pursus *F A station prev G Commercial U	Enter the appropriate letter indicating the basis on which you carried a permitted station. (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)] B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1) C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)] D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule). E Carried pursuant to individual waiver of FCC rules (76.7) *F A station previously carried on a part-time or substitute basis prior to June 25, 1981 G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)] M Retransmission of a distant multicast stream.								
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 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		
							-			
				I				0.00		
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE					
ine 1: Enter the	total number of	DSEs from p	part 5 of this s	schedule						
ine 2: Enter the	sum of permitted	d DSEs from	n block B abo	ve						
ine 3: Subtract	line 2 from line 1	. This is the	total number	of DSEs subject 7 of this schedule		ate.				
ine 4: Enter gro	ess receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represen partially	
ine 5: Multiply li	ine 4 by 0.0375 a	ınd enter su	m here				x		permited/ partially nonpermitted	
Line 6: Enter tota	al number of DSE	Es from line	3						carriage? If yes, see part 9 instructions.	
ino 7: Multiply li	ine 6 hy line 5 an	d enter here	and on line	2. block 3. space	I (nage 7)			0.00		

	WNER OF CABLE S						S	YSTEM ID# 25206	Name	
In block A: • If your answer if ' schedule.	ck A must be comp "Yes," leave the rei "No," complete bloo	mainder of pa	pelow.	of the DSE schedu		complete part {	3, (page 16) of the		6	
			BLOCK A:	TELEVISION MA	ARKETS				Computation of 3.75 Fee	
effect on June 24, X Yes—Com	1981?	schedule—D	•	er markets as defin LETE THE REMAIN			C rules and regula	tions in	G.1. G.1. GG	
		BLO	CK B: CARF	IAGE OF PERM	MITTED DS	Es				
Column 1: CALL SIGN	FCC rules and re instructions for th	List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.)								
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommercia D Grandfathered instructions fo E Carried pursus *F A station prev G Commercial U	Enter the appropriate letter indicating the basis on which you carried a permitted station. (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)] B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1) C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)] D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule). E Carried pursuant to individual waiver of FCC rules (76.7) *F A station previously carried on a part-time or substitute basis prior to June 25, 1981 G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)] M Retransmission of a distant multicast stream.								
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 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		
							-			
				I				0.00		
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE					
ine 1: Enter the	total number of	DSEs from p	part 5 of this s	schedule						
ine 2: Enter the	sum of permitted	d DSEs from	n block B abo	ve						
ine 3: Subtract	line 2 from line 1	. This is the	total number	of DSEs subject 7 of this schedule		ate.				
ine 4: Enter gro	ess receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represen partially	
ine 5: Multiply li	ine 4 by 0.0375 a	ınd enter su	m here				x		permited/ partially nonpermitted	
Line 6: Enter tota	al number of DSE	Es from line	3						carriage? If yes, see part 9 instructions.	
ino 7: Multiply li	ine 6 hy line 5 an	d enter here	and on line	2. block 3. space	I (nage 7)			0.00		

	WNER OF CABLE S						S	YSTEM ID# 25206	Name	
In block A: • If your answer if ' schedule.	ck A must be comp "Yes," leave the rei "No," complete bloo	mainder of pa	•	of the DSE schedu	ıle blank and	complete part {	3, (page 16) of the		6	
			BLOCK A:	TELEVISION MA	ARKETS				Computation of 3.75 Fee	
effect on June 24, Yes—Com	1981?	schedule—D	•	er markets as defin LETE THE REMAIN			C rules and regula	tions in	G.1. G.1. GG	
		BLO	CK B: CARF	IAGE OF PERM	MITTED DS	Es				
Column 1: CALL SIGN	List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.)									
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Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 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		
				I				0.00		
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE					
ine 1: Enter the	total number of	DSEs from p	part 5 of this s	schedule						
ine 2: Enter the	sum of permitted	d DSEs from	n block B abo	ve						
ine 3: Subtract	line 2 from line 1	. This is the	total number	of DSEs subject 7 of this schedule		ate.				
ine 4: Enter gro	ess receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represen partially	
ine 5: Multiply li	ine 4 by 0.0375 a	ınd enter su	m here				x		permited/ partially nonpermitted	
Line 6: Enter tota	al number of DSE	Es from line	3						carriage? If yes, see part 9 instructions.	
ine 7: Multinly li	ine 6 hy line 5 an	d enter here	and on line	2. block 3. space	I (nage 7)			0.00		

	WNER OF CABLE S						S	YSTEM ID# 25206	Name	
In block A: • If your answer if ' schedule.	ck A must be comp "Yes," leave the rei "No," complete bloo	mainder of pa	pelow.	of the DSE schedu		complete part {	3, (page 16) of the		6	
			BLOCK A:	TELEVISION MA	ARKETS				Computation of 3.75 Fee	
effect on June 24, X Yes—Com	1981?	schedule—D	•	er markets as defin LETE THE REMAIN			C rules and regula	tions in	G.1. G.1. GG	
		BLO	CK B: CARF	IAGE OF PERM	MITTED DS	Es				
Column 1: CALL SIGN	FCC rules and re instructions for th	List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.)								
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommercia D Grandfathered instructions fo E Carried pursus *F A station prev G Commercial U	Enter the appropriate letter indicating the basis on which you carried a permitted station. (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)] B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1) C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)] D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule). E Carried pursuant to individual waiver of FCC rules (76.7) *F A station previously carried on a part-time or substitute basis prior to June 25, 1981 G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)] M Retransmission of a distant multicast stream.								
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 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		
							-			
				I				0.00		
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE					
ine 1: Enter the	total number of	DSEs from p	part 5 of this s	schedule						
ine 2: Enter the	sum of permitted	d DSEs from	n block B abo	ve						
ine 3: Subtract	line 2 from line 1	. This is the	total number	of DSEs subject 7 of this schedule		ate.				
ine 4: Enter gro	ess receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represen partially	
ine 5: Multiply li	ine 4 by 0.0375 a	ınd enter su	m here				x		permited/ partially nonpermitted	
Line 6: Enter tota	al number of DSE	Es from line	3						carriage? If yes, see part 9 instructions.	
ino 7: Multiply li	ine 6 hy line 5 an	d enter here	and on line	2. block 3. space	I (nage 7)			0.00		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 25206									
		BLOCK	A: TELEVIS	ON MARKETS	(CONTINI	UED)			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation of 3.75 Fee

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. d/b/a SPARKLIGHT 25206 Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute -Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). Carriage B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN DSE **PERIOD CARRIAGE** DSE DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. of the If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. Syndicated **BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? No—Proceed to part 8 Yes—Complete blocks B and C . BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any community served by the cable system prior to March 31, 1972? (refer commercial VHF station that places a grade B contour, in whole or in part, over the cable system? to former FCC rule 76.159) Yes-List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 2	M ID# 25206	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	22.16	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the 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 DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1.)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ \$		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)		
	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		//E OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT	SYSTEM ID# 25206									
		,										
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). 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.										
Surcharge												
		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> .									
	Instruc	ctions:										
8		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	t									
J		checked "Yes," use the total number of DSEs from part 5.										
Computation		ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.										
of	1 1	r answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below	N									
Base Rate Fee	blank.											
	What is	s a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers										
	were lo	ocated within that station's local service area and others were located outside that area. For the definition of a station's "local										
	service	e area," see page (v) of the general instructions.										
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS										
	• Did ve	our cable system retransmit the signals of any partially distant television stations during the accounting period?										
		Yes—Complete part 9 of this schedule. No—Complete the following sections.										
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE										
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶\$										
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes,"										
		use the total number of DSEs from part 5.).										
	Section											
	3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.										
		A. Enter 0.01064 of gross receipts (the amount in section 1)										
		B. Enter 0.00701 of gross receipts (the amount in section 1)▶										
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here										
		D. Multiply line B by line C and enter here										
		E. Add lines A, and D. This is your base rate fee. Enter here										
		and in block 3, line 1, space L (page 7)	0.00									
		Base Rate Fee	U.UU									

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	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. Enter 0.01064 of gross receipts		8
(the amount in section 1) \$		
B. Enter 0.00701 of gross receipts		Computation
(the amount in section 1) \$		of Base Rate Fee
C. Multiply line B by 3.000 and enter here ▶		Dase Rate Fee
D. Enter 0.00330 of gross receipts		
(the amount in section 1) > _		
E. Subtract 4.000 from total DSEs		
(the figure in section 2) and enter here		
F. Multiply line D by line E and enter here \$		
G. Add lines A, C, and F. This is your base rate fee.		
Enter here and in block 3, line 1, space L (page 7) Base Rate Fee	0.00	
Dase Rate Fee		
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple		_
Space G.	criarillei iille-ups iil	9
In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base receipts from subscribers located within the station's local service area, from your system's total gross receipts. To		Computation
exclusion, you must:	_	of Base Rate Fee
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are d		and Syndicated
station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. De DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate		Exclusivity
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your syst		Surcharge for
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exe also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A a		Partially Distant
if your cable system is wholly located outside all major television markets, complete block A only.	and B solow. However,	Stations, and
How to Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
Step 1: For each community served, determine the local service area of each wholly distant and each partially discarried to that community.	tant station you	Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers outside the station's local service area. A subscriber located outside the local service area of a station is distant to same token, the station is distant to the subscriber.)		
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. system will have only one subscriber group when the distant stations it carried have local service areas that coinci	Note that a cable	
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of y		
groups.	· · · · · · · · · · · · · · · · · ·	
In each section: • Identify the communities/areas represented by each subscriber group.		
 Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distassubscribers in the group. 	ant to all of the	
• If:		
 your system is located wholly outside all major and smaller television markets, give each station's DSE as you of this schedule; or, 	gave it in parts 2, 3, and	
 any portion of your system is located in a major or smaller televison market, give each station's DSE as you gay part 6 of this schedule. 	ve it in block B,	
Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
 Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the g in the paper SA3 form. 	eneral instructions	
Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule		
page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber gross for that group's complement of stations and total gross receipts from the subscribers in that group). You do actual calculations on the form.	roup (that is, the total	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 25206 CABLE ONE, INC. d/b/a SPARKLIGHT 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.

KETC 0.25	EGAL NAME OF OWNE						:	25206	Name
FIRST SUBSCRIBER GROUP COMMUNITY/ AREA CHRISTIAN, SHELBY, MOULTRIE COMMUNITY/ AREA CALL SIGN DSE DSE DSE DSE DSE DSE DSE DS		BLOCK A:	COMPUTATION OF	F BASE RA	TE FEES FOR EACH	SUBSCRIE	BER GROUP		
CALL SIGN DSE								JP	_
CALL SIGN DSE	COMMUNITY/ AREA	CHRIST	ΓΙΑΝ, SHELBY, M	OULTRIE	COMMUNITY/ AREA MOI		MONTGOMERY CO WEST		
an Syndid Sector	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE CALL SIGN DSE			of
Syndic Exclusion Total DSEs O.00 Total DSEs O.00 Total DSEs O.00 Total DSEs Gross Receipts Second Group S 563,176.38 Gross Receipts Second Group S 481.56 THIRD SUBSCRIBER GROUP COMMUNITY AREA FAYETTE CO. COMMUNITY AREA FAYETTE CO. CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE KETC O.25 WICS O.25 WICS O.25 Total DSEs O.26 Gross Receipts Fourth Group S 236,454.15 Base Rate Fee Fourth Group S 238,97 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.					KETC	0.25			Base Rate F
Exclusion State Section Section									and
Exclusion State Section Section									Syndicated
Surch for Partial Dist Stati Total DSEs		····		•••••••••••		···			Exclusivity
fotal DSEs O.00 Sross Receipts First Group S 563,176.38 S 9 0.00 Base Rate Fee Second Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA FAYETTE CO. CALL SIGN DSE CALL SIGN CALL SIGN CALL SIGN DSE CALL SIGN DSE KETC O.25 WICS O.25 WICS O.25 Total DSEs O.50 Total DSEs O.50 Total DSEs O.25 Gross Receipts Fourth Group S 481.56 FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA MONTGOMERY CO N, C & MACOU Total DSEs Gross Receipts Third Group S 440,586.68 Gross Receipts Fourth Group S 236,454.15 Base Rate Fee Third Group S 236,454.15 Base Rate Fee Fourth Group S 628.97 Base Rate Fee Fourth Group S 628.97						-		······	
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THIRD SUBSCRIBER GROUP THIRD SUBSCRIBER GROUP CALL SIGN DSE CALL SIGN DSE									-
Total DSEs Octobre DSEs Octo									Distant
Gross Receipts First Group S									Stations
Gross Receipts First Group S 563,176.38 Gross Receipts Second Group S 181,038.77 Base Rate Fee First Group S 0.00 Base Rate Fee Second Group FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA FAYETTE CO. COMMUNITY/ AREA MONTGOMERY CO N,C & MACOU CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE KETC 0.25 WICS 0.25 Total DSEs Gross Receipts Fourth Group S 236,454.15 Base Rate Fee Fourth Group S 236,454.15									
Gross Receipts First Group S 563,176.38 Gross Receipts Second Group S 181,038.77 Base Rate Fee First Group S 0.00 Base Rate Fee Second Group FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA FAYETTE CO. COMMUNITY/ AREA MONTGOMERY CO N,C & MACOU CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE KETC 0.25 WICS 0.25 Total DSEs Gross Receipts Fourth Group S 236,454.15 Base Rate Fee Fourth Group S 236,454.15									
Gross Receipts First Group Sase Rate Fee First Group Sase Rate Fee First Group Sase Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA FAYETTE CO. COMMUNITY/ AREA FAYETTE CO. CALL SIGN DSE CALL SIGN DS									
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ABSE Rate Fee First Group THIRD SUBSCRIBER GROUP TOMMUNITY/ AREA FAYETTE CO. COMMUNITY/ AREA FAYETTE CO. CALL SIGN DSE CALL SIGN DSE CALL SIGN COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE CALL SIGN COMMUNITY/ AREA CALL SIGN DSE CALL SI									
THIRD SUBSCRIBER GROUP COMMUNITY/ AREA FAYETTE CO. COMMUNITY/ AREA MONTGOMERY CO N, C & MACOU CALL SIGN DSE CALL SIG	iross Receipts First G	roup	\$ 563	3,176.38	Gross Receipts Secon	d Group	\$ 1	81,038.77	
THIRD SUBSCRIBER GROUP COMMUNITY/ AREA FAYETTE CO. COMMUNITY/ AREA MONTGOMERY CO N, C & MACOU CALL SIGN DSE CALL SIGN DS									
COMMUNITY/ AREA FAYETTE CO. COMMUNITY/ AREA MONTGOMERY CO N,C & MACOU CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE KETC 0.25 WICS 0.25 Total DSEs Gross Receipts Third Group \$ 440,586.68 Base Rate Fee Third Group \$ 2,343.92 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	481.56	
COMMUNITY/ AREA FAYETTE CO. COMMUNITY/ AREA MONTGOMERY CO N,C & MACOU CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE KETC 0.25 WICS 0.25 Total DSEs Gross Receipts Third Group \$ 2,343.92 Base Rate Fee : Add the base rate fees for each subscriber group as shown in the boxes above.		TUIDD	CURCOURER CROI	ID	#	FOURTH	CLIBECDIRED CROL	ID.	
CALL SIGN DSE CALL SIGN DSE KETC 0.25 WICS 0.25 WICS 0.25 Fotal DSEs 0.50 Gross Receipts Third Group \$ 2,343.92 Base Rate Fee Third Group \$ 2,343.92 Base Rate Fee Fourth Group \$ 628.97				JP					
	COMMUNITY/ AREA	FAYET	TE CO.		COMMUNITY/ AREA	MONTGO	OMERY CO N,C	& MACOU	
MICS 0.25 0.25 0.25 0.25 0.25 0.25 0.25 0.25	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		····			KETC	0.25			
Gross Receipts Third Group \$ 440,586.68 Gross Receipts Fourth Group \$ 236,454.15 Base Rate Fee Third Group \$ 2,343.92 Base Rate Fee Fourth Group \$ 628.97	NICS	0.25							
Gross Receipts Third Group \$ 440,586.68 Gross Receipts Fourth Group \$ 236,454.15 Base Rate Fee Third Group \$ 2,343.92 Base Rate Fee Fourth Group \$ 628.97									
Gross Receipts Third Group \$ 440,586.68 Gross Receipts Fourth Group \$ 236,454.15 Base Rate Fee Third Group \$ 2,343.92 Base Rate Fee Fourth Group \$ 628.97									
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Gross Receipts Third Group \$ 440,586.68 Gross Receipts Fourth Group \$ 236,454.15 Base Rate Fee Third Group \$ 2,343.92 Base Rate Fee Fourth Group \$ 628.97									
Gross Receipts Third Group \$ 440,586.68 Gross Receipts Fourth Group \$ 236,454.15 Base Rate Fee Third Group \$ 2,343.92 Base Rate Fee Fourth Group \$ 628.97 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Gross Receipts Third Group \$ 440,586.68 Gross Receipts Fourth Group \$ 236,454.15 Base Rate Fee Third Group \$ 2,343.92 Base Rate Fee Fourth Group \$ 628.97									
Gross Receipts Third Group \$ 440,586.68 Gross Receipts Fourth Group \$ 236,454.15 Base Rate Fee Third Group \$ 2,343.92 Base Rate Fee Fourth Group \$ 628.97 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Gross Receipts Third Group \$ 440,586.68 Gross Receipts Fourth Group \$ 236,454.15 Base Rate Fee Third Group \$ 2,343.92 Base Rate Fee Fourth Group \$ 628.97		••••		•••••••••••		···			
Gross Receipts Third Group \$ 440,586.68 Gross Receipts Fourth Group \$ 236,454.15 Base Rate Fee Third Group \$ 2,343.92 Base Rate Fee Fourth Group \$ 628.97 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.					-	-			
Gross Receipts Third Group \$ 440,586.68 Gross Receipts Fourth Group \$ 236,454.15 Base Rate Fee Third Group \$ 2,343.92 Base Rate Fee Fourth Group \$ 628.97 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.						-			
Gross Receipts Third Group \$ 440,586.68 Gross Receipts Fourth Group \$ 236,454.15 Base Rate Fee Third Group \$ 2,343.92 Base Rate Fee Fourth Group \$ 628.97						<u></u>			
Gross Receipts Third Group \$ 440,586.68 Gross Receipts Fourth Group \$ 236,454.15 Base Rate Fee Third Group \$ 2,343.92 Base Rate Fee Fourth Group \$ 628.97		<u></u>				-			
Gross Receipts Third Group \$ 440,586.68 Gross Receipts Fourth Group \$ 236,454.15 Base Rate Fee Third Group \$ 628.97 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.						<u> </u>			
Gross Receipts Third Group \$ 440,586.68 Gross Receipts Fourth Group \$ 236,454.15 Base Rate Fee Third Group \$ 628.97 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Base Rate Fee Third Group \$ 2,343.92 Base Rate Fee Fourth Group \$ 628.97 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	otal DSEs			0.50	Total DSEs			0.25	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Gross Receipts Third C	Group	\$ 440	,586.68	Gross Receipts Fourth	Group	\$ 2	36,454.15	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Base Rate Fee Third G	Group	s 2	2.343.92	Base Rate Fee Fourth	Group	s	628.97	
Base 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) \$ 6,573.89			<u> </u>	.,5 .0.02		= 	<u> </u>	0_0.01	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7) \$ 6,573.89									
nter here and in block 3, line 1, space L (page 7) \$ 6,573.89	ase Rate Fee: Add th	ne base rate	e fees for each subsci	riber group a	s shown in the boxes ab	ove.			
· · · · · · · · · · · · · · · · · · ·				· '			\$	6,573.89	

LEGAL NAME OF OWNE CABLE ONE, INC.						S	25206	Name
E		COMPUTATION C		TE FEES FOR EACH		BER GROUP SUBSCRIBER GROU	ID	
COMMUNITY/ AREA		IPIN CO-SE		COMMUNITY/ AREA				9
CALL SIGN	DSE	CALL SIGN		CALL SIGN	DSE CALL SIGN		DSE	Computation of
KETC	0.25							Base Rate Fee
			····					and Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
			·····		<u>.</u>			Stations
Total DSEs			0.25	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 22	9,720.02	Gross Receipts Secon	d Group	\$ 2	45,155.36	
Base Rate Fee First G	roup	\$	611.06	Base Rate Fee Secon	d Group	\$	0.00	
		SUBSCRIBER GRO	UP			SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	BOND			COMMUNITY/ AREA	GREENE	= CO.		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
KETC WICS	0.25 0.25			KETC	0.25			
***************************************	0.20							
Total DSEs			0.50	Total DSEs			0.25	
Gross Receipts Third C	Group	\$ 19	9,309.89	Gross Receipts Fourth	Group	\$	68,413.84	
Base Rate Fee Third G	Group	\$	102.73	Base Rate Fee Fourth	Group	\$	181.98	
				Ш			_	
Base Rate Fee: Add the Enter here and in block			criber group a	as shown in the boxes at	ove.	\$		

LEGAL NAME OF OWNE							25206	Name
E	BLOCK A:	COMPUTATION C	OF BASE RA	ATE FEES FOR EAC	CH SUBSCRI	BER GROUP		
	NINTH	SUBSCRIBER GRO	OUP		TENTH	SUBSCRIBER GRO	JP	•
COMMUNITY/ AREA	JERSE	Y CO.		COMMUNITY/ ARE	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				KDNL	0.25			Base Rate Fee
				KDNL-DT2	1.00			and
				KMOV	0.25			Syndicated
				KETC	0.25			Exclusivity
				WRBU	1.00			Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs	•		0.00	Total DSEs	•		2.75	
Gross Receipts First G	roup	<u>\$</u> 1	1,695.15	Gross Receipts Sec	ond Group	\$	97,071.92	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	2,223.68	
E	LEVENTH	SUBSCRIBER GRO	DUP		TWELVTH	SUBSCRIBER GRO	JP	
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 0	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
C. 500 P. Coolpto Phila C	54p	<u> </u>			Croup	*		
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		
	. 5, 1, 3	page 1)				T		

LEGAL NAME OF OW CABLE ONE, IN						S	25206	Name
				ATE FEES FOR EAG				
		SUBSCRIBER GRO		FOURTEENTH SUBSCRIBER GROUP				9
COMMUNITY/ AREA	······		0	COMMUNITY/ ARE	Α		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
		-						and
		-	·····					Syndicated Exclusivity
								Surcharge
								for
								Partially
		-						Distant Stations
								Ottations
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GROU		
COMMUNITY/ AREA	A		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 Thire	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	
Dage Date Free A.	4	a fan fan eeste ee		an abanca in the ter	-h			
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		
		/						

LEGAL NAME OF OW CABLE ONE, IN						S	25206	Name
				ATE FEES FOR EAG				
		SUBSCRIBER GRO		EIGHTEENTH SUBSCRIBER GROUP				9
COMMUNITY/ AREA	······		0	COMMUNITY/ ARE	Α		0	Computatio
CALL SIGN	DSE	CALL SIGN	N DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
		-						and
		-	·····					Syndicated Exclusivity
								Surcharge
								for
								Partially
		-						Distant Stations
								Ottations
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				I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>	-						
	<u></u>							
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	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
			_ _					
Book Bote Fore Add	l the bess :	o food for each and	oribor	oo oboum in the barre	abous			
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxes	above.	\$		
		,						

LEGAL NAME OF OWNE CABLE ONE, INC.						S	3YSTEM ID# 25206	Name
		COMPUTATION C SUBSCRIBER GRO		ATE FEES FOR EAC		IBER GROUP SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
			····					and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
	ITY-THIRD	SUBSCRIBER GRO				SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	······		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····							
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
•	•				-			
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW CABLE ONE, IN						S	25206	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO		TWENTY-SIXTH SUBSCRIBER GROUP				9
COMMUNITY/ ARE/	······		0	COMMUNITY/ ARE	Α		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
		-						and
		-	·····		······			Syndicated Exclusivity
								Surcharge
								for
	<u></u>	-						Partially
		-						Distant Stations
								Otations
		-						
			·····					
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO		TI .		SUBSCRIBER GROU		
COMMUNITY/ ARE			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 Thir	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	
				-11				
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	s		
and here and in DIC	on o, ille 1, 8	ppace L (page 1)				Ψ		

LEGAL NAME OF OWN						S	25206	Name
OADLE ONE, INC							25206	
T\//E		SUBSCRIBER GRO		TE FEES FOR EACH SUBSCRIBER GROUP THIRTIETH SUBSCRIBER GROUP			JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
07.122 0.0.1	202	07.22 0.0.1	232	07.22 0.01.	DSE	CALL SIGN	332	Base Rate Fee
								and
								Syndicated
								Exclusivity
			<u>.</u>					Surcharge for
					·····			Partially
								Distant
								Stations
			····	-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	•	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	
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	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	as shown in the boxes a	above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 25206									
CABLE ONE, III							25200			
ТЬ		SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP I SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA		. 23233 NDER GROOT	0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
07.122.01.011	332	07.22 3.3.1	332	07.22 57611	302	0,422 0.014	332	Base Rate Fee		
								and		
								Syndicated		
								Exclusivity		
				-				Surcharge for		
				-				Partially		
			••••					Distant		
								Stations		
			••••							
Total DSEs			0.00	Total DSEs			0.00			
ross Receipts First Group \$ 0.0			0.00	Gross Receipts Sec	ond Group	\$	0.00			
	Base Rate Fee First Group \$ 0.00			Base Rate Fee Seco		\$	0.00			
		SUBSCRIBER GRO		Ti .		I SUBSCRIBER GROU	JP			
COMMUNITY/ AREA	Α		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 Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00			
	- r	·			- · P	·				
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
			criber group a	as shown in the boxes	above.					
Enter here and in blo	ock 3, line 1, s	pace L (page 7)				\$				

	EGAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. d/b/a SPARKLIGHT 25206								
THIRTY		COMPUTATION C SUBSCRIBER GRO	UP	11	RTY-EIGHTH	IBER GROUP I SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and Syndicated	
								Exclusivity	
								Surcharge	
			<u>.</u>					for Partially	
			····					Distant	
								Stations	
			·····						
Total DSEs			0.00	Total DSEs			0.00		
ross Receipts First Group \$ 0.0			0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Sec	ond Group	\$	0.00		
	RTY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU	_		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			····						
			<u></u>						
			<u>.</u>						
			·····						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
Base Rate Fee: Add the Enter here and in blood	he base rat					\$	0.00		

	GAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. d/b/a SPARKLIGHT 25206									
		COMPUTATION C SUBSCRIBER GRO		ATE FEES FOR EAC		IBER GROUP SUBSCRIBER GROU	JP	•		
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		
			<u>.</u>					for Partially		
	····		····					Distant		
								Stations		
			····							
			0.00				0.00			
otal DSEs 0.0				Total DSEs			0.00			
ross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00			
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00			
	RTY-THIRD	SUBSCRIBER GRO		1		SUBSCRIBER GROU	_			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
			<u>.</u>							
			····							
Fotal DSEs			0.00	Total DSEs			0.00			
	Oraun	•	0.00		rth Croup	•	0.00			
Gross Receipts Third	σιουρ	<u>\$</u>	0.00	Gross Receipts Fou	rui Group	\$	0.00			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00			
Base Rate Fee Third	he base rat					\$	0.00			

	GAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. d/b/a SPARKLIGHT 25206									
			NE DACE DA	TE FEE FOR FAC	LI CUDCOD	IDED COOLID	20200			
		SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP 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			0.00	Total DSEs			0.00			
ross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	ond Group	\$	0.00			
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco		\$	0.00			
		SUBSCRIBER GRO		Ti .		SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
			·····							
			····							
			<u>.</u>							
Total DSEs			0.00	Total DSEs			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			
				Ш						
Base Rate Fee: Add t Enter here and in bloo			criber group a	as shown in the boxes	above.	\$				

EGAL NAME OF OWNER OF CABLE SYSTEM: SABLE ONE, INC. d/b/a SPARKLIGHT SYSTEM ID# 25206								
		COMPUTATION C		ATE FEES FOR EAC		IBER GROUP I SUBSCRIBER GROU	ID	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fe
								and Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
ross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	FTY-FIRST	SUBSCRIBER GRO		1		SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	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 (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee Third (Base Rate Fee: Add the Enter here and in block	ne base rat					\$	0.00	

LEGAL NAME OF OW CABLE ONE, INC						S	25206	Name
				ATE FEES FOR EAG				
		SUBSCRIBER GRO		Ti .		I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	CALL SIGN DSE CALL SIGN DSE			of
								Base Rate Fe
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Otations
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		\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GROU		
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	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	
				Ш				
Base Rate Fee: Add	the base rat	e fees for each subs	criber group	as shown in the boxes	above.			
Enter here and in blo						\$		

FIFTY-SE\ COMMUNITY/ AREA		COMPUTATION O SUBSCRIBER GRO		ATE FEES FOR EAC	IFTY-EIGHTH	BER GROUP SUBSCRIBER GROU	JP 0	9
CALL SIGN	DSE	CALL SIGN		COMMUNITY/ ARE	Α		0	u
Total DSEs	DSE	CALL SIGN	DSE					Computation
			_	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Gross Receipts First Grou _เ			0.00	Total DSEs			0.00	
				Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group		\$	0.00	Base Rate Fee Sec		\$	0.00	
	<u> </u>	SUBSCRIBER GRO				SUBSCRIBER GROU	_	
COMMUNITY/ AREA			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 Third Grou			0.00	Gross Receipts Fou	rth Group	\$	0.00	
	ıup	\$	0.00					
Base Rate Fee Third Grou	oup	\$	0.00					
		\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add the b Enter here and in block 3, l		\$		Base Rate Fee Foul	rth Group	\$	0.00	

	EGAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. d/b/a SPARKLIGHT 25206									
,				TE FEES FOR EAC	LL CLIDOOD	IDED COOLID	20200			
:		SUBSCRIBER GRO		TI .		SUBSCRIBER GROUP	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			0.00	Total DSEs			0.00			
ross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	ond Group	\$	0.00			
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Seco		\$	0.00			
		SUBSCRIBER GRO		Ti .		SUBSCRIBER GROU	JP			
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	A		0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
			••••							
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00			
,	•				,	_				
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
			criber group a	as shown in the boxes	above.					
Enter here and in blo			5 F			\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 25206								
				TE FEES FOR EAC				
	IXTY-FIFTH	SUBSCRIBER GRO		TI .		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
	·····		····					Surcharge
								for
								Partially
								Distant Stations
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First C		\$	0.00	Base Rate Fee Sec		\$	0.00	
	'-SEVENTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU	JP 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	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	
				Ш				
Base Rate Fee: Add t Enter here and in bloc	he base rat k 3, line 1, s	e fees for each subs space L (page 7)	criber group a	as shown in the boxes	above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. d/b/a SPARKLIGHT 25206									
,			TE BASE DA	ATE FEES FOR EACI		IRED CDOUD	20200			
;		SUBSCRIBER GRO		III		I SUBSCRIBER GROU	JP			
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		
	<u>.</u>							Stations		
Total DSEs			0.00	Total DSEs			0.00			
ross Receipts First Group \$ 0.0			0.00	Gross Receipts Seco	nd Group	\$	0.00			
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Seco		\$	0.00			
		SUBSCRIBER GRO		Ti .		SUBSCRIBER GROU	JP			
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
				-						
				-						
					•••••					
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00			
										
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00			
				Ш						
			criber group	as shown in the boxes a	above.	•				
Enter here and in blo	оск 3, line 1, s	space L (page 7)				\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT SYSTEM ID# 25206								
	BLOCK A:	COMPUTATION C	OF BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	NTY-THIRD	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
			••••				·····	Partially
						-		Distant
								Stations
Total DSEs	<u>.</u>		0.00	Total DSEs	'		0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVE	NTY-FIFTH	SUBSCRIBER GRO	OUP	SE\	/ENTY-SIXTH	SUBSCRIBER GROU	IP	
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	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				••				
Base Rate Fee: Add t Enter here and in bloc	he base rat k 3, line 1, s	e fees for each subs space L (page 7)	criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN CABLE ONE, INC						S	25206	Name
				ATE FEES FOR EAC				
SEVENTY COMMUNITY/ AREA	'-SEVENTH	SUBSCRIBER GRO	0 0	SEVE COMMUNITY/ ARE		SUBSCRIBER GROU	JP 0	9
COMMONT IT AIREA				COMMONT IT ARE				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe and
								Syndicated
								Exclusivity
			<u></u>					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	
	NTY-NINTH	SUBSCRIBER GRO				I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		П	0.00	Total DSEs		H	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
	"F	<u>·</u>			- · · P	·		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t	he hase rat	e fees for each subs	criber aroun	as shown in the boxes	above			
Enter here and in bloc			J. 54P			\$		

1D# 206								
				TE FEES FOR EACH				
0		SUBSCRIBER GROU	Y-SECOND	COMMUNITY/ AREA	<u>0</u>	SUBSCRIBER GRO	ITY-FIRST	EIGH COMMUNITY/ AREA
Con								
E Base	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base		-	<u> </u>		<u></u>			
Syr								
Exc								
Su		-						
Pa								
Si								
			<u></u>		<u></u>			
<u>o</u> _	0.00			Total DSEs	0.00			otal DSEs
0	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	roup	Gross Receipts First G
	Gross Receipts Second Group \$ 0.00						•	
<u>-</u>							•	
0	0.00	\$		Base Rate Fee Secon	0.00	\$	-oup	ase Rate Fee First Gr
	IP	\$ SUBSCRIBER GROU		EIGH	UP	\$ SUBSCRIBER GROI	-oup	ase Rate Fee First Gi
0	IP					SUBSCRIBER GROI	-oup	ase Rate Fee First Gi
0	IP			EIGH	UP	SUBSCRIBER GROI	-oup	ase Rate Fee First Gi EIGH OMMUNITY/ AREA
0	0 0	SUBSCRIBER GROU	Y-FOURTH	EIGH* COMMUNITY/ AREA	UP 0		TY-THIRD	ase Rate Fee First Gr EIGH OMMUNITY/ AREA
0	0 0	SUBSCRIBER GROU	Y-FOURTH	EIGH* COMMUNITY/ AREA	UP 0		TY-THIRD	ase Rate Fee First Gr EIGH OMMUNITY/ AREA
0	0 0	SUBSCRIBER GROU	Y-FOURTH	EIGH* COMMUNITY/ AREA	UP 0		TY-THIRD	ase Rate Fee First Gi EIGH OMMUNITY/ AREA
0	0 0	SUBSCRIBER GROU	Y-FOURTH	EIGH* COMMUNITY/ AREA	UP 0		TY-THIRD	ase Rate Fee First Gr EIGH OMMUNITY/ AREA
0	0 0	SUBSCRIBER GROU	Y-FOURTH	EIGH* COMMUNITY/ AREA	UP 0		TY-THIRD	ase Rate Fee First Gi EIGH OMMUNITY/ AREA
0	0 0	SUBSCRIBER GROU	Y-FOURTH	EIGH* COMMUNITY/ AREA	UP 0		TY-THIRD	ase Rate Fee First Gr EIGH OMMUNITY/ AREA
0	0 0	SUBSCRIBER GROU	Y-FOURTH	EIGH* COMMUNITY/ AREA	UP 0		TY-THIRD	ase Rate Fee First Gr EIGH OMMUNITY/ AREA
0	0 0	SUBSCRIBER GROU	Y-FOURTH	EIGH* COMMUNITY/ AREA	UP 0		TY-THIRD	lase Rate Fee First G
0	0 0	SUBSCRIBER GROU	Y-FOURTH	EIGH* COMMUNITY/ AREA	UP 0		TY-THIRD	Base Rate Fee First Gi EIGH COMMUNITY/ AREA
0	0 0	SUBSCRIBER GROU	Y-FOURTH	EIGH* COMMUNITY/ AREA	UP 0		TY-THIRD	Base Rate Fee First Gr EIGH COMMUNITY/ AREA
0	0 0	SUBSCRIBER GROU	Y-FOURTH	EIGH* COMMUNITY/ AREA	UP 0		TY-THIRD	Base Rate Fee First Gr EIGH COMMUNITY/ AREA
O	0 0	SUBSCRIBER GROU	Y-FOURTH	EIGH* COMMUNITY/ AREA	UP 0		TY-THIRD	EIGH COMMUNITY/ AREA CALL SIGN
0 E	DSE	SUBSCRIBER GROU	Y-FOURTH DSE	EIGHT COMMUNITY/ AREA	DSE		TY-THIRD DSE	EIGH COMMUNITY/ AREA CALL SIGN Total DSEs
0 E	DSE DSE O.00	SUBSCRIBER GROU	Y-FOURTH DSE	EIGHT COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE D.000	CALL SIGN	TY-THIRD DSE	Base Rate Fee First Gi EIGH COMMUNITY/ AREA

CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Ba	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 25206							Name	
CALL SIGN DSE CALL SIGN DSE					т —				
CALL SIGN	COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
Total DSEs Gross Receipts First Group Base Rate Fee First Group S O.00 Base Rate Fee Second Group EIGHTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE C	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
Total DSEs									Base Rate Fee
Total DSEs				····					and Syndicated
Total DSEs									Exclusivity
Total DSEs Total									Surcharge
Total DSEs O.00 Gross Receipts First Group South See First Group COMMUNITY/ AREA OCOMMUNITY/		<u> </u>		····					for Partially
Total DSEs O.00 Gross Receipts First Group Base Rate Fee First Group Base Rate Fee First Group COMMUNITY/ AREA OCMMUNITY/ AREA OCMUNITY/ AREA OCMU									Distant
Gross Receipts First Group Sase Rate Fee First Group EIGHTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CA									Stations
Gross Receipts First Group Base Rate Fee First Group EIGHTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE				<u></u>					
Gross Receipts First Group Base Rate Fee First Group EIGHTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE									
Gross Receipts First Group Base Rate Fee First Group EIGHTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE CA									
Gross Receipts First Group Base Rate Fee First Group EIGHTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE CA		<u></u>		····					
Base Rate Fee First Group EIGHTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE	Total DSEs		II .	0.00	Total DSEs			0.00	
Base Rate Fee First Group EIGHTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE	Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
EIGHTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN	·	•				•			
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs 0.00 Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN		SEVENTH	SUBSCRIBER GRO		1		SUBSCRIBER GROU	_	
Total DSEs O.00 Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	COMMUNITY/ AREA				COMMUNITY/ AREA	Α		U	
Gross Receipts Third Group \$ 0.00 Gross Receipts 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									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00		<u></u>		····					
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00				····					
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00				<u></u>					
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
	Total DSEs	•		0.00	Total DSEs	<u>'</u>		0.00	
	Gross Receipts Third G	roup	\$		Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00		•				1			
	Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Foun	rth Group	\$	0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7) \$\$				criber group	as shown in the boxes	above.			

	EGAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. d/b/a SPARKLIGHT 25206						Name	
		COMPUTATION C		ATE FEES FOR EAC	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
								Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
Total DSEs Total DSEs						0.00		
Gross Receipts First G	Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00				0.00			
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	ETY-FIRST	SUBSCRIBER GRO	0 0			SUBSCRIBER GROU	JP O	
COMMUNITY/ AREA			U	COMMUNITY/ AREA			U	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT SYSTEM ID# 25206							Name	
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCRI	BER GROUP		
	ETY-THIRD	SUBSCRIBER GRO		ii —		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NIN	ETY-FIFTH	SUBSCRIBER GRO	DUP	N	INETY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····				······	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				••				
Base Rate Fee: Add the Enter here and in bloc	he base rat k 3, line 1, s	e fees for each subs space L (page 7)	criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT SYSTEM ID# 25206							Name		
NINETY		COMPUTATION C SUBSCRIBER GRO				NINETY-EIGHTH SUBSCRIBER GROUP			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
			<u>.</u>					and Syndicated	
			·····					Exclusivity	
								Surcharge	
								for	
								Partially Distant	
								Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First (oss Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00								
Base Rate Fee First C	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
	ETY-NINTH	SUBSCRIBER GRO				I SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			<u>.</u>						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add t			criber group	as shown in the boxes	above.	\$			

LEGAL NAME OF OW						S	25206	Name
			LE DAGE D	TE FEES FOR EAC	H SHBOOD	IDED COOLD	20200	
ONE HUN		SUBSCRIBER GRO		П		SUBSCRIBER GROUP	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			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 GRO		11		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····		······			
			••••	-				
			••••	-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
							<u> </u>	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				Ш				
			criber group	as shown in the boxes	above.			
Enter here and in blo	ock 3, line 1, s	space L (page 7)				\$		

LEGAL NAME OF OWNE CABLE ONE, INC.						S	25206	Name
			E BASE D	TE FEES FOR EAC	LI CI IDCOD	IBED CDOLID	20200	
		SUBSCRIBER GRO		TI .		I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٨		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
	<u></u>		<u>.</u>					Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
			·····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	Gross Receipts Second Group \$ 0.00			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO		11		I SUBSCRIBER GROU	JP -	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
			····					
	···		····	-				
	<u>.</u>		<u>.</u>					
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third 0	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				Ш				
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT SYSTEM ID# 25206							Name	
E	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCR	BER GROUP		
ONE HUNDR	ED NINTH	SUBSCRIBER GRO		ONE HUNI	RED TENTH	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	٩		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
				-				Exclusivity
	····		·····	-				Surcharge for
								Partially
								Distant
			<u></u>					Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	0.00	
	LEVENIH	SUBSCRIBER GRO		ll .		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>			-				
	<u></u>							
	····		····					
	····		····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third 0	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	ne base rat 3, line 1, s	e fees for each subso pace L (page 7)	criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT SYSTEM ID# 25206							Name	
		COMPUTATION C		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	ID	
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
			····					and Syndicated
								Exclusivity
								Surcharge for
			····					Partially
								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	
	FIFTEENTH	SUBSCRIBER GRO		ii -		SUBSCRIBER GROU		
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	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t			criber group a	as shown in the boxes	above.	\$		

CABLE ONE, INC						S	25206	Name
ONE HUNDRED SEVI				ONE HUNDRED E	TE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED EIGHTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0			
oommonn i, , a.e., t				Solvino (1177) (122)				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 0	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	IINTEENTH	SUBSCRIBER GRO		1		SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
S. CCC P. COCIPIS TIME	Стоир	.*		S. S	C.Oup	*		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.						S	3YSTEM ID# 25206	Name
		COMPUTATION O SUBSCRIBER GRO		ONE HUNDRED TWE	TE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED TWENTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0			
COMMONITY AREA				COMMONIT IT AREA	·			9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
	····							Exclusivity
								Surcharge
								for
								Partially Distant
	····							Stations
	····		····					
	····		····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
0.000				Oraco Maco.pia aco.	a G.Gap			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED TWE	NTY-THIRD	SUBSCRIBER GROUI	Þ	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····		····					
	····							
	<u>.</u>							
	····		····					
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third (- -	•	0.00	Gross Receipts Four	th Group	¢	0.00	
C.000 Noocipis Tilliu C	J. σα ρ	\$	0.00	Torous receipts rour	Group	\$	<u> </u>	
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 25206							Name	
		COMPUTATION C SUBSCRIBER GROU		ONE HUNDRED T	TE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA 0			
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	·····		····					and Syndicated
	·····		····					Exclusivity
								Surcharge
			<u></u>					for
								Partially
	·····		····					Distant Stations
								Stations
	·····		····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First C	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NE HUNDRED TWENT	Y-SEVENTH	SUBSCRIBER GROU		11		SUBSCRIBER GROUP	1	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>					
	·····							
	·····		<mark></mark>				·····	
	·····							
	·····		····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
•	•				•			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWI						S	25206	Name
CABLE ONL, INC							25200	
ONE HUNDRED TW				ATE FEES FOR EAC				
COMMUNITY/ AREA		SUBSCRIBER GROU	0	COMMUNITY/ AREA		SUBSCRIBER GROUP	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	
ONE HUNDRED T	HIRTY-FIRST	SUBSCRIBER GROU		li		SUBSCRIBER GROUP	1	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>					
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
C. 000 Receipts Tillie	. Oloup	<u>*</u>	<u> </u>	Cross receipts rour	a. Group	*	3.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Dana Bets E. A. C.	46-6			the shares in the 1	al ave			
Enter here and in blo			criber group a	as shown in the boxes	apove.	\$		

CABLE ONE, INC.						S	25206	Name
				TE FEES FOR EAC	H SUBSCRI	BER GROUP		
	RTY-THIRD	SUBSCRIBER GROUI		H		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
	····		···					Surcharge for
			···					Partially
								Distant
								Stations
			<u>_</u>					
				-				
	····		 					
	····		···					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TH	IRTY-FIFTH	SUBSCRIBER GROUI	•	ONE HUNDRED	THIRTY-SIXTH	SUBSCRIBER GROUP	1	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····		<u></u>					
	····		<u></u>					
	<u></u>		<u></u>	-				
	···		<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	th Group	\$	0.00	
					-			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Foun	th Group	\$	0.00	
				11				
Base Rate Fee: Add th Enter here and in block	e base rat e 3, line 1, s	e fees for each subsc pace L (page 7)	riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC						S	25206	Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED THIRT	Y-SEVENTH	SUBSCRIBER GROU		H		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	٩		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
				-				Exclusivity
				-				Surcharge for
	•••••	-	····					Partially
								Distant
								Stations
			····					
			····				·····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	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	
	IIRTY-NINTH	SUBSCRIBER GROU		ll .		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····		····	-				
			····					
			····					
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				**				
Base Rate Fee: Add t Enter here and in bloc	he base rat k 3, line 1, s	e fees for each subse pace L (page 7)	criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN CABLE ONE, INC						S	3YSTEM ID# 25206	Name
		COMPUTATION C SUBSCRIBER GROU		ONE HUNDRED FO	RTY-SECONE	IBER GROUP SUBSCRIBER GROUP	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
			····					
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FO	ORTY-THIRD	SUBSCRIBER GROU	Р	ONE HUNDRED FO	RTY-FOURTH	I SUBSCRIBER GROUP	1	
COMMUNITY/ 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	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
					·			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add t			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC							25206	Name
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
		SUBSCRIBER GROU		11		H SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
			<u></u>					and
		-						Syndicated Exclusivity
			····					Surcharge
								for
								Partially
								Distant Stations
		-						Stations
Total DSEs		II.	0.00	Total DSEs		H	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 GROU		11		SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
			····					
		-						
		-	<u></u>					
		-						
		-	····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	s	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
			criber group	as shown in the boxes	above.			
Enter here and in bloo						\$		

LEGAL NAME OF OWNE CABLE ONE, INC.						S	25206	Name
				TE FEES FOR EAC				
ONE HUNDRED FOR	TY-NINTH	SUBSCRIBER GRO		li .		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	٩		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
	····		····					Surcharge for
	····		···					Partially
								Distant
								Stations
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	TY-FIRST	SUBSCRIBER GRO		1		SUBSCRIBER GROU		
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 G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
							1	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Foun	rth Group	\$	0.00	
				**				
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.						S	25206	Name
		COMPUTATION OF		ATE FEES FOR EAC	TY-FOURTH	IBER GROUP I SUBSCRIBER GROU	JP 0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
			-					Exclusivity
			<u> </u>					Surcharge
								for
								Partially
								Distant
								Stations
			<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP	ONE HUNDRED	FIFTY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	 		<u></u>		······			
	. 		···					
	<u></u>		<u></u>					
			-					
	<u></u>		<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third 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			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN CABLE ONE, INC						S	3YSTEM ID# 25206	Name
		COMPUTATION C SUBSCRIBER GROU		ONE HUNDRED I	FIFTY-EIGHTH	IBER GROUP	0	9
COMMONT IT AREA				COMMONT IT AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
	····		····		·····			
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED F	IFTY-NINTH	SUBSCRIBER GROU	P	ONE HUNDI	RED SIXTIETH	SUBSCRIBER GROUP	1	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····		·····			
Total DSEs		Ш	0.00	Total DSEs		11	0.00	
Gross Receipts Third	Group	<u> </u>	0.00	Gross Receipts Four	th Group	e	0.00	
C.000 Neverbia Tilila	Стоир	<u>\$</u>	0.00	Torous receipts rout	ar Group	\$	<u> </u>	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.							25206	Name
E	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP		
	FIRST	SUBSCRIBER GRO	UP		SECOND	SUBSCRIBER GRO	JP	0
COMMUNITY/ AREA	CHRIST	ΓΙΑΝ, SHELBY, N	IOULTRI	COMMUNITY/ AREA	MONTG	OMERY CO WE	ST	9 Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
KSDK	0.25			KSDK	0.25			Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
							······	for
	<u></u>		<u></u>		<u></u>		······	Partially
								Distant Stations
	···		····		···		······	Stations
							·······	
	···		···					
							•••••	
Total DSEs			0.25	Total DSEs			0.25	
Gross Receipts First G	roup	s 563	3,176.38	Gross Receipts Secon	d Group	\$	181,038.77	
		, , , , , , , , , , , , , , , , , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			· ·		
Base Rate Fee First G	roup	\$ 5	5,279.78	Base Rate Fee Secon	d Group	\$	1,697.24	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	FAYET	TE CO.		COMMUNITY/ AREA	MONTG	OMERY CO N,C	C & MACOU	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							·····	
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			···					
	···		···				·······	
	···		···		···			
							•••••	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$ 440	,586.68	Gross Receipts Fourth	Group	\$ 2	236,454.15	
Base Rate Fee Third G	Group	\$	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 al	oove.	\$	9,275.35	

Nonpermitted 3.75 Stations

	d/b/a SP	E SYSTEM: ARKLIGHT				`	25206	Name
B	LOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	FIFTH	SUBSCRIBER GRO)UP	1	SIXTH	SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA	MACOL	UPON CO SE		COMMUNITY/ AREA	SANGA	ION CO.		9 Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				KSDK	0.25			Base Rate
								and
								Syndicate
								Exclusivi
	1			***				Surcharg
								for
					•••••		······	
								Partially
								Distant
								Stations
	·							
							·····	
				+				
Total DSEs			0.00	Total DSEs			0.25	
			. 700 00				245.455.00	
Gross Receipts First Gr	oup	\$ 22	9,720.02	Gross Receipts Seco	ond Group	\$	245,155.36	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	2,298.33	
	SEVENTH	SUBSCRIBER GRO)UP		EIGHTH	SUBSCRIBER GRO	JP	
COMMUNITY/ AREA	BOND	CO.		COMMUNITY/ AREA	A GREENE	ECO.		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		01.22.21				0.122.0.0		
					······			
					······			
					·····			
Fotal DSEs			0.00	Total DSEs			0.00	
	roup	ş 1		Total DSEs Gross Receipts Four	th Group	\$	_	
	roup	ş 1	0.00		rth Group	\$	0.00	
Total DSEs Gross Receipts Third G	roup	ş 1			th Group	\$	_	
Gross Receipts Third G	·	s 1	9,309.89			\$	68,413.84	
Gross Receipts Third G	·	s 1		Gross Receipts Four			_	
Gross Receipts Third G	·	\$ 1 ¹	9,309.89	Gross Receipts Four			68,413.84	
	roup	\$	0.00	Gross Receipts Four	th Group		68,413.84	

Nonpermitted 3.75 Stations

CABLE ONE, INC.		E SYSTEM: ARKLIGHT				5	25206	Name
·				TE EEEO EOO EAO:	LOUIDOOD	NDED CDCLID		
E		SUBSCRIBER GRO		TE FEES FOR EACH		IBER GROUP I SUBSCRIBER GROU	ID	
COMMUNITY/ AREA	JERSE		<u></u>	COMMUNITY/ AREA				9
COMMONT IT AIREA	OLIVOL			COMMONT IT AREA	00011			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
			<mark></mark>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	s 11	,695.15	Gross Receipts Secon	d Group	\$	97,071.92	
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
E	LEVENTH	SUBSCRIBER GRO	UP		TWELVTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
			<u> </u>					
	-		<u> </u>					
			0.00	Total DSEs			0.00	
Total DSEs						•	0.00	
	roup	•	በ በበ	Grose Pagainta Equath				
Total DSEs Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	

Nonpermitted 3.75 Stations

,		SYSTEM: ARKLIGHT				•	25206	Na
				ATE FEES FOR EAC				
THIRTE	ENTH S	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		I SUBSCRIBER GROU	JP 0	9
COMMUNITY AREA				COMMONT TO AREA				Compu
CALL SIGN [OSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	0
								Base Ra
								an Syndid
			-		·····			Exclus
								Surch
								for
								Partia Dista
			<u> </u>					Statio
					<u>.</u>			
			-					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group		\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
		·*				<u>·</u>		
3ase Rate Fee First Group)	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	ENTH S	SUBSCRIBER GRO				SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN [DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN [OSE	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 [DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN [DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	DSE	CALL SIGN	DSE	Total DSEs	DSE	CALL SIGN	DSE	
Total DSEs		CALL SIGN				CALL SIGN		
CALL SIGN [0.00	Total DSEs			0.00	

	25206					ARREIGITI	u/b/u 01 /	CABLE ONE, INC.
		BER GROUP	SUBSCRI	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	В
•	JP	SUBSCRIBER GROU	HTEENTH	EIC	UP	SUBSCRIBER GRO	NTEENTH	SEVE
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated							<u>.</u>	
Exclusivity								
Surcharge								
for								
Partially								
Distant								
Stations								
	······							
	•••••		-		····		····	
			 				-	
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00		а споар	Gross receipts ecoor	0.00	•	тоир	Sross recouples i hat of
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	WENTIETH	Т)UP	SUBSCRIBER GRO	INTEENTH	NI
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
							····	
	······		······································		····		····	
			-				····	
						-		
	0.00			Total DSEs	0.00			Fotal DSEs
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
		_						

ABLE ONE, INC. U/b/a	ABLE SYSTEM: SPARKLIGHT					25206	Nan
	A: COMPUTATION (
TWENTY-FIR DMMUNITY/ AREA	ST SUBSCRIBER GRO	OUP 0	COMMUNITY/ ARE		SUBSCRIBER GROU	0	9
			COMMONT I/ ARE				Compu
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Ra
							Syndic
							Exclus
							Surcha
							for Partia
							Dista
							Statio
tal 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	
TWENTY-THI	RD SUBSCRIBER GRO	DUP	TWE	NTY-FOURTH	I SUBSCRIBER GROU	JP	
DMMUNITY/ AREA		0	COMMUNITY/ ARE	٩		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	
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	
DALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
DALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
DALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
DALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
DALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
DALL SIGN DSE	CALL SIGN	DSE	Total DSEs	DSE	CALL SIGN	DSE	
	CALL SIGN				CALL SIGN		
tal DSEs		0.00	Total DSEs			0.00	

CABLE ONE, INC. d/l		SYSTEM: ARKLIGHT					25206	Name
				ATE FEES FOR EACH				
	<u>/-FIFTH S</u>	SUBSCRIBER GRO		TI .		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computat
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate I
								and
								Syndicate
								Exclusivit
								Surcharg for
								Partially
			-					Distant
								Stations
Total DSEs	-		0.00	Total DSEs			0.00	
Gross Receipts First Group	р	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
	Г						$\neg \neg$	
Base Rate Fee First Group	p [\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
		\$ SUBSCRIBER GRO	<u>'</u>			\$ SUBSCRIBER GROU		
TWENTY-SE		SUBSCRIBER GROU	<u>'</u>		ITY-EIGHTH			
TWENTY-SEY		SUBSCRIBER GROU	UP	TWEN	ITY-EIGHTH		UP	
TWENTY-SEY	VENTH S		UP 0	TWEN	ITY-EIGHTH	SUBSCRIBER GROU	UP 0	
TWENTY-SE	VENTH S		UP 0	TWEN	ITY-EIGHTH	SUBSCRIBER GROU	UP 0	
TWENTY-SEY	VENTH S		UP 0	TWEN	ITY-EIGHTH	SUBSCRIBER GROU	UP 0	
TWENTY-SE	VENTH S		UP 0	TWEN	ITY-EIGHTH	SUBSCRIBER GROU	UP 0	
TWENTY-SEY	VENTH S		UP 0	TWEN	ITY-EIGHTH	SUBSCRIBER GROU	UP 0	
TWENTY-SEY	VENTH S		UP 0	TWEN	ITY-EIGHTH	SUBSCRIBER GROU	UP 0	
TWENTY-SEY	VENTH S		UP 0	TWEN	ITY-EIGHTH	SUBSCRIBER GROU	UP 0	
TWENTY-SEY	VENTH S		UP 0	TWEN	ITY-EIGHTH	SUBSCRIBER GROU	UP 0	
TWENTY-SEY	VENTH S		UP 0	TWEN	ITY-EIGHTH	SUBSCRIBER GROU	UP 0	
TWENTY-SEY	VENTH S		UP 0	TWEN	ITY-EIGHTH	SUBSCRIBER GROU	UP 0	
TWENTY-SEY	VENTH S		UP 0	TWEN	ITY-EIGHTH	SUBSCRIBER GROU	UP 0	
TWENTY-SEY	VENTH S		UP 0	TWEN	ITY-EIGHTH	SUBSCRIBER GROU	UP 0	
TWENTY-SEY	VENTH S		UP 0	TWEN	ITY-EIGHTH	SUBSCRIBER GROU	UP 0	
TWENTY-SET	VENTH S		DSE	TWEN COMMUNITY/ AREA CALL SIGN	ITY-EIGHTH	SUBSCRIBER GROU	DSE	
TWENTY-SEY COMMUNITY/ AREA CALL SIGN Fotal DSEs	DSE	CALL SIGN	DSE DSE O.000	TWEN COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	DSE	
TWENTY-SEY COMMUNITY/ AREA CALL SIGN Total DSEs	DSE		DSE	TWEN COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	
COMMUNITY/ AREA	DSE	CALL SIGN	DSE DSE O.000	TWEN COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	DSE	
TWENTY-SEY COMMUNITY/ AREA CALL SIGN Fotal DSEs	DSE DSE	CALL SIGN	DSE DSE O.000	TWEN COMMUNITY/ AREA CALL SIGN Total DSEs	DSE h Group	CALL SIGN	DSE	

CABLE ONE, INC	. u/b/a 3P	ARKLIGHT					25206	Name
				TE FEES FOR EAC	H SUBSCR	IBER GROUP		<u></u>
TWE	NTY-NINTH	SUBSCRIBER GRO	DUP		THIRTIETH	SUBSCRIBER GRO	UP	^
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
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			·····					
				-				
			·····				······	
				-				
Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THI	RTY-FIRST	SUBSCRIBER GRO	DUP	THIF	TY-SECOND	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Γotal 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	th Group	\$	0.00	
				II				
				Ш				

	a SPARKI	_IGHT				•	25206	Nam
				ATE FEES FOR EACH				
	HIRD SUBS	CRIBER GROU		li		I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computa
CALL SIGN D	SE CA	LL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
	·····				·····			Syndicat Exclusiv
								Surchar
								for
			ļ					Partiall
								Distant Station
								Otation
								
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otal DSEs	II.		0.00	Total DSEs		11	0.00	
Gross Receipts First Group	•		0.00	Gross Receipts Seco	nd Group	¢	0.00	
Bioss Receipts Filst Gloup	<u>\$</u>			Gloss Receipts Seco	iu Group	\$	0.00	
Base Rate Fee First Group	\$		0.00	Base Rate Fee Second	nd Group	\$	0.00	
THIDTY I	TIETU CI IDC	CRIBER GROU	ID			LOUBOODIDED ODOL		
	-IF ITI 30B3	JOINIBER GROC			IRTY-SIXTE	SUBSCRIBER GROU	JP	
			0	COMMUNITY/ AREA	IRTY-SIXTE	SUBSCRIBER GROU	0	
COMMUNITY/ AREA		LL SIGN			DSE	CALL SIGN	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		——————————————————————————————————————	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		——————————————————————————————————————	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		——————————————————————————————————————	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		——————————————————————————————————————	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		——————————————————————————————————————	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		——————————————————————————————————————	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		——————————————————————————————————————	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		——————————————————————————————————————	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		——————————————————————————————————————	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		——————————————————————————————————————	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		——————————————————————————————————————	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		——————————————————————————————————————	0	
CALL SIGN D			0	COMMUNITY/ AREA		——————————————————————————————————————	0	
CALL SIGN D	SE CA		DSE	COMMUNITY/ AREA CALL SIGN	DSE	——————————————————————————————————————	DSE	
COMMUNITY/ AREA	SE CA		0 DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	0.00	

CABLE OILE, IIIO. U	b/a SP <i>F</i>	SYSTEM: ARKLIGHT				:	25206	Name
				ATE FEES FOR EAC				
	VENTH S	SUBSCRIBER GROU		ii e		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicate Exclusivit
			<u> </u>					Surcharge
								for
								Partially
								Distant
								Stations
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Grou	р	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
	ļ						1	
Base Rate Fee First Grou	p	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	-NINTH S	SUBSCRIBER GROU				SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			······································					
	- II				·····			
Total DSEs			0.00	Total DSFs			0.00	
			0.00	Total DSEs	th Co		0.00	
otal DSEs	ıp	\$	0.00	Total DSEs Gross Receipts Four	th Group	\$	0.00	

	A: COMPUTATION OF SUBSCRIBER GROUND CALL SIGN			RTY-SECOND	BER GROUP SUBSCRIBER GROUP CALL SIGN	25206 UP	Q Computation of Base Rate Fer and Syndicated Exclusivity
FORTY-FIRS	T SUBSCRIBER GRO	0 0	FOR COMMUNITY/ ARE	RTY-SECOND	SUBSCRIBER GROU	0	Computation of Base Rate Fee and Syndicated Exclusivity
	CALL SIGN				CALL SIGN		Computation of Base Rate Fee and Syndicated Exclusivity
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fe and Syndicated Exclusivity
							and Syndicated Exclusivity
							Syndicated Exclusivity
							Exclusivity
							Surcharge
							for Partially
							Distant
							Stations
		<mark></mark>					
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		\$	0.00	
FORTY-THIRI	D SUBSCRIBER GRO	DUP	FOR	RTY-FOURTH	SUBSCRIBER GROU	JP	
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 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	
		0.50		- ·		5.50	
Base Rate Fee: Add the base ra							

CABLE ONE, INC.						\$	SYSTEM ID# 25206	Name
			LE BASE DA	TE FEES FOR EAC	LU CLIDOOD	URED CROUD	20200	
		SUBSCRIBER GRO		II		SUBSCRIBER GROUP	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
	<u></u>							Partially
				-				Distant Stations
	····						·······	Stations
	····		····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FORTY-	SEVENTH	SUBSCRIBER GRO	UP	FO	RTY-EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	٩		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>			-				
			·····	-				
				-				
	····		····					
			<u></u>					
	<u></u>							
				-				
								
	···			-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	•				•			
Base Rate Fee: Add th Enter here and in block			criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN						;	SYSTEM ID# 25206	Name
)F BASE RA	ATE FEES FOR EAC	H SUBSCE	RIBER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GRO	UP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fe
								and
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							·······	for
	····			-				Partially Distant
			·····					Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FI	FTY-FIRST	SUBSCRIBER GRO	DUP	FIF	TY-SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	th Group	\$	0.00	
Raco Dato Eoo Third	Group		0.00	Raco Poto Foo Foo	th Group		0.00	
Base Rate Fee Third	эгоир	\$	0.00	Base Rate Fee Four	ит Стоир	\$	0.00	
Base Rate Fee: Add to Enter here and in bloc			criber group	as shown in the boxes	above.	\$		
Hore and in bloc		pass L (page 1)				~		

	a SPAR	STEM: (LIGHT				•	25206	Nam
				ATE FEES FOR EAC				
	HIRD SUB	SCRIBER GROU		TI .		SUBSCRIBER GROU		9
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CALL SIGN DS	SE C	ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Fotal DSEs			0.00	Total DSEs			0.00	
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Gross Receipts First Group	<u>\$</u>		0.00	Gross Receipts Seco	ona Group	\$	0.00	
Base Rate Fee First Group	\$		0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FIFTY-F	IFTH SUB	SCRIBER GROU	JP		FIFTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN DS	SE C	ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Fotal DSEs			0.00	Total DSEs			0.00	
Fotal DSEs Gross Receipts Third Group	\$		0.00	Total DSEs Gross Receipts Four	th Group	\$	0.00	

· ·	SPARKLIGHT				•	25206	Name
	(A: COMPUTATION		п				
	NTH SUBSCRIBER GR				SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ AREA			DSE	Computa
CALL SIGN DS	E CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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							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	
FIFTY-NII	NTH SUBSCRIBER GR	OUP		SIXTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
CALL SIGN DS	E CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DS	E CALL SIGN	DSE			CALL SIGN		
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CALL SIGN DS	E CALL SIGN	DSE			CALL SIGN		
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	E CALL SIGN		CALL SIGN		CALL SIGN	DSE	
Fotal DSEs		0.00	Total DSEs	DSE		DSE	
CALL SIGN DS CALL SIGN Total DSEs Gross Receipts Third Group	E CALL SIGN		CALL SIGN	DSE	CALL SIGN	DSE	

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	0	SUBSCRIBER GROU	Y-SECOND	COMMUNITY/ AREA	<u>0</u>	SUBSCRIBER GROU		COMMUNITY/ AREA
Comp	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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_	0.00			Total DSEs	0.00			otal DSEs
		\$	d Group	Gross Receipts Secon	0.00	\$	roun	Proce Boosinto First C
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	0.00		d Group	Base Rate Fee Secon	UP	\$ SUBSCRIBER GROU	roup	sase Rate Fee First G
	0.00	\$	d Group	Base Rate Fee Secon		\$	roup	ase Rate Fee First G
	0.00	\$	d Group	Base Rate Fee Secon	UP	\$	roup	ase Rate Fee First G SIX OMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	UP 0	\$ SUBSCRIBER GROU	TY-THIRD	ase Rate Fee First G SIX OMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	UP 0	\$ SUBSCRIBER GROU	TY-THIRD	ase Rate Fee First G SIX OMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	UP 0	\$ SUBSCRIBER GROU	TY-THIRD	SIX:OMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	UP 0	\$ SUBSCRIBER GROU	TY-THIRD	sase Rate Fee First G
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	UP 0	\$ SUBSCRIBER GROU	TY-THIRD	SIX:OMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	UP 0	\$ SUBSCRIBER GROU	TY-THIRD	Base Rate Fee First G SIX COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	UP 0	\$ SUBSCRIBER GROU	TY-THIRD	Sase Rate Fee First G SIX COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	UP 0	\$ SUBSCRIBER GROU	TY-THIRD	Base Rate Fee First Gi SIX COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	UP 0	\$ SUBSCRIBER GROU	TY-THIRD	Base Rate Fee First Gi SIX COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	UP 0	\$ SUBSCRIBER GROU	TY-THIRD	Base Rate Fee First Gi SIX COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	UP 0	\$ SUBSCRIBER GROU	TY-THIRD	Base Rate Fee First G SIX COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	UP 0	\$ SUBSCRIBER GROU	TY-THIRD	SIX COMMUNITY/ AREA CALL SIGN
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH DSE	Base Rate Fee Secon SIXT COMMUNITY/ AREA CALL SIGN	DSE	\$ SUBSCRIBER GROU	DSE	SIX COMMUNITY/ AREA CALL SIGN Total DSEs
	0.00	SUBSCRIBER GROU	d Group Y-FOURTH DSE	Base Rate Fee Second SIXT COMMUNITY/ AREA CALL SIGN	DSE DSE D.00	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA

		ARKLIGHT					25206	Name
E	LOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
SIX	TY-FIFTH	SUBSCRIBER GRO	UP		SIXTY-SIXTH	SUBSCRIBER GRO	UP	^
COMMUNITY/ AREA			0	COMMUNITY/ ARE	٩		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
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Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SIXTY-	SEVENTH	SUBSCRIBER GRO	UP	S	XTY-EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
	roup	S			rth Group	\$	0.00	
	roup	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$		
Total DSEs Gross Receipts Third G	·	\$				\$		

CABLE ONE, INC. d/b/	/a SPAF	RKLIGHT					25206	Nan
				ATE FEES FOR EAC				
	INTH SU	UBSCRIBER GROU		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Comput
CALL SIGN DS	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$		0.00	Gross Receipts Seco	nd Group	\$	0.00	
	_							
	- 1							
Base Rate Fee First Group	\$		0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		UBSCRIBER GROU	<u> </u>			SUBSCRIBER GROU		
SEVENTY-F		JBSCRIBER GROI	<u> </u>		TY-SECOND			
SEVENTY-F		UBSCRIBER GROU	JP	SEVEN	TY-SECOND		UP .	
SEVENTY-F	FIRST SU		UP 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-F OMMUNITY/ AREA	FIRST SU		UP 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-F	FIRST SU		UP 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-F	FIRST SU		UP 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-F	FIRST SU		UP 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-F	FIRST SU		UP 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-F	FIRST SU		UP 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-F	FIRST SU		UP 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-F	FIRST SU		UP 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-F	FIRST SU		UP 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
COMMUNITY/ AREA	FIRST SU		UP 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-F	FIRST SU		UP 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-F COMMUNITY/ AREA CALL SIGN DO	FIRST SU		DSE	SEVEN COMMUNITY/ AREA CALL SIGN	TY-SECOND	SUBSCRIBER GROU	DSE	
SEVENTY-F COMMUNITY/ AREA CALL SIGN DS Total DSEs	PISSE DESCRIPTION OF THE PROPERTY OF THE PROPE	CALL SIGN	DSE DSE	SEVEN COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	DSE	
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CABLE ONE, INC. u/i		SYSTEM: ARKLIGHT				•	25206	Nam
				ATE FEES FOR EACH				
	-THIRD	SUBSCRIBER GRO		TI .		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs			0.00	Total DSEs		11	0.00	
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Gross Receipts First Group	Þ	\$	0.00	Gross Receipts Seco	na Group	\$	0.00	
ase Rate Fee First Group	р	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
				+				
SEVENTY	'-FIFTH	SUBSCRIBER GRO	UP	SEVE	NTY-SIXTH	I SUBSCRIBER GROU	JP	
	'-FIFTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		I SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	DSE	CALL SIGN		1		CALL SIGN	_	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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CALL SIGN			DSE	COMMUNITY/ AREA CALL SIGN			DSE	
CALL SIGN CALL SIGN Total DSEs	DSE	CALL SIGN	0 DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	0.00	
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		PARKLIGHT					25206	
05.75.75				ATE FEES FOR EAC			ID	
		SUBSCRIBER GRO		TI .		SUBSCRIBER GROU		9
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
noss receipts i list	Огоир	-	0.00	Gross receipts dec	ond Group	y	0.00	
ase Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVI	ENTY-NINTH	SUBSCRIBER GRO	DUP		EIGHTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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		-						
otal DSEs			0.00	Total DSEs			0.00	
	Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	
Fotal DSEs Gross Receipts Third	Group	\$			rth Group	\$		
Gross Receipts Third	·	\$	0.00	Gross Receipts Fou	·		0.00	
	·	\$			·	\$		

CABLE ONE, INC.						;	SYSTEM ID# 25206	Name
			E BASE DA	TE FEES FOR EAC	CH SURSOF	RIBER GROUP		
		SUBSCRIBER GRO		m e		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
EIGH	TY-THIRD	SUBSCRIBER GRO)UP	EIGH	TY-FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Foul	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group a	as shown in the boxes	above.	\$		

EIGH		COMPUTATION O SUBSCRIBER GRO		ATE FEES FOR EAC		IBER GROUP I SUBSCRIBER GROU	ID	
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
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ase Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
EIGHTY-S	EVENTH	SUBSCRIBER GRO	UP	EIG	HTY-EIGHTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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			0.00	Total DSEs			0.00	
otal DSEs	oup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
otal DSEs Gross Receipts Third Gr	•			II			1	
	-							
	·	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	

• ,	SPARKLIGHT				•	25206	Name
			ATE FEES FOR EAC				
	NTH SUBSCRIBER GE				SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ AREA	······		0	Computat
CALL SIGN DS	E CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ona Group	\$	0.00	
3ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
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	to r cobcortibert of	NOUP	+ '\'''	TY-SECONL	SUBSCRIBER GRO	UP	
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		ARKLIGHT					25206	
K I I A		COMPUTATION C SUBSCRIBER GRO		ATE FEES FOR EAC		IBER GROUP I SUBSCRIBER GROU	IID	
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
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ase Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NI	NETY-FIFTH	SUBSCRIBER GRO	DUP	N	INETY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
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otal DSEs			0.00	Total DSEs			0.00	
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Gross Receipts Third	·	\$	0.00	Gross Receipts Fou	·		0.00	
	·	\$			·	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.						:	SYSTEM ID# 25206	Name
			E BASE PA	TE FEES FOR EAC	H SUBSOR	RIBER GROUP		
		SUBSCRIBER GRO		TI .		SUBSCRIBER GRO	UP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	9 Computation
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
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Total DSEs			0.00	Total DSEs			0.00	
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Base Rate Fee Third G	ισαρ	<u> </u> \$	0.00	Base Rate Fee Four	ωι Θιουρ	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group a	as shown in the boxes	above.	\$		

CABLE ONE, INC.						;	SYSTEM ID# 25206	Name
			F BASE PA	TE FEES FOR EAC	H SUBSOR	IBER GROUP		
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COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDR	ED THIRD	SUBSCRIBER GRO)UP	ONE HUNDR	ED FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
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Base Rate Fee: Add the Enter here and in block			criber group a	as shown in the boxes	above.	\$		

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	a SPA	SYSTEM: ARKLIGHT				:	25206	Name
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Gross Receipts First Group	-	\$	0.00	Gross Receipts Secon	ia Group	\$	0.00	
sase Rate Fee First Group	<u>!</u>	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
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	TEM ID# 25206 Name
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LEGAL NAME OF OWNER CABLE ONE, INC. (•			S	25206	Name
BI	OCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED TWEN	ITY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED TWEN	ITY-SECONE	SUBSCRIBER GROUP		9
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
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ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWEN	NTY-FOURTH	SUBSCRIBER GROUP		
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LEGAL NAME OF OWNER OF CABLE ONE, INC. d/b	/a SPAF	≀KLIGHT					25206	Nam
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LEGAL NAME OF OWNER OF CABLE ONE, INC. d/b/							25206	Nam
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SPARKLIGHT	25206 Name
(A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER G	
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E CALL SIGN DSE CALL SIGN DSE CAL	LL SIGN DSE of
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\$ 0.00 Gross Receipts Second Group \$	0.00
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COMMUNITY/ AREA E CALL SIGN DSE CALL SIGN DSE CAL O.00 Total DSEs	LL SIGN DSE

LEGAL NAME OF OWNER OF CABLE ONE, INC. d/b/a						25206	Name
	A: COMPUTATION C		11				
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LEGAL NAME OF OWNE CABLE ONE, INC.						;	SYSTEM ID# 25206	Name
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		SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP	.	
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
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Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FORTY	-SEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRED F	ORTY-EIGHTH	SUBSCRIBER GROUP		
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Gross Receipts Third G	Group	\$	0.00	Gross Receipts Foul	th Group	\$	0.00	
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		L*	0.00				0.00	
Base Rate Fee: Add th Enter here and in block			criber group a	as shown in the boxes	above.	\$		

6 Name	25206							
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	DSE	SUBSCRIBER GROU	Y-SECOND DSE	ONE HUNDRED FIF COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE	CALL SIGN	DSE DSE	COMMUNITY/ AREA
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LEGAL NAME OF OWN CABLE ONE, INC						\$	25206	Name
				TE FEES FOR EAC				<u> </u>
	FTY-THIRD	SUBSCRIBER GRO		11		SUBSCRIBER GROU		9
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED F	FTY-FIFTH	SUBSCRIBER GRO	UP	ONE HUNDRED	FIFTY-SIXTH	SUBSCRIBER GRO	JP	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Rate Fee Third (Group		0.00		rth Group			

NC. d/b/a SPARKLIGHT	SYSTEM ID# 25206	Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP		
FIFTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER G		9
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rst Group \$ 0.00 Gross Receipts Second Group \$	0.00	
st Group \$ 0.00 Base Rate Fee Second Group \$	0.00	
OFIFTY-NINTH SUBSCRIBER GROUP ONE HUNDRED SIXTIETH SUBSCRIBER	GROUP	
EA COMMUNITY/ AREA	0	
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	0.00	

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 20 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. d/b/a SPARKLIGHT 25206 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 must also 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 INSTRUCTIONS: **Base Rate Fee** 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 THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. d/b/a SPARKLIGHT 25206 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 must also 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 INSTRUCTIONS: **Base Rate Fee** 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 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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. d/b/a SPARKLIGHT 25206 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 must also 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 INSTRUCTIONS: **Base Rate Fee** 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 **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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 20 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. d/b/a SPARKLIGHT 25206 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 must also 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 of INSTRUCTIONS: **Base Rate Fee** 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. ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP ONE HUNDRED FIFTIETH 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 ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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