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					
00/04/0004	\$					
02/24/2021	ALLOCATION NUMBER					
02/2 1/202						

Return completed workbook by email to:

coplicsoa@copyright.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:								
Accounting Period	2020/2								
B Owner	rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire accounts.	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.							
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM								
	Armstrong Utilities, Inc.								
				63167	720202				
				63167	2020/2				
	One Armstrong Place Butler, PA 16001								
С	INSTRUCTIONS: In line 1, give any business or trade names used to ic								
C	names already appear in space B. In line 2, give the mailing address of	the system, if diffe	erent from the address giver	n in space B	١.				
System	1 Rising Sun Head End								
	MAILING ADDRESS OF CABLE SYSTEM:								
	2 122 South Queen Street (Number, street, rural route, apartment, or suite number)								
	Rising Sun, MD 21911								
	(City, town, state, zip code)								
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and reli	st on page 1	1b				
Area Served	with all communities. CITY OR TOWN	STATE							
First	Abingdon	MD							
Community	Below is a sample for reporting communities if you report multiple cha		nace G						
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB	GRP#				
Sample	Alda	MD	Α		1				
Campie	Alliance	MD	В	2	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: 63167 Armstrong Utilities, Inc. Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future 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. CH LINE UP SUB GRP# CITY OR TOWN STATE **Abingdon** MD AD 4 **First Bel Air North** MD AD 4 Community Cardiff MD AD 4 Castleton MD AD 4 **CECIL COUNTY** MD **AB** 2 CHANCEFORD TOWNSHIP AC 3 PA See instructions for 3 **CROSS ROADS BOROUGH** PA AC additional information on alphabetization. Darlington MD AD 4 3 **DELTA BOROUGH** PA AC **Dublin** MD **AD** 4 3 **EAST HOPEWELL TOWNSHIP** PA AC Add rows as necessary. 1 **EAST NOTTINGHAM TOWNSHIP** PA AA 1 **ELK TOWNSHIP** PA AA **FAWN GROVE BOROUGH** PA AC 3 **FAWN TOWNSHIP** PA AC 3 **Forest Hills** MD **AD** 4 HIGHLAND TOWNSHIP PA AA 1 **HOPEWELL TOWNSHIP** PA AC 3 4 **Jarrettsville** MD AD LONDONDERRY TOWNSHIP PA AA 1 LOWER CHANCEFORD TOWNSHIP PA AC 3 1 LOWER OXFORD TOWNSHIP PA AA **Norrisville** MD **AD** 4 **NORTH HOPEWELL TOWNSHIP** 3 PA AC **OXFORD BOROUGH** PA AA 1 PEACH BOTTOM BOROUGH PA AC 3 **Pvlesville** MD AD 4 3 SHREWSBURY BOROUGH PA AC 3 STEWARTSTOWN BOROUGH PA AC **STREET** MD AD 4 2 TOWN OF RISING SUN MD **AB UPPER OXFORD TOWNSHIP** PA AA 1 WEST FALLOWFIELD TOWNSHIP 1 PA AA 1 **WEST NOTTINGHAM TOWNSHIP** PA AA Whiteford MD AD 4 3 WINTERSTOWN BOROUGH PA AC

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		NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE SUBSCRIBERS RATE		
Residential:					
Service to first set	15,492	\$ 35.45			
Service to additional set(s)					
• FM radio (if separate rate)					
Motel, hotel					
Commercial					
Converter					
Residential					
Non-residential					

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63167 Armstrong Utilities, Inc. PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 3. TYPE 2. B'CAST 4. DISTANT? 5. BASIS OF 1. CALL 6. LOCATION OF STATION SIGN **CHANNEL** OF (Yes or No) **CARRIAGE** NUMBER **STATION** (If Distant) **KJW** 2 ı No Philadelphia, PA **KJW-HD** 2.1 ı Philadelphia, PA No See instructions for KYW 3 N No Philadelphia, PA additional information on alphabetization. KYW-HD 3.1 N No Philadelphia, PA KYW-DT2 3.2 N No Philadelphia, PA **WCAU** 34 I-M No Lancaster, PA WCAU-DT2 10.2 N No Lancaster, PA WCAU-HD 10.1 I-M No Lancaster, PA WCAU-DT3 10.3 Ν No Lancaster, PA WHYY 12 Ν No Wilmington, DE WHYY-DT2 Ε Wilmington, DE 12.2 No WHYY-DT3 12.3 E-M No Wilmington, DE WHYY-HD 12.1 E-M Wilmington, DE No **WMPB** 29 Ν No Baltmore, MD **WPHL** 17 I-M No Philadelphia, PA WPHL-DT2 Philadelphia, PA 17.2 I No WPHL-DT3 17.3 ı Philadelphia, PA No WPHL-DT4 17.4 I-M Philadelphia, PA No

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

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	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
WPHL-HD	17.1	I-M	No		Philadelphia, PA
WPPX	31	I-M	No		Philadelphia, PA
WPPX-HD	31.1	ı	No		Philadelphia, PA
WPSG	57	ı	No		Philadelphia, PA
WPSG-HD	57.1	I	No		Philadelphia, PA
WPVI	6	I	No		Philadelphia, PA
WPVI-DT2	6.2	I	No		Philadelphia, PA
WPVI-DT3	6.3	N	No		Philadelphia, PA
WPVI-HD	6.1	I-M	No		Philadelphia, PA
WTXF	29	I-M	No		Baltimore, MD
WTXF-DT2	29.2	N	No		Baltimore, MD
WTXF-HD	29.1	I	No		Baltimore, MD

G

Primary Transmitters: Television

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

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

G

Primary Transmitters: Television

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.

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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
WMPB-DT3	29.3	E	No		Baltmore, MD
WMPB-HD	29.1	E-M	No		Baltmore, MD
WNUV	40	E-M	No		Baltimore, MD
WNUV-DT2	40.2	E	No		Baltimore, MD
WNUV-DT3	40.3	ı	No		Baltimore, MD
WNUV-HD	40.1	I-M	No		Baltimore, MD
WPVI	6	ı	No		Philadelphia, PA
WPVI-HD	6.1	I-M	No		Philadelphia, PA
WTXF	29	I-M	No		Baltimore, MD
WTXF-HD	29.1	I	No		Baltimore, MD
WUTB	41	I-M	No		Baltimore, MD
WUTB-HD	41.1	ı	No		Baltimore, MD
		1			

G

Primary Transmitters: Television

PRIMARY TRANSMITTERS: TELEVISION

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

G

Primary Transmitters: Television

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

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP AC								
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	1	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
WPMT-HD	43.1	I	No		York, PA			
WLYH	49.1	I	No		Red Lion, PA			

G

Primary Transmitters: Television

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AD	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBAL	11	N	No		Baltimore, MD
WBAL-DT2	11.2	I-M	No		Baltimore, MD
WBAL-HD	11.1	N	No		Baltimore, MD
WBFF	45	I-M	No		Baltimore, MD
WBFF-HD	45.1	I-M	No		Baltimore, MD
WBFF-DT3	45.3	N	No		Baltimore, MD
WJZ	13	N	No		Lancaster, PA
WJZ-HD	13.1	N	No		Lancaster, PA
WMAR	2	N	No		Baltimore, MD
WMAR-HD	2.1	I-M	No		Baltimore, MD
WMPB	29	N	No		Baltmore, MD
WMPB-DT2	29.2	N	No		Baltmore, MD
WMPB-DT3	29.3	Е	No		Baltmore, MD
WMPB-HD	29.1	E-M	No		Baltmore, MD
WNUV	40	E-M	No		Baltimore, MD
WNUV-DT2	40.2	E	No		Baltimore, MD
WNUV-DT3	40.3	I	No		Baltimore, MD
WNUV-HD	40.1	I-M	No		Baltimore, MD

G

Primary Transmitters: Television

0.1 0.102.1.7.102.0.		
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Armstrong Utilities, Inc.	63167	Name
DDIMARY TRANSMITTERS. TELEVISION		

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AD	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WUTB	41	I-M	No		Baltimore, MD
WUTB-HD	41.1	I	No		Baltimore, MD
	<u></u>				

G

Primary Transmitters: Television

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

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

I ONW SASE, I AGE 5.						ACCOUNTING	T LINIOD. 2020/2	
LEGAL NAME OF OWNER OF Armstrong Utilities, In		EM:			S	63167	Name	
SUBSTITUTE CARRIAGI	E: SPECIA	AL STATEMEN	NT AND PROGRAM LOG	ì				
In General: In space I, ident substitute basis during the a explanation of the programm	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regu	lations, or authorizations.	For a further	Substitute	
1. SPECIAL STATEMENT							Carriage:	
During the accounting per	_			s, any nonne	twork television program	1	Special Statement and	
broadcast by a distant stat	broadcast by a distant station? Yes XNo Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program							
log in block 2.								
2. LOG OF SUBSTITUTE								
In General: List each substiclear. If you need more spa				wherever pos	ssible, if their meaning is			
			ision program (substitute p	rogram) that	, during the accounting			
period, was broadcast by a						ion		
under certain FCC rules, re SA3 form for futher informa								
titles, for example, "I Love I	_ucy" or "NE	BA Basketball:	76ers vs. Bulls."		p. og. a			
' •		,	r "Yes." Otherwise enter "N					
			asting the substitute progra ne community to which the		ensed by the FCC or, in			
the case of Mexican or Car	nadian statio	ons, if any, the	community with which the	station is ide	ntified).			
first. Example: for May 7 given		when your syst	tem carried the substitute p	orogram. Use	numerals, with the mon	th		
, , ,		substitute pro	gram was carried by your o	able system	. List the times accurately	y		
to the nearest five minutes.	Example: a	a program carri	ed by a system from 6:01:	15 p.m. to 6:2	28:30 p.m. should be			
stated as "6:00–6:30 p.m."	er "R" if the	listed program	was substituted for progra	mming that v	our system was required	ł		
to delete under FCC rules a						•		
gram was substituted for pr	-	that your syste	em was permitted to delete	under FCC	rules and regulations in			
effect on October 19, 1976	=							
					EN SUBSTITUTE	7. REASON		
		E PROGRAM	<u> </u>		IAGE OCCURRED 6. TIMES	FOR		
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	FROM — TO	DELETION		
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ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 6.

	1										
Name	Armstrong U		SYSTEM:						SYSTEM ID# 63167		
	_	RT-TIME CARRIAGE LOG									
J Part-Time Carriage Log	In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in										
			DATI	ES AND HOURS	OF F	PART-TIME CAR	RIAGE				
		WHEN	N CARRIAGE OCC	CURRED			WHE	N CARRIAGE OC	CURRED		
	CALL SIGN		НОІ	URS	1	CALL SIGN		НС	DURS		
		DATE	FROM	ТО			DATE	FROM	TO		
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LEGA	AL NAME OF OWNER OF CABLE SYSTEM: mstrong Utilities, Inc.	SYSTEM ID# 63167	Name
Inst all a (as i	OSS RECEIPTS tructions: The figure you give in this space determines the form you fle and the amount you pay amounts (gross receipts) paid to your cable system by subscribers for the system's secondary tr identified in space E) during the accounting period. For a further explanation of how to compute te (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)	ansmission service this amount, see	K Gross Receipts
IMP	during the accounting period. PORTANT: You must complete a statement in space P concerning gross receipts.	\$ 3,364,902.09 (Amount of gross receipts)	
Instru Com Com If you fee to accom If pa	ARIGHT ROYALTY FEE actions: Use the blocks in this space L to determine the royalty fee you owe: mplete block 1, showing your minimum fee. mplete block 2, showing whether your system carried any distant television stations. Dur system did not carry any distant television stations, leave block 3 blank. Enter the amount of from block 1 on line 1 of block 4, and calculate the total royalty fee. Dur system did carry any distant television stations, you must complete the applicable parts of the ompanying this form and attach the schedule to your statement of account. The schedule was completed, the base rate fee should be entered a below.	e DSE Schedule d on line 1 of	L Copyright Royalty Fee
3 be	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered elow.		
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be en block 4 below.	ntered on line	
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are recleast the minimum fee, regardless of whether they carried any distant stations. This fee is 1.06 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	\$ 3,364,902.09	
	Enter the result here. This is your minimum fee.	35,802.56	
2	space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column 4, you "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period? Yes—Complete the DSE schedule. X No—Leave block 3 below blank and complete the DSE schedule.		
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$ -	
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00	
	Line 3. Add lines 1 and 2 and enter here	-	
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$ 35,802.56	Cable systems
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter	0.00	submitting additional
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	deposits under Section 111(d)(7) should contact the Licensing
	Line 4. FILING FEE	\$ 725.00	additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	36,527.56	appropriate form for submitting the additional fees.
	EFT Trace # or TRANSACTION ID #		
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See pageneral instructions located in the paper SA3 form and the Excel instructions tab for many contents.)	- ','	

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM									
Name	Armstrong Utilities, Inc.									
	CHANNELS									
M	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations									
Channels	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable									
Citatilleis	1. Enter the total number of channels on which the cable									
	system carried television broadcast stations									
	Enter the total number of activated channels									
	on which the cable system carried television broadcast stations 385									
	and nonbroadcast services									
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual									
Individual to	we can contact about this statement of account.)									
Be Contacted										
for Further	Name Ken Proudfoot Telephone (724) 283-0925									
Information	Name Refi Floudioot [724] 263-0925									
	Address One Assessment Place									
	Address One Armstrong Place (Number, street, rural route, apartment, or suite number)									
	Butler, PA 16001									
	(City, town, state, zip)									
	Email kproudfoot@agoc.com Fax (optional)									
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)									
0										
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)									
	(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or									
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or									
	In the 1 of opace 2 and that the owner to not a corporation of partitioning, or									
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.									
	III III O O Opaco E.									
	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/ Diane Potochny									
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2"									
	button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.									
	Typed or printed name: Diane Potochny									
	ryped of printed fiame. Dialie Fotociniy									
	Title: Chief Financial Officer									
	(Title of official position held in corporation or partnership)									
	Date: February 26, 2021									

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nama
Armstrong Utilities, Inc.	63167	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 lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable systemedice of providing secondary transmissions of primary broadcast transmitters, the systemedicers and amounts collected from subscribers receiving secondary transmissions pursuant. For more information on when to exclude these amounts, see the note on page (vii) of the general in paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for second made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below	em for the basic nall not include sub- to section 119."	Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA		Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	-	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	x 0.00274 - (interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further	r assistance please	
contact the Licensing Division at (202) 707-8150 or licensing@copyright.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 Copy please list below the owner, address, first community served, accounting period, and ID number as gilling.	•	
Owner		
Address		
First community served		
Accounting period		
ID number		

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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	0.25
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 permitted station but does not fall into one of the above categories, please attach written documentation to the statement of account detailing the basis for its classification.

Substitution of Grandfathered Stations. Under section 76.65 of the former FCC rules, a cable system was not required to delete any 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.

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

- Calculate a separate base rate fee for each subscriber group, using
 the rates given above; (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.

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.

	1 ,	TC Mi
Santa Rosa	Stations A and C 35 mile zone	
	l'、 /	Fir
	`~-/	(Sa
	Fairvale	Gr
Rapid City		DS
		Ва
	Bodega	\$3
 	Bay	\$3
/		Ва
Station	ns B. D.	_
an		To
35 mil	e zone	In
` ~		1

	Distant Stations Carried		Identification of	of Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
J	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
	B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
	C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
	D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
	E (network)	0.25	Fairvale	Stations B, D, and E	120,000.00
	TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00

linimum Fee Total Gross Receipts	\$600,000.00
	x .01064
	\$6.384.00

		\$0,304.00			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

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

ACCOUNTING PERIOD: 2020/2

DSE SCHEDULE. PAGE 11. (CONTINUED)

1	LEGAL NAME OF OWNER OF CABLE SYSTEM: Armstrong Utilities, Inc. 6310							
	SUM OF DSEs OF CATEGOR • Add the DSEs of each station Enter the sum here and in line	Y "O" STATION			0.00			
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3).							
Computation of DSEs for	mercial educational station, give the DSE as ".25."							
Category "O"			CATEGORY "O" STATION	NS: DSEs				
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Add rows as								
necessary.								
Remember to copy all								
formula into new								
rows.				·				
				·				
				·				
				·				
				·				
				<u> </u>				
		ļ		<u> </u>				

Name	Armstrong U	OWNER OF CABLE SYSTEM: Itilities, Inc.						S	YSTEM ID# 63167
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	Column 2 figure should of Column 3 Column 4 be carried out Column 5 give the type-1 Column 6	st the call sign of all distate: For each station, give to correspond with the information: For each station, give to bright the figure in columnts at least to the third decires and the station of the figure as ".25." Multiply the figure in columniation of the station's control of the station's	he number of mation given is the total number upon 2 by the final point. This station, give the DSE. (For motor CATEGOR	hours your cable systen in space J. Calculate on er of hours that the stati gure in column 3, and g is the "basis of carriage e "type-value" as "1.0."	n carried the stati ly one DSE for each on broadcast over jive the result in control e value" for the standard For each network give the result in ding, see page (v	ion during the a ach station. In the air during decimals in colutation. It or noncomme column 6. Rou riii) of the gener	the account imn 4. This f ercial educati nd to no less al instruction	ing period. igure must ional station, s than the	E
	SIGN	CARRIE	ED BY	STATION	VALUE) <u> </u>	VALUE		
		SYSTE	M ÷	ON AIR	=	x		=	
			÷		=	x		=	
			÷		=	x		=	
			÷		=	x x		=	
			÷		=	x		=	
			÷		=	x		=	
			÷		=	х		=	
	Add the DSEs	of CATEGORY LAC Soft each station. In here and in line 2 of po		hedule,			0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efference to Broadcast of space I). Column 2: at your option. Column 3: Column 4: I	This figure should correst Enter the number of dayst Divide the figure in colum This is the station's DSE	itution for a price shown by to ork programs of the number of live spond with the sin the calend an 2 by the figure (For more informatical shows a property of the significant of the si	ogram that your system he letter "P" in column 7 luring that optional carries, nonnetwork programs information in space I. ar year: 365, except in a gre in column 3, and givermation on rounding, se	was permitted to or space I); and age (as shown by the secarried in substitute I); a leap year. The result in column in the page (viii) of the page (viii) of the secare III); and the page (viii) of the page (viii) of the page I); and the page IIII in the page IIII in the page IIII in the page III in the page II in the p	o delete under F the word "Yes" ir itution for progr lumn 4. Round ne general instr	FCC rules ar n column 2 of ams that we to no less th uctions in the	re deleted an the third	ı.
				E-BASIS STATION					
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMB OF DA IN YEA	YS	1. CALL SIGN	OF		3. NUMBER OF DAYS IN YEAR	4. DSE
			÷				÷		
			÷				JUMBER 3. NUMBER 4. DSE OF DAYS ROGRAMS IN YEAR		
			÷	=			÷		=
			÷ ÷	=					
	Add the DSEs	OF SUBSTITUTE-BASI	IS STATIONS:	:			0.00		
5		ER OF DSEs: Give the am		boxes in parts 2, 3, and	4 of this schedule	and add them t	o provide the	total	
Total Number	1. Number	of DSEs from part 2 ●				>		0.00	
of DSEs	2. Number	of DSEs from part 3 ●				<u> </u>		0.00	
	3. Number	of DSEs from part 4 ●				>		0.00	
							Г		
	TOTAL NUMBE	R OF DSEs							0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2020/2

LEGAL NAME OF O Armstrong Uti	WNER OF CABLE S	YSTEM:					S	YSTEM ID# 63167	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	ule blank and	complete par	t 8, (page 16) of the	_	6
			BLOCK A:	TELEVISION MA	ARKETS				Computation of 3.75 Fee
effect on June 24, Yes—Com		schedule—D0					CC rules and regula	tions in	G.1. G.1. GG
		BLO	CK B: CARR	NAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN	FCC rules and re	of distant sta gulations pric e DSE Scheo	tions 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 syste ermitted stati	em was permitted to ons, see the stream as set forth	•	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rul A Stations carrie 76.61(b)(c)] B Specialty statio C Noncommerica D Grandfathered instructions for E Carried pursua *F A station prev	les and regul ed pursuant to on as defined al educationa station (76.6 r DSE schedu ant to individu viously carried HF station wi	ations cited belothe FCC markin 76.5(kk) (76 I station [76.59 5) (see paragrale). al waiver of FC d on a part-time thin grade-B co	59(d)(1), 76.61(e) (c), 76.61(d), 76.63 aph regarding subs CC rules (76.7) e or substitute basi ontour, [76.59(d)(5)	e in effect on a 57, 76.59(b), (1), 76.63(a) (3) (a) referring the stitution of grads sprior to June	June 24, 1987 76.61(b)(c), 7 referring to 76 to 76.61(d)] andfathered st	76.63(a) referring to		
Column 3:	*(Note: For those this schedule to d	stations ider letermine the	ntified by the le	Г	, you must co	mplete the wo	orksheet on page 14	T	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
								0.00	
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE				
ine 1: Enter the	total number of [OSEs from p	art 5 of this s	chedule					
ine 2: Enter the	sum of permitted	d DSEs from	block B abov	/e				-	
	line 2 from line 1. eave lines 4–7 bla			•		ate.		0.00	
ine 4: Enter gro	ess receipts from	space K (pa	ge 7)				x 0.03	375	Do any of the DSEs represen partially
ine 5: Multiply li	ne 4 by 0.0375 a	nd enter sur	n here				x		permited/ partially nonpermitted
ine 6: Enter tota	al number of DSE	s from line (3					-	carriage? If yes, see part 9 instructions.
ine 7: Multiply li	ne 6 by line 5 and	d enter here	and on line 2	, block 3, space L	_ (page 7)			0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Armstrong Utilities, Inc. SYSTEM ID# 63167								Name	
		BLOC	A: TELEVI	SION MARKETS	(CONTIN	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 o
									3.75 Fee
						•			

ACCOUNTING PERIOD: 2020/2

Nama		ER OF CABLE SYSTEM	:			SYSTEM ID#					
Name	Armstrong Utili	ties, Inc.				63167					
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter """ in column 2 of part 6 of the DSE schedule. Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)										
		1	FOR STATIONS CARRIE								
	1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN DSE PERIOD CARRIAGE DSE DSE										
	GIGIT	DOL	1 LINOB	O/ II (I (I/(OE	BOL	BOL					
7 Computation of the		"Yes," complete blocks	nd C blank and complete p								
Syndicated			BLOCK A: MAJOR	TELEVISION MARK	ET						
Exclusivity Surcharge	• Is any portion of the c	able system within a to	o 100 major television mark	et as defned by section 76	.5 of FCC rules in effect Ju	ine 24. 1981?					
our on ur go	l — · ·	blocks B and C .	o roo major toronoron mani	No—Proceed to		2 1, 100 1 1					
				7	F						
	BLOCK B: C	arriage of VHF/Grade	B Contour Stations	BLOCK C: Computation of Exempt DSEs							
	commercial VHF static or in part, over the cab	block B of part 6 the p on that places a grade ble system? ation below with its appro nd proceed to part 8.	B contour, in whole	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 to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE No—Enter zero and proceed to part 8.							
		<u> </u>			T 11						
	CALL SIGN	DSE CAI	LL SIGN DSE	CALL SIGN	DSE CALL SI	GN DSE					
		тот	AL DSEs 0.00		TOTAL D	SEs 0.00					
						 -					

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Armstrong Utilities, Inc.	SYSTEM ID# 63167	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	3,364,902.09	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? X Yes—Complete section 3 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? 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)		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	Yes—Complete part 9 of this schedule. X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the 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	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#								
	,	Armstrong Utilities, Inc.	63167								
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.									
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)									
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ _\$									
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here									
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ \$									
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.									
		F. Multiply line D by line E and enter here									
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)									
		Syndicated Exclusivity Surcharge	<u></u>								
	Instru	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 p checked "Yes," use the total number of DSEs from part 5.	art								
		ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.									
Computation of	1	ır answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ır answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B bel	OW								
Base Rate Fee	1	• If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below blank.									
	What is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers										
	were located within that station's local service area and others were located outside that area. For the definition of a station's "local service area," see page (v) of the general instructions.										
	, p-g- (-, g										
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS										
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?										
	Yes—Complete part 9 of this schedule. X No—Complete the following sections.										
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE									
	Section 1	Enter the amount of gross receipts from space K (page 7)	2.09								
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.									
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.) ▶	0.00								
	Section										
	3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.									
		A. Enter 0.01064 of gross receipts									
		(the amount in section 1)	<u>-</u>								
		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	<u>-</u>								
		E. Add lines A, and D. This is your base rate fee. Enter here									
		and in block 3, line 1, space L (page 7)	_								
		Base Rate Fee	<u></u> l								

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2020/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: Armstrong Utilities, Inc.	SYSTEM ID# 63167	Name
Section If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank	ζ.	
A. Enter 0.01064 of gross receipts (the amount in section 1)		8
B. Enter 0.00701 of gross receipts (the amount in section 1) * \$	_	Computation of Base Rate Fee
C. Multiply line B by 3.000 and enter here >		Dase Nate i ee
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	
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage	of television broadcast signals shall	
instead be reported on a community-by-community basis (subscriber groups) if the cable system repospace G.	orted multiple channel line-ups in	9
In General: If any of the stations you carried were partially distant, the statute allows you, in computing receipts from subscribers located within the station's local service area, from your system's total gross	•	Computation of
exclusion, you must:		Base Rate Fee
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscrib station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee	e system. Determine the number of rate base rate fee for each group.	Syndicated Exclusivity Surcharge
NOTE: If any portion of your cable system is located within the top 100 television market and the stat also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete bif your cable system is wholly located outside all major television markets, complete block A only.	tion is not exempt in part 7, you must	for Partially Distant 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 carried to that community.	h partially distant station you	Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of you outside the station's local service area. A subscriber located outside the local service area of a statio the same token, the station is distant to the subscriber.)		
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to wis subscriber group must consist entirely of subscribers who are distant to exactly the same complement system will have only one subscriber group when the distant stations it carried have local service are	nt of stations. Note that a cable	
Computing the base rate fee for each subscriber group: Block A contains separate sections, one groups.	for each of your system's subscriber	
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 static subscribers in the group. 	on that is distant to all of the	
• If:		
1) your system is located wholly outside all major and smaller television markets, give each station's 4 of this schedule; or,	DSE as you 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 DS part 6 of this schedule.	SE as you gave 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 in the paper SA3 form.	e (vii) of the general instructions	
Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of page. In making this computation, use the DSE and gross receipts figure applicable to the particular DSEs for that group's complement of stations and total gross receipts from the subscribers in that groactual calculations on the form.	subscriber group (that is, the total	

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

LEGAL NAME OF OWNER Armstrong Utilities		SYSTEM:				S	STEM ID# 63167	Name
		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EACH		BER GROUP SUBSCRIBER GROUF	0	
COMMUNITY/ AREA Lower Oxford, PA			COMMUNITY/ AREA	Rising Sun, MD			9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	s 830	,151.22	Gross Receipts Secon	d Group	s 1,10	09,435.39	
	·	· ·	,		·	,		
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Secon		\$UBSCRIBER GROUP	0.00	
COMMUNITY/AREA		SUBSCRIBER GROU	Р	COMMUNITY/ADEA				
COMMUNITY/ AREA	rawii G	irove, PA		COMMUNITY/ AREA	Harford,	WD		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							-	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$ 745	,261.59	Gross Receipts Fourth	Group	\$ 68	30,053.88	
							$\neg \neg $	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Page Bate Feet Add !!	o hees	food for each	hor gra	a about in the barren				
Enter here and in block			beigioupa	s shown in the boxes abo	ove.	\$	0.00	

LEGAL NAME OF OWNE Armstrong Utilities		E SYSTEM:				5	63167	Name
I	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GRO	UP		SECONE	SUBSCRIBER GROU	JP	^
COMMUNITY/ AREA	Lower	Oxford, PA		COMMUNITY/ AREA	Rising Sun, MD			9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
			<mark></mark>					and
								Syndicated
			<mark></mark>					Exclusivity
			<mark></mark>					Surcharge for
	···		···		···			Partially
	···		···		···			Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 830	0,151.22	Gross Receipts Secon	d Group	\$ 1,	109,435.39	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	Fawn G	Grove, PA		COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<mark></mark>					
			<mark></mark>					
	<u></u>		···		<u></u>			
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third G	iroup	\$ 745	5,261.59	Gross Receipts Fourth	Group	\$	680,053.88	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group a	II as shown in the boxes ab	oove.	\$	0.00	

FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Armstrong Utilities, Inc. 63167 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 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 Second 50 major television market First 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. Exclusivity 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 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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown