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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

| FOR COPYRIGHT OFFICE USE ONLY | | | | | | |
|-------------------------------|----------------------|--|--|--|--|--|
| DATE RECEIVED AMOUNT | | | | | | |
| 2-23-23 | \$ ALLOCATION NUMBER | | | | | |

Return completed workbook by email to:

coplicsoa@loc.gov

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

| Α | AC | COUNTING PERIOD COVERED BY THIS STATEMENT: | | | | |
|----------------------|------|--|--|-------------------------------------|--------------|--------|
| Accounting Period | | 2022/2 | | | | |
| B Owner | rate | Give the full legal name of the owner of the cable system. If the owner is a title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines of the the were different owners during the accounting period, only the owner ingle statement of account and royalty fee payment covering the entire accounting the covering the entire accounting the covering the interest of the covering the system's first filing. If not, enter the system's ID | ss of the cable syste on the last day of th unting period. | m. e accounting period should su | • | 023031 |
| | | CABLE ONE, INC. | | | | |
| | | | | | 02303 | 120222 |
| | | | | | 023031 | 2022/2 |
| | | 210 E. EARLL DRIVE PHOENIX, AZ 85012-2626 | | | | |
| С | | TRUCTIONS: In line 1, give any business or trade names used to it | , | | | |
| System | nar | nes already appear in space B. In line 2, give the mailing address of IDENTIFICATION OF CABLE SYSTEM: SPARKLIGHT | rtne system, ir diff | erent from the address give | en in space | В. |
| | 2 | MAILING ADDRESS OF CABLE SYSTEM: 303 N. 4TH ST. (Number, street, rural route, apartment, or suite number) PONCA CITY, OK 74601 (City, town, state, zip code) | | | | |
| D | Ins | tructions: For complete space D instructions, see page 1b. Identify | only the frst comn | nunity served below and rel | list on page | 1b |
| Area | wit | n all communities. | • | | | |
| Served | | CITY OR TOWN | STATE | | | |
| First Community | | PONCA CITY | OK | | | |
| | E | elow is a sample for reporting communities if you report multiple character OR TOWN (SAMPLE) | annel line-ups in S STATE | pace G. CH LINE UP | SIIB | GRP# |
| | Ald | | MD | A | | 1 |
| Sample | - | ance | MD | В | | 2 |
| | Gei | | 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 sufficiency of the fling, a determination that would be made by a court of law.

| LEGAL NAME OF OWNER OF CABLE SYSTEM: | | | SYSTEM ID# | | | | | | | |
|--|-------|------------|------------|------------------------|--|--|--|--|--|--|
| CABLE ONE, INC. | | | 023031 | | | | | | | |
| Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. | | | | | | | | | | |
| Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. | | | | | | | | | | |
| If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). | | | | | | | | | | |
| When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. | | | | | | | | | | |
| CITY OR TOWN | STATE | CH LINE UP | SUB GRP# | | | | | | | |
| PONCA CITY | OK | AA | 1 | First | | | | | | |
| KAY COUNTY | OK | AA | 1 | Community | | | | | | |
| OSAGE | OK | AB | 2 | | | | | | | |
| TONKAWA | OK | AA | 1 | | | | | | | |
| | | | | | | | | | | |
| | | | | See instructions for | | | | | | |
| | | | | additional information | | | | | | |
| | | | | on alphabetization. | | | | | | |
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| | | | | Add rows as necessary. | | | | | | |
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Name LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#
CABLE ONE, INC. 023031

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 | 1,241 | \$ | 42.00 | ECONOMY IPTV | | 12 | \$ | 54.00 |
| Service to additional set(s) | | | | | | | | |
| FM radio (if separate rate) | | | | | | | | |
| Motel, hotel | | | | | T | | | |
| Commercial | 70 | \$ | 40.00 | | | | | |
| Converter | | | | | Ī | | | |
| Residential | 898 | \$ | 7.00 | | - | | | |
| Non-residential | | ļ | | | | | | |
| | ···· | · | | | ***** | | | |

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 | | CATEGORY OF SERVICE | F | RATE | | |
| Continuing Services: | | Installation: Non-residential | | | | | | |
| Pay cable | 10.99-19.00 | Motel, hotel | | | | STANDARD CABLE | \$ | 57.75 |
| Pay cable—add'l channel | | Commercial | Commercial | | | STANDARD IPTV | \$ | 57.75 |
| Fire protection | | • Pay cable | | | | DIGITAL VALUE PACK | \$ | 16.00 |
| Burglar protection | | Pay cable-add'l channel | | | Ī | HISPANIC TIER | \$ | 6.00 |
| Installation: Residential | | Fire protection | | | | | ••••• | |
| First set | 0-90.00 | Burglar protection | ļ | | | | | |
| Additional set(s) | | Other services: | | | Ī | | | |
| • FM radio (if separate rate) | | Reconnect | | 0-90.00 | | | | |
| Converter | | Disconnect | | | Ī | | | |
| | | Outlet relocation | | 90.00 | İ | | | |
| | | Move to new address | \$ | 90.00 | İ | | | |
| | | | | | İ | | | •••••• |

FORM SA3E, PAGE 3 SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name CABLE ONE, INC. 023031 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections

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

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

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

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

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

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

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

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

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

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

CHANNEL LINE-UP AA 1 CALL 2 B'CAST 3 TYPF 4 DISTANT? 5 BASIS OF 6 LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER **STATION** (If Distant) K38AK 38 Ε No **PONCA CITY, OK KAUT** 19 No OKLAHOMA CITY, OK **KFOR** 27 Ν No OKLAHOMA CITY, OK 7.2 KOCO-2 I-M No OKLAHOMA CITY, OK **KOCB** 33 ı No OKLAHOMA CITY, OK KOCB-2 33.2 I-M No OKLAHOMA CITY, OK KOCB-3 33.3 I-M No OKLAHOMA CITY, OK косо Ν 7 No OKLAHOMA CITY, OK KOKH 24 No OKLAHOMA CITY, OK KOKH-2 24.2 I-M No OKLAHOMA CITY. OK **KOPX** 18 ı OKLAHOMA CITY, OK No **KSBI** 23 ı No OKLAHOMA CITY, OK **KTBO** 15 ı No OKLAHOMA CITY, OK KTUZ SHAWNEE, OK 29 No KFOR-2 I-M OKLAHOMA CITY, OK 27 No **KWTV** N 25 No OKLAHOMA CITY, OK KFOR-3 27.3 I-M No OKLAHOMA CITY, OK

Primary Transmitters: Television

See instructions for additional information on alphabetization.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#
Name

PRIMARY TRANSMITTERS: TELEVISION

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

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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.

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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 | AA -CONT'D | |
|-----------------|--------------------------------|--------------------------|----------------------------|---|------------------------|
| 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 |
| KFOR-4 | 27.4 | I-M | No | | OKLAHOMA CITY, OK |
| KOKH-3 | 24.3 | I-M | No | | OKLAHOMA CITY, OK |
| KAUT-2 | 19.2 | I-M | No | | OKLAHOMA CITY, OK |
| K38AK-SIMUL | 38 | E | No | | PONCA CITY, OK |
| KAUT-SIMUL | 19 | ı | No | | OKLAHOMA CITY, OK |
| KFOR-SIMUL | 27 | N | No | | OKLAHOMA CITY, OK |
| KOCB-SIMUL | 33 | I | No | | OKLAHOMA CITY, OK |
| KOCO-SIMUL | 7 | N | No | | OKLAHOMA CITY, OK |
| KOKH-SIMUL | 24 | I | No | | OKLAHOMA CITY, OK |
| KOPX-SIMUL | 18 | I | No | | OKLAHOMA CITY, OK |
| KTBO-SIMUL | 15 | I | No | | OKLAHOMA CITY, OK |
| KWTV-SIMUL | 25 | N | No | | OKLAHOMA CITY, OK |
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G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#
Name
023031

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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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 |
| KFOR-2 | 27.2 | I-M | Yes | 0 | OKLAHOMA CITY, OK |
| КОСВ | 33 | I | Yes | 0 | OKLAHOMA CITY, OK |
| косо | 7 | N | Yes | 0 | OKLAHOMA CITY, OK |
| KOKH | 24 | I | Yes | 0 | OKLAHOMA CITY, OK |
| KOKH-2 | 24.2 | I-M | Yes | 0 | OKLAHOMA CITY, OK |
| KOPX | 18 | ı | Yes | 0 | OKLAHOMA CITY, OK |
| K38AK | 38 | E | No | | PONCA CITY, OK |
| KAUT | 19 | I | Yes | 0 | OKLAHOMA CITY, OK |
| KFOR | 27 | N | Yes | 0 | OKLAHOMA CITY, OK |
| KAUT-2 | 19.2 | I-M | Yes | 0 | OKLAHOMA CITY, OK |
| KOCB-SIMUL | 33 | I | Yes | Е | OKLAHOMA CITY, OK |
| KOCB-2 | 33.2 | I-M | Yes | 0 | OKLAHOMA CITY, OK |
| KOCB-3 | 33.3 | I-M | Yes | 0 | OKLAHOMA CITY, OK |
| KOCO-SIMUL | 7 | N | Yes | Е | OKLAHOMA CITY, OK |
| KOKH-SIMUL | 24 | I | Yes | Е | OKLAHOMA CITY, OK |
| K38AK-SIMUL | 38 | Е | No | | PONCA CITY, OK |
| KOPX-SIMUL | 18 | ı | Yes | E | OKLAHOMA CITY, OK |
| KSBI | 23 | ı | Yes | 0 | OKLAHOMA CITY, OK |

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#
Name
023031

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.

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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 CONT'D | |
|-----------------|--------------------------------|--------------------------|----------------------------|---|------------------------|
| 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 |
| ктво | 15 | I | Yes | 0 | OKLAHOMA CITY, OK |
| KAUT-SIMUL | 19 | I | Yes | E | OKLAHOMA CITY, OK |
| KTUZ | 29 | I | Yes | 0 | SHAWNEE, OK |
| KOCO-2 | 7.2 | I-M | Yes | 0 | OKLAHOMA CITY, OK |
| KWTV | 25 | N | Yes | 0 | OKLAHOMA CITY, OK |
| KFOR-3 | 27.3 | I-M | Yes | 0 | OKLAHOMA CITY, OK |
| KFOR-4 | 27.4 | I-M | Yes | 0 | OKLAHOMA CITY, OK |
| KOKH-3 | 24.3 | I-M | Yes | 0 | OKLAHOMA CITY, OK |
| KFOR-SIMUL | 27 | N | Yes | E | OKLAHOMA CITY, OK |
| KTBO-SIMUL | 15 | I | Yes | E | OKLAHOMA CITY, OK |
| KWTV-SIMUL | 25 | N | Yes | E | OKLAHOMA CITY, OK |
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Primary Transmitters: Television

| FORM SA3E. PAGE 3. | | | | | | |
|--|---|---|--|---|--|------------------------------------|
| CABLE ONE, IN | | STEM: | | | SYSTEM ID# 023031 | Name |
| PRIMARY TRANSMITTE | |)N | | | | |
| In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas | G, identify every system during the ons in effect or 6.61(e)(2) and (sis, as explaine | television stance accounting June 24, 1984), or 76.63 (rd in the next p | period, except (31, permitting the eferring to 76.61 paragraph. | (1) stations carried e carriage of certa l (e)(2) and (4))]; a | and low power television stations) I only on a part-time basis under in network programs [sections nd (2) certain stations carried on a | G Primary Transmitters: Television |
| basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you he cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For sexplanation of these th Column 6: Give the | CC rules, regular here in space only on a substand also in spatformation concurn. In station's call associated with a case of the case of | ottions, or auth G—but do list titute basis. Ince I, if the state erning substitute basis. Ince I, if the state erning substitute basis because the FCC has, WRC is Challe station. In the local servage (v) of the local servage (v) of the est in column on during the camulticast stream or before Jumitter or an author of the local servage in column or during the camulticast stream or before Jumitter or an author of the local servage of the station. For the local servage (v) of the servage (v) of the case in column or during the camulticast stream or before Jumitter or an author of the local servage (v) of the station. For the local servage (v) of the station. | orizations: It it in space I (the ation was carried ute basis station eport origination cording to its ove be reported in c as assigned to t annel 4 in Wash ation is a networ etwork), "N-M" (f educational), or e general instruct id, you must con accounting perior | e Special Statemer I both on a substitute, see page (v) of a program services er-the-air designat column 1 (list each the television static ington, D.C. This r rk station, an indep for network multical r "E-M" (for noncolutions located in the instant"), enter "Ye ons located in the instant"), enter "Ye ons located in the instant of the primary column 5, s ind. Indicate by ente ctivated channel of ubject to a royalty tween a cable syst senting the primary channel on any oth instructions located ist the community | ant and Program Log)—if the Jute basis and also on some other The general instructions located Souch as HBO, ESPN, etc. Identify Jion. For example, report multi- Justice stream separately; for example Justice on for broadcasting over-the-air in Justice of the channel Justice of the cha | Television |
| Note: If you are utilizin | g multiple char | • • | use a separate s | | channel line-up. | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | | | | |
|--|--------------------------------|--------------------------|----------------------------|---|---|------|--|--|
| LEGAL NAME OF OWN | ER OF CABLE SY | STEM: | | | SYSTEM ID# | Name | | |
| CABLE ONE, IN | IC. | | | | 023031 | Name | | |
| PRIMARY TRANSMITTE | RS: TELEVISIO | N | | | | | | |
| In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e | | | | | | | | |
| | | | | | to which the station is licensed by the which the station is identifed. | | | |
| Note: If you are utilizing | | | | | | | | |
| | | CHANN | EL LINE-UP | AE | | | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | | | |
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| FORM SA3E. PAGE 3. | | | | | | 1 | |
|---|--------------------------------|--------------------------|----------------------------|---|------------------------|------|--|
| CABLE ONE, IN | | STEM: | | | SYSTEM ID# 023031 | Name | |
| | | | | | 023031 | | |
| 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), 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space ((the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as 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), | | | | | | | |
| Column 6: Give the | e location of ea | ch station. Fo | r U.S. stations, I | list the community | | | |
| Note: If you are utilizing | | | | • | | | |
| | | CHANN | EL LINE-UP | AF | | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | | |
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| FORM SA3E. PAGE 3. | | | | | | |
|---|---|--|--|--|---|--|
| LEGAL NAME OF OWN | | STEM: | | | SYSTEM ID# | Name |
| CABLE ONE, IN | IC. | | | | 023031 | |
| PRIMARY TRANSMITTE | RS: TELEVISIO | N | | | | |
| In General: In space of carried by your cable is FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program bassubstitute Basis is basis under specific FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multicated for the meaning of the Column 4: If the st planation of local serving Column 5: If you have cable system carried the carried the distant state. For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the Column 6: Give the | G, identify every eystem during the cons in effect or 6.61(e)(2) and (6.5is, as explained stations: With record only on a substand also in spatformation concern. In the station's call associated with example stem carried the in each case very entering the least), "E" (for not exe terms, see pation is outside ce area, see parave entered "Ye he distant station on a part-tirrion of a distant entered into or a primary transistimulcasts, also aree categories, elocation of each | r television state accounting in June 24, 1984), or 76.63 (nd in the next prespect to any tions, or authors, or authors, or authors, or authors, if the state and in the state in column on during the amount of the local servage (v) of the state in column on during the amount of the local servage in column on during the amount of the local servage in column on during the amount of the local servage in column on during the amount of the local servage in column on during the amount of the local servage in column on during the amount of the local servage in or before Jumitter or an associated in the local servage in the local servage (v) of the servage (v) | period, except (81, permitting the eferring to 76.61 paragraph. distant stations orizations: it in space I (the tition was carried ute basis station eport origination cording to its over be reported in cording to its over be reported in cording to its over be reported in cording to its over be reported in cording to its over be reported in cording to its over be reported in cording to its annel 4 in Washington is a network educational), on the educational, on the general instruction accounting period in the general instruction is an end of the general in the social cording to the general in the cordinal that is not some 30, 2009, be sociation representation of the general in the cordinal in the cordinal in the social cordinal | (1) stations carried e carriage of certa (e)(2) and (4))]; at carried by your carried by your carried by your carried by your carried by your carried by your carried by your carried by your carried by your carried statemed by the sepage (v) of a program services exthe-air designation of the television static ington, D.C. This rack station, an indeport network multicar "E-M" (for noncontions located in the inplete column 5, said. Indicate by entectivated channel cubject to a royalty tween a cable systesenting the primary channel on any other structions located in the instructions located is the community instructions located is the community | s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system | Primary Transmitters: Television |
| Note: If you are utilizing | | • | EL LINE-UP | | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | | 1 | |
|--|--|--|---|---|--|------------|--|
| CABLE ONE, IN | | STEM: | | | SYSTEM ID# 023031 | Name | |
| PRIMARY TRANSMITTE | | N | | | | | |
| In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program | | | | | | | |
| basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the | CC rules, regular here in space only on a substand also in spation and also in spation and also in spation and also in spation associated with a spation associated with a common and a spation is outside a common a part-tirision of a distant a entered into or a primary transis simulcasts, also aree categories, e location of eaction of eaction of eaction and a spation area and a spation area and a spation area and a spation area and a spation area and a spation area and a spation area and a spation area and a spation area and a spation area and a spation area and a spation and a spation area and a spation area and a spation and a spation area and a spation area and a spation area and a spation and a spation area and a spation area and a spation area and a spation area and a spation area and a spation area and a spation and a spation area a | tions, or auth G—but do list itute basis. Ice I, if the state erning substitute basis. Ice I, if the state erning substitute basis between the FCC has whether the station. If the local server in column and uring the state of the basis becamulticast stream or before Jumitter or an author of the local server in the local server in column and uring the state of the local server in column and urin | orizations: t it in space I (the ation was carried cute basis station report origination cording to its over the be reported in cording to its as assigned to the annel 4 in Wash ation is a networ etwork), "N-M" (for I educational), or general instruction 4, you must con accounting period accounting | e Special Statemer I both on a substitute, see page (v) of a program services er-the-air designat column 1 (list each the television static ington, D.C. This r rk station, an indep for network multical r "E-M" (for noncolutions located in the instant"), enter "Ye ons located in the instant"), enter "Ye ons located in the instant of the primary column 5, s ind. Indicate by ente ctivated channel of ubject to a royalty tween a cable syst senting the primary channel on any oth instructions located ist the community | ant and Program Log)—if the Jute basis and also on some other The general instructions located Souch as HBO, ESPN, etc. Identify Jion. For example, report multi- Justice stream separately; for example Justice on for broadcasting over-the-air in Justice of the channel Justice of the cha | Television | |
| Note: If you are utilizing | ng multiple chan | • • | use a separate s | | channel line-up. | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | | |
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| FORM SA3E. PAGE 3. | | | | | | |
|--|--|---|---|--|--|------------------------------------|
| LEGAL NAME OF OW | NER OF CABLE SY | STEM: | | | SYSTEM ID# | Name |
| CABLE ONE, I | NC. | | | | 023031 | |
| PRIMARY TRANSMITT | ERS: TELEVISIO | N | | | | |
| In General: In space carried by your cable FCC rules and regular 76.59(d)(2) and (4), 7 substitute program ba Substitute Basis: basis under specifc F• Do not list the station station was carried • List the station here, basis. For further in the paper SA3 fc Column 1: List eareach multicast stream cast stream as "WETA-simulcast). Column 2: Give the its community of licen on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of th Column 4: If the splanation of local serve Column 5: If you he cable system carried the distant star For the retransmis of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the substitution of the substi | G, identify every system during the tions in effect on 6.61(e)(2) and (4 isis, as explained Stations: With record or a substant and also in spanformation concorm. In associated with A-2". Simulcast substant station's call substant station is outside rice area, see parave entered "Ye the distant station or a part-tin sion of a distant the entered into or a primary transr simulcasts, also hree categories, see location of a distant the categories, are location of a distant the entered into or a primary transr simulcasts, also hree categories, see location of a distant of a distant station of a distant the entered into or a primary transr simulcasts, also hree categories, see location of a distant of a distant the categories, see location of each station of a distant of a dista | r television state accounting June 24, 198 A), or 76.63 (M), or 76.63 (M) A), or 76.63 (M) A), or 76.63 (M) B) espect to any tions, or author G—but do list itute basis. Ce I, if the state rining substition Sign. Do not real a station account of the station account of the station. Chether the FCC has be station. Chether the stater "N" (for neal station. Chether the stater "N" (for neal station. Chether the station. Chether the station. Chether the station. Chether the station. Chether the station. Chether "S" in column of the local serving (V) of the graph of the station of the station. Chether the station of the station. Chether "E". If y see page (V) Chether the station. Chether the station. Chether "E". If y see page (V) Chether the station. | period, except to period, except to permitting the eferring to 76.6° paragraph. distant stations orizations: it in space I (the tion was carried ute basis station eport origination cording to its own be reported in origination is a network to the educational), or equipment of the educational), or egeneral instruction of the education representation , it is a period to the education representation representation representations, it is a period to the education representation representations. | (1) stations carrie e carriage of certa (e)(2) and (4))]; a carried by your content of the carried by your content of the carried by your content of the carried by your content of the carried by your content of the carried state of the carr | es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your stering "LAC" if your cable system capacity. / payment because it is the subject stem or an association representing ry transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. / to which the station is licensed by the | G Primary Transmitters: Television |
| Note: If you are utilizi | | | | | which the station is identifed. channel line-up. | |
| | | CHANN | EL LINE-UP | Al | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | | | | |
|---|---|--|--|--|--|-------------------------|--|--|
| LEGAL NAME OF OWN | IER OF CABLE SY | STEM: | | | SYSTEM ID# | Name | | |
| CABLE ONE, IN | IC. | | | | 023031 | Nume | | |
| PRIMARY TRANSMITTE | RS: TELEVISIO | N | | | | | | |
| carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 | ystem during the ons in effect or i.61(e)(2) and (4 | ne accounting June 24, 198 4), or 76.63 (r | period, except 81, permitting th referring to 76.6 | stations carried e carriage of certa | and low power television stations) I only on a part-time basis under iin network programs [sections nd (2) certain stations carried on a | G Primary Transmitters: | | |
| Substitute Basis S | substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program | | | | | | | |
| basis under specifc FC Do not list the station station was carried | here in space | G—but do list | | e Special Stateme | ent and Program Log)—if the | | | |
| • List the station here, | and also in spa formation conc | ce I, if the sta | | | ute basis and also on some other the general instructions located | | | |
| | | - | | | s such as HBO, ESPN, etc. Identify ion. For example, report multi- | | | |
| cast stream as "WETA WETA-simulcast). | 2". Simulcast | streams must | be reported in o | column 1 (list each | stream separately; for example | | | |
| | | | • | | on for broadcasting over-the-air in may be different from the channel | | | |
| on which your cable sy Column 3: Indicate | | | ation is a netwo | rk station, an inde | pendent station, or a noncommercial | | | |
| | - | , | , , | | ast), "I" (for independent), "I-M" mmercial educational multicast). | | | |
| For the meaning of the Column 4: If the sta | | | | | e paper SA3 form. s". If not, enter "No". For an ex- | | | |
| planation of local servi Column 5: If you ha | | | | | paper SA3 form. tating the basis on which your | | | |
| cable system carried the | | | | | ering "LAC" if your cable system apacity. | | | |
| For the retransmiss | ion of a distant | multicast stre | eam that is not s | subject to a royalty | payment because it is the subject tem or an association representing | | | |
| the cable system and a | a primary transı | mitter or an as | ssociation repre | senting the primar | y transmitter, enter the designa- ner basis, enter "O." For a further | | | |
| explanation of these th | ree categories, | see page (v) | of the general i | nstructions located | d in the paper SA3 form. to which the station is licensed by the | | | |
| FCC. For Mexican or C | Canadian statio | ns, if any, give | e the name of th | e community with | which the station is identifed. | | | |
| Note: If you are utilizin | g multiple chan | • • | EL LINE-UP | | cnannei iine-up. | | | |
| 4 0011 | O D'CACT | | | - | C LOCATION OF STATION | | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL | 3. TYPE OF | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE | 6. LOCATION OF STATION | | | |
| | NUMBER | STATION | | (If Distant) | | | | |
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| FORM SA3E. PAGE 3. | | | | | | |
|---|--|--|---|---|--|------------------------------------|
| LEGAL NAME OF OW | NER OF CABLE SY | STEM: | | | SYSTEM ID# | Name |
| CABLE ONE, I | NC. | | | | 023031 | |
| PRIMARY TRANSMITT | ERS: TELEVISIO | N | | | | |
| In General: In space carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program ba Substitute Basis basis under specifc F • Do not list the station station was carried • List the station here basis. For further in the paper SA3 f Column 1: List ea each multicast stream cast stream as "WET WETA-simulcast). Column 2: Give the its community of licer on which your cable s Column 3: Indicated ucational station, b (for independent multifor the meaning of the Column 4: If the splanation of local sen Column 5: If you cable system carried the distant stafer the retransmis of a written agreement the cable system and tion "E" (exempt). For explanation of these to Column 6: Give the | G, identify every system during the titons in effect on 6.61(e)(2) and (4 asis, as explained Stations: With record of control of con | r television state accounting a June 24, 198 4), or 76.63 (nd in the next pespect to any tions, or authors, or aut | period, except to period, except to permitting the eferring to 76.6° paragraph. distant stations orizations: it in space I (the tion was carried ute basis station eport origination cording to its own be reported in origination is a network to the educational), or equipment of the educational), or egeneral instruction of the education representation , it is a period to the education representation representation representations, it is a period to the education representation representations. | (1) stations carrie e carriage of certa (e)(2) and (4))]; a carried by your control of the carried by your control of the carried by your control of the carried by your control of the carried by your control of the carried by your control of the carried by your control of the carried by your control of the carried by your control of the carried by your control of the carried by | es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. / payment because it is the subject stem or an association representing try transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. / to which the station is licensed by the | G Primary Transmitters: Television |
| Note: If you are utilizi | | | | | which the station is identifed. channel line-up. | |
| | | CHANN | EL LINE-UP | ΔK | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | | |
|--|---|--|---|--|---|--|
| LEGAL NAME OF OWN | IER OF CABLE SY | STEM: | | | SYSTEM ID# | Name |
| CABLE ONE, IN | IC. | | | | 023031 | |
| PRIMARY TRANSMITTE | RS: TELEVISIO | N | | | | |
| In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you h cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th | G, identify every eystem during the ons in effect or 6.61(e)(2) and (4.5is, as explained tations: With respect to the control of the control | y television stane accounting in June 24, 1984), or 76.63 (rud in the next prespect to any titions, or authors, or authors, or authors, or authors, or authors, or authors, if the stane and substitute basis. In a station account a station account a station account a station. If the stane station, whether the station, whether the station. If the local serves age (v) of the station and uring the same basis becamulticast streen or before Junititier or an aspect of the control of the station and uring the same basis becamulticast streen or before Junititer or an aspect of the station and uring the same basis becamulticast streen or before Junititer or an aspect of the station and uring the same basis becamulticast streen or before Junititer or an aspect of the station and uring the same basis becamulticast streen or before Junititer or an aspect of the station and uring the same basis becamulticast streen or before Junititer or an aspect of the station and uring the same basis becamulticast streen or before Junititer or an aspect of the station and uring the same basis becamulticast streen are same and uring the same basis becamulticast streen are same and uring the same are same and uring the same are same and uring the same are | period, except (al., permitting the eferring to 76.61 paragraph. distant stations orizations: tit in space I (the effect of the | (1) stations carried e carriage of certa (e)(2) and (4))]; and (e)(2) and (f)(2); and (f)(| s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system | Primary Transmitters: Television |
| FCC. For Mexican or C | Canadian statio | ns, if any, give | e the name of th | e community with | which the station is identifed. | |
| Note: If you are utilizin | g multiple chan | • • | use a separate s EL LINE-UP | | channel line-up. | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | | |
|---|--|---|--|--|--|---|
| LEGAL NAME OF OWN | ER OF CABLE SY | STEM: | | | SYSTEM ID# | Name |
| CABLE ONE, IN | IC. | | | | 023031 | Name |
| PRIMARY TRANSMITTE | RS: TELEVISIO | N | | | | |
| In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 for Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy | G, identify every ystem during the ons in effect or .61(e)(2) and (4 sis, as explained tations: With respect to rules, regulations and also in spatformation concerm. In station's call associated with -2". Simulcast is echannel number. For example testem carried the | y television standard to the accounting and June 24, 1984), or 76.63 (red in the next prespect to any tions, or authors, or authors, or authors, or authors, if the standard to the station account of the station account of the station account of the station. | period, except (81, permitting the eferring to 76.61 paragraph. distant stations orizations: tit in space I (the ation was carried ute basis station cording to its over the effect of t | (1) stations carried e carriage of certa (e)(2) and (4))]; and carried by your case. Special Statement both on a substitute, see page (v) of a program services er-the-air designation to (list each the television staticington, D.C. This result (e)(2) and (e)(3) and (e)(4) and | and low power television stations) I only on a part-time basis under in network programs [sections and (2) certain stations carried on a able system on a substitute program and Program Log)—if the ate basis and also on some other a | G Primary Transmitters: Television |
| educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servic Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the | entering the le cast), "E" (for no case terms, see pation is outside ce area, see pation entered "Ye ne distant static ion on a part-tirion of a distant entered into or a primary transsismulcasts, also ree categories, e location of eacanadian station | tter "N" (for ne concommercial page (v) of the the local servage (v) of the ges" in column on during the ame basis becamulticast streen or before Jumitter or an asponente "E". If y see page (v) ch station. Forns, if any, give | etwork), "N-M" (for educational), or educational), or educational), or educational educational, or educational edu | or network multicar "E-M" (for noncortions located in the distant"), enter "Yes ons located in the nplete column 5, sod. Indicate by entectivated channel cubject to a royalty tween a cable systemannel on any other tructions located ist the community with | ist), "I" (for independent), "I-M" mmercial educational multicast). e paper SA3 form. s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject tem or an association representing y transmitter, enter the designater basis, enter "O." For a further in the paper SA3 form. to which the station is licensed by the which the station is identifed. | |
| | | CHANN | EL LINE-UP | AM | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | | | |
|--|--------------------------------|--------------------------|------------------------------------|---|------------------------|---------|--|
| LEGAL NAME OF OWN | ER OF CABLE SY | STEM: | | | SYSTEM ID# | Name | |
| CABLE ONE, IN | IC. | | | | 023031 | Train o | |
| PRIMARY TRANSMITTE | RS: TELEVISIO | N | | | | | |
| In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 07.66.16(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for retwork), "N-M" (for network multicast), "" (for independent), "-M" (for in | | | | | | | |
| Note. If you are utilizing | g multiple chair | | | | Charlie ine-up. | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | EL LINE-UP 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | | |
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| FORM SA3E. PAGE 3. | • | | | | | 1 |
|--|--------------------------------|--------------------------|----------------------------|---|---------------------------------|------|
| CABLE ONE, | | 'STEM: | | | SYSTEM ID# 023031 | Name |
| | | | | | 023031 | |
| 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 | | | | | | |
| FCC. For Mexican or | r Canadian statio | ns, if any, give | e the name of th | e community with | which the station is identifed. | |
| Note: If you are utilize | zing multiple char | | • | <u>'</u> | channel line-up. | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | | | |
|--|--------------------------------|--------------------------|----------------------------|---|------------------------|------|--|
| LEGAL NAME OF OWN | ER OF CABLE SY | STEM: | | | SYSTEM ID# | Name | |
| CABLE ONE, IN | IC. | | | | 023031 | Nume | |
| PRIMARY TRANSMITTE | RS: TELEVISIO | N | | | | | |
| In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "F" (for independent), "I-M" (for ind | | | | | | | |
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| Note: If you are utilizing | | | | • | | | |
| | | CHANN | EL LINE-UP | AP | | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | | |
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| FORM SA3E. PAGE 3. | | | | | |
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| LEGAL NAME OF OWNER OF C | CABLE SYSTEM: | | | SYSTEM ID# | Name |
| CABLE ONE, INC. | | | | 023031 | |
| PRIMARY TRANSMITTERS: TE | LEVISION | | | | |
| In General: In space G, identicarried by your cable system of FCC rules and regulations in e76.59(d)(2) and (4), 76.61(e)(2) substitute program basis, as e Substitute Basis Stations basis under specifc FCC rules • Do not list the station here in station was carried only on • List the station here, and also basis. For further informatic in the paper SA3 form. Column 1: List each station each multicast stream associated cast stream as "WETA-2". Sin WETA-simulcast). Column 2: Give the chann its community of license. For each on which your cable system candeducational station, by enterin (for independent multicast), "Eror the meaning of these term Column 4: If the station is planation of local service area Column 5: If you have entered the distancerried the distant station on a For the retransmission of a of a written agreement entered the cable system and a primarition "E" (exempt). For simulcate explanation of these three cate Column 6: Give the locatic FCC. For Mexican or Canadia | ify every television standuring the accounting effect on June 24, 19 (2) and (4), or 76.63 (1) explained in the next sit. With respect to any sit, regulations, or authors a substitute basis. The standard sit is a substitute basis. The standard sit is a substitute basis. The standard sit is a substitute basis. The standard sit is a substitute basis. The standard sit is a substitute basis. The standard sit is a substitute basis. The standard sit is a substitute basis. The standard sit is a substitute basis. The standard sit is a substitute basis on concerning substitute standard the station. The standard sit is a substitute sit is a substitute basis becaused whether the standard sit is a substitute sit is a part-time basis becaused in the substitute of the substitute of the substitute of the station during the substitute sit is a substitute of the | g period, except of 81, permitting the referring to 76.61 paragraph. It distant stations for izations: to tit in space I (the referring to 16.61 paragraph. It is in space I (the referring to 16.61 paragraph. It is in space I (the referring to 16.61 paragraph. It is in space I (the referring to 16.61 paragraph. It is in the referring to 16.61 paragraph. It is in the referring period ause of lack of a peam that is not some 30, 2009, be secciation representation I.S. stations, I the referring the referring to 16.61 paragraph. | (1) stations carried e carriage of certa (e)(2) and (4))]; a carried by your cast of the carried by your cast of the carried by your cast of the carried by your cast of the carried by your cast of the carried by of the program services er-the-air designate column 1 (list each column 1 (list each che television static ington, D.C. This rark station, an independent of the carried or "E-M" (for nonconstions located in the instant"), enter "Ye ions located in the instant"), enter "Ye ions located in the column 5, so the carried channel carried channel or any other carried channel or any other carried channel on any other carried channel on any other carried channel on any other carried channel on any other carried channel on any other carried community with ecommunity with | ute basis and also on some other the general instructions located as such as HBO, ESPN, etc. Identify ion. For example, report multistream separately; for example on for broadcasting over-the-air in may be different from the channel opendent station, or a noncommercial ast), "I" (for independent), "I-M" mmercial educational multicast). e paper SA3 form. s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject tem or an association representing y transmitter, enter the designater basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. | G Primary Transmitters: Television |
| Note: If you are utilizing multip | • • | · | • | лапненте-ар. | |
| | | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | | | |
|--|--|--|---|---|--|------------|--|
| CABLE ONE, IN | | STEM: | | | SYSTEM ID# 023031 | Name | |
| PRIMARY TRANSMITTE | | N | | | | | |
| In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program | | | | | | | |
| basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the | CC rules, regular here in space only on a substand also in spatformation concern. In station's call associated with associated with associated with a channel number. For example stem carried the in each case wentering the least), "E" (for no se terms, see pation is outside ce area, see pation on a part-tirion of a distant entered into or a primary transistimulcasts, also ree categories, e location of ea | tions, or auth G—but do list itute basis. Ice I, if the state erning substitute basis. Ice I, if the state erning substitute basis between the FCC has whether the station. If the local server in column and uring the state of the basis becamulticast stream or before Jumitter or an author of the local server in the local server in column and uring the state of the local server in column and urin | orizations: t it in space I (the ation was carried cute basis station report origination cording to its over the be reported in cording to its as assigned to the annel 4 in Wash ation is a networ etwork), "N-M" (for I educational), or general instruction 4, you must con accounting period accounting | e Special Statemer I both on a substitute, see page (v) of a program services er-the-air designat column 1 (list each the television static ington, D.C. This r rk station, an indep for network multical r "E-M" (for noncolutions located in the instant"), enter "Ye ons located in the instant"), enter "Ye ons located in the instant of the primary column 5, s ind. Indicate by ente ctivated channel of ubject to a royalty tween a cable syst senting the primary channel on any oth instructions located ist the community | ant and Program Log)—if the Jute basis and also on some other The general instructions located Souch as HBO, ESPN, etc. Identify Jion. For example, report multi- Justice stream separately; for example Justice on for broadcasting over-the-air in Justice of the channel Justice of the cha | Television | |
| Note: If you are utilizin | g multiple char | • • | • | | channel line-up. | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | | |
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| FORM SA3E. PAGE 3. | | | | | | | |
|--|--------------------------------|--------------------------|----------------------------|---|------------------------|------|--|
| LEGAL NAME OF OWN | ER OF CABLE SY | STEM: | | | SYSTEM ID# | Name | |
| CABLE ONE, IN | IC. | | | | 023031 | Nume | |
| PRIMARY TRANSMITTE | RS: TELEVISIO | N | | | | | |
| In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational) and columnal propers SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), ent | | | | | | | |
| Note: If you are utilizing | g multiple chan | nel line-ups, ι | use a separate s | space G for each | channel line-up. | | |
| | | CHANN | EL LINE-UP | AS | | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | | |
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| FORM SA3E. PAGE 3. | | | | | 0./07514.15.// | |
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| LEGAL NAME OF OWN | | STEM: | | | SYSTEM ID# | Name |
| CABLE ONE, IN | NC. | | | | 023031 | |
| PRIMARY TRANSMITTE | RS: TELEVISIO | N | | | | |
| In General: In space of carried by your cable's FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program bassubstitute program bassubstitute Basis Substitute Pasis Pasis Substitute Pasis | G, identify every eystem during the lons in effect on 6.61(e)(2) and (4 sis, as explained stations: With record only on a substand also in spatformation concerm. The station's call associated with record only on a substand also in spatformation concerm. The station's call associated with record only on a substand also in spatformation concerm. The station's call associated with record of the ending the level of the end of the end of the end of the end of the end of the end of the end of the end of a distant entered into or a primary transmissimulcasts, also aree categories, the location of each of the ending of the ending | r television state accounting a June 24, 1984), or 76.63 (d in the next pespect to any tions, or authors, or autho | period, except (al., permitting the eferring to 76.61 paragraph. distant stations orizations: it in space I (the tion was carried atte basis station eport origination cording to its over the period of the energy of the educational), or expenses assigned to the energy of the educational), or expenses of lack of a excounting period case of lack of a expenses of lack of a expenses of lack of a expenses of lack of a expenses of lack of a expenses of lack of a expenses of lack of a expenses of lack of a expense of lack of a expenses of lack of a expenses of lack of a expenses of lack of a expenses of lack of a expenses of lack of a expenses of lack of a expense of lack of a exp | (1) stations carried e carriage of certa (e)(2) and (4))]; at carried by your carried by your carried by your carried by your carried by your carried by your carried by your carried by your carried by your carried by the sepage (v) of a program services er-the-air designation of the television static ington, D.C. This not k station, an indepor network multicar "E-M" (for noncorritions located in the instant"), enter "Yes only instant", enter "Yes only instant of the primary channel on any other thannel on any other tructions located ist the community | s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system | G Primary Transmitters: Television |
| | | CHANN | EL LINE-UP | A.T. | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3 | 5. | | | | | |
|---|--|---|---|--|--|------------------------------------|
| | WNER OF CABLE SY | STEM: | | | SYSTEM ID# | Name |
| | | NA I | | | 023031 | |
| carried by your cabl FCC rules and regu 76.59(d)(2) and (4), substitute Basis basis under specifc • Do not list the stati station was carrie • List the station her basis. For further in the paper SA3 Column 1: List e each multicast streac cast stream as "WE WETA-simulcast). Column 2: Give its community of lice on which your cable Column 3: Indice ducational station, (for independent mu For the meaning of Column 4: If the planation of local se Column 5: If you cable system carried carried the distant s For the retransm of a written agreement the cable system ar tion "E" (exempt). For | e G, identify evene e system during the lations in effect or 76.61(e)(2) and (coasis, as explaine is Stations: With the FCC rules, regularion here in space ed only on a substitute, and also in spar information conditions are station's call am associated with TA-2". Simulcast the channel numbers. For example system carried that in each case who yentering the least in each case who yentering the least in each case who yentering the least in each case who yentering the least in each case who yenter in soutside invice area, see part have entered "Yealth on a part-time is sission of a distant tent entered into on a part-time in the part of a distant tent entered into on a part-time in the part of a distant tent entered into on a part-time in the part of a distant tent entered into on a part-time in the part of a distant tent entered into on a part-time in the part of a distant tent entered into on a part-time in the part of a distant tent entered into on a part-time in the part of a distant tent entered into on a part-time in the part of a distant tent entered into on a part-time in the part of a distant tent entered into on a part-time in the part of a distant tent entered into on a part-time in the part of a distant tent entered into on a part-time in the part of a distant tent entered into on a part-time in the part of | y television standard accounting in June 24, 198 4), or 76.63 (r d in the next prespect to any attions, or auth G—but do list titute basis. In the standard accounting substitute basis. In the standard account in a station account in a station account in the station. Whether the station. Whether the station. Whether the station. Whether the station account in column in during the same basis became the for before Jumitter or an associated in the station account in the station of the station. The station is the station account in column in during the same basis became the foreign account in the station or before Jumitter or an associated in the station account | period, except of all, permitting the eferring to 76.61 paragraph. In distant stations orizations: It it in space I (the effect of the effect | (1) stations carried e carriage of certa (e)(2) and (4))]; all carried by your case. Special Statement both on a substitute, see page (v) of a program services er-the-air designation of the television static ington, D.C. This result in the television static ington, D.C. This result is the television static ington, D.C. This result is the television static ington, D.C. This result is the television static ington, D.C. This result is the television static ington, D.C. This result is the television static ington, D.C. This result is the television static ington, D.C. This result is the television static ington, D.C. This result is the television static ington, D.C. This result is the television static ington, D.C. This result is the television static ington, D.C. This result is the television static ington, and independent in the television static ington, and in the television static ingto | s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject tem or an association representing y transmitter, enter the designater basis, enter "O." For a further the paper SA3 form. | G Primary Transmitters: Television |
| FCC. For Mexican of | or Canadian statio | ns, if any, give | e the name of th | e community with | to which the station is licensed by the which the station is identifed. | |
| Note: If you are utili | zing multiple char | • • | • | | channel line-up. | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | | |
|---|--|--|--|--|---|------------------------------------|
| LEGAL NAME OF OWN | ER OF CABLE SY | STEM: | | | SYSTEM ID# | Name |
| CABLE ONE, IN | IC. | | | | 023031 | Numo |
| PRIMARY TRANSMITTE | RS: TELEVISIO | N | | | | |
| carried by your cable s FCC rules and regulation 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specific FC Do not list the station station was carried to basis. For further in in the paper SA3 for Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servic Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the | ystem during the ons in effect on .61(e)(2) and (4 is, as explained tations: With r C rules, regula here in space only on a substand also in space formation concurred. In station's call associated with -2". Simulcast sechannel numbers of the case we entering the legast), "E" (for no se terms, see pation is outside the carea, see pation of a distant static on on a part-timination of a distant entered into or a primary transistimulcasts, also ree categories, a location of eact anadian station is entered anadian station of eact anadian station is entered anadian station of eact anadian station is a considered anadian station is a considered into or a primary transistimulcasts, also ree categories, a location of eact anadian station is suited. | ne accounting June 24, 1984), or 76.63 (nd in the next pespect to any tions, or authors, or authors, or authors, or authors, cell, if the state rining substitute basis. The station according to the station according to the feet of the feet of the station. The station according to the station according to the station. The station according to the station according to the station according to the station according to the station according to the station according to the station. The station according to the station according to the station according to the station according to the station. For the station, if any, given the station according to the station according to the station. For the station according to th | period, except of all, permitting the eferring to 76.61 paragraph. distant stations orizations: it in space I (the station was carried ute basis station cording to its over be reported in compart of the station is a network ation is a network etwork), "N-M" (freducational), or egeneral instruction in the station is a network etwork), "N-M" (freducational), or egeneral instruction in the station is a network etwork etwork), "N-M" (freducational), or egeneral instruction etwork etwork), "September 1 period etwork et | (1) stations carried e carriage of certa (e)(2) and (4))]; a carried by your carried by your carried by your carried by your carried by your carried by your carried by your carried by on a substitute, see page (v) of a program services er-the-air designate column 1 (list each the television static ington, D.C. This rark station, an independent of the column 1 (for nonconstions located in the instant"), enter "Ye on located in the instant"), enter "Ye only the column 5, so do Indicate by enter the column 5, so do Indicate by enter the primary channel on any other thannel | s". If not, enter "No". For an expaper SA3 form. Itating the basis on which your ering "LAC" if your cable system expacity. payment because it is the subject tem or an association representing y transmitter, enter the designation basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. | G Primary Transmitters: Television |
| | | CHANN | EL LINE-UP | AV | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | | | | | | |
|--|--------------------------------|--------------------------|----------------------------|---|------------------------|------|--|--|--|--|
| LEGAL NAME OF OWN | ER OF CABLE SY | STEM: | | | SYSTEM ID# | Name | | | | |
| CABLE ONE, IN | IC. | | | | 023031 | Nume | | | | |
| 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(lq)2 and (4),76,616(e)(2) and (4),0 or 76,63 (referring to 76,61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "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, "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, se | | | | | | | | | | |
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| Note: If you are utilizing | g multiple char | inel line-ups, i | use a separate s | space G for each o | channel line-up. | | | | | |
| | | CHANN | EL LINE-UP | AW | | | | | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | | | | | |
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ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 4. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 023031 CABLE ONE, INC. PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION LOCATION OF STATION AM or FM S/D **CALL SIGN** AM or FM S/D

| FORM SA3E. PAGE 5. | | | | | | | ACCOUNTING | PERIOD: 2022/2 |
|---|--|---|--|--|--|--|-----------------|---|
| LEGAL NAME OF OWNER OF C | CABLE SYSTI | EM: | | | | S | YSTEM ID# | Nome |
| CABLE ONE, INC. | | | | | | | 023031 | Name |
| SUBSTITUTE CARRIAGE | : SPECIA | L STATEMEN | IT AND PROGRAM LOG | | | | | |
| In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form. | | | | | | | | |
| 1. SPECIAL STATEMENT | CONCER | NING SUBST | ITUTE CARRIAGE | | | | | Carriage: |
| During the accounting peri broadcast by a distant stat | | cable system | carry, on a substitute basis | s, any nonnet | | | ⊠No | Special Statement and Program Log |
| Note: If your answer is "No" log in block 2. | , leave the r | rest of this pag | e blank. If your answer is " | Yes," you mu | st complete th | ie program | | .5 |
| 2. LOG OF SUBSTITUTE In General: List each substiclear. If you need more space Column 1: Give the title of period, was broadcast by a cunder certain FCC rules, reg SA3 form for futher informat titles, for example, "I Love L Column 2: If the program Column 3: Give the call is Column 4: Give the broathe case of Mexican or Canathe case of Mexican or Canathe Column 5: Give the monifirst. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00—6:30 p.m." | tute progrance, please a of every nor distant static gulations, or ion. Do not ucy" or "NB n was broad sign of the s dcast statio adian station th and day we "5/7." "s when the Example: a er "R" if the lend regulation of the sign of t | m on a separa' attach additional anetwork televi on and that you authorizations as general c A Basketball: cast live, enter tation broadca n's location (th ns, if any, the c when your syst substitute prog program carrie | al pages. sion program (substitute paur cable system substitute paur cable system substituteds. See page (vi) of the generategories like "movies", or 76ers vs. Bulls." "Yes." Otherwise enter "N sting the substitute programe community to which the sem carried the substitute pagram was carried by your ceed by a system from 6:01:1 was substituted for programing the accounting period; | rogram) that, I for the program instruction "basketball". o." m. station is licentation is identation is identation. Use able system. 5 p.m. to 6:26 mming that you enter the letter. | during the accramming of ar ns located in the List specific pure tified). The second by the Foundaria specific pure tified in the times in the time | counting sother static he paper program CC or, in high the month accurately uld be as required sted pro | h | |
| | | | | | EN SUBSTITI | | 7. REASON | |
| 1. TITLE OF PROGRAM | 2. LIVE? Yes or No | 3. STATION'S CALL SIGN | 4. STATION'S LOCATION | 5. MONTH AND DAY | IAGE OCCUI 6. TIM FROM — | | FOR DELETION | |
| | 10001110 | 07.22 0.0.1 | | 7412 2711 | | | | |
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ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 6.

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

023031

J

Part-Time Carriage Log

PART-TIME CARRIAGE LOG

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

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

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

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

DATES AND HOURS OF PART-TIME CARRIAGE

| | \\/ UEN | N CARRIAGE O | | | PART-TIME CAR | | I CARRIAGE OC | CLIDDED |
|-----------|---------|--------------|----------|----|---------------|---------|---------------|------------|
| CALL SIGN | VVIILI | | | | CALL SIGN | VVIILIY | | |
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| | SA3E. PAG | | | | OVOTEM ID# | |
|--|---|---|----------------|---------------|--------------------------------|--|
| | BLE ON | FOWNER OF CABLE SYSTEM: E, INC. | | | SYSTEM ID# 023031 | Name |
| all a (as page | amounts (q identifed i le (vii) of th Gross re during th | CEIPTS The figure you give in this space determines the form you fle and the amount y gross receipts) paid to your cable system by subscribers for the system's secon n space E) during the accounting period. For a further explanation of how to corne general instructions. ceipts from subscribers for secondary transmission service(s) e accounting period. You must complete a statement in space P concerning gross receipts. | dary tr | ansmission | service , see 543,462.02 | K Gross Receipts |
| • Con • Con • If you fee: • If you accompany to the contract of the contract o | nctions: Umplete bloomplete bloom system from block bur system ompanying | ROYALTY FEE lise the blocks in this space L to determine the royalty fee you owe: ck 1, showing your minimum fee. ck 2, showing whether your system carried any distant television stations. In did not carry any distant television stations, leave block 3 blank. Enter the amount of block 4, and calculate the total royalty fee. In did carry any distant television stations, you must complete the applicable parting this form and attach the schedule to your statement of account. | ts of th | e DSE Sche | edule | L Copyright Royalty Fee |
| bloc | ck 3 below | | | | | |
| 3 be | elow. | e DSE schedule was completed, the amount from line 7 of block C should be en | | | | |
| | art 7 or pa block 4 b | rt 9, block B, of the DSE schedule was completed, the surcharge amount should elow. | d be er | ntered on lir | ie | |
| Block 1 | least the system's Line 1. E Line 2. M | M FEE: All cable systems with semiannual gross receipts of \$527,600 or more a minimum fee, regardless of whether they carried any distant stations. This fee is gross receipts for the accounting period. Inter the amount of gross receipts from space K fulltiply the amount in line 1 by 0.01064 | | | | |
| | | Enter the result here. This is your minimum fee. | \$ | | 5,782.44 | |
| Block 2 | space G. "Yes" in t Did you X Yes- | T TELEVISION STATIONS CARRIED: Your answer here must agree with the ir. If, in space G, you identifed any stations as "distant" by stating "Yes" in column this block. It cable system carry any distant television stations during the accounting period —Complete the DSE schedule. No—Leave block 3 below blank and complete the DSE schedule. | 1 4, you 1? | u must chec | k (4. | |
| Block 3 | | 4, or part 9, block A of the DSE schedule. If none, enter zero 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE | | \$ | 3,229.30 0.00 | |
| | | schedule. If none, enter zero | | | | |
| | _ | Add lines 1 and 2 and enter here | \$ | | 3,229.30 | |
| Block 4 | f | 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 | | \$ | 5,782.44 | Cable systems |
| | (| SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero. | | | 0.00 | submitting additional deposits under |
| | | Line 3. INTEREST CHARGE : Enter the amount from line 4, space Q, page 9 (Interest Worksheet) | | | 0.00 | Section 111(d)(7) should contact the Licensing |
| | Line 4. FILING FEE. \$ 725.00 TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here. \$ 6,507.44 | | | | | |
| | | | | | | |
| | | Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (Sependent instructions located in the paper SA3 form for more information.) | ee pag | ge (i) of the | | additional fees. |

ACCOUNTING PERIOD: 2022/2

| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. | SYSTEM ID# 023031 |
|--|--|----------------------|
| M Channels | CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations | |
| | Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services | |
| N Individual to | INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.) | |
| Be Contacted for Further Information | Name JENAE HECK Telephone 602-364-6092 | |
| | Address 210 E. EARLL DRIVE (Number, street, rural route, apartment, or suite number) PHOENIX, AZ 85012-2626 (City, town, state, zip) | |
| | Email JENAE.HECK@CABLEONE.BIZ Fax (optional) 602-364-6013 | |
| O Certifcation | CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.) • I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) | |
| | (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified | |
| | in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B. | ·m |
| | I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] | |
| | X /s/ Quynh Tran | |
| | Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings. | e "F2" |
| | Typed or printed name: QUYNH TRAN | |
| | Title: VICE PRESIDENT & TREASURER (Title of official position held in corporation or partnership) | |
| | Date: February 23, 2023 | |

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

| LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. | SYSTEM ID# 023031 | 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 syst service of providing secondary transmissions of primary broadcast transmitters, the system is scribers 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? | em for the basic hall not include sub- t to section 119." | Special Statement Concerning Gross Receipts Exclusion |
| YES. Enter the total here and list the satellite carrier(s) below | | |
| Name Mailing Address Mailing Address Mailing Address | | |
| INTEREST ASSESSMENTS | | |
| You must complete this worksheet for those royalty payments submitted as a result of a late paymer 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 | 4 | 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 | x 0.00274 | |
| Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7) | <u>-</u> | |
| | (interest charge) | |
| * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. | r assistance please | |
| ** 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 Copplease list below the owner, address, first community served, accounting period, and ID number as filing. | = | |
| Owner Address | | |
| First community served | | |
| Accounting period ID number | | |
| *************************************** | | |

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

ACCOUNTING PERIOD: 2022/2

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, 198l, 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

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

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

 1.064% of gross receipts
 Each of the second, third, and fourth DSEs
 0.701% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

0.330% of gross receipts

· If any of the stations were partially distant:

The fifth and each additional DSE

- 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 (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

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

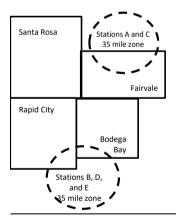
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

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



| Distant Stations Carr | ied | Identification | of Subscriber Groups | |
|-----------------------|-------------|----------------|------------------------|------------------|
| STATION | DSE | CITY | OUTSIDE LOCAL | GROSS RECEIPTS |
| 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) | <u>0.25</u> | Fairvale | Stations B, D, and E | 120,000.00 |
| TOTAL DSEs | 2.472 | | TOTAL GROSS RECEIPTS | \$600.000.00 |

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

| First Subscriber Group | | Second Subscriber Group | | Third Subscriber Group | |
|------------------------------|--------------------|-----------------------------|--------------------|-----------------------------|---------------------|
| (Santa Rosa) | | (Rapid City and Bodega Bay) | | (Fairvale) | |
| 0 | #040 000 00 | 0 | #470 000 00 | 0 | # 400 000 00 |
| 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: 2022/2

| DSE SCHEDULE. PAGE | E 11. (CONTINUED) | | | | | |
|----------------------|--|-------|----------------------|---------|-----------|--------------|
| 1 | LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023031 | | | | | |
| I | | | | | | |
| | SUM OF DSEs OF CATEGORY "O" STATIONS: | | | | | |
| | Add the DSEs of each station. Enter the sum here and in line 1 of part 5 of this schedule. | | | | | |
| | | | | | 16.75 | <u>.</u> |
| 2 | Instructions: | | | | | |
| _ | In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 | | | | | |
| Computation | of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom- | | | | | |
| of DSEs for | mercial educational station, give the DSE as ".25." | | | | | |
| Category "O" | | | CATEGORY "O" STATION | S: DSEs | | |
| Stations | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE |
| | KAUT | 1.000 | | | | |
| | KAUT-2 | 1.000 | | | | |
| | КТВО | 1.000 | | | | |
| | KOKH-3 | 1.000 | | | | |
| | KOPX | 1.000 | | | | |
| Add rows as | KSBI | 1.000 | | | | † |
| necessary. | KFOR | 0.250 | | | | |
| Remember to copy all | KFOR-2 | 1.000 | | | | |
| formula into new | KOCO | 0.250 | | | | . |
| rows. | KOKH | 1.000 | | | | |
| | KOKH-2 | 1.000 | | | | |
| | KOCB | | | | | |
| | | 1.000 | | | | |
| | KOCB-2 | 1.000 | | | | |
| | KOCB-3 | 1.000 | | | | |
| | KOCO-2 | 1.000 | | | | |
| | KWTV | 0.250 | | | | |
| | KFOR-3 | 1.000 | | | | |
| | KFOR-4 | 1.000 | | | | . |
| | KTUZ | 1.000 | | | | |
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| I . | | | | | | i i |

| Name | CABLE ONE | OWNER OF CABLE SYSTEM: | | | | | S | 023031 |
|---|--|--|--|--|--|--|--|--------|
| Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel | Column 2 figure should of Column 3 Column 4 be carried out Column 5 give the type- Column 6 | st the call sign of all distar 2: For each station, give the correspond with the inform 3: For each station, give the properties of the column | ne number of he nation given in the total number mn 2 by the figural point. This is tation, give the figurum 4 by the figurum 4 by the figurum 4 by the figurum 5 he nation. | ours your cable system space J. Calculate only of hours that the static ure in column 3, and gives the "basis of carriage "type-value" as "1.0." Fugure in column 5, and gure in | carried the static rone DSE for each on broadcast ove we the result in divalue" for the state For each network | on during the accounting p ch station. r the air during the accour ecimals in column 4. This | nting period. figure must tional station, ss than the | |
| Capacity | | | CATEGORY | LAC STATIONS: | COMPLITAT | ION OF DSFs | | |
| | 1. CALL SIGN | 2. NUMBE OF HOU CARRIE SYSTEM | R JRS ED BY | 3. NUMBER OF HOURS STATION ON AIR | 4. BASIS OI CARRIAC VALUE | 5. TYPE | | E |
| | | | ÷ | | = | x | = | |
| | | | ÷ | | = | x x | = | |
| | | | | | | x | | |
| | | | ÷ | | = | x | = | |
| | | | | | | x x | | |
| | | | ÷ | | = | x | = | |
| | Add the DSEs | of CATEGORY LAC ST of each station. Im here and in line 2 of pa | | edule, | | 0.00 | | |
| Computation of DSEs for Substitute-Basis Stations | Was carried tions in efferations in efferations in efferations and the space I). Column 2: at your option. Column 3: Column 4: | ect on October 19, 1976 (a one or more live, nonnetwo For each station give the I This figure should correst Enter the number of days Divide the figure in column This is the station's DSE (| ution for a prog is shown by the rk programs du number of live, bond with the ir in the calendar in 2 by the figur. For more inforr | gram that your system of a letter "P" in column 7 ring that optional carria nonnetwork programs of formation in space I. It year: 365, except in a e in column 3, and give mation on rounding, see | was permitted to of space I); and ge (as shown by t carried in substit leap year. the result in colust page (viii) of the | delete under FCC rules and the word "Yes" in column 2 of ution for programs that we want 4. Round to no less the general instructions in the | of ere deleted han the third | |
| | _ | | | -BASIS STATION | | | T | |
| | 1. CALL SIGN | 2. NUMBER OF PROGRAMS | 3. NUMBE OF DAY IN YEAF | 'S | 1. CALL SIGN | 2. NUMBER OF PROGRAMS | 3. NUMBER OF DAYS IN YEAR | 4. DSE |
| | | | | = | | - | | = |
| | | - | | = | | = | + | = |
| | | - | | = | | - | | = |
| | | - | | = | | - | + | = |
| | Add the DSEs | oF SUBSTITUTE-BASIS of each station. Im here and in line 3 of pa | | edule, | | 0.00 | | |
| 5 | | ER OF DSEs: Give the am s applicable to your system | | boxes in parts 2, 3, and | 4 of this schedule | e and add them to provide t | the total | |
| Total Number | 1. Number | of DSEs from part 2 ● | | | | > | 16.75 | |
| of DSEs | 2. Number | of DSEs from part 3 ● | | | | - | 0.00 | |
| | 3. Number | of DSEs from part 4 ● | | | | - | 0.00 | |
| | TOTAL NUMBE | ER OF DSEs | | | | | | 16.75 |

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

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2022/2

| LEGAL NAME OF O | | SYSTEM: | | | | | S | YSTEM ID# 023031 | Name |
|--|---|--|---|--|---|--|--|---------------------|--|
| Instructions: Bloc In block A: • If your answer if ' schedule. | · | | irt 6 and part 7 | of the DSE schedu | ıle blank and | complete part 8 | 3, (page 16) of the | | 6 |
| If your answer if ' | 'No," complete blo | cks B and C b | | TELEVISION MA | ADKETS | | | | Computation of |
| | 1981? | schedule—D0 | ajor and smalle | | ed under sect | | C rules and regula | tions in | 3.75 Fee |
| | | PI O | | | AITTED DO | | | | - |
| Column 1: CALL SIGN Column 2: BASIS OF PERMITTED CARRIAGE | FCC rules and reinstructions for the Satellite Television. Enter the appropion (Note the FCC rule) A Stations carried 76.61(b)(c)] B Specialty static C Noncommeric D Grandfathered instructions for E Carried pursual *F A station preinstruction | of distant stangulations price DSE Schedon Extension ariate letter indiles and reguled pursuant to as defined all educational station (76.6 or DSE schedulant to individuations) restation with the station with the distance of the station with the station with the station with the distance of the station with the | titions listed in port to June 25, 1 dule. (Note: The and Localism A icating the bas ations cited belothe FCC markin 76.5(kk) (76) I station [76.59 5) (see paragralle). al waiver of FCd on a part-time thin grade-B cort to the cort to the cort is | is on which you car ow pertain to those ket quota rules [76. .59(d)(1), 76.61(e) (c), 76.61(d), 76.63 aph regarding subs C rules (76.7) e or substitute basis ontour, [76.59(d)(5) | rried a permitte in effect on 557, 76.59(b), (1), 76.63(a) referring to stitution of grass prior to Junes | hat your systen ermitted station mpt multicast sied station. lune 24, 1981.) 76.61(b)(c), 76 referring to 76.6 o 76.61(d)] ndfathered stat | ns, see the tream as set forth .63(a) referring to 61(e)(1) tions in the | in the | |
| Column 3: | | e stations ider | ntified by the le | parts 2, 3, and 4 of tter "F" in column 2 | | | ksheet on page 14 | 4 of | |
| 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | |
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| | | E | BLOCK C: CC | MPUTATION OF | 3.75 FEE | | | | - |
| Line 1: Enter the | | | | | | | | | |
| Line 2: Enter the | sum of permitte | d DSEs from | n block B abo | ve | | | | | |
| Line 3: Subtract (If zero, l | | | | of DSEs subject 7 of this schedule | | ate. | | | |
| Line 4: Enter gro | ss receipts from | space K (pa | ige 7) | | | | x 0.03 | 375 | Do any of the DSEs represent partially |
| Line 5: Multiply li | ne 4 by 0.0375 a | and enter su | m here | | | | x | | permited/ partially nonpermitted |
| Line 6: Enter tota | al number of DSE | Es from line | 3 | | | | | | carriage? If yes, see part 9 instructions. |
| Line 7: Multiply li | ne 6 by line 5 an | d enter here | e and on line 2 | 2, block 3, space | L (page 7) | | | 0.00 | |

| BLE ONE, | OWNER OF CABLE S | | | | | | | O23031 | Name |
|-----------------|-----------------------|----------|-----------------|-----------------------|------------|-----------------|-----------------------|--------|----------------------|
| | | BLOCK | A: TELEVI | SION MARKETS | S (CONTINI | UED) | | | _ |
| 1. CALL SIGN | 2. PERMITTED BASIS | | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 6 |
| | | | | | | | | | Computation 3.75 Fee |
| | | | | | | | | | 3.731 66 |
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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 023031 Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. the DSE Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Schedule for Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). Carriage B-Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B. column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 6. PERMITTED 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT SIGN DSE **PERIOD CARRIAGE** DSE DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. of the If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. **Syndicated BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? No—Proceed to part 8 X Yes—Complete blocks B and C. BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159) or in part, over the cable system? Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE 0.00 0.00 **TOTAL DSEs** TOTAL DSEs

| LEGAL NA | ME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023031 | Name |
|---------------|--|---------------------------|
| | BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE | |
| Section 1 | Enter the amount of gross receipts from space K (page 7) | 7 |
| Section 2 | A. Enter the total DSEs from block B of part 7 | Computation of the |
| | B. Enter the total number of exempt DSEs from block C of part 7 | 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 | Surcharge |
| • Is an | y portion of the cable system within a top 50 television market as defined by the FCC? 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? No—Complete the applicable section below. | |
| | If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below. | |
| | A. Enter 0.00599 of gross receipts (the amount in section1) | |
| | B. Enter 0.00377 of gross receipts (the amount in section 1.) | |
| | C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here | |
| | D. Multiply line B by line C and enter here | |
| | E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge | |
| Section 3b | If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank. | |
| | A. Enter 0.00599 of gross receipts (the amount in section 1) | |
| | B. Enter 0.00377 of gross receipts (the amount in section 1) | |
| | C. Multiply line B by 3.000 and enter here | |
| | D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ _ | |
| | E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here | |
| | F. Multiply line D by line E and enter here | |
| | G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge | |
| | SECTION 4: SECOND 50 TELEVISION MARKET | |
| | Did your cable system retransmit the signals of any partially distant television stations during the accounting period? | |
| Section 4a | X Yes—Complete part 9 of this schedule. No—Complete the applicable section below. | |
| | If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1) | |
| | B. Enter 0.00189 of gross receipts (the amount in section 1) | |
| | C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here | |
| | D. Multiply line B by line C and enter here | |
| | E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge | |

| Name | | ie of owner of cable system: CABLE ONE, INC. | 023031 |
|---|--|--|-----------|
| 7 | Section | | |
| 7 | 4b | If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. | |
| Computation of the | | A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$ | |
| Syndicated Exclusivity | | B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$ | |
| Surcharge | | C. Multiply line B by 3.000 and enter here | |
| | | D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ _\$ | |
| | | E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here | |
| | | F. Multiply line D by line E and enter here | |
| | | G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7) | |
| | | Syndicated Exclusivity Surcharge | <u></u> . |
| 8 Computation of Base Rate Fee | 6 was control of the second of | ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. r answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belo | w |
| | | BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS | |
| | • Did vo | our cable system retransmit the signals of any partially distant television stations during the accounting period? | |
| | _ | Yes—Complete part 9 of this schedule. No—Complete the following sections. | |
| | | BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE | |
| | Section 1 | Enter the amount of gross receipts from space K (page 7) | |
| | Section 2 | Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.). | |
| | Section 3 | If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. | |
| | | A. Enter 0.01064 of gross receipts (the amount in section 1) | |
| | | B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ | |
| | | C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here | |
| | | D. Multiply line B by line C and enter here | |
| | | E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) | |
| | | Base Rate Fee | 0.00 |

| DSE SCH | IEDL | ILE. PAGE 17. | | | | ACCOUNTING | G PERIOD: 2022/2 |
|------------------|-------|---|---------------|---|-----------------------|------------------|---------------------|
| LEGAL N | AME | OF OWNER OF CABLE SYSTEM: | | | | SYSTEM ID# | Nama |
| CABL | E | ONE, INC. | | | | 023031 | Name |
| Section | If th | e figure in section 2 is more than 4.000, compute your base | rate fee here | and leave section 3 blank. | | | |
| 4 | ١. | E | | | | | 8 |
| | Α. | Enter 0.01064 of gross receipts | | ▶\$ | | | • |
| | | (the amount in section 1) | | ν | | | |
| | В. | Enter 0.00701 of gross receipts | | | | | Computation |
| | | (the amount in section 1) | <u> </u> | | <u>—</u> | | of |
| | C. | Multiply line B by 3.000 and enter here | | ▶\$ | | _ | Base Rate Fee |
| | D. | Enter 0.00330 of gross receipts | | | | | |
| | | (the amount in section 1) | ▶ \$ | | <u></u> | | |
| | E. | Subtract 4.000 from total DSEs | | | | | |
| | | (the figure in section 2) and enter here | > | | <u></u> | | |
| | 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 | | • | œ. | 0.00 | |
| | | Dase Nate Fee | | | Ψ | 0.00 | |
| IMPOR | RTA | NT: It is no longer necessary to report television signals | s on a syste | m-wide basis. Carriage | of television broadca | st signals shall | |
| instead Space | | reported on a community-by-community basis (subscri | ber groups) | if the cable system repo | orted multiple channe | el line-ups in | 9 |
| | | : If any of the stations you carried were partially distant | | | 0, | • | Computation |
| | | m subscribers located within the station's local service ou must: | area, irom | your system's total gross | s receipis. To take a | dvantage of this | of Base Rate Fee |
| | | | · | ation of the control | 414 | 41 | and |
| | | e all of your subscribers into subscriber groups, each one same group of stations. Next: Treat each subscribe | | | | | Syndicated |
| | | the portion of your system's gross receipts attributable | 0 1 | • | , | | Exclusivity |

Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.

NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, if your cable system is wholly located outside all major television markets, complete block A only.

How to Identify a Subscriber Group for Partially Distant Stations

Step 1: For each community served, determine the local service area of each wholly distant and each partially distant station you carried to that community.

Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by 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 which they are distant. Each subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable system will have only one subscriber group when the distant stations it carried have local service areas that coincide.

Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber groups.

In each section:

- Identify the communities/areas represented by each subscriber group.
- Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the subscribers in the group.
- If
- 1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, and 4 of this schedule; or.
- 2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, part 6 of this schedule.
- $\bullet \ \, \text{Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group. } \\$
- Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions in the paper SA3 form.
- Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your actual calculations on the form.

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations, and
for Partially
Permitted
Stations

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 023031 CABLE ONE, INC. Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | | SYSTEM ID# 023031 | Name |
|-------------------------|----------------|-------------------|-------------|----------------------|------------|--------------|----------------------|-------------------------|
| E | BLOCK A: | COMPUTATION OF | BASE RA | TE FEES FOR EA | CH SUBSCRI | BER GROUP | | |
| | FIRST | SUBSCRIBER GROU | Р | | SECOND | SUBSCRIBER G | ROUP | • |
| COMMUNITY/ AREA | Ponca | City, Kay County, | Tonkav | COMMUNITY/ ARE | EA Osage (| County | | 9 Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | | | | KAUT | 1.00 | KOCB-3 | 1.00 | Base Rate Fee |
| | | | | KFOR | 0.25 | KFOR-4 | 1.00 | and |
| | | | | КОСВ | 1.00 | KFOR-2 | 1.00 | Syndicated |
| | | | | косо | 0.25 | KAUT-2 | 1.00 | Exclusivity |
| | | | | КОКН | 1.00 | KTUZ | 1.00 | Surcharge |
| | | | | KOPX | 1.00 | | | for |
| | | | | KSBI | 1.00 | | | Partially |
| | | | | KWTV | 0.25 | | | Distant |
| | | | | КТВО | 1.00 | | | Stations |
| | | | | KOCO-2 | ····· | | | |
| | | | | | | | | |
| | | | | KOKH-3 | 1.00 | | | |
| | | | | | ••••• | | | |
| | | | | KFOR-3 | ••••• | | | |
| | | | | KOCB-2 | 1.00 | | | |
| Total DSEs | • | | 0.00 | Total DSEs | 1 | | 16.75 | |
| Gross Receipts First Gr | oup | \$ 499 | 671.93 | Gross Receipts Se | cond Group | \$ | 43,790.09 | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Se | cond Group | \$ | 3,229.30 | |
| | THIRD | SUBSCRIBER GROU | P | | FOURTH | SUBSCRIBER G | ROUP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ ARE | ĒA | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | <u> </u> | | 0.00 | |
| Gross Receipts Third G | iroup | \$ | 0.00 | Gross Receipts Fo | urth Group | \$ | 0.00 | |
| Gross Necelpts Tillia G | поир | Ψ | 0.00 | Gloss Necelpls 1 o | инн Отоир | 4 | 0.00 | |
| Base Rate Fee Third G | iroup | \$ | 0.00 | Base Rate Fee For | urth Group | \$ | 0.00 | |
| Base Rate Fee: Add th | | | ber group a | s shown in the boxes | s above. | | 2 222 22 | |
| Enter here and in block | ರ, iine 1, s | pace L (page /) | | | | \$ | 3,229.30 | |

| CABLE ONE, INC. | R OF CABLI | E SYSTEM: | | | | SY | 023031 | Name |
|--|---|-----------------|------------------|--------------------------|---------|--|--------|---------------------|
| Bl | OCK A: | COMPUTATION OF | BASE RA | TE FEES FOR EACH | SUBSCRI | IBER GROUP | | |
| | FIFTH | SUBSCRIBER GROU | P | | SIXTH | SUBSCRIBER GROUP | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | 9 Computation |
| CALL SICN | Dee | CALL SICN | DOE | CALL SICN | Dec | CALL SICN | Dec | of |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | or Base Rate Fee |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gro | oup | \$ | 0.00 | Gross Receipts Second | d Group | \$ | 0.00 | |
| | | | | | | | 1 | |
| Base Rate Fee First Gro | | | | | | | | |
| S | Receipts First Group \$ 0.00 Gross Receipts Second Gr ate Fee First Group \$ 0.00 Base Rate Fee Second Gr SEVENTH SUBSCRIBER GROUP E UNITY/ AREA 0 COMMUNITY/ AREA | EIGHTH | SUBSCRIBER GROUP | | | | | |
| Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 | 0 | COMMUNITY/ AREA | | | 0 | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| | BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Syntax Subscriber Group Total DSEs O.00 Gross Receipts Second Group \$ 0.00 Gross Receipts Second Group \$ 0.00 SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O | | | | | | | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third Gr | oup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| Base Rate Fee Third Gr | oup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| | | | | Ш | | | | |
| Base Rate Fee: Add the | | | ber group a | as shown in the boxes ab | ove. | • | | |
| Enter here and in block 3 | 5, IINE 1, S | pace L (page /) | | | | \$ | | |

| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | SY | 023031 | Name |
|---------------------------|-------------------------|-----------------|---|--------------------------|---------|------------------|----------|----------|
| Bl | OCK A: | COMPUTATION OF | BASE RA | TE FEES FOR EACH | SUBSCRI | BER GROUP | | |
| | NINTH | SUBSCRIBER GROU | Р | | TENTH | SUBSCRIBER GROUP | | _ |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Base Rate Fee First Gro | oup | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
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| | | | ### PUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SCRIBER GROUP | | | | | |
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| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | S | YSTEM ID# 023031 | Name |
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| В | LOCK A: | COMPUTATION OF | BASE RA | ATE FEES FOR EACH | SUBSCR | IBER GROUP | | |
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| COMMUNITY/ AREA | Receipts First Group \$ 0.00 Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FIFTEENTH SUBSCRIBER GROUP MUNITY/ AREA 0 COMMUNITY/ AREA 0 | | | | | | | |
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| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | S | YSTEM ID# 023031 | Name |
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| E | BLOCK A: | COMPUTATION OF | BASE RA | ATE FEES FOR EACH | SUBSCR | IBER GROUP | | |
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| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | S | (STEM ID# 023031 | Name |
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| В | LOCK A: | COMPUTATION OF | BASE RA | ATE FEES FOR EACH | SUBSCR | IBER GROUP | | |
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| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | S | YSTEM ID# 023031 | Name |
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| Е | BLOCK A: | COMPUTATION OF | BASE RA | ATE FEES FOR EACH | SUBSCR | IBER GROUP | | |
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| 0 | 0.00 JP 0 | \$ SUBSCRIBER GROU | d Group Y-FOURTH | Base Rate Fee Secon FORT COMMUNITY/ AREA | 0.00 JP | SUBSCRIBER GROU | oup | FORTOMMUNITY/ AREA |
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| 0 | DSE | \$ SUBSCRIBER GROU | d Group Y-FOURTH DSE | Base Rate Fee Secon FORT COMMUNITY/ AREA CALL SIGN | 0.00 JP O DSE | SUBSCRIBER GROU | DSE DSE | FORTOMMUNITY/ AREA CALL SIGN Total DSEs |
| 0 | 0.00 DSE 0.00 | SUBSCRIBER GROU | d Group Y-FOURTH DSE | FORT COMMUNITY/ AREA CALL SIGN Total DSEs | 0.00 JP 0 DSE | SUBSCRIBER GROU | DSE DSE | COMMUNITY/ AREA |
| O | 0.00 DSE 0.00 | SUBSCRIBER GROU | d Group Y-FOURTH DSE | FORT COMMUNITY/ AREA CALL SIGN Total DSEs | 0.00 JP 0 DSE | SUBSCRIBER GROU | DSE DSE | CALL SIGN CALL SIGN Total DSEs |

| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | S | YSTEM ID# 023031 | Name |
|--|-----------|-----------------|------------|--------------------------|---------------|-----------------|---------------------|-------------------------|
| В | LOCK A: | COMPUTATION OF | BASE RA | ATE FEES FOR EACH | SUBSCR | IBER GROUP | | |
| FOR | TY-FIFTH | SUBSCRIBER GROU | IP | FOI | RTY-SIXTH | SUBSCRIBER GROU | Р | 0 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | 9 Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| 0.122.3.0.1 | | 3.1223.0 | | | | | | Base Rate Fee |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Secon | d Group | \$ | 0.00 | |
| | | | | | | | | |
| Base Rate Fee First Gro | oup | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
| FORTY-S | SEVENTH | SUBSCRIBER GROU | IP | FOR1 | ΓY-EIGHTH | SUBSCRIBER GROU | Р | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | • | 11 | 0.00 | |
| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| | • | | | | • | | | |
| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
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| Base Rate Fee: Add the Enter here and in block | | | iber group | as shown in the boxes ab | oove. | \$ | | |

| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | S | YSTEM ID# 023031 | Name |
|--|-----------|-----------------|------------|--------------------------|---------------|---|---------------------|--------------------------|
| В | LOCK A: | COMPUTATION OF | BASE RA | ATE FEES FOR EACH | SUBSCR | IBER GROUP | | |
| | TY-NINTH | SUBSCRIBER GROU | | | FIFTIETH | SUBSCRIBER GROU | | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Secon | d Group | \$ | 0.00 | |
| | | | | | | | | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
| FIF | TY-FIRST | SUBSCRIBER GROU | IP | FIFT | Y-SECOND | SUBSCRIBER GROU | Р | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
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| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| | | | | | | | | |
| Base Rate Fee: Add the Enter here and in block | | | iber group | as shown in the boxes ab | oove. | \$ | | |

| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | s | YSTEM ID# 023031 | Name |
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| | | | | ATE FEES FOR EACH | SUBSCR | IBER GROUP | | |
| | TY-THIRD | SUBSCRIBER GROU | | FIFT | Y-FOURTH | SUBSCRIBER GROU | Р | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First G | roup | \$ | 0.00 | Gross Receipts Secor | nd Group | \$ | 0.00 | |
| Base Rate Fee First G | roup | \$ | 0.00 | Base Rate Fee Secon | nd Group | \$ | 0.00 | |
| FIF | TY-FIFTH | SUBSCRIBER GROU | JP | F | IFTY-SIXTH | SUBSCRIBER GROU | Р | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third G | Group | \$ | 0.00 | Gross Receipts Fourth | n Group | \$ | 0.00 | |
| Base Rate Fee Third G | Group | \$ | 0.00 | Base Rate Fee Fourth | n Group | \$ | 0.00 | |
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| Raco Rato Foo: Add th | a haen rot | a foos for each cubes | iher group | as shown in the boxes a | hove | | | |
| Enter here and in block | | | inei Aioah | as shown in the boxes a | DUVE. | \$ | | |

| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | S | 023031 | Name |
|--|-----------|-----------------|------------|--|---------------|-------------------|--------|-------------------------|
| E | BLOCK A: | COMPUTATION OF | BASE RA | ATE FEES FOR EACH | SUBSCR | IBER GROUP | | |
| | | SUBSCRIBER GROU | | TI CONTRACTOR OF THE CONTRACTO | | I SUBSCRIBER GROU | IP | _ |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | 9 Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| 0.122.2.0.7 | | | | | | 0.122.1.0.1 | | Base Rate Fee |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First G | roup | \$ | 0.00 | Gross Receipts Secon | d Group | \$ | 0.00 | |
| Base Rate Fee First G | roup | \$ | 0.00 | Base Rate Fee Secon | d Group | \$ | 0.00 | |
| FIF | TY-NINTH | SUBSCRIBER GROU | JP | | SIXTIETH | I SUBSCRIBER GROU | IP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Gross Receipts Third G | Group | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| Base Rate Fee Third G | Group | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| Base Rate Fee: Add th Enter here and in block | | | iber group | as shown in the boxes al | bove. | \$ | | |

| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | S | YSTEM ID# 023031 | Name |
|--|-----------|-----------------|------------|--------------------------|---------------|-----------------|---------------------|-------------------------|
| В | LOCK A: | COMPUTATION OF | BASE RA | ATE FEES FOR EACH | SUBSCR | IBER GROUP | | |
| SIX | TY-FIRST | SUBSCRIBER GROU | IP | SIXT | Y-SECOND | SUBSCRIBER GROU | Р | 0 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | 9 Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| 07.22 0.011 | 202 | 57 ILL 51511 | 302 | 07.122.010.1 | | 07.122 070.1 | 332 | Base Rate Fee |
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| Total DSEs | | | 0.00 | Total DSEs | | 11 | 0.00 | |
| | oup. | ¢ | 0.00 | | d Croup | <u> </u> | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Secon | a Group | \$ | 0.00 | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Secon | d Group | \$ | 0.00 | |
| SIX | TY-THIRD | SUBSCRIBER GROU | IP | SIXT | Y-FOURTH | SUBSCRIBER GROU | Р | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023031 | | | | | | | | Name |
|---|--------------|-----------------|-------------|--|-----------|------------------|----------|----------------------|
| В | LOCK A: | COMPUTATION OF | BASE RA | TE FEES FOR EACH | SUBSCRI | BER GROUP | | |
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| LEGAL NAME OF OWNER CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | S | 923031 | Name |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023031 | | | | | | | | Name |
|---|-----------------|-----------------|---|-------------------------|----------|-----------------|------|--------------------------|
| | BLOCK A: | COMPUTATION O | BASE RA | ATE FEES FOR EACH | H SUBSCR | IBER GROUP | | |
| | | SUBSCRIBER GRO | | Ti . | | SUBSCRIBER GROU | | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | | | | | | | | Base Rate Fee |
| | | | | | | | | and |
| | | | | | | | | Syndicated |
| | | | | | | | | Exclusivity Surcharge |
| | | | | | | | | for |
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| Tatal DOEs | | | 0.00 | T-t-I DOE- | | | 0.00 | |
| Total DSEs | _ | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First (| Group | \$ | 0.00 | Gross Receipts Secon | nd Group | \$ | 0.00 | |
| Base Rate Fee First (| Group | \$ | 0.00 | Base Rate Fee Secon | nd Group | \$ | 0.00 | |
| EIGHTY | /-SEVENTH | SUBSCRIBER GRO | JP | EIGH | TY-EIGHT | SUBSCRIBER GROU | JP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third | Group | \$ | 0.00 | Gross Receipts Fourtl | h Group | \$ | 0.00 | |
| Base Rate Fee Third | Group | \$ | 0.00 | Base Rate Fee Fourth | n Group | \$ | 0.00 | |
| Base Rate Fee: Add to Enter here and in blood | | | riber group | as shown in the boxes a | ibove. | \$ | | |
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| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | S | YSTEM ID# 023031 | Name |
|--|-----------|-----------------|------------|--------------------------|---------------|-----------------|---------------------|-------------------------|
| В | BLOCK A: | COMPUTATION OF | BASE RA | ATE FEES FOR EACH | SUBSCR | IBER GROUP | | |
| EIGH | TY-NINTH | SUBSCRIBER GROU | JP | | NINTIETH | SUBSCRIBER GROU | Р | 0 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | 9 Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| 0.122.2.0.1 | | | | | | | | Base Rate Fee |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Secon | d Group | \$ | 0.00 | |
| | | | | | | | | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
| NINE | TY-FIRST | SUBSCRIBER GROU | JP | NINET | Y-SECOND | SUBSCRIBER GROU | Р | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Total DSEs | | | 0.00 | Total DSEs | · | | 0.00 | |
| Gross Receipts Third G | iroup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| · | | | | | • | | | |
| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| | | | | | | | | |
| Base Rate Fee: Add the Enter here and in block | | | iber group | as shown in the boxes ab | oove. | \$ | | |

| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | S | YSTEM ID# 023031 | Name |
|--|-----------|-----------------|------------|--------------------------|---------------|-------------------|---------------------|-------------------------|
| В | LOCK A: | COMPUTATION OF | BASE RA | ATE FEES FOR EACH | SUBSCR | IBER GROUP | | |
| NINE | TY-THIRD | SUBSCRIBER GROU | IP | NINET | Y-FOURTH | I SUBSCRIBER GROU | Р | 0 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | 9 Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | | | | | | | | Base Rate Fee |
| | | | | | | | | and |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Second | d Group | \$ | 0.00 | |
| | | | | | | | | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
| NINE | TY-FIFTH | SUBSCRIBER GROU | IP | NINI | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| 30 | 1 | · | | | - =: = | | | |
| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| | | | | ** | | | | |
| Base Rate Fee: Add the Enter here and in block | | | iber group | as shown in the boxes ab | oove. | \$ | | |

| LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023031 | | | | | | | | |
|---|----------|-----------------|------------|-------------------------------------|---------------|-----------------|------|------------------|
| В | LOCK A: | COMPUTATION OF | BASE RA | ATE FEES FOR EACH | SUBSCR | IBER GROUP | | |
| | SEVENTH | SUBSCRIBER GROU | | 11 | ΓΥ-EIGHTH | SUBSCRIBER GROU | | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | | | | | | | | Base Rate Fee |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Second Group \$ 0.00 | | | | |
| | | | | | | | | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Secon | d Group | \$ | 0.00 | |
| NINE | TY-NINTH | SUBSCRIBER GROU | JP | ONE HU | INDREDTH | SUBSCRIBER GROU | Р | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| B B. (F11.15 | | | | D B (F = :: | 0 | | | |
| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
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| Base Rate Fee: Add the Enter here and in block | | | iber group | as shown in the boxes al | oove. | \$ | | |

| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | S | O23031 | Name |
|-------------------------|-----------|-----------------------------------|------------|--------------------------|--|-------------------------------|--------|--------------------------|
| | | COMPUTATION OF SUBSCRIBER GROU | IP | 11 | | BER GROUP SUBSCRIBER GROUP | · | 0 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | 9 Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | | | | | | | | Base Rate Fee and |
| | | - | | | | | | Syndicated |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | | Total DSEs 0.00 Gross Receipts Second Group \$ 0.00 | | | |
| | · | | | | · | | | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
| | ED THIRD | SUBSCRIBER GROU | 1P 0 | 1 | D FOURTH | SUBSCRIBER GROUP | 0 | |
| COMMUNITY/ AREA | | | <u> </u> | COMMUNITY/ AREA | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | I | 0.00 | Total DSEs | 1 | | 0.00 | |
| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
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| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| Deep Date Est. Add. | - ha | for formal | | | | | | |
| Enter here and in block | | | ivei group | as shown in the boxes ab | ouve. | \$ | | |

| LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023031 | | | | | | | | Name |
|---|----------|-----------------|-----------|--------------------------|-----------|------------------|-------------|---------------------|
| | | | | ATE FEES FOR EACH | | | | |
| | ED FIFTH | SUBSCRIBER GROU | P 0 | 11 | RED SIXTH | SUBSCRIBER GROUP | | 9 |
| COMMUNITY/ AREA | | | U | COMMUNITY/ AREA | | | 0 | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| | oun | • | 0.00 | | | | | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Second | и Стоир | \$ | 0.00 | |
| Base Rate Fee First Gro | oup | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
| ONE HUNDRED S | SEVENTH | SUBSCRIBER GROU | Р | ONE HUNDRE | D EIGHTH | SUBSCRIBER GROUP |) | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
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| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
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| Base Rate Fee: Add the Enter here and in block | | | ber group | as shown in the boxes ab | oove. | \$ | | |

| LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023031 | | | | | | | | Name |
|---|----------|-----------------------------------|------------|---|---------------|-------------------------------|------------|----------------------|
| | | COMPUTATION OF SUBSCRIBER GROU | | ATE FEES FOR EACH ONE HUNDR COMMUNITY/ AREA | | IBER GROUP SUBSCRIBER GROU | P 0 | 9 |
| COMMONT IT AREA | | | | COMMONT IT AREA | | | | Computation |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Second | d Group | \$ | 0.00 | |
| | - up | | | | а О.оцр | | | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
| ONE HUNDRED E | EVENTH | SUBSCRIBER GROU | IP | ONE HUNDRED | TWELVTH | SUBSCRIBER GROU | Р | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
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| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
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| Base Rate Fee: Add the Enter here and in block | | | iber group | as shown in the boxes ab | oove. | \$ | | |

| CABLE ONE, INC. | | E SYSTEM: | | | | S | YSTEM ID# 023031 | Name |
|-------------------------|-------------|--------------------------------|------------|--------------------------|-------------|--|---------------------|---------------------|
| | | COMPUTATION OF SUBSCRIBER GROU | | ATE FEES FOR EACH | | IBER GROUP SUBSCRIBER GROU | P 0 | 9 |
| | | | | | | | | Computation |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First G | roup | \$ | 0.00 | Gross Receipts Secon | d Group | \$ | 0.00 | |
| Base Rate Fee First G | roup | \$ | 0.00 | Base Rate Fee Secon | d Group | \$ | 0.00 | |
| ONE HUNDRED F | IFTEENTH | SUBSCRIBER GROU | JP | ONE HUNDRED S | SIXTEENTH | SUBSCRIBER GROU | Р | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Gross Receipts Third G | σιυαρ | \$ | 0.00 | Gross Receipts Fourth | Gloup | \$ | 0.00 | |
| Base Rate Fee Third G | Group | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| | | | iber group | as shown in the boxes al | bove. | | | |
| Enter here and in block | | | • | | | \$ | | |

| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | S | YSTEM ID# 023031 | Name |
|--|-----------|-----------------|------------|--------------------------|--|-------------------------------|---------------------|--------------------------|
| ONE HUNDRED SEVEN | | | | ONE HUNDRED EIG | | IBER GROUP SUBSCRIBER GROU | 0 | 9 |
| CALL CICAL | DOE | CALL CION | DOE | CALL CICAL | LDOE | II CALL SICAL | DOE | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of Base Rate Fee |
| | | | | | | | | and |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Second | d Group | \$ | 0.00 | |
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| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
| | NTEENTH | SUBSCRIBER GROU | | ii . | WENTIETH | SUBSCRIBER GROUI | _ | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Total DSEs | | | 0.00 | Total DSEs | 1 | 11 | 0.00 | |
| | rour | • | 0.00 | | Crown | • | 0.00 | |
| Gross Receipts Third G | ιουμ | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
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| Base Rate Fee: Add the Enter here and in block | | | iber group | as shown in the boxes ab | oove. | \$ | | |

| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | S | YSTEM ID# 023031 | Name |
|-------------------------|--------------|------------------------|------------|--------------------------|----------------|------------------|---------------------|-------------------------|
| В | LOCK A: | COMPUTATION OF | BASE RA | ATE FEES FOR EACH | SUBSCR | IBER GROUP | | |
| | | SUBSCRIBER GROU | | ONE HUNDRED TWENT | | | | _ |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | 9 Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| 0.122.2.0.1 | | | | | | | | Base Rate Fee |
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| Total DSEs | | | 0.00 | Total DSEs | • | | 0.00 | |
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| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Secon | u Group | \$ | 0.00 | |
| Base Rate Fee First Gr | | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
| ONE HUNDRED TWEN | NTY-THIRD | SUBSCRIBER GROUP | | ONE HUNDRED TWEN | TY-FOURTH | SUBSCRIBER GROUP | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| Cross receipts mild G | тоир | _* | 0.00 | Closs Receipts Fourth | Эгоир | Ψ | 3.00 | |
| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| Base Rate Fee: Add the | e hase rate | a fees for each subser | iher aroup | as shown in the boxes at | nove | | | |
| Enter here and in block | | | o. group | as shown in the boxes at | | \$ | | |

| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | S | YSTEM ID# 023031 | Name |
|--|-----------|---------------------------------|------------|--------------------------|--|--|---------------------|----------------------|
| | | COMPUTATION OF SUBSCRIBER GROUP | BASE RA | ONE HUNDRED TWI | | IBER GROUP | 0 | 9 |
| OOMMONT IT THE | | | | COMMONT IT THE | | | | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
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| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Secon | d Group | \$ | 0.00 | |
| Cross resolpts riller or | очр | <u> </u> | | Cross rescipto eccon | a Oloup | | | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Secon | d Group | \$ | 0.00 | |
| ONE HUNDRED TWENTY | -SEVENTH | SUBSCRIBER GROUP | | ONE HUNDRED TWEN | ITY-EIGHTH | SUBSCRIBER GROUP | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| | | | | | • | | | |
| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| | | | | ** | | | | |
| Base Rate Fee: Add the Enter here and in block | | | iber group | as shown in the boxes at | oove. | \$ | | |

| LEGAL NAME OF OWNER CABLE ONE, INC. | R OF CABLI | E SYSTEM: | | | | S | 023031 | Name |
|--|------------|------------------|--------------|--------------------------|--|------------------|--------|----------------------|
| В | LOCK A: | COMPUTATION OF | BASE RA | TE FEES FOR EACH | SUBSCR | BER GROUP | | |
| ONE HUNDRED TWEN | NTY-NINTH | SUBSCRIBER GROUP | | ONE HUNDRED | THIRTIETH | SUBSCRIBER GROUP | | • |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | 9 Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | | | | | | | | Base Rate Fee |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Secon | d Group | \$ | 0.00 | |
| | | | | | | | | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Secon | d Group | \$ | 0.00 | |
| ONE HUNDRED THIS | RTY-FIRST | SUBSCRIBER GROUP | | ONE HUNDRED THIR | TY-SECOND | SUBSCRIBER GROUP | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | <u></u> | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| , :3 | | | | | • | | | |
| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
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| Base Rate Fee: Add the Enter here and in block | | | iber group a | as shown in the boxes at | oove. | \$ | | |

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| | | SUBSCRIBER GROUP | | ONE HUNDRED THIS | | | | ONE HUNDRED THIF |
| 9 | 0 DSE | | | COMMUNITY/ AREA | 0 | | | COMMUNITY/ AREA |
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| of Base Rate | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN |
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| | _ | \$ | nd Group | Gross Receipts Seco | 0.00 | \$ | oup | iross Receipts First Gr |
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| | 0.00 | \$ | nd Group | Gross Receipts Secon | 0.00 | \$ | oup | Base Rate Fee First Gr |
| | 0.00 | \$ | nd Group | Gross Receipts Secondary Base Rate Fee Secondary ONE HUNDRED T | 0.00 0.00 | \$ | oup | ASE RATE FEE FIRST GROWN ONE HUNDRED THI |
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| | 0.00 | \$ SUBSCRIBER GROUP | nd Group | Gross Receipts Second Base Rate Fee Second ONE HUNDRED T COMMUNITY/ AREA | 0.00 0.00 | \$ SUBSCRIBER GROU | oup RTY-FIFTH | ONE HUNDRED THI |
| | 0.00 | \$ SUBSCRIBER GROUP | nd Group | Gross Receipts Second Base Rate Fee Second ONE HUNDRED T COMMUNITY/ AREA | 0.00 0.00 | \$ SUBSCRIBER GROU | oup RTY-FIFTH | ase Rate Fee First Gr ONE HUNDRED THI OMMUNITY/ AREA |
| | 0.00 | \$ SUBSCRIBER GROUP | nd Group | Gross Receipts Second Base Rate Fee Second ONE HUNDRED T COMMUNITY/ AREA | 0.00 0.00 | \$ SUBSCRIBER GROU | oup RTY-FIFTH | ASE RATE FEE FIRST GROWN ONE HUNDRED THI |
| | 0.00 | \$ SUBSCRIBER GROUP | nd Group | Gross Receipts Second Base Rate Fee Second ONE HUNDRED T COMMUNITY/ AREA | 0.00 0.00 | \$ SUBSCRIBER GROU | oup RTY-FIFTH | ONE HUNDRED THI |
| | 0.00 | \$ SUBSCRIBER GROUP | nd Group | Gross Receipts Second Base Rate Fee Second ONE HUNDRED T COMMUNITY/ AREA | 0.00 0.00 | \$ SUBSCRIBER GROU | oup RTY-FIFTH | ONE HUNDRED THIS |
| | 0.00 | \$ SUBSCRIBER GROUP | nd Group | Gross Receipts Second Base Rate Fee Second ONE HUNDRED T COMMUNITY/ AREA | 0.00 0.00 | \$ SUBSCRIBER GROU | oup RTY-FIFTH | ONE HUNDRED THIS COMMUNITY/ AREA |
| | 0.00 | \$ SUBSCRIBER GROUP | nd Group | Gross Receipts Second Base Rate Fee Second ONE HUNDRED T COMMUNITY/ AREA | 0.00 0.00 | \$ SUBSCRIBER GROU | oup RTY-FIFTH | ONE HUNDRED THI |
| | 0.00 0.00 DSE | \$ SUBSCRIBER GROUP | nd Group | Gross Receipts Second Base Rate Fee Second ONE HUNDRED TO COMMUNITY AREA | 0.00 0.00 DSE | \$ SUBSCRIBER GROU | oup RTY-FIFTH | ONE HUNDRED THI COMMUNITY/ AREA CALL SIGN |
| | 0.00 0.00 DSE | \$ SUBSCRIBER GROUP | HIRTY-SIXTH DSE | Gross Receipts Second Base Rate Fee Second ONE HUNDRED TO COMMUNITY AREA | 0.00 0.00 DSE 0.00 | \$ SUBSCRIBER GROU | OUP RTY-FIFTH DSE | ONE HUNDRED THIS COMMUNITY/ AREA CALL SIGN |
| | 0.00 0.00 DSE | \$ SUBSCRIBER GROUP | HIRTY-SIXTH DSE | Gross Receipts Second Base Rate Fee Second ONE HUNDRED TO COMMUNITY AREA | 0.00 0.00 DSE | \$ SUBSCRIBER GROU | OUP RTY-FIFTH DSE | ONE HUNDRED THIS COMMUNITY/ AREA CALL SIGN |
| | 0.00 0.00 DSE | SUBSCRIBER GROUP CALL SIGN | HIRTY-SIXTH DSE | Gross Receipts Second Base Rate Fee Second ONE HUNDRED TO COMMUNITY AREA | 0.00 0.00 DSE 0.00 | SUBSCRIBER GROU | OUP RTY-FIFTH DSE | ONE HUNDRED THIS COMMUNITY/ AREA |

| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | s | YSTEM ID# 023031 | Name |
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| B ONE HUNDRED THIRTY | | | BASE RA | ONE HUNDRED THIS | | IBER GROUP SUBSCRIBER GROUP | 0 | 9 |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Secon | d Group | \$ | 0.00 | |
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| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
| ONE HUNDRED THIF | RTY-NINTH | SUBSCRIBER GROUP | | ONE HUNDRED | FORTIETH | SUBSCRIBER GROU | Р | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
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| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
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| Base Rate Fee: Add the Enter here and in block | | | iber group | as shown in the boxes ab | oove. | \$ | | |

| CABLE ONE, INC. | | E SYSTEM: | | | | S | YSTEM ID# 023031 | Name |
|--|-------------|---------------------------------|------------|--------------------------------|---------------|-----------------------------|---------------------|-------------------|
| ONE HUNDRED FO | | COMPUTATION OF SUBSCRIBER GROUP | | 1 | | IBER GROUP SUBSCRIBER GROUP | | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | Computation |
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| Gross Receipts First G | roup | \$ | 0.00 | Gross Receipts Secon | d Group | \$ | 0.00 | |
| Base Rate Fee First G | roup | \$ | 0.00 | Base Rate Fee Secon | d Group | \$ | 0.00 | |
| | RTY-THIRD | SUBSCRIBER GROUP | | 11 | TY-FOURTH | SUBSCRIBER GROUP | | |
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| Gross Receipts Third G | Group | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| Base Rate Fee Third G | Group | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| Base Rate Fee: Add th Enter here and in block | | | iber group | II as shown in the boxes at | oove. | \$ | | |

| BI OCK | A. COMPLITATION (|)F BASE R/ | ATE FEES FOR EAC | HSUBSCR | IBFR GROUP | | |
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| ONE HUNDRED FORTY-FIR | | | | | SUBSCRIBER GROUP |) | |
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| otal DSEs | | 0.00 | Total DSEs | | | 0.00 | |
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| ross Receipts First Group | \$ | 0.00 | Gross Receipts Seco | nd Group | \$ | 0.00 | |
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| ase Rate Fee First Group | \$ | 0.00 | Base Rate Fee Seco | nd Group | \$ | 0.00 | |
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| ONE HUNDRED FORTY-SEVEN | · | JP | ONE HUNDRED FO | RTY-EIGHTH | \$ SUBSCRIBER GROUP |) | |
| ONE HUNDRED FORTY-SEVEN | · | | | RTY-EIGHTH | - | • | |
| OME HUNDRED FORTY-SEVEN OMMUNITY/ AREA | ITH SUBSCRIBER GROU | JP 0 | ONE HUNDRED FO | PRTY-EIGHTH | 1 SUBSCRIBER GROUP | 0 | |
| OME HUNDRED FORTY-SEVEN OMMUNITY/ AREA | ITH SUBSCRIBER GROU | JP | ONE HUNDRED FO | RTY-EIGHTH | - |) | |
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| OME HUNDRED FORTY-SEVEN OMMUNITY/ AREA | ITH SUBSCRIBER GROU | JP 0 | ONE HUNDRED FO | PRTY-EIGHTH | 1 SUBSCRIBER GROUP | 0 | |
| OME HUNDRED FORTY-SEVEN OMMUNITY/ AREA | ITH SUBSCRIBER GROU | JP 0 | ONE HUNDRED FO | PRTY-EIGHTH | 1 SUBSCRIBER GROUP | 0 | |
| OME HUNDRED FORTY-SEVEN OMMUNITY/ AREA | ITH SUBSCRIBER GROU | JP 0 | ONE HUNDRED FO | PRTY-EIGHTH | 1 SUBSCRIBER GROUP | 0 | |
| OME HUNDRED FORTY-SEVEN OMMUNITY/ AREA | ITH SUBSCRIBER GROU | JP 0 | ONE HUNDRED FO | PRTY-EIGHTH | 1 SUBSCRIBER GROUP | 0 | |
| ONE HUNDRED FORTY-SEVEN OMMUNITY/ AREA | ITH SUBSCRIBER GROU | JP 0 | ONE HUNDRED FO | PRTY-EIGHTH | 1 SUBSCRIBER GROUP | 0 | |
| ONE HUNDRED FORTY-SEVEN | ITH SUBSCRIBER GROU | JP 0 | ONE HUNDRED FO | PRTY-EIGHTH | 1 SUBSCRIBER GROUP | 0 | |
| ONE HUNDRED FORTY-SEVEN OMMUNITY/ AREA | ITH SUBSCRIBER GROU | JP 0 | ONE HUNDRED FO | PRTY-EIGHTH | 1 SUBSCRIBER GROUP | 0 | |
| ONE HUNDRED FORTY-SEVEN | ITH SUBSCRIBER GROU | JP 0 | ONE HUNDRED FO | PRTY-EIGHTH | 1 SUBSCRIBER GROUP | 0 | |
| ONE HUNDRED FORTY-SEVEN | ITH SUBSCRIBER GROU | JP 0 | ONE HUNDRED FO | PRTY-EIGHTH | 1 SUBSCRIBER GROUP | 0 | |
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Nonpermitted 3.75 Stations

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| CABLE ONE, INC | | .E SYSTEM: | | | | • | 023031 | Name |
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| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | • | 023031 | Name |
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| Base Rate Fee: Add th | | e fees for each subs pace L (page 7) | scriber group | as shown in the boxes | above. | \$ | | |

Nonpermitted 3.75 Stations

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| Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. | ate Fee: Add the bar | | <u> </u> |

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| CABLE ONE, INC. | | E SYSTEM: | | | | • | 8YSTEM ID# 023031 | Name |
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| Base Rate Fee First G | roup | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 | |
| ONE HUNDR | ED THIRD | SUBSCRIBER GRO | DUP | ONE HUNDE | RED FOURTH | SUBSCRIBER GRO | UP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ ARE. | Α | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
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| Gross Receipts Third (| Broup | \$ | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 | |
| Base Rate Fee Third (| Group | \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 | |
| | | e fees for each subs | criber group | as shown in the boxes | above. | \$ | | |

| CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | ; | 8YSTEM ID# 023031 | Name |
|--|-----------|---------------------------------|--------------|-----------------------|---------------|------------------|----------------------|------------------|
| ONE HUNDF | | COMPUTATION C SUBSCRIBER GRO | DUP | 1 | IDRED SIXTH | RIBER GROUP | | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ ARE | Α | | 0 | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | | | | | | | | Base Rate Fee |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First G | roup | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | |
| Bara Bata Fara Fired O | | | 0.00 | B B-4- F 0 | | | 2.22 | |
| Base Rate Fee First G | | \$ | 0.00 | Base Rate Fee Sec | | \$ | 0.00 | |
| | SEVENTH | SUBSCRIBER GRO | 0 | 11 | | 1 SUBSCRIBER GRO | <u>0</u> | |
| COMMUNITY/ AREA | | | U | COMMUNITY/ ARE | Α | | <u> </u> | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third G | Group | \$ | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 | |
| | | | | | | | | |
| Base Rate Fee Third G | Group | \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 | |
| | | | | | | | | |
| Base Rate Fee: Add the Enter here and in block | | | criber group | as shown in the boxes | above. | \$ | | |

| GAL NAME OF OWNER OF CABLE SYST ABLE ONE, INC. | ĩΕM: | | | S | 023031 | Name |
|--|---------------------------------------|--|---------------|----------------------|-------------|-----------------|
| | | RATE FEES FOR EACH | | | | |
| ONE HUNDRED NINTH SUBS | | ii ii | RED TENTH | I SUBSCRIBER GROU | | 9 |
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| otal DSEs | 0.00 | Total DSEs | | | 0.00 | |
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| ross Receipts First Group \$ | | - | • | - | | |
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| ross Receipts First Group sase Rate Fee First Group \$ | 0.00 | Base Rate Fee Secon | d Group | \$ | 0.00 | |
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| ase Rate Fee First Group \$ | | ONE HUNDRED | | - | • | |
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| ONE HUNDRED ELEVENTH SUBSOMMUNITY/ AREA | CRIBER GROUP 0 | ONE HUNDRED COMMUNITY/ AREA | TWELVTH | I SUBSCRIBER GROU | JP 0 | |
| ONE HUNDRED ELEVENTH SUBSOMMUNITY/ AREA | CRIBER GROUP 0 | ONE HUNDRED COMMUNITY/ AREA | TWELVTH | I SUBSCRIBER GROU | JP 0 | |
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| BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP | |
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Nonpermitted 3.75 Stations

| CABLE ONE, INC. | | E SYSTEM: | | | | \$ | 023031 | Name |
|--|-----------|-----------------------------------|---------------|-----------------------|-----------|------------------------------|--------|---------------------------|
| | | COMPUTATION O SUBSCRIBER GROUP | | ATE FEES FOR EAC | | IBER GROUP SUBSCRIBER GROUP | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | Α | | 0 | 9 Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of Base Rate Fee |
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| Total DSEs | • | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First G | iroup | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | |
| Base Rate Fee First G | iroup | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 | |
| | NTY-THIRD | SUBSCRIBER GROUP | | II | | I SUBSCRIBER GROUP | _ | |
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| Base Rate Fee Third (| Group | \$ | 0.00 | Base Rate Fee Four | rth Group | \$ | 0.00 | |
| Base Rate Fee: Add the Enter here and in block | | | riber group a | as shown in the boxes | above. | \$ | | |

| CABLE ONE, INC | | E SYSTEM: | | | | \$ | 023031 | Name |
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| ONE HINDRED TW | | COMPUTATION C | | ATE FEES FOR EAC | | IBER GROUP | | |
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| otal DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
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| Base Rate Fee First (| Group | \$ | 0.00 | Base Rate Fee Seco | nd Group | \$ | 0.00 | |
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| | Y-SEVENTH | SUBSCRIBER GROU | | 11 | | I SUBSCRIBER GROUP | | |
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| IGN DSE CALL SIGN DSE Base Rate Ference and Syndicated Exclusivity Surcharge for Partially Distant Stations Es 0.00 ceipts Second Group \$ 0.00 INDRED THIRTY-SECOND SUBSCRIBER GROUP INTY/ AREA 0 IGN DSE CALL SIGN DSE SES 0.000 IGN DSE CALL SIGN DSE IGN DSE CALL SIGN DSE IGN DSE CALL SIGN DSE IGN DSE CALL SIGN DSE IGN DSE CALL SIGN DSE IGN DSE CALL SIGN DSE | CABLE ONE, INC. | R OF CABL | E SYSTEM: | | | | • | 8YSTEM ID# 023031 | Name |
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| CABLE ONE, INC. | | E SYSTEM: | | | | • | 023031 | Name |
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| Base Rate Fee Third G | Group | \$ | 0.00 | Base Rate Fee Four | th Group | \$ | 0.00 | |
| Base Rate Fee: Add the Enter here and in block | | | criber group | as shown in the boxes | above. | \$ | | |

| BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED THIRTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE | Computation of Base Rate Fand Syndicate Exclusivities Surcharge for Partially Distant Stations |
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| | JP 0 | 1 SUBSCRIBER GROU | FTY-SIXTH | ONE HUNDRED F | JP 0 | SUBSCRIBER GROU | TY-FIFTH | ONE HUNDRED FIF | | | |
| | JP 0 | 1 SUBSCRIBER GROU | FTY-SIXTH | ONE HUNDRED F | JP 0 | SUBSCRIBER GROU | TY-FIFTH | ONE HUNDRED FIF | | | |
| | JP 0 | 1 SUBSCRIBER GROU | FTY-SIXTH | ONE HUNDRED F | JP 0 | SUBSCRIBER GROU | TY-FIFTH | ONE HUNDRED FIF OMMUNITY/ AREA | | | |
| | JP 0 | 1 SUBSCRIBER GROU | FTY-SIXTH | ONE HUNDRED F | JP 0 | SUBSCRIBER GROU | TY-FIFTH | ONE HUNDRED FIF OMMUNITY/ AREA | | | |
| | JP 0 | 1 SUBSCRIBER GROU | FTY-SIXTH | ONE HUNDRED F | JP 0 | SUBSCRIBER GROU | TY-FIFTH | ONE HUNDRED FIF | | | |
| | JP 0 | 1 SUBSCRIBER GROU | FTY-SIXTH | ONE HUNDRED F | JP 0 | SUBSCRIBER GROU | TY-FIFTH | ONE HUNDRED FIF | | | |
| | JP 0 | 1 SUBSCRIBER GROU | FTY-SIXTH | ONE HUNDRED F COMMUNITY/ AREA CALL SIGN | JP 0 DSE | SUBSCRIBER GROU | TY-FIFTH | ONE HUNDRED FIF OMMUNITY/ AREA CALL SIGN | | | |
| | DSE DSE O.00 | CALL SIGN | DSE DSE | ONE HUNDRED F COMMUNITY/ AREA CALL SIGN Total DSEs | DSE DSE O.00 | CALL SIGN | TY-FIFTH DSE | ONE HUNDRED FIF OMMUNITY/ AREA CALL SIGN contain DSEs | | | |
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| CABLE ONE, INC. | | E SYSTEM: | | | | • | 023031 | Name |
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| BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 | | | | | | | | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First G | roup | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | |
| Base Rate Fee First G | roup | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 | |
| ONE HUNDRED FIF | TY-NINTH | SUBSCRIBER GRO | OUP | ONE HUNDR | ED SIXTIETH | H SUBSCRIBER GRO | UP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ ARE | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | - | 0.00 | |
| Gross Receipts Third (| Group | \$ | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 | |
| Base Rate Fee Third (| 2roup | | 0.00 | Base Rate Fee Fou | rth Group | • | 0.00 | |
| Dase Nate Fee Hill (| νουρ | 4 | 0.00 | Dase Rate Fee FOU | тат Стоир | \$ | 0.00 | |
| Base Rate Fee: Add th | ne base rat e | e fees for each subs | scriber group | as shown in the boxes | above. | | | |

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. 023031 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee INSTRUCTIONS: and 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 **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP ONE HUNDRED FIFTY-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 ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP ONE HUNDRED FIFTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSFs 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 Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. 023031 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee INSTRUCTIONS: and 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 **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP ONE HUNDRED SIXTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSFs 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

| C | Cable Worksheet | | Total amount of remittance | Number of SAs rec'd | | II | Initials | |
|-------------------------------------|--------------------|------------------------|----------------------------|------------------------------|-------------------------|-------------|----------|--|
| | | | Date of remittance | Check EFT | | FILING FEES | | |
| Cable ID # | | | | | | Amount | Initials | |
| Examined by | | Reviewed by | Date examination completed | Allocation | number | | | |
| Space A Accounting Period | | | | | | | | |
| | Jan | uary 1 - June 30, 2017 | [| ☐ July 1 - December 31, 2017 | | | | |
| | Lett | er sent |] | ☐ Information received | | | | |
| | Acc | epted | [| Phone call/Date/Contact | | | | |
| Space B Owner | | | | | | | | |
| | Lett | er sent | [| Information rec | eived | | | |
| | Acc | epted | [| Phone call/Date | /Contact | | | |
| Space D Area Served | | | | | | | | |
| | Lett | er sent | | Information received | | | | |
| | Acc | epted |] | Phone call/Date | :/Contact | | | |
| Space E Secondary Transission | | | | | | | | |
| Service Subscribers: | Lett | Letter sent | | | Information received | | | |
| and Rates | Acc | Accepted | | | Phone call/Date/Contact | | | |
| Space G Primary Transmitters: | | | | | | | | |
| Television | Lett | er sent | | ☐ Information received | | | | |
| | ☐ Acc | epted | | Phone call/Date | e/Contact | | | |
| Space H Primary Transmitters: | | | | | | | | |
| Radio | Acc | epted | | Phone call/Date | e/Contact | | | |

| | | Space I Substitute Carriage | |
|-----------------------|---------------------------|---|--|
| Letter sent | ☐ Information received | | |
| Accepted | Phone call/Date/Contact | | |
| | | Space J Part-time Carriage Log | |
| ✓ Letter sent | ☐ Information received | (SA3 only) | |
| Accepted | Phone call/Date/Contact | | |
| | | Space K Gross Receipts | |
| Letter sent | ☐ Information received | | |
| Letter sent | Phone call/Date/Contact | | |
| | | Space L Copyright Filing and Royalty Fees | |
| Royalty Fee should be | Refund request to fiscal | 1 | |
| Letter sent | ☐ Information received | 1 | |
| Accepted | Phoe call/Date/Contact | 1 | |
| | | Space M Channels | |
| Letter sent | ☐ Information received | | |
| Accepted | Phone call/Date/Contact | | |
| | | Space O Certification | |
| Letter sent | ☐ Information received | | |
| Accepted | Phone call/Date/Contact | | |
| | | Space P Statement of Gross Receipts | |
| Letter sent | ☐ Information received | | |
| Accepted | Phone call/Date/Contact | 1 | |
| | | Space Q Interest Assessment | |
| Letter sent | ☐ Info/add'l fee received | | |
| Accepted | Phone call/Date/Contact | | |