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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY						
DATE RECEIVED	AMOUNT					
2/25/2021	\$ ALLOCATION NUMBER					
,,_,	ALLOCATION NOMBER					

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting Period	2020/2				
B	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire accounting Check here if this is the system's first filing. If not, enter the system's ID to LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM CABLE ONE, INC. d/b/a SPARKLIGHT	ss of the cable syste on the last day of th unting period.	m. e accounting period should su		10379
				103792	0202
				10379 20	020/2
	210 E. EARLL DRIVE PHOENIX, AZ 85012				
С	INSTRUCTIONS: In line 1, give any business or trade names used to it names already appear in space B. In line 2, give the mailing address of	,			se
System	1 IDENTIFICATION OF CABLE SYSTEM: TELECOMMUNICATIONS MANAGEMENT, LLC D/B/A	NEWWAVE C	OMMUNICATIONS		
	MAILING ADDRESS OF CABLE SYSTEM: 1007 N ONE MILE RD (Number, street, rural route, apartment, or suite number) DEXTER, MO 63841 (City, town, state, zip code)				
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comr	nunity served below and rel	ist on page 1b	,
Area	with all communities.	I			
Served	CITY OR TOWN	STATE			
First Community	DEXTER	MO			
	Below is a sample for reporting communities if you report multiple characteristics (SAMPLE)	annel line-ups in S STATE	pace G. CH LINE UP	SUB GR	P#
	Alda	MD	A	30B GR	. п
Sample	Alliance	MD	В	2	
	Gering	MD	В	3	

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

FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 10379 CABLE ONE, INC. d/b/a SPARKLIGHT

Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined 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.

D Area Served

Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.

If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).

When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below.

CITY OR TOWN	STATE	CH LINE UP	SUB GRP#
DEXTER	MO	AA	1
BERNIE	MO	AA	1
BLOOMFIELD	MO	AA	1
ESSEX	MO	AA	1
DUNKLIN CO.	MO	AB	2
CAMPBELL	МО	AB	2
CLARKTON	MO	AB	2
HOLCOMB	MO	AB	2
MALDEN	МО	AB	3
GIDEON	MO	AB	3
PARMA	MO	AB	1 3
PORTAGEVILLE	MO	AB	3
RISCO	MO	AB	3
KENNETT	MO	AD	4
SENATH	MO	AD	4
CLAY CO.	AR	AC	5
GREENWAY	AR	AC	5
PIGGOT	AR	AC	5
POLLARD	AR	AC	5
RECTOR	AR	AC	5
ST. FRANCIS	AR	AC	5
GREENE CO.	AR	AC	5 5
LAFE	AR	AC	5
MARMADUKE	AR	AC	5
STEELE	MO	AD	6
PEMISCOT CO.	MO	AD	6
WARDELL	MO	AD	7
HOMESTOWN	MO	AD	7
NORTH WARDELL	MO	AD	7

First Community

See instructions for additional information on alphabetization.

Add rows as necessary.

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1			l l
1		1	
1			
			
1			
L			

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC. d/b/a SPARKLIGHT

SYSTEM ID#
10379

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.

BLOCK 1					BLOC	K 2	
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE		CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE
Residential:				П			
Service to first set	4,022	\$	40.00	Ш			
Service to additional set(s)]					
FM radio (if separate rate)							
Motel, hotel	389	\$	40.50				
Commercial]					
Converter							
Residential		·					
Non-residential		·					
				1 ľ		1	

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLO	CK 1			BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE RATE			CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential				
Pay cable	\$9-\$18	Motel, hotel			EXPANDED	\$88.00
Pay cable—add'l channel		Commercial			DIGITAL FAMILY PAK	\$16.00
Fire protection		• Pay cable			STARZ SUPER	\$19.00
•Burglar protection		Pay cable-add'l channel			SHOWTIME /TMC	\$10.99
Installation: Residential		Fire protection			HBO MULTI SCREEN	\$19.00
First set	\$ 30.00	Burglar protection			CINEMAX MULTI SCREEN	\$19.00
 Additional set(s) 		Other services:				
 FM radio (if separate rate) 		Reconnect	\$	90.00		
Converter		Disconnect				
		Outlet relocation	\$	30.00		
		Move to new address	\$	30.00		

CABLE ON	FOWNER OF CABLE SY IE, INC. d/b/a SP		-		SYSTEM ID# 10379	Name
1						
In General: In speciarried by your or carried the said and respectively. It is the station was calculated by the said of t	able system during to egulations in effect of (4), 76.61(e)(2) and (4), 76.61(e)(2) and (5), 76.61(e)(2) and (5), 76.61(e)(2) and (6), 76.61(e)(2) and (6), 76.61(e)(4), 76.61	y television st he accounting n June 24, 19 (4), or 76.63 (i def in the next respect to any ations, or auth G—but do lis titute basis. ace I, if the sta cerning substiff sign. Do not it h a station ac streams musifier ber the FCC he, WRC is Che es tation. whether the state ter "N" (for noncommercial page (v) of the the the local servage (v) of the ess" in column on during the me basis because.	g period, except 81, permitting the referring to 76.6 paragraph. If the distance of the distan	(1) stations carried the carriage of cert (e)(2) and (4))]; as a carried by your of the Special Statem of both on a substitute, see page (v) of the program service er-the-air designated that the television statington, D.C. This or "E-M" (for noncontribute) or "E-M" (for noncontribute) or the television statington, but the television statington, and indicated in the television statington, and the tele	es.' If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject	G Primary Transmitters: Television
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of a written agree the cable system tion "E" (exempt) explanation of the Column 6: GifcC. For Mexica Note: If you are to 1. CALL SIGN KBSI KFVS-2 WDKA-2 KFVS-4 KPOB WPSD-3 WTCT-2 KTEJ KFVS-3 KBSI-2 KFVS-5	and a primary trans For simulcasts, alses three categories ive the location of earn or Canadian static utilizing multiple characteristics 2. B'CAST CHANNEL NUMBER 23.1 12.1 12.2 25 12.4 15.1 6.1 6.3 30.1 20.1 12.3 23.2	mitter or an a o enter "E". If o enter "E". If o enter "E". If o enter "E". If o enter in ent	ssociation repreyou carried the of the general or U.S. stations, ethe name of the use a separate state of the content of the separate state of the content o	senting the prima channel on any or instructions locate list the community with space G for each AA 5. BASIS OF CARRIAGE (If Distant)	ry transmitter, enter the designather basis, enter "O." For a further did in the paper SA3 form. It to which the station is licensed by the which the station is identifed. In the channel line-up. 6. LOCATION OF STATION CAPE GIRARDEAU, MO CAPE GIRARDEAU, MO CAPE GIRARDEAU, MO PADUCAH, KY CAPE GIRARDEAU, MO POPLAR BLUFF, MO PADUCAH, KY PADUCAH, KY MERION, IL JONESBORO, AR CAPE GIRARDEAU, MO CAPE GIRARDEAU, MO CAPE GIRARDEAU, MO	additional information
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of a written agree the cable system tion "E" (exempt) explanation of the Column 6: Gi FCC. For Mexica Note: If you are to 1. CALL SIGN KBSI KFVS-2 WDKA-2 KFVS-4 KPOB WPSD WPSD-3 WTCT-2 KTEJ KFVS-3 KBSI-2 KFVS-5 WDKA-3	and a primary trans b. For simulcasts, alses three categories ive the location of earn or Canadian static utilizing multiple characteristics. 2. B'CAST CHANNEL NUMBER 23.1 12.1 12.2 25 12.4 15.1 6.1 6.3 30.1 20.1 12.3 23.2 12.5 25.3 25.4	mitter or an a o enter "E". If o enter "E". If o enter "E". If o enter "E". If o enter items, if any, givennel line-ups, CHANN 3. TYPE OF STATION I-M I-M I-M I-M I-M I-M I-M I-	ssociation repreyou carried the of the general or U.S. stations, ethe name of the use a separate of the separa	senting the prima channel on any or instructions locate list the community with space G for each AA 5. BASIS OF CARRIAGE (If Distant)	ry transmitter, enter the designather basis, enter "O." For a further ad in the paper SA3 form. It to which the station is licensed by the which the station is identifed. In the channel line-up. 6. LOCATION OF STATION CAPE GIRARDEAU, MO CAPE GIRARDEAU, MO CAPE GIRARDEAU, MO PADUCAH, KY CAPE GIRARDEAU, MO POPLAR BLUFF, MO PADUCAH, KY MERION, IL JONESBORO, AR CAPE GIRARDEAU, MO CAPE GIRARDEAU, MO CAPE GIRARDEAU, MO PADUCAH, KY MERION, IL JONESBORO, AR CAPE GIRARDEAU, MO CAPE GIRARDEAU, MO CAPE GIRARDEAU, MO PADUCAH, KY PADUCAH, KY	additional information

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC. d/b/a SPARKLIGHT

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.

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

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

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	AB	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KBSI	23.1	I-M	No		CAPE GIRARDEAU, MO
KFVS	12.1	N-M	No		CAPE GIRARDEAU, MO
KFVS-4	12.4	I-M	No		CAPE GIRARDEAU, MO
KFVS-2	12.2	I-M	No		CAPE GIRARDEAU, MO
KFVS-5	12.5	I-M	No		CAPE GIRARDEAU, MO
WPSD	6.1	N-M	No		PADUCAH, KY
WPSD-3	6.2	I-M	No		PADUCAH, KY
KTEJ	20.1	E	No		JONESBORO, AR
KPOB	15.1	N-M	No		POPLAR BLUFF, MO
KFVS-3	12.3	I-M	No		CAPE GIRARDEAU, MO
KBSI-2	23.2	I-M	No		CAPE GIRARDEAU, MO
WDKA-2	25.2	I-M	No		PADUCAH, KY
WTCT-2	30.2	I-M	No		MERION, IL
KBSI-3	23.3	I-M	No		CAPE GIRARDEAU, MO
WDKA-3	25.3	I-M	No		PADUCAH, KY
WDKA-4	25.4	I-M	No		PADUCAH, KY

G

Primary Transmitters: Television

LEGAL NAME OF OV	· WNER OF CABLE SY:	STEM:			SYSTEM ID#	
	INC. d/b/a SP				10379	Name
PRIMARY TRANSMIT	TERS: TELEVISIO	N				
In General: In space carried by your cable FCC rules and regul 76.59(d)(2) and (4), substitute program be substitute Basis basis under specifc • Do not list the station was carried • List the station was carried • List the station here in the paper SA3 Column 1: List each multicast stream as "WE" WETA-simulcast). Column 2: Give its community of lice on which your cable Column 3: Indicated actional station, (for independent multifor independent multifor independent multifor independent in the planation of local secolumn 5: If you cable system carried the distant station of a written agreement of a written agreement cable system an tion "E" (exempt). For explanation of these Column 6: Give	e G, identify every e system during the lations in effect on 76.61(e)(2) and (4 pasis, as explained is Stations: With record roles, regular on here in space (6 ed only on a substee, and also in space, and also in each case where the each case where the least on a part-time in the lation of a distant ent entered into on a part-time in the each case, also three categories, the location of each recall and a station of each recall and and a station of each recall and a stat	television stare accounting June 24, 198 4), or 76.63 (red) in the next period of list its test of the state	period, except (181, permitting the eferring to 76.61) arragraph. distant stations orizations: it in space I (the tion was carried tute basis stations between the transparent origination cording to its over be reported in comparent origination as assigned to the transparent origination is a network twork), "N-M" (for educational), or egeneral instruction is a network of lack of accounting period use of the general in r U.S. stations, list the name of the use a separate specific process.	1) stations carried a carriage of certain (e)(2) and (4))]; are carried by your carried by your carried by your carried by statement both on a substitute, see page (v) of program services rethe-air designation of the common of	". If not, enter "No". For an expaper SA3 form. ating the basis on which your ring "LAC" if your cable system apacity. Dayment because it is the subject erm or an association representing a 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. The basis is the station is identified.	Primary Transmitters: Television
1.011	o Dioast			, ,		
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	
KPOR 2	15 2	NA	No		DODI AD BLUEE MO	
KPOB-4	15.3	I-M	No No		POPLAR BLUFF, MO	
NPUD-4	15.4	I-M	No		POPLAR BLUFF, MO	

ACCOUNTING PERIOD: 2020/2 FORM SA3E, PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 10379 CABLE ONE, INC. d/b/a SPARKLIGHT PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. · List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other

basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. **Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify

each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

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

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

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

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

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

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

		CHANN	EL LINE-UP	AC	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KJNB-LD	27.1	I	No		JONESBORO, AR
KJNB-LD2 KVTJ-DT	27.2 18.1	N-M I-M	No No		JONESBORO, AR JONESBORO, AR
KTEJ	20.1	E	No		JONESBORO, AR
KAIT-1	8.1	N-M	No		JONESBORO, AR
KAIT-2 KAIT-3	8.2 8.3	N-M i-M	No No		JONESBORO, AR JONESBORO, AR
10-11-0	0.0	1-101	110		JONEODORO, AR

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 10379 CABLE ONE, INC. d/b/a SPARKLIGHT PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

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

CHANNEL LINE-UP AD 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER **STATION** (If Distant) **KBSI** 23.1 I-M No CAPE GIRARDEAU, MO **KFVS** 12.1 N-M CAPE GIRARDEAU, MO No KFVS-2 12.2 I-M No CAPE GIRARDEAU, MO **KVTJ-DT** JONESBORO, AR 18.1 I-M No **KPOB** 15.1 N-M No POPLAR BLUFF, MO **WPSD** 6.1 N-M PADUCAH, KY No WPSD-3 6.3 I-M No PADUCAH, KY KFVS-3 12.3 I-M CAPE GIRARDEAU, MO No **KTEJ** 20.1 Ε JONESBORO, AR No WDKA-2 25.2 I-M Yes 0 PADUCAH, KY KBSI-2 23.2 I-M CAPE GIRARDEAU, MO No KFVS-4 12.4 I-M No CAPE GIRARDEAU, MO KFVS-5 12.5 I-M No CAPE GIRARDEAU, MO KBSI-3 23.3 I-M CAPE GIRARDEAU, MO No WDKA-3 25.3 I-M PADUCAH, KY No WDKA-4 25.4 I-M No PADUCAH, KY KPOB-3 POPLAR BLUFF, MO 15.3 I-M No KPOB-4 15.4 I-M No POPLAR BLUFF, MO

G

Primary Transmitters: Television

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

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	
CABLE ONE, IN	IC. d/b/a SP	ARKLIGHT	1		10379	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s	system during t	he accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under ain network programs [sections	G
76.59(d)(2) and (4), 76 substitute program bas	6.61(e)(2) and (sis, as explaine	4), or 76.63 (red in the next p	eferring to 76.61 paragraph.	1(e)(2) and (4))]; a	nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
basis under specifc F0	CC rules, regula n here in space	ations, or auth G—but do lis	orizations:		ent and Program Log)—if the	
• List the station here,	and also in spa formation cond	ace I, if the sta			ute basis and also on some other f the general instructions located	
Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast).	ch station's call associated wit A-2". Simulcast	h a station acc streams must	cording to its over be reported in o	er-the-air designat column 1 (list each	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in	
its community of licens on which your cable sy	se. For example ystem carried th	e, WRC is Cha ne station.	annel 4 in Wash	ington, D.C. This	may be different from the channel pendent station, or a noncommercial	
(for independent multi-	cast), "E" (for n ese terms, see	oncommercial page (v) of the	l educational), o e general instruc	r "E-M" (for nonco ctions located in th	ast), "I" (for independent), "I-M" mmercial educational multicast). ne paper SA3 form. ns". If not, enter "No". For an ex-	
	ave entered "Y	es" in column	4, you must con	mplete column 5, s	paper SA3 form. stating the basis on which your ering "LAC" if your cable system	
of a written agreement the cable system and	sion of a distant t entered into o a primary trans	t multicast stre n or before Ju mitter or an a	eam that is not s ne 30, 2009, be ssociation repre	ubject to a royalty tween a cable sys senting the primar	payment because it is the subject tem or an association representing y transmitter, enter the designa-	
explanation of these the Column 6: Give the	nree categories e location of ea	, see page (v) ch station. Fo	of the general i r U.S. stations, l	nstructions locate list the community	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing	ng multiple chai	nnel line-ups,	use a separate s	space G for each	channel line-up.	
		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	

FURM SA3E. PAGE 3.				CVCTEM ID#	
CABLE ONE, INC.		LIGHT		SYSTEM ID# 10379	Name
PRIMARY TRANSMITTERS:	: TELEVISION				
In General: In space G, ic carried by your cable syst FCC rules and regulations 76.59(d)(2) and (4), 76.61 substitute program basis, Substitute Basis Stat basis under specific FCC or Do not list the station her station was carried onlow 1. List the station here, and basis. For further information in the paper SA3 form. Column 1: List each seach multicast stream as "WETA-2" WETA-simulcast). Column 2: Give the child its community of license. I on which your cable system Column 4: If the station planation of local services. Column 5: If you have cable system carried the distant station For the retransmission of a written agreement enthe cable system and a prition "E" (exempt). For sim explanation of these three	dentify every televitem during the accident du	counting period, excee 24, 1981, permitting, 76.63 (referring to 76 he next paragraph, ct to any distant station, or authorizations: aut do list it in space I basis. if the station was carring substitute basis station according to its ms must be reported ation according to its ms must be reported be FCC has assigned according to its ms must be reported be FCC has assigned according to its ms must be reported be reported be reported by the station is a net of the station is a net of the general instruction. If the general instruction is a service area, (i.e. of the general instruction of the general instructi	pt (1) stations carried the carriage of cert (6.61(e)(2) and (4))]; a cons carried by your constant (the Special Statem ried both on a substitutions, see page (v) constitutions, see page (v) constant	es". If not, enter "No". For an ex- e paper SA3 form. estating the basis on which your tering "LAC" if your cable system capacity. / payment because it is the subject estem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further	Primary Transmitters: Television
		,	•	which the station is identifed.	
Note: If you are utilizing n	<u> </u>	CHANNEL LINE-U	<u> </u>	cnanner line-up.	
SIGN	B'CAST 3. TY CHANNEL OF	YPE 4. DISTANT	? 5. BASIS OF	6. LOCATION OF STATION	

TORWOADE. FAGE 3.					evetem in#	
CABLE ONE,					SYSTEM ID# 10379	Namo
PRIMARY TRANSMIT	TERS: TELEVISIO	N				
carried by your cable FCC rules and regul 76.59(d)(2) and (4), substitute program b Substitute Basis basis under specifc Do not list the stati station was carrie List the station her	e system during to ations in effect on 76.61(e)(2) and (pasis, as explained Stations: With FCC rules, regulation here in space and also in space, and also in space, and also in space.	he accounting I June 24, 19, or 76.63 (red in the next prespect to any ations, or auth G—but do listitute basis.	period, except 81, permitting the eferring to 76.6 paragraph. distant stations orizations: t it in space I (the ation was carried	(1) stations carrie the carriage of certa 1(e)(2) and (4))]; a carried by your case Special Statement both on a substif	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the cute basis and also on some other f the general instructions located	G Primary Transmitters: Television
each multicast streat cast stream as "WE" WETA-simulcast). Column 2: Give its community of lice on which your cable Column 3: Indicated educational station, (for independent muter for the meaning of total Column 4: If the planation of local set Column 5: If you cable system carried the distant station of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of the cast station of these Column 6: Give FCC.	ach station's call m associated wit TA-2". Simulcast the channel num nse. For example system carried thate in each case by entering the letticast), "E" (for n hese terms, see station is outside vice area, see p have entered "Y I the distant station on a part-tission of a distant entered into od a primary transor simulcasts, als three categories the location of ear Canadian station.	h a station accepted by the FCC hee, WRC is Chane station. Whether the station accepted by the local service age (v) of the es" in column on during the me basis becate multicast streen or before Jumitter or an accepted by the local service and the local service a	cording to its over the reported in or the reported in the repo	er-the-air designal column 1 (list each the television statistic, an indefor network multic, or "E-M" (for noncotions located in the distant"), enter "Ye ions located in the implete column 5, and Indicate by entictivated channel or acuble system a cable system and the primal channel on any of instructions located list the community with	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. If payment because it is the subject etem or an association representing try transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. If to which the station is licensed by the which the station is identifed.	
Note: If you are utilize	zing multiple cha	· · ·			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	

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#			
CABLE ONE, IN	IC. d/b/a SP	ARKLIGHT			10379	Name		
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
carried by your cable s	system during t	he accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under ain network programs [sections	G		
76.59(d)(2) and (4), 76 substitute program bas	6.61(e)(2) and (sis, as explaine	4), or 76.63 (red in the next p	referring to 76.61 paragraph.	I(e)(2) and (4))]; a	nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television		
Do not list the station	 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 each multicast stream as "WETA WETA-simulcast).	ch station's call associated with a-2". Simulcast	h a station acc streams must	cording to its over be reported in o	er-the-air designat column 1 (list each	s such as HBO, ESPN, etc. Identify ion. For example, report multinatream separately; for example on for broadcasting over-the-air in			
its community of licens on which your cable sy Column 3: Indicate	se. For example stem carried the in each case v	e, WRC is Cha ne station. whether the st	annel 4 in Wash ation is a networ	ington, D.C. This ink station, an inde	may be different from the channel pendent station, or a noncommercial ast), "I" (for independent), "I-M"			
For the meaning of the Column 4: If the st planation of local servi	ese terms, see ation is outside ce area, see pa	page (v) of the the local serv age (v) of the	e general instruc vice area, (i.e. "d general instructi	ctions located in th listant"), enter "Ye ons located in the	s". If not, enter "No". For an ex- paper SA3 form.			
cable system carried t	he distant statio ion on a part-tii	on during the a	accounting perionuse of lack of a	od. Indicate by ento	stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject			
of a written agreement the cable system and tion "E" (exempt). For	entered into o a primary trans simulcasts, als	n or before Ju mitter or an as o enter "E". If	ne 30, 2009, be ssociation repres you carried the o	tween a cable sys senting the primar channel on any otl	y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form.			
	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. channel line-up.			
		CHANN	EL LINE-UP	АН				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
	I	1		I	i			

				CVCTEM ID#	
		•		SYSTEM ID# 10379	Name
RS: TELEVISIO	N				
system during the constant of	he accounting n June 24, 19 4), or 76.63 (r ed in the next	period, except 81, permitting th referring to 76.6° paragraph.	(1) stations carrie te carriage of certa 1(e)(2) and (4))]; a	d only on a part-time basis under and in network programs [sections and (2) certain stations carried on a	Primary Transmitters:
CC rules, regular here in space only on a subs and also in spatiormation concurr. ch station's call associated with A-2". Simulcast e channel numbers, for example set of the in each case were entered the interest of the i	ations, or auth G—but do lis titute basis. ace I, if the state rining substiff sign. Do not read that it is station acceptable and the station acceptable and the station. Whether the station. Whether the station. Whether the station apage (v) of the estation acceptable (v) of the the local servage (v) of the estation and uring the me basis becat multicast stream or before Jumitter or an acceptable (v), see page (v), se	tit in space I (the ation was carried tute basis station report origination or cording to its own to be reported in the annel 4 in Wash (ation is a network), "N-M" (I educational), one general instruction of the general instruction of the general instruction of the general instruction of lack of a general instruction of the general in the gene	de Special Statement of both on a substitute, see page (v) of the program service er-the-air designate column 1 (list each the television statington, D.C. This with the properties of the television statington, D.C. This with the television state of the	ent and Program Log)—if the tute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example con for broadcasting over-the-air in may be different from the channel expendent station, or a noncommercial ast), "I" (for independent), "I-M" commercial educational multicast). The paper SA3 form. The paper SA3 form. The stating the basis on which your tering "LAC" if your cable system capacity. To payment because it is the subject term or an association representing try transmitter, enter the designa- ther basis, enter "O." For a further din the paper SA3 form. To which the station is licensed by the	Television
ıg multiple char	· · ·			channel line-up.	
2. B'CAST CHANNEL NUMBER	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
	RS: TELEVISIO G, identify ever system during to ions in effect of 3.61(e)(2) and (sis, as explained Stations: With CC rules, regular here in space only on a substand also in spanformation conditions. Simulcast e channel numbers. For example ystem carried the in each case of the cast, "E" (for neach case of the distant statiction on a part-tission of a distant tentered into of a primary transismulcasts, alsonee categories e location of each candian statiction on the cast of the cast of the distant statiction on a part-tission of a distant tentered into of a primary transismulcasts, alsonee categories e location of each candian statiction on the cast of the ca	G, identify every television staystem during the accounting ions in effect on June 24, 19 (3.61(e)(2) and (4), or 76.63 (1) (8) (8) (8) (8) (8) (8) (8) (8) (9) (10) (10) (10) (10) (10) (10) (10) (10	G. identify every television station (including system during the accounting period, except ions in effect on June 24, 1981, permitting the 3.61(e)(2) and (4), or 76.63 (referring to 76.6 sis, as explained in the next paragraph. Stations: With respect to any distant stations: There in space G—but do list it in space I (the only on a substitute basis. and also in space I, if the station was carried formation concerning substitute basis station associated with a station according to its over a substitute associated with a station according to its over a substitute basis associated with a station according to its over a substitute basis station associated with a station according to its over a substitute basis station associated with a station according to its over a substitute basis station associated with a station according to its over a substitute basis station associated with a station according to its over a substitute basis station associated with a station according to its over a substitute basis and a station according to its over a substitute basis and a station is a network and a station is outside the local service area, (i.e. "Goast), "E" (for noncommercial educational), or a see terms, see page (v) of the general instruct and a station is outside the local service area, (i.e. "Goast), "E" (for noncommercial educational), or a part-time basis because of lack of a sion of a distant multicast stream that is not state and and a station are an association repressimulcasts, also enter "E". If you carried the accounting period the accounting account of each station. For U.S. stations, Canadian stations, if any, give the name of the gmultiple channel line-ups, use a separate channel channel line-ups, use a separate channel channel line-ups, use a separate channel channel line-ups.	G. identify every television station (including translator stations system during the accounting period, except (1) stations carrier ions in effect on June 24, 1981, permitting the carriage of certs (6.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; a sis, as explained in the next paragraph. Stations: With respect to any distant stations carried by your of the common of the	RC. d/b/a SPARKLIGHT Gr. identify every television station (including translator stations and low power television stations) system during the accounting period, except (1) stations carried only on a part-time basis under ions in effect on June 24, 1981, permitting the carriage of certain network programs [sections io.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a sis, as explained in the next paragraph. Stations: With respect to any distant stations carried by your cable system on a substitute program CC rules, regulations, or authorizations: • here in space G—but do list it in space I (the Special Statement and Program Log)—if the only on a substitute basis. • and also in space I, if the station was carried both on a substitute basis and also on some other formation concerning substitute basis stations, see page (v) of the general instructions located orm. • station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify associated with a station according to its over-the-air designation. For example, report multi-A-Z-". Simulcast streams must be reported in column 1 (list each stream separately; for example e channel number the FCC has assigned to the television station for broadcasting over-the-air in se. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel ystem carried the station. • entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" cast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). see terms, see page (v) of the general instructions located in the paper SA3 form. • attenting the letter "N" (for network), "Indicate by entering "LAC" if your cable system ion on a part-time basis because of lack of activated channel capacity. • ion of a distant multicast stream that is not subject to a royalty payment because it is the subject tentered "Yes" in column 4, you must complete column 5, sta

FURM SA3E. PAGE 3.					CVCTEM ID#	<u> </u>
CABLE ONE, IN			•		SYSTEM ID# 10379	Name
PRIMARY TRANSMITTER	RS: TELEVISIO	N				
In General: In space G carried by your cable sy FCC rules and regulatio 76.59(d)(2) and (4), 76. substitute program basi Substitute Basis St basis under specifc FCt • Do not list the station station was carried of • List the station here, a basis. For further infinithe paper SA3 for Column 1: List each each multicast stream a cast stream as "WETA-WETA-simulcast). Column 2: Give the its community of license on which your cable system carried the station of local service Column 4: If the station planation of local service Column 5: If you ha cable system carried the carried the distant station for written agreement of the cable system and a tion "E" (exempt). For sexplanation of these thr	is, identify even yestem during the properties of the control of t	y television standard accounting on June 24, 194, or 76.63 (rd din the next) respect to any ations, or auth G—but do listitute basis. In a station acceptable of the station acceptable of the station acceptable of the station. Whether the station acceptable of the station acceptable of the station. Whether the station acceptable of the station acceptable of the local services in column on during the acceptable of the station of the station of the station of the station acceptable of the station acceptable of the station acceptable of the station of the station of the station acceptable of the station acceptabl	g period, except 81, permitting the referring to 76.6 paragraph. It is a special to the referring to 76.6 paragraph. It is a special to the referring to 76.6 paragraph. It is in space I (the referring to the report origination cording to its own to be reported in the re	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your content of both on a substitution, see page (v) on program services er-the-air designation of the television statistington, D.C. This rk station, an indefor network multicar "E-M" (for noncontions located in the distant"), enter "Yesions located in the model of the column 5, so the	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
		. ,		•	which the station is identifed.	
Note: If you are utilizing	g multiple char		use a separate	<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	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC. d/b/a SP	ARKLIGHT			10379	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Pasis is basis under specific FC • Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA-simulcast). Column 2: Give th its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multi-For the meaning of the Column 5: If you cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify every system during the ions in effect or 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(y television standard y television standard y television standard y television standard y televisions, or auth G—but do list titute basis. In the standard y television y tele	period, except all, permitting the seferring to 76.6 paragraph. It distant stations orizations: to the seferring to 76.6 paragraph. It distant stations orizations: to the seferring period as a seferring to the seferring period to the seferring period to the seferring to the sef	(1) stations carried e carriage of certa (e)(2) and (4))]; a carried by your case Special Statement both on a substitus, see page (v) on program services er-the-air designate column 1 (list each the television statington, D.C. This in the station, an indefor network multicar "E-M" (for noncostions located in the instant"), enter "Ye in special column 5, so do Indicate by entity tween a cable system a cable system in the primar channel on any of instructions locate list the community is the community of the community is the community in the carried in the community is the community is the community in the carried in the community is the community in the carried in the community is the community is the carried in the community is the carried in the community is the carried in t	page.". If not, enter "No". For an expaper SA3 form. It stating the basis on which your ering "LAC" if your cable system capacity. It payment because it is the subject tem or an association representing y transmitter, enter the designation the pager SA3 form. It is not expected by the station is licensed by the	G Primary Transmitters: Television
Note: If you are utilizing				•	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	ΔK		
4 0411	O DIOACT		<u> </u>		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	
CICIV	NUMBER	STATION	(103 01 110)	(If Distant)		
				,		
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LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	.,		
CABLE ONE, IN	IC. d/b/a SP	ARKLIGHT			10379	Name		
PRIMARY TRANSMITTERS: TELEVISION								
carried by your cable s	system during t	he accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under hin network programs [sections	G		
76.59(d)(2) and (4), 76 substitute program bas	6.61(e)(2) and (sis, as explaine	4), or 76.63 (red in the next p	eferring to 76.61 paragraph.	1(e)(2) and (4))]; a	nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television		
Do not list the station	basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.							
• List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located								
in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in								
its community of licens on which your cable sy Column 3: Indicate	se. For example stem carried the in each case v	e, WRC is Cha ne station. whether the st	annel 4 in Wash ation is a networ	ington, D.C. This in	may be different from the channel pendent station, or a noncommercial			
(for independent multion For the meaning of the Column 4: If the st	cast), "E" (for neese terms, see ation is outside	oncommercial page (v) of the the local serv	educational), one e general instruction vice area, (i.e. "d	r "E-M" (for nonco ctions located in th listant"), enter "Ye	s". If not, enter "No". For an ex-			
	ave entered "Y	es" in column	4, you must con	nplete column 5, s	stating the basis on which your			
carried the distant stat For the retransmiss of a written agreement the cable system and	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 designa-							
explanation of these the Column 6: Give the FCC. For Mexican or C	nree categories e location of ea Canadian statio	, see page (v) ch station. Fo ns, if any, give	of the general in r U.S. stations, I e the name of th	nstructions located list the community se community with	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.			
Note: If you are utilizing	ig mulliple char	• •	EL LINE-UP	•	channer line-up.			
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
OIOIV	NUMBER	STATION	(103 01 140)	(If Distant)				

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#		
CABLE ONE, IN	IC. d/b/a SP	ARKLIGHT	1		10379	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s	system during t	he accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under ain network programs [sections	G	
76.59(d)(2) and (4), 76 substitute program bas	6.61(e)(2) and (sis, as explaine	4), or 76.63 (red in the next p	eferring to 76.61 paragraph.	1(e)(2) and (4))]; a	nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television	
basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.							
List the station here, and also in 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 each multicast stream cast stream as "WETA WETA-simulcast).	ch station's call associated wit A-2". Simulcast	h a station acc streams must	cording to its over be reported in o	er-the-air designat column 1 (list each	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in		
its community of licens on which your cable sy	se. For example ystem carried th	e, WRC is Cha ne station.	annel 4 in Wash	ington, D.C. This	may be different from the channel pendent station, or a noncommercial		
(for independent multi-	cast), "E" (for n ese terms, see	oncommercial page (v) of the	l educational), o e general instruc	r "E-M" (for nonco ctions located in th	ast), "I" (for independent), "I-M" mmercial educational multicast). ne paper SA3 form. ns". If not, enter "No". For an ex-		
	ave entered "Y	es" in column	4, you must con	mplete column 5, s	paper SA3 form. stating the basis on which your ering "LAC" if your cable system		
of a written agreement	sion of a distant t entered into o	t multicast stre n or before Ju	eam that is not s ne 30, 2009, be	ubject to a royalty tween a cable sys	capacity. payment because it is the subject tem or an association representing y transmitter, enter the designa-		
tion "E" (exempt). For explanation of these th Column 6: Give the	simulcasts, als nree categories e location of ea	o enter "E". If , see page (v) ich station. Fo	you carried the o of the general i r U.S. stations, l	channel on any ot nstructions locate list the community	her basis, enter "O." For a further d in the paper SA3 form. r to which the station is licensed by the		
Note: If you are utilizing		nnel line-ups,	use a separate s	space G for each	which the station is identifed. channel line-up.		
	T	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		

TORWOADE. FAGE 0.					CVCTEM ID#			
CABLE ONE, IN			ı		SYSTEM ID# 10379	Name		
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program base	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							
				carried by your c	able system on a substitute program	Television		
pasis 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.								
basis. For further in	formation cond				ute basis and also on some other f the general instructions located			
each multicast stream cast stream as "WETA WETA-simulcast).	ch station's call associated with a-2". Simulcast	h a station acc streams must	cording to its over be reported in o	er-the-air designat column 1 (list each	s such as HBO, ESPN, etc. Identify ion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in			
its community of licens on which your cable sy	•		annel 4 in Wash	ington, D.C. This	may be different from the channel			
educational station, by (for independent multi For the meaning of the Column 4: If the st planation of local servi	entering the lecast), "E" (for nese terms, see ation is outside fee area, see page 2.5.	etter "N" (for no oncommercia page (v) of the the local serv age (v) of the	etwork), "N-M" (f l educational), o e general instruc vice area, (i.e. "c general instructi	or network multica r "E-M" (for nonco ctions located in th listant"), enter "Ye ons located in the	s". If not, enter "No". For an ex-			
cable system carried the carried the distant state. For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	he distant station on a part-tion of a distant entered into on a primary trans simulcasts, also ree categories e location of ea Canadian statio	on during the ame basis becan multicast streen or before Jumitter or an amount of enter "E". If a see page (v) ch station. Fons, if any, given	accounting period ause of lack of a gam that is not some 30, 2009, be association represous carried the of the general in the country of the general in the country of the general in the country of the name of the	d. Indicate by ent ctivated channel of ubject to a royalty tween a cable system of the primar channel on any ot instructions locate list the community with	ering "LAC" if your cable system capacity. 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.			
		CHANN	EL LINE-UP	AN				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
	I	1		I	i .	Ī		

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#			
CABLE ONE, IN	IC. d/b/a SP	ARKLIGHT			10379	Name		
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
carried by your cable s	system during t	he accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under ain network programs [sections	G		
76.59(d)(2) and (4), 76 substitute program bas	6.61(e)(2) and (sis, as explaine	4), or 76.63 (red in the next p	referring to 76.61 paragraph.	I(e)(2) and (4))]; a	nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television		
Do not list the station	 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 each multicast stream as "WETA WETA-simulcast).	ch station's call associated with A-2". Simulcast	h a station acc streams must	cording to its over be reported in o	er-the-air designat column 1 (list each	s such as HBO, ESPN, etc. Identify ion. For example, report multinatream separately; for example on for broadcasting over-the-air in			
its community of licens on which your cable sy Column 3: Indicate	se. For example stem carried the in each case v	e, WRC is Cha ne station. whether the st	annel 4 in Wash ation is a netwo	ington, D.C. This ink station, an inde	may be different from the channel pendent station, or a noncommercial ast), "I" (for independent), "I-M"			
For the meaning of the Column 4: If the st planation of local servi	ese terms, see ation is outside ice area, see pa	page (v) of the the local serv age (v) of the	e general instruc vice area, (i.e. "c general instructi	ctions located in th listant"), enter "Ye ons located in the	s". If not, enter "No". For an ex- paper SA3 form.			
cable system carried t	he distant statio ion on a part-tii	on during the a	accounting perionsus	od. Indicate by ento	stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject			
of a written agreement the cable system and tion "E" (exempt). For explanation of these th	t entered into on a primary trans simulcasts, also nree categories	n or before Ju mitter or an as o enter "E". If , see page (v)	ne 30, 2009, be ssociation repre- you carried the of the general i	tween a cable sys senting the primar channel on any otl nstructions located	tem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form.			
	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. channel line-up.			
		CHANN	EL LINE-UP	AO				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
		1		I	i			

LEGAL NAME OF	OWNER OF CABLE SY	STEM:			SYSTEM ID#	
	E, INC. d/b/a SP		•		10379	Name
PRIMARY TRANSM	IITTERS: TELEVISIO	N				
carried by your ca FCC rules and reg 76.59(d)(2) and (4 substitute progran	ble system during t gulations in effect of b), 76.61(e)(2) and (n basis, as explaine	he accounting n June 24, 19 4), or 76.63 (r ed in the next	period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie te carriage of certa 1(e)(2) and (4))]; a	s and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary Transmitters: Television
basis under specii Do not list the st. station was car List the station h basis. For furth in the paper SA Column 1: List each multicast str. cast stream as "W WETA-simulcast). Column 2: Giv its community of li on which your cab Column 3: Ind educational station (for independent r For the meaning of Column 4: If th planation of local s Column 5: If y cable system carr carried the distant For the retrans of a written agreet the cable system s tion "E" (exempt). explanation of the Column 6: Giv FCC. For Mexicar	fc FCC rules, regulation here in space ried only on a subsiere, and also in space information conduction. It each station's call earn associated with a subsidering the conduction of the system carried the channel number of the system carried the case of the conduction of these terms, see the station is outside service area, see pour have entered "Y ied the distant station on a part-timest of a distant ment entered into one and a primary transfor simulcasts, also three categories are the location of earn or Canadian station or Canadian station.	ations, or auth G—but do listitute basis. ace I, if the state that it is sign. Do not read that it is sign. Do not read that it is station acceptable. The station acceptable is streams must ber the FCC heart and the station. Whether the station. Whether the station. Whether the station. Whether the station apage (v) of the estation in column on during the me basis becate multicast stream or before Jumitter or an acceptable in the station. For the station. For the station. For the station is station. For the station is station. For the station is station.	tit in space I (the ation was carried tute basis station report origination or cording to its own to be reported in the annel 4 in Wash (ation is a netwo etwork), "N-M" (I educational), one general instructivice area, (i.e. "or general instructivice area, (i.e. "or general instructivice area, in the annel 4 in wash (i.e. "or general instructivice area, in the seam that is not s	d both on a substines, see page (v) of a program service er-the-air designate column 1 (list each the television statington, D.C. This rk station, an indefor network multicer "E-M" (for nonceptions located in the inplete column 5, and Indicate by entitivated channel is subject to a royalty tween a cable system in the prima channel on any of instructions located in the inplete column 5, and Indicate by entity and instructions located in the inplete column 5, and Indicate by entity and instructions located in the inplete community with the c	ent and Program Log)—if the tute basis and also on some other of the general instructions located s such as HBO, ESPN, etc. Identify tion. For example, report multi- h stream separately; for example ion for broadcasting over-the-air in may be different from the channel expendent station, or a noncommercial ast), "I" (for independent), "I-M" commercial educational multicast). The paper SA3 form. The paper SA3 form. The stating the basis on which your tering "LAC" if your cable system capacity. The young to the subject testem or an association representing the paper SA3 form. The stating the basis, enter "O." For a further the basis, enter "O." For a further and in the paper SA3 form. The paper SA3 form form for paper sA4 form for pap	Television
Note: II you are u	tilizing multiple cha		•		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	

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Nama	
CABLE ONE, IN	NC. d/b/a SP	ARKLIGHT			10379	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s	system during t	he accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under ain network programs [sections	G	
76.59(d)(2) and (4), 76 substitute program bas	6.61(e)(2) and (sis, as explaine	4), or 76.63 (red in the next p	eferring to 76.61 paragraph.	1(e)(2) and (4))]; a	nd (2) certain stations carried on a	Primary Transmitters: Television	
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under 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 page 200 forms.							
each multicast stream cast stream as "WETA- WETA-simulcast).	ch station's call associated wit A-2". Simulcast	h a station acc streams must	cording to its over be reported in o	er-the-air designat column 1 (list each	s such as HBO, ESPN, etc. Identify ition. For example, report multi- n stream separately; for example		
its community of licens on which your cable sy	se. For example ystem carried th	e, WRC is Cha ne station.	annel 4 in Wash	ington, D.C. This	on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial		
educational station, by (for independent multi- For the meaning of the	entering the lecast), "E" (for neese terms, see	etter "N" (for no oncommercial page (v) of the	etwork), "N-M" (f l educational), o e general instruc	for network multica r "E-M" (for nonco ctions located in th	ast), "I" (for independent), "I-M" mmercial educational multicast).		
	ave entered "Y	es" in column	4, you must con	mplete column 5, s	paper SA3 form. stating the basis on which your ering "LAC" if your cable system		
of a written agreement	sion of a distant t entered into o	t multicast stre n or before Ju	eam that is not s ne 30, 2009, be	ubject to a royalty tween a cable sys	capacity. payment because it is the subject tem or an association representing y transmitter, enter the designa-		
explanation of these the Column 6: Give the	nree categories e location of ea	, see page (v) ch station. Fo	of the general i r U.S. stations, l	nstructions locate list the community	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.		
Note: If you are utilizing		. ,		•			
		CHANN	EL LINE-UP	AQ			
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		

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#		
CABLE ONE, IN	NC. d/b/a SP	ARKLIGHT			10379	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s	system during t	he accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under ain network programs [sections	G	
76.59(d)(2) and (4), 76 substitute program bas	6.61(e)(2) and (sis, as explaine	4), or 76.63 (red in the next p	eferring to 76.61 paragraph.	I(e)(2) and (4))]; a	nd (2) certain stations carried on a	Primary Transmitters: Television	
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under 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							
each multicast stream cast stream as "WETA- WETA-simulcast).	ch station's call associated wit A-2". Simulcast	h a station acc streams must	cording to its over be reported in o	er-the-air designat column 1 (list each	s such as HBO, ESPN, etc. Identify ition. For example, report multi- n stream separately; for example		
its community of licens on which your cable sy	se. For example ystem carried th	e, WRC is Cha ne station.	annel 4 in Wash	ington, D.C. This	on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial		
educational station, by (for independent multi- For the meaning of the	entering the lecast), "E" (for neese terms, see	etter "N" (for no oncommercial page (v) of the	etwork), "N-M" (f l educational), o e general instruc	or network multica r "E-M" (for nonco ctions located in th	ast), "I" (for independent), "I-M" mmercial educational multicast).		
	ave entered "Y	es" in column	4, you must con	nplete column 5, s	paper SA3 form. stating the basis on which your ering "LAC" if your cable system		
of a written agreement	sion of a distant t entered into o	: multicast stre n or before Ju	eam that is not s ne 30, 2009, be	ubject to a royalty tween a cable sys	capacity. payment because it is the subject tem or an association representing y transmitter, enter the designa-		
explanation of these the Column 6: Give the	nree categories e location of ea	, see page (v) ch station. Fo	of the general i r U.S. stations, l	nstructions locate list the community	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the		
Note: If you are utilizing		. ,		•	which the station is identifed. channel line-up.		
		CHANN	EL LINE-UP	AR			
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		
	T						

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	IC. d/b/a SP	ARKLIGHT	•		10379	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s	system during t	he accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under ain network programs [sections	G	
76.59(d)(2) and (4), 76 substitute program bas	6.61(e)(2) and (sis, as explaine	4), or 76.63 (red in the next	referring to 76.61 paragraph.	1(e)(2) and (4))]; a	nd (2) certain stations carried on a	Primary Transmitters: Television	
basis under specifc FC	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 • List the station here,	only on a subs	titute basis. ace I, if the sta	ation was carried	I both on a substit	ute basis and also on some other		
in the paper SA3 fo	rm.	ŭ		,	f the general instructions located s such as HBO, ESPN, etc. Identify		
cast stream as "WETA WETA-simulcast).	A-2". Simulcast	streams must	be reported in o	column 1 (list each	cion. For example, report multi- n stream separately; for example		
	se. For example	e, WRC is Ch			on for broadcasting over-the-air in may be different from the channel		
Column 3: Indicate educational station, by	e in each case vertering the le	whether the st etter "N" (for n	etwork), "N-M" (f	or network multica	pendent station, or a noncommercial ast), "I" (for independent), "I-M"		
For the meaning of the Column 4: If the st	ese terms, see ation is outside	page (v) of the the local serv	e general instruc vice area, (i.e. "c	ctions located in th listant"), enter "Ye	s". If not, enter "No". For an ex-		
	ave entered "Y	es" in column	4, you must con	nplete column 5, s	paper SA3 form. stating the basis on which your ering "LAC" if your cable system		
carried the distant stat	ion on a part-ti sion of a distant	me basis beca t multicast stre	ause of lack of a eam that is not s	ctivated channel oubject to a royalty	capacity. payment because it is the subject		
the cable system and	a primary trans	mitter or an a	ssociation repre	senting the primar	tem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further		
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations, l	list the community	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.		
Note: If you are utilizing		. ,		•			
		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		
				,			
					ļ		

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#		
CABLE ONE, IN	IC. d/b/a SP	ARKLIGHT	1		10379	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s	system during t	he accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under hin network programs [sections	G	
76.59(d)(2) and (4), 76 substitute program bas	6.61(e)(2) and (sis, as explaine	4), or 76.63 (red in the next p	eferring to 76.61 paragraph.	I(e)(2) and (4))]; a	nd (2) certain stations carried on a	Primary Transmitters: Television	
basis under specifc F0 • Do not list the station	Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.						
• List the station here,	and also in spa formation cond	ace I, if the sta			ute basis and also on some other f the general instructions located		
Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast).	ch station's call associated with A-2". Simulcast	h a station acc streams must	cording to its over be reported in o	er-the-air designat column 1 (list each	s such as HBO, ESPN, etc. Identify ion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in		
its community of licens on which your cable sy	se. For example stem carried th	e, WRC is Cha ne station.	annel 4 in Wash	ington, D.C. This i	may be different from the channel pendent station, or a noncommercial		
(for independent multi-	cast), "E" (for neese terms, see	oncommercial page (v) of the	l educational), o e general instruc	r "E-M" (for nonco ctions located in th	ast), "I" (for independent), "I-M" mmercial educational multicast). se paper SA3 form. s". If not, enter "No". For an ex-		
	ave entered "Y	es" in column	4, you must con	nplete column 5, s	paper SA3 form. stating the basis on which your ering "LAC" if your cable system		
of a written agreement	sion of a distant t entered into o	: multicast stre n or before Ju	eam that is not s ne 30, 2009, be	ubject to a royalty tween a cable sys	capacity. payment because it is the subject tem or an association representing y transmitter, enter the designa-		
explanation of these the Column 6: Give the	nree categories e location of ea	, see page (v) ch station. Fo	of the general i r U.S. stations, l	nstructions located ist the community	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the		
FCC. For Mexican or (Note: If you are utilizing		. ,		•	which the station is identifed. channel line-up.		
		CHANN	EL LINE-UP	AT			
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		
		1		1			

TORWOADE. FAGE 3.					CVCTEM ID#	
CABLE ONE, IN			ı		SYSTEM ID# 10379	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during the country of the cou	he accounting n June 24, 199 4), or 76.63 (r d in the next p	period, except 81, permitting th eferring to 76.6° paragraph.	(1) stations carried e carriage of certa I(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under hin network programs [sections nd (2) certain stations carried on a	G Primary Transmitters:
Substitute Basis States basis under specific FC				carried by your c	able system on a substitute program	Television
	here in space	G-but do lis		e Special Stateme	ent and Program Log)—if the	
basis. For further in	formation cond				ute basis and also on some other f the general instructions located	
each multicast stream cast stream as "WETA WETA-simulcast).	ch station's call associated with a-2". Simulcast	h a station acc streams must	cording to its over be reported in o	er-the-air designat column 1 (list each	s such as HBO, ESPN, etc. Identify ion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in	
its community of licens on which your cable sy	•		annel 4 in Wash	ington, D.C. This	may be different from the channel	
educational station, by (for independent multi- For the meaning of the Column 4: If the st planation of local servi	entering the lecast), "E" (for necesse terms, see ation is outside to area, see page 2.5.	etter "N" (for no oncommercia page (v) of the the local serv age (v) of the	etwork), "N-M" (f l educational), o e general instruc vice area, (i.e. "c general instructi	or network multica r "E-M" (for nonco ctions located in th listant"), enter "Ye ons located in the	s". If not, enter "No". For an ex-	
carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these th Column 6: Give the	ion on a part-tii cion of a distant entered into or a primary trans simulcasts, also aree categories e location of ea Canadian statio	me basis beca multicast stren n or before Ju mitter or an aso o enter "E". If , see page (v) ch station. Fo ns, if any, give	ause of lack of a eam that is not s ne 30, 2009, be ssociation repre- you carried the o of the general i r U.S. stations, le the name of th	ctivated channel of ubject to a royalty tween a cable systemation of the channel on any often instructions located ist the community e community with	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.	
		CHANN	EL LINE-UP	AU		
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	
	•					

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Nama
CABLE ONE, IN	IC. d/b/a SP	ARKLIGHT	•		10379	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s	system during t	he accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under	G
		,	, i	J	nin network programs [sections nd (2) certain stations carried on a	Primary
substitute program bas	sis, as explaine	d in the next	paragraph.		. ,	Transmitters:
Substitute Basis S basis under specifc FC				carried by your c	able system on a substitute program	Television
				e Special Stateme	ent and Program Log)—if the	
station was carried	,		ation was carried	l both on a cubatit	ute basis and also on some other	
	formation cond	,			f the general instructions located	
		-			s such as HBO, ESPN, etc. Identify	
			•	•	ion. For example, report multi- n stream separately; for example	
WETA-simulcast).	a abannal numb	oor the ECC b	as socianed to t	the television stati	on for broadcasting ever the air in	
its community of licens	se. For example	e, WRC is Cha			on for broadcasting over-the-air in may be different from the channel	
	e in each case v	whether the st			pendent station, or a noncommercial	
	•	,	,. ,		ast), "I" (for independent), "I-M" mmercial educational multicast).	
For the meaning of the	ese terms, see	page (v) of the	e general instruc	ctions located in th	,	
planation of local servi	ce area, see pa	age (v) of the	general instructi	ions located in the	paper SA3 form.	
- I			•	•	stating the basis on which your ering "LAC" if your cable system	
carried the distant stat		•	٠.	•	, ,	
					payment because it is the subject	
					tem or an association representing y transmitter, enter the designa-	
, , ,			•	•	her basis, enter "O." For a further	
					d in the paper SA3 form. to which the station is licensed by the	
				•	which the station is identifed.	
Note: If you are utilizing	ig muitiple char		· .	•	cnannei iine-up.	
		1	EL LINE-UP			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
				(
	•		•			

FURM SA3E. PAGE 3.				CVCTEM ID#	<u> </u>
CABLE ONE, INC.		НТ		SYSTEM ID# 10379	Name
PRIMARY TRANSMITTERS:	TELEVISION				
In General: In space G, id carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Statibasis under specifc FCC rules on the station was carried only List the station here, and basis. For further inform in the paper SA3 form. Column 1: List each steach multicast stream ass cast stream as "WETA-2". WETA-simulcast). Column 2: Give the chits community of license. For which your cable system Column 3: Indicate in educational station, by ent (for independent multicast). For the meaning of these the Column 5: If you have cable system carried the distant station of a written agreement ent the cable system and a prition "E" (exempt). For simulexplanation of these three	dentify every television and continued to the motions: With respect to the properties of a substitute basis of a distant multicast energy transmitter or a substitute and the mation concerning substitute basis of a distant multicast energy for an artifulation of a substitute basis of a distant multicast energy for an artifulation of a substitute basis of a distant multicast energy for an artifulation of a substitute of a substitute for a substitute of a subst	ating period, except, 1981, permitting the 1981, any distant stations authorizations: the 1981 permitted in the 19	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the Special Statement of t	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further	G Primary Transmitters: Television
FCC. For Mexican or Cana Note: If you are utilizing m	•	•	•	which the station is identifed.	
Note. If you are utilizing in	•	NNEL LINE-UP	•	спаппет ппе-ир.	
SIGN	B'CAST 3. TYPE OF STATI	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name CABLE ONE, INC. d/b/a SPARKLIGHT 10379 PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION S/D

LEGAL NAME OF OWNER OF								PERIOD: 2020/2	
CADIE ONE INC 4/b/						S	YSTEM ID#	Name	
CABLE ONE, INC. d/b/	a SPARNI	LIGH I					10379		
SUBSTITUTE CARRIAGE	E: 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 CONCERNING SUBSTITUTE CARRIAGE							Substitute Carriage: Special		
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Yes XNo								Statement and Program Log	
Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS									
In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast 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). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in									
5	SUBSTITUT	F PROGRAM	WHEN SUBSTITUTE 7. REASON						
TITLE OF PROGRAM	SUBSTITUTE PROGRAM CARRIAGE OCCURRED FOR TITLE OF PROGRAM 2. LIVE? 3. STATION'S CARRIAGE OCCURRED FOR DELETION TO STATION OF A						l .		
	2. LIVE? Yes or No		4. STATION'S LOCATION	CARR	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		
		3. STATION'S		CARR 5. MONTH	IAGE OCCL	JRRED IMES	FOR		

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 6.

Name	CABLE ONE		SPARKLIGHT						8YSTEM ID# 10379
J Part-Time Carriage Log	time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occ-								9
			DATES	AND HOURS	OF F	PART-TIME CAR	RIAGE		
	CALL SIGN	WHEN	CARRIAGE OCCL			CALL SIGN	WHE	N CARRIAGE OCCL	
	OALL GIGIT	DATE	HOUF FROM	RS TO		OALL GION	DATE	HOUF FROM	RS TO
		DATE	FROM	10			DATE	FROM	10
			_					_	
			_					_	
			_					_	
			_					_	
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			_					_	
			_					_	
			_						
			_					_	
								_	
					l				

LEGA	SASE. PAGE 7. IL NAME OF OWNER OF CABLE SYSTEM: SYSTEM BLE ONE, INC. d/b/a SPARKLIGHT 103	Namo				
Inst all a (as pag	COSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of mounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service identified in space E) during the accounting period. For a further explanation of how to compute this amount, see (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. STANT: You must complete a statement in space P concerning gross receipts. (Amount of gross receipts)	K Gross Receipts				
• Con • Con • If you fee • If you accompany	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. It is system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum from block 1 on line 1 of block 4, and calculate the total royalty fee. It is system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule companying this form and attach the schedule to your statement of account.	L Copyright Royalty Fee				
bloc	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of k 3 below. Art 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 in block					
3 be If pa	or the BSE schedule was completed, the amount from line 7 or block 3 should be entered on line 2 in block 9 low. Int 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be entered on line block 4 below.					
	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are required to pay at least the minimum fee, regardless of whether they carried any distant stations. This fee is 1.064 percent of the system's gross receipts for the accounting period.					
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.	- 1				
	This is your minimum fee. \$ 14,722.05					
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the information you gave in space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column 4, you must check "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period? X Yes—Complete the DSE schedule. No—Leave block 3 below blank and complete line 1, block 4.					
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero \$ 2,245.49	_				
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	_				
	Line 3. Add lines 1 and 2 and enter here \$ 2,245.49]				
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger.	Cable systems				
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero. 0.00	submitting additional deposits under				
	Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)					
	Line 4. FILING FEE	additional fees. Division for the				
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	appropriate form for submitting the additional fees.				
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See page (i) of the general instructions located in the paper SA3 form for more information.)	additional 1003.				

ACCOUNTING PERIOD: 2020/2 FORM SA3E, PAGE 8.

Name		STEM ID#
	CABLE ONE, INC. d/b/a SPARKLIGHT	10379
	CHANNELS	
M	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations	
Channels	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	
Gildinicis	Enter the total number of channels on which the cable	7
	system carried television broadcast stations	
	2. Enter the total number of estivated abounds	
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations	\neg
	and nonbroadcast services	
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual	
Individual to	we can contact about this statement of account.)	
Be Contacted		
for Further	Name EMERSON YEARWOOD Telephone 602-364-6195	
Information		
	Address 210 E EARLL DRIVE (Number, street, rural route, apartment, or suite number)	
	PHOENIX, AZ 85012	
	(City, town, state, zip)	
	Email emerson.yearwood@cableone.biz Fax (optional) 602-364-6013	
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)	
0		
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified	
	in line 1 of space B and that the owner is not a corporation or partnership; or	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.	
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.	
	[18 U.S.C., Section 1001(1986)]	
	/s/Raymond Storck	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2"	
	button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	
	Typed or printed name: RAYMOND STORCK	
	Title: VICE PRESIDENT	
	(Title of official position held in corporation or partnership)	••••
	Date: 5-h	
1	Date: February 25, 2021	

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

	STEM ID#	Name
CABLE ONE, INC. d/b/a SPARKLIGHT	10379	
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119	sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.	Э	Concerning Gross Receipts Exclusion
During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmission made by satellite carriers to satellite dish owners?	ons	
X NO		
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Name Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment for an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	ent.	Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here		
x	days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	_ ′ ₋	
x 0.00274	4	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,		
space L, (page 7)		
(interest cha		
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assistance ple contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	ease	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the origining.	inal	
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 sufficiency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2020/2

DSE SCHEDULE. PAGE 10.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

• Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	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 pernitted station but does not fall into one of the above categories, please attach written documentation to the statement of account detailing the basis for its classification.

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

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

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

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

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

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

SCHEDULE

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

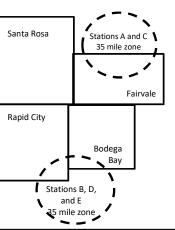
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

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



Distant Stations Carr	iea	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

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

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

ACCOUNTING PERIOD: 2020/2

4	LEGAL NAME OF OWNER OF CAB	LE SYSTEM:			S'	YSTEM ID#
1	CABLE ONE, INC. d/b/a	SPARKLIGHT				10379
	SUM OF DSEs OF CATEGO	RY "O" STATIONS	:			
	Add the DSEs of each static					
	Enter the sum here and in line		chedule.		1.25	
						1
2	Instructions: In the column headed "Call	Sign": list the call s	iane of all distant stations	identified by the	letter "∩" in column 5	
_	of space G (page 3).	Sign . list the call s	ayrıs or alı distant stations	s identified by the	letter O in column 5	
Computation	In the column headed "DSE	:": for each indepen	dent station, give the DSI	E as "1.0"; for ead	ch network or noncom-	
of DSEs for	mercial educational station, g					
Category "O"		(CATEGORY "O" STATIO	NS: DSEs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	KTEJ	0.250				
	WDKA-2	1.000				
		<u> </u>		<u> </u>		
		····				
		····				
Add rows as		····				
necessary.		<mark> </mark> -		<mark></mark>		
Remember to copy all		····		 -		
formula into new						
rows.		<mark></mark> .				
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Name		WNER OF CABLE SYSTEM:					•	SYSTEM ID#
Name	CABLE ONE,	INC. d/b/a SPARKLI	GHT					10379
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2: figure should co Column 3: Column 4: be carried out Column 5: give the type-v Column 6:	t the call sign of all distan : For each station, give th correspond with the inform : For each station, give th : Divide the figure in colur at least to the third decim : For each independent st 'alue as ".25."	e number of hounding to a total number on the total number on 2 by the figural point. This is the action, give the "turn 4 by the figurum 4 by	ars your cable system of pace J. Calculate only of hours that the station is in column 3, and give the "basis of carriage waype-value" as "1.0." For the column 5, and giver in column	carried the station one DSE for each broadcast over the result in devalue" for the station each network ive the result in control or each network.	n during the accounting perch station. the air during the account ecimals in column 4. This fi	ting period. igure must onal station, s than the	
Capacity			CATEGORY	LAC STATIONS:	COMPLITATI	ON OF DSEs		
	1. CALL SIGN	2. NUMBEI OF HOU CARRIE SYSTEM	R 3 JRS D BY	B. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	5. TYPE	6. DS	SE
			÷		=	<u>x</u>	=	
			÷ -			x	<u> </u>	
			÷ ÷			x x	=	
			÷	=		x	=	
			÷ ÷		-	x	<u>=</u>	
			÷			x	=	
	Add the DSEs of	OF CATEGORY LAC ST of each station. The here and in line 2 of particular particular in line 2.		lule,		0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in effer Broadcast or space I). Column 2: Fat your option. Tolumn 3: EColumn 4: ECo	ct on October 19, 1976 (a ne or more live, nonnetwor For each station give the r This figure should corresp Enter the number of days Divide the figure in column his is the station's DSE (f	ution for a progras s shown by the lark programs durin number of live, noond with the infoin the calendar yn 2 by the figure for more informat	am that your system wetter "P" in column 7 cong that optional carriage onnetwork programs cormation in space I. rear: 365, except in a I in column 3, and give ation on rounding, see	ras permitted to of space I); and e (as shown by the carried in substitute eap year. the result in colupage (viii) of the	delete under FCC rules and e word "Yes" in column 2 of ution for programs that were mn 4. Round to no less the general instructions in the	re deleted an the third	
				BASIS STATION				
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBEF OF DAYS IN YEAR	3	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷		=		÷		=
		÷		=		-		=
		÷		=		÷		=
		÷		=		÷		=
	Add the DSEs o	OF SUBSTITUTE-BASIS	S STATIONS:			0.00	1	-
5		R OF DSEs: Give the amo		oxes in parts 2, 3, and 4	of this schedule	and add them to provide th	ne total	
Total Number		of DSEs from part 2 •				<u> </u>	1.25	
of DSEs		of DSEs from part 3 ●				<u></u>	0.00	
	3. Number o	of DSEs from part 4 ●				-	0.00	
	TOTAL NUMBEI	R OF DSEs				>		1.25

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

	WNER OF CABLE S						S	YSTEM ID# 10379	Name
nstructions: Bloc	ck A must be comp	leted.							_
	"Yes," leave the rer	mainder of pa	irt 6 and part 7	of the DSE schedu	ule blank and	complete part	8, (page 16) of the		6
	"No," complete bloc	cks B and C t							
				TELEVISION MA					Computation of 3.75 Fee
s the cable systen ffect on June 24,	n located wholly ou 1981?	itside of all m	ajor and smalle	er markets as defin	ed under sect	tion 76.5 of FC	C rules and regula	itions in	
Yes—Com	plete part 8 of the	schedule—D	O NOT COMP	LETE THE REMAII	NDER OF PA	RT 6 AND 7.			
X No—Comp	olete blocks B and 0	C below.							
		BLO	CK B: CARF	NAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN	FCC rules and re	gulations pric e DSE Sched	or to June 25, 1 Jule. (Note: Th	oart 2, 3, and 4 of t 981. For further ex e letter M below ref Act of 2010.)	planation of p	ermitted statio	ns, see the	·	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerica D Grandfathered instructions for E Carried pursua *F A station prev	les and reguled pursuant to on as defined all educational station (76.6 r DSE schedunt to individuciously carried HF station wield produced produce	ations cited be to the FCC mar in 76.5(kk) (76 l station [76.59 l) (see paragrule). all waiver of FC d on a part-tim thin grade-B c	6.59(d)(1), 76.61(e) (c), 76.61(d), 76.63 aph regarding subs CC rules (76.7) e or substitute basi ontour, [76.59(d)(5	e in effect on 3.57, 76.59(b), (1), 76.63(a) is stitution of grass prior to June	June 24, 1981. 76.61(b)(c), 76 referring to 76. to 76.61(d)] ndfathered sta	.63(a) referring to 61(e)(1) tions in the		
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	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	
		•						0.00	
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE				
ine 1: Enter the	total number of l	DSEs from լ	part 5 of this	schedule					
ine 2: Enter the	sum of permitted	d DSEs from	n block B abo	ve			,		
	line 2 from line 1. eave lines 4–7 bl					ate.			
ine 4: Enter gro	ess receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the
ine 5: Multiply li	ine 4 by 0.0375 a	ınd enter su	m here						partially permited/ partially
ine 6: Enter tota	al number of DSE	s from line	3				x		nonpermitted carriage? If yes, see par 9 instructions
ine 7: Multiply li	ine 6 by line 5 an	d enter here	and on line	2, block 3, space	I (page 7)			0.00	3 motructions

	FOWNER OF CABLE S E, INC. d/b/a SPAI						S'	YSTEM ID# 10379	Name
		BLOCK	A: TELEVI	SION MARKETS	(CONTINU	JED)			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
0.0.1	2, 10.0		0.0.1	2, (6.6		0.0.1	2, 10.0		Computation o
						1			

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. d/b/a SPARKLIGHT 10379 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.) Computating 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. the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). 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 If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. of the **Syndicated BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defned by section 76.5 of FCC rules in effect June 24, 1981? Yes—Complete blocks B and C . No—Proceed to part 8 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 or in part, over the cable system? to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN 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. d/b/a SPARKLIGHT	SYSTEM ID# 10379	Name
		10379	
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,383,651.05	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ \$		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge.		
	Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS 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)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2)		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)		
	Syndicated Exclusivity Surcharge		

Name		ME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT	10379
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation of the Syndicated		A. Enter 0.00300 of gross receipts (the amount in section 1)	
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here.	
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here ▶	
		F. Multiply line D by line E and enter here	
		Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge	
8 Computation of Base Rate Fee	6 was of In blood In blood In group blank. What is were lood to the were lood In blood In the were lood In the blood In th	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 below	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did yo	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.	
	Section	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	1	Enter the amount of gross receipts from space K (page 7) ▶ _ \$	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.).	
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts (the amount in section 1) ▶ _\$	
		B. Enter 0.00701 of gross receipts (the amount in section 1)	
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	0.00
		Base Rate Fee	

	AME OF OWNER OF CABLE SYSTEM: LE ONE, INC. d/b/a SPARKLIGHT	SYSTEM ID# 10379	Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4	A. Enter 0.01064 of gross receipts (the amount in section 1) * ** ** ** ** ** ** ** ** **	_	8
	B. Enter 0.00701 of gross receipts (the amount in section 1) \$		Computation of Base Rate Fee
	C. Multiply line B by 3.000 and enter here	_	
	D. Enter 0.00330 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee	0.00	
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channels.		9
In Gen receipt exclusi First: I station DSEs a	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee is from subscribers located within the station's local service area, from your system's total gross receipts. To take a con, you must: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each subscriber group. That total is the base rate fee for your system.	o the same	Computation of Base Rate Fee and Syndicated Exclusivity Surcharge
NOTE: also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B becable system is wholly located outside all major television markets, complete block A only.		for Partially Distant Stations, and
Step 1	Identify a Subscriber Group for Partially Distant Stations For each community served, determine the local service area of each wholly distant and each partially distant state to that community.	ition you	for Partially Permitted Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were lot the station's local service area. A subscriber located outside the local service area of a station is distant to that state token, the station is distant to the subscriber.)		
subscri	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Compt groups	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your sys	tem's subscriber	
• Identi	section: fy the communities/areas represented by each subscriber group. the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to albers in the group.	ll of the	
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it is schedule; or,	in parts 2, 3, and	
, ,	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in l 6 of this schedule.	block B,	
• Add t	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general is paper SA3 form.	instructions	
page. DSEs f	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the or that group's complement of stations and total gross receipts from the subscribers in that group). You do not necesticulations on the form.	at is, the total	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 10379 CABLE ONE, INC. d/b/a SPARKLIGHT Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNE CABLE ONE, INC.						S	YSTEM ID# 10379	Name
				TE FEES FOR EACH				
COMMUNITY/ADEA	STODD	SUBSCRIBER GROU	<u>P</u>	COMMUNITY/ADEA		N COUNTY CENT		9
COMMUNITY/ AREA	31000	AKD CO		COMMUNITY/ AREA	DONKLI	N COUNTY CENT	NAL	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
KTEJ	0.25							Base Rate Fee and
								Syndicated
								Exclusivity
	<u></u>							Surcharge for
								Partially
	<u> </u>							Distant
								Stations
			<u> </u>					
Total DSEs			0.25	Total DSEs			0.00	
Gross Receipts First G	roup	<u>\$ 464</u>	,412.20	Gross Receipts Secon	d Group	\$	82,005.95	
Base Rate Fee First G			,235.34	Base Rate Fee Secon		\$	0.00	
COMMUNITY/ADEA		SUBSCRIBER GROU		COMMUNITY/ AREA		SUBSCRIBER GROU	P	
COMMUNITY/ AREA	DUNKL	IN CO NORTH & N	YEVV IVIAI	COMMUNITY/ AREA	DUNKLI	N CO SOUTH		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
KTEJ	0.25							
								
	-							
	-							
Total DSEs			0.25	Total DSEs			0.00	
Gross Receipts Third G	Group	\$ 203	,658.70	Gross Receipts Fourth	Group	\$ 30	00,523.72	
							$\neg \neg $	
Base Rate Fee Third G	Group	\$	541.73	Base Rate Fee Fourth	Group	\$	0.00	
				11				
Base Rate Fee: Add the Enter here and in block			ber group a	s shown in the boxes ab	ove.	\$	2,245.49	

CABLE ONE, INC.						•	10379	Name
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRII	BER GROUP		
	FIFTH	SUBSCRIBER GRO	JP		SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	CLAY 8	GREENE COUN	TIES (AR	COMMUNITY/ AREA	PEMISC	OT COUNTY SO	UTH	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				WDKA-2	1.00			Base Rate Fe
								and
			<u></u>					Syndicated
								Exclusivity
								Surcharge
			<u></u>					for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			1.00	
Gross Receipts First G	iroup	\$ 289	,562.04	Gross Receipts Seco	ond Group	\$	40,230.59	
-					•			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	428.05	
	SEVENTH	SUBSCRIBER GRO	JP		EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	PEMISO	COT COUNTY NO	RTH	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
KTEJ	0.25							
WDKA-2	1.00							
Total DSEs			1.25	Total DSEs			0.00	
Gross Receipts Third (2roup	. 3	3,257.85	Gross Receipts Four	th Group	¢	0.00	
Gross Necelbis Hillia	υ ι υαρ	\$ 3	,,201.00		ar Group	\$	0.00	
Base Rate Fee Third (Group	\$	40.37	Base Rate Fee Four	th Group	\$	0.00	
					•			
Base Rate Fee: Add th	ne base rat e	e fees for each subsc	riber arous	as shown in the hoves	above			
Enter here and in block	3, line 1, s	pace L (page 7)	g.oup	55		\$		

CABLE ONE, INC						S	10379	Name
				ATE FEES FOR EAC				
	NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
			<u></u>				<u></u>	and
								Syndicated Exclusivity
	····		····				·····	Surcharge
								for
								Partially
			<u>.</u>					Distant Stations
	····		····	-			·····	Otations
			<u></u>					
Total DSEs	'		0.00	Total DSEs	'		0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	0.00	
	ELEVENTH	SUBSCRIBER GRO				SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				II				
Base Rate Fee: Add the Enter here and in block	he base rat k 3, line 1, s	te fees for each subsepace L (page 7)	criber group a	as shown in the boxes	above.	\$		

CABLE ONE, IN						5	10379	Name
				ATE FEES FOR EAG				
		SUBSCRIBER GRO		ii		H SUBSCRIBER GROU	JP 0	9
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Stations
Total DSEs	•		0.00	Total DSEs	'		0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
	•				•			
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		-		SUBSCRIBER GROU	JP 0	
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
				П				
			criber group	as shown in the boxes	above.			
Enter here and in blo	ock 3, line 1, s	space L (page 7)				\$		

LEGAL NAME OF OWN							10379	Name
				TE FEES FOR EAC				
	NTEENTH	SUBSCRIBER GRO		 		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	······		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fo
	····		····					and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
	····		····					Stations
	<u>.</u>		<u>.</u>					
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts First G	Froun	\$	0.00	Gross Receipts Sec	and Group	\$	0.00	
orodo redospio i noi e	лоцр			ll cross rescripts cos	ond Group	<u>*</u>		
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	INTEENTH	SUBSCRIBER GRO						
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····		····					
	<u></u>		<u>.</u>					
	····		····	-				
	<u></u>		<u>.</u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Foun	th Group	\$	0.00	
ase Rate Fee: Add t	ha hasa ra t	a face for each subs	criber group :	es shown in the hoves	abovo			

CABLE ONE, INC						S	10379	Name
	ENTY-FIRST	COMPUTATION C SUBSCRIBER GRO	UP	11	NTY-SECONI	IBER GROUP SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
			<u>.</u>					and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	and Group	\$	0.00	
Gross Receipts i list	Огоар	4	0.00	Gloss Receipts dec	ona Oroap	*	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		TI .		H SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
S. OOS TOOSIPIS TIME	. J. Jup	<u>-</u>			Стоир	<u>*</u>		
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWI						S	10379	Name
TWI		COMPUTATION C SUBSCRIBER GRO		ATE FEES FOR EAC		IBER GROUP I SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
				.				
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	-	\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO		ii –		1 SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW CABLE ONE, IN						S	10379	Name
TW		COMPUTATION C		ATE FEES FOR EAC		IBER GROUP I SUBSCRIBER GROU	JP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts Firs	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
			1					
Base Rate Fee Firs		\$	0.00	Base Rate Fee Sec		\$	0.00	
TI COMMUNITY/ ARE		SUBSCRIBER GRO	OUP 0	THIF COMMUNITY/ ARE		SUBSCRIBER GROU	JP 0	
COMMUNITY ARE	Α			COMMONT 1/ ARE	Η			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add	d the hase rat	e fees for each subs	criber group	as shown in the boxes	above			
Enter here and in blo			g. oup	5		\$		

LEGAL NAME OF OW CABLE ONE, INC						S	10379	Name
	IRTY-THIRD	COMPUTATION C SUBSCRIBER GRO	UP	ii	RTY-FOURTH	IBER GROUP I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
				.	•••••			Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		ii –		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
•	•				•			
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWI						S	YSTEM ID# 10379	Name
	Y-SEVENTH	COMPUTATION C SUBSCRIBER GRO	UP	11	IRTY-EIGHTH	IBER GROUP I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

BI OCK						10379	Name
	A: COMPUTATION (ST SUBSCRIBER GR		TIT.		RIBER GROUP D SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate Fe
							Syndicated
							Exclusivity
							Surcharge for
							Partially
							Distant Stations
							Stations
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	D SUBSCRIBER GRO		ii –		H SUBSCRIBER GROU	_	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	

CABLE ONE, IN						5	10379	Name
	BLOCK A:	COMPUTATION (F BASE RA	ATE FEES FOR EAG	CH SUBSCR	IBER GROUP		
		SUBSCRIBER GRO		11		H SUBSCRIBER GROU		a
COMMUNITY/ AREA	A		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Name
								Base Rate Fee
			····					
			····					Otations
				.				
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
			1					
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO		TI .		H SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	·······		<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Bets For This	d Cro		0.00	Base Bate For F	wth Carrie			
Base Rate Fee Third	и Group	\$	0.00	Base Rate Fee Fou	rui Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		
Lines here and in bit	, in 6 1, 3	Space E (page 1)				~		

CABLE ONE, INC.						S	10379	Name
				TE FEES FOR EAC				
FOR COMMUNITY/ AREA	RTY-NINTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
OALL CION	I DOE	II OALL SION	T por		LDOE	II OALL OLON		Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
	····		····					for
								Partially
								Distant
	····		····					Stations
								
				.				
Total DSEs	•		0.00	Total DSEs	'		0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FIF	TY-FIRST	SUBSCRIBER GRO	UP	FI	TY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
	····		····					
				.				
	····		····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	ne base rat < 3, line 1, s	e rees for each subsemble (page 7)	criber group a	as snown in the boxes	above.	\$		

LEGAL NAME OF OW CABLE ONE, INC						S	10379	Name
F		COMPUTATION C SUBSCRIBER GRO		ATE FEES FOR EAC		IBER GROUP I SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs		П	0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	and Group	\$	0.00	
Orosa Neccipia i irai	Огоир	4	0.00	Closs Receipts dec	ona Oroap	4	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO				1 SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		П	0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	~ r	·				·		
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW CABLE ONE, INC						S	10379	Name
FIFT		COMPUTATION C SUBSCRIBER GRO		ATE FEES FOR EAC		IBER GROUP I SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				.				Base Rate Fe
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO				1 SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC						5	10379	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		ii		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
			····	-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		II		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····	-				
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Raca Pata Faa Thi	d Group		0.00	Raca Bata Faa Faa	rth Group		0.00	
Base Rate Fee Third	а споир	\$	0.00	Base Rate Fee Fou	rai Gioup	\$	0.00	
Base Rate Fee: Add	the base rat	te fees for each subs	criber group	as shown in the boxes	above.			
Enter here and in blo						\$		

		COMPUTATION C						
COMMUNITY/ AREA		SUBSCRIBER GRO		ATE FEES FOR EAC	JP	•		
			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
			····					and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
				-				
				-				
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First 0		\$	0.00	Base Rate Fee Seco		\$	0.00	
	-SEVENTH	SUBSCRIBER GRO		TI .		I SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····					
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxes	above.			

CABLE ONE, INC.						S	10379	Name
				TE FEES FOR EAC				
	(TY-NINTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	<u>.</u>						<u></u>	and
								Syndicated Exclusivity
	····		···				·····	Surcharge
								for
								Partially
	<u>.</u>							Distant Stations
	····		····	-			·····	Otations
	<u></u>							
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	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVE	NTY-FIRST	SUBSCRIBER GRO	UP	SEVEN	NTY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
	<u></u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.0		0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Dece Data Free Alli	b '	a fana fan er ek er l		alanomic October	-1			
Base Rate Fee: Add the Enter here and in block			ander group a	as snown in the doxes	apove.	\$		

CABLE ONE, INC						S	10379	Name
	NTY-THIRD	COMPUTATION O SUBSCRIBER GRO	UP	ii	NTY-FOURTH	IBER GROUP I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
				.				
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Second Group \$ 0.00			0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		ii –		1 SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	<u> </u>		0.00	Total DSEs	<u> </u>		0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
1	•				F	·		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 10379								
	Y-SEVENTH	COMPUTATION C SUBSCRIBER GRO	UP	11	NTY-EIGHT	IBER GROUP I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVE	NTY-NINTH	SUBSCRIBER GRO)UP		EIGHTIETH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
			<u>_</u>					
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 10379								
	SHTY-FIRST	COMPUTATION C SUBSCRIBER GRO	UP	11	HTY-SECONE	IBER GROUP SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
				.				
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Second Group \$ 0.0			0.00	
Base Rate Fee First	-	\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO		ii –		1 SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
•	·				•			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 10379								
ElG		COMPUTATION O		ATE FEES FOR EAC		IBER GROUP I SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				.				Base Rate Fe
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
				-				Distant
								Stations
				-				
				-				
Total DSEs			0.00	Total DSEs			0.00	
	C	_		Total DSEs 0.00 Gross Receipts Second Group \$ 0.00				
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO				I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
			·····	-				
Total DSEs		Ш	0.00	Total DSEs			0.00	
Gross Receipts Third	Group	¢	0.00	Gross Receipts Fou	rth Group	*	0.00	
orosa Neoeibis IIIII	Gloup	\$ 	0.00	Totos Necelpis Fou	rai Oroup	<u>\$</u>		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 10379								
EIG		COMPUTATION C		ATE FEES FOR EAC		IBER GROUP I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fed
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Second Group \$ 0.00				
·								
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NII COMMUNITY/ AREA		SUBSCRIBER GRO)UP 0	NINE COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	
COMMONT 1/ AIRE								
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				.				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
		_						
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 10379								
				TE FEES FOR EAC					
		SUBSCRIBER GRO		ii -		SUBSCRIBER GROU	JP 0	9	
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE	Computation				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
								Syndicated	
								Exclusivity Surcharge	
								for	
								Partially	
								Distant	
								Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
N	INETY-FIFTH	SUBSCRIBER GRO	DUP	N	IINETY-SIXTH	SUBSCRIBER GROU	JP		
COMMUNITY/ ARE/	Α		0	COMMUNITY/ ARE					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			<u></u>						
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third	a Group	\$	0.00	Base Rate Fee Fou	rtn Group	\$	0.00		
				Ш					
Base Rate Fee: Add Enter here and in blo			criber group a	as shown in the boxes	above.	\$			
	2, 1, .	, (r~g~ / /				,			

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 10379								
	Y-SEVENTH	COMPUTATION C SUBSCRIBER GRO	UP	11	IETY-EIGHTH	IBER GROUP I SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs	•	·	0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		11		1 SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	<u> </u>	!!	0.00	Total DSEs	<u> </u>		0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
ļ-1- ·······	•				F	·		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN						S	10379	Name
		COMPUTATION C SUBSCRIBER GRO		ONE HUNDS	RED SECONE	IBER GROUP) SUBSCRIBER GROU	JP 0	9
COMMONT I/ AREA				COMMONT I/ ARE	······································			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
	·····		····		•••••			Exclusivity
								Surcharge
								for
	<u>.</u>							Partially Distant
	·····						·····	Stations
	<mark>.</mark>							
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		11		1 SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u>.</u>							
	<u>.</u>							
Total DSEs	•	'	0.00	Total DSEs	'		0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
,,,,,,,,,,,	•				F	·		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Foun	rth Group	\$	0.00	
Base Rate Fee: Add t			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC.						S	10379	Name
				ATE FEES FOR EAC				
	RED FIFTH	SUBSCRIBER GRO		†I		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
	····		···					for
								Partially
								Distant
								Stations
							·····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED	SEVENTH	SUBSCRIBER GRO	UP	ONE HUND	RED EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····		···				·····	
	····		···				·····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts 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	ne base rat 3, line 1, s	e fees for each subsc space L (page 7)	riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.						S	10379	Name
				TE FEES FOR EAC				
	ED NINTH	SUBSCRIBER GROU		 		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
	<u></u>						<u></u>	Exclusivity Surcharge
	<u></u>							for
								Partially
								Distant
								Stations
			-					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED E	LEVENTH	SUBSCRIBER GROU	JP	ONE HUNDRE	D TWELVTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u> </u>							
								
	<u></u>							
	<u> </u>							
	···							
			······································					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
							$\neg \neg $	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				• •				
Base Rate Fee: Add th Enter here and in block	e base rat 3, line 1, s	e fees for each subsc space L (page 7)	riber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE						S	10379	Name
				ATE FEES FOR EAC				
ONE HUNDRED THI COMMUNITY/ AREA	RTEENTH	SUBSCRIBER GROU	JP 0	ONE HUNDRED F		SUBSCRIBER GROU	JP 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL GIGIN	DOL	CALL GIGIN	BOL	GALL GIGIN	DOL	OALL GIGIN	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant Stations
	····							Otations
	···							
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	
	IFTEENTH	SUBSCRIBER GROU		ti -		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
	····		······································					
	····		····					
	···		······································					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third 0	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Dana Deta Es A 1111	- h	- face from a set	wile - w					
Base Rate Fee: Add the Enter here and in block	e pase rat 3, line 1, s	e iees ior each subsc space L (page 7)	nper group	as snown in the doxes	apove.	\$		

CABLE ONE, INC						S	10379	Name
ONE HUNDRED SEV	'ENTEENTH			ONE HUNDRED E	EIGHTEENTH	IBER GROUP SUBSCRIBER GROU	JP 0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								Syndicated
								Exclusivity
								Surcharge
								for
			···					Partially Distant
								Stations
			····					
			···					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Basa Bata Faa Firet	0,,,,,,		0.00	Bass Bats Foo See	and Crave		0.00	
Base Rate Fee First		CHRCCDIPED CDO	0.00	Base Rate Fee Sec		L CURCORIRER CROI	0.00	
COMMUNITY/ AREA		SUBSCRIBER GRO	<u> </u>	COMMUNITY/ AREA		1 SUBSCRIBER GROU	0	
001111111111111111111111111111111111111								
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			···		•••••			
			····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	I Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Foun	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC							10379	Name
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
		SUBSCRIBER GRO		1		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
			<u></u>					Surcharge
								for
								Partially
								Distant Stations
								Giationo
			<u>-</u>				·····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TW	'ENTY-THIRD	SUBSCRIBER GROUP)	ONE HUNDRED TW	ENTY-FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
			<u></u>					
								
								
Total DSEs			0.00	Total DSEs			0.00	
		•			outh Consum			
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	iui Group	<u>\$</u>	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW CABLE ONE, IN						\$	SYSTEM ID# 10379	Name
ONE HUNDRED TO	WENTY-FIFTH	COMPUTATION O		ONE HUNDRED T	WENTY-SIXTI	RIBER GROUP	0	9
COMMONTI IT AREA	······································			COMMONT I/ ARE	^			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Gross Receipts First Group \$ 0.00			Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GROU		ii		H SUBSCRIBER GROUF	_	
COMMUNITY/ AREA	Α		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				Ш				
Base Rate Fee: Add	d the base ra t	te fees for each subs	criber group	as shown in the boxes	above.			
Enter here and in blo			J F			\$		

CABLE ONE, INC						S	10379	Name
	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED TWI	ENTY-NINTH	SUBSCRIBER GROUP		ONE HUNDR	ED THIRTIETH	SUBSCRIBER GROUP)	٥
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Samuration
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O/ALL SIGIT	552	O/ IEE O/O/I	562	O/ ILL SIGIT	502	O/ LEE GIGIT	552	Base Rate Fee
								and
								Syndicated
			<u></u>					Exclusivity
								Surcharge for
	····				•••••			Partially
								Distant
								Stations
			<u>.</u>					
			<u>.</u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TH	HIRTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED TH	IRTY-SECONE	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>					
			<u>.</u>					
			<u>.</u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Foul	rth Group	\$	0.00	
Base Rate Fee: Add to Enter here and in blood			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW CABLE ONE, INC						S	10379	Name
ONE HUNDRED T	HIRTY-THIRD	COMPUTATION C		ONE HUNDRED TH	IIRTY-FOURTH	IBER GROUP SUBSCRIBER GROUP	0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
					•••••			Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Otations
Total DSEs			0.00	Total DSEs			0.00	
	Croup	•			and Craun	•		
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED 1	THIRTY-FIFTH	SUBSCRIBER GROU	Р	ONE HUNDRED	THIRTY-SIXTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					•••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Croup	•	0.00	Gross Receipts Fou	rth Croup	•	0.00	
Cross Receipts Tillic	ι Οιουρ	\$	<u> </u>		rar Group	\$	<u> </u>	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

Nan	10379							
				TE FEES FOR EACH	BASE RA			
9		SUBSCRIBER GROUP	RTY-EIGHTH			SUBSCRIBER GROUP		
Comput	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rat								
and								
Syndica								
Exclusi								
Surcha								
for								
Partial Distar		-					····	
Station								
			···					
-								
.	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	ross Receipts First Group \$ 0.00		
	0.00							
1	0.00	·	·				- ,	ross recoupts i not e
	0.00	\$		Base Rate Fee Seco	0.00	\$		
 -	0.00	\$	d Group	Base Rate Fee Seco	0.00	\$ SUBSCRIBER GROUP	Group	ase Rate Fee First G
. 	0.00		d Group	Base Rate Fee Seco		\$ SUBSCRIBER GROUP	Group	one hundred th
. 	0.00	\$	d Group	Base Rate Fee Seco	0.00	\$ SUBSCRIBER GROUP	Group	ase Rate Fee First G
- - - -	0.00	\$	d Group	Base Rate Fee Seco		SUBSCRIBER GROUP	Group	ONE HUNDRED THE
	0.00 UP	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED COMMUNITY/ AREA	0		Group	ONE HUNDRED THE
	0.00 UP	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED COMMUNITY/ AREA	0		Group	ONE HUNDRED THE
	0.00 UP	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED COMMUNITY/ AREA	0		Group	ONE HUNDRED THE
	0.00 UP	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED COMMUNITY/ AREA	0		Group	ONE HUNDRED THE
	0.00 UP	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED COMMUNITY/ AREA	0		Group	ONE HUNDRED THE
	0.00 UP	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED COMMUNITY/ AREA	0		Group	ONE HUNDRED THE
	0.00 UP	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED COMMUNITY/ AREA	0		Group	ONE HUNDRED THE
	0.00 UP	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED COMMUNITY/ AREA	0		Group	ONE HUNDRED THE
	0.00 UP	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED COMMUNITY/ AREA	0		Group	ONE HUNDRED THE
	0.00 UP	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED COMMUNITY/ AREA	0		Group	ONE HUNDRED THE
	0.00 UP	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED COMMUNITY/ AREA	0		Group	ONE HUNDRED THE
	0.00 UP	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED COMMUNITY/ AREA	0		Group	ONE HUNDRED THE
	0.00 UP	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED COMMUNITY/ AREA	0		Group	ONE HUNDRED THE
	0.00 UP 0 DSE	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDREI COMMUNITY/ AREA CALL SIGN	DSE		Group	ONE HUNDRED THE COMMUNITY AREA
	0.00 UP 0 DSE 0.00	SUBSCRIBER GROU	d Group FORTIETH DSE	Base Rate Fee Seco ONE HUNDREI COMMUNITY/ AREA CALL SIGN Total DSEs	0 DSE	CALL SIGN	Broup IIRTY-NINTH DSE	ONE HUNDRED THE COMMUNITY AREA
	0.00 UP 0 DSE	\$ I SUBSCRIBER GROU	d Group FORTIETH DSE	Base Rate Fee Seco ONE HUNDREI COMMUNITY/ AREA CALL SIGN	DSE		Broup IIRTY-NINTH DSE	ONE HUNDRED THE OMMUNITY AREA
	0.00 UP 0 DSE 0.00	SUBSCRIBER GROU	d Group FORTIETH DSE	Base Rate Fee Seco ONE HUNDREI COMMUNITY/ AREA CALL SIGN Total DSEs	0 DSE	CALL SIGN	Broup IIRTY-NINTH DSE	Base Rate Fee First G
	0.00 UP 0 DSE 0.00	SUBSCRIBER GROU	DSE Group	Base Rate Fee Seco ONE HUNDREI COMMUNITY/ AREA CALL SIGN Total DSEs	0 DSE	CALL SIGN	Broup IIRTY-NINTH DSE Group	ONE HUNDRED THE COMMUNITY AREA

CABLE ONE, INC						S	10379	Name
	BLOCK A:	COMPUTATION O	BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		·
ONE HUNDRED F	ORTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED FO	ORTY-SECONE	SUBSCRIBER GROUP	,	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
			······································					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED F	ORTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED FO	ORTY-FOURTH	SUBSCRIBER GROUP	1	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	······		<u> </u>					
			······································		•••••			
			ļ					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
C. C.C. Receipts Tilliu	. J. Jup	.*		Sicos Receipts Fou	Огоар	*		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.						S	10379	Name
				ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	RTY-FIFTH	SUBSCRIBER GROUP	1	II		SUBSCRIBER GROUP		0
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
								and
								Syndicated Exclusivity
	<u></u>						····	Surcharge
								for
				.				Partially
								Distant
								Stations
	<u>-</u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FORTY	-SEVENTH	SUBSCRIBER GROUP	1	ONE HUNDRED F	ORTY-EIGHTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
				11				
Base Rate Fee: Add th Enter here and in block	e base rat 3, line 1, s	e fees for each subsc space L (page 7)	riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.						S	10379	Name
				ATE FEES FOR EAC				
ONE HUNDRED FOR	TY-NINTH	SUBSCRIBER GROU		ti –		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
	<u></u>		····					Syndicated Exclusivity
								Surcharge
								for
								Partially
							·····	Distant Stations
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	TY-FIRST	SUBSCRIBER GROU		ti –		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
			······································					
	<u></u>		····					
			-					
Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block	e base rat 3, line 1, s	e fees for each subsc space L (page 7)	riber group a	as shown in the boxes	above.	\$		

CABLE ONE, INC.						S	10379	Name
				ATE FEES FOR EAC				
ONE HUNDRED FIF COMMUNITY/ AREA	TY-THIRD	SUBSCRIBER GROU	JP 0	ONE HUNDRED FI		SUBSCRIBER GROU	JP 0	9
OOMMONT 17 / AREX				January 1774 C				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<u></u>							Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
	<u></u>							
T-t-LDCC-			0.00	Total DSEs			0.00	
Total DSEs			0.00		d C	•		
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	FTY-FIFTH	SUBSCRIBER GROU		ti -		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···		<u></u>					
	····		···					
	····		<u></u>					
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	ne base rat k 3, line 1, s	e fees for each subsc space L (page 7)	riber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN						S	10379	Name
ONE HUNDRED FIF	TY-SEVENTH	COMPUTATION C	Р	ONE HUNDRED	FIFTY-EIGHTI		0	9
oommorar 1774 (E)								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
			••••					Exclusivity
								Surcharge
								for
								Partially Distant
							·····	Stations
			<u></u>					
			····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GROU	MPUTATION OF BASE RATE FEES FOR EACH SUBSCR BSCRIBER GROUP ONE HUNDRED FIFTY-EIGHTH CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE O.00 Total DSEs Gross Receipts Second Group BSCRIBER GROUP ONE HUNDRED SIXTIETH O COMMUNITY/ AREA	H SUBSCRIBER GROUP	_			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							·····	
			••••					
Total DSEs	<u>'</u>	!!	0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	· -: -				- · P	·		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.						S	10379	Name
E	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GRO	UP		SECONE	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA	STODE	DARD CO		COMMUNITY/ AREA	DUNKL	IN COUNTY CENT		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<u></u>							
			····				·····	
				.				
					····			
								Partially
								Distant
								Stations
				.				
			····				·····	
			···	RATE FEES FOR EACH SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP COMMUNITY/ AREA DUNKLIN COUNTY CENTRAL CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs Gross Receipts Second Group Base Rate Fee Second Group FOURTH SUBSCRIBER GROUP A COMMUNITY/ AREA DUNKLIN CO SOUTH				
					ACH SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP REA DUNKLIN COUNTY CENTRAL DSE CALL SIGN DSE CALL SIGN DSE 0.000 Second Group \$ 82,005.95 FOURTH SUBSCRIBER GROUP REA DUNKLIN CO SOUTH			
Γotal DSEs			0.00	Total DSEs	•		0.00 82,005.95 0.00	
Gross Receipts First G	roup	\$ 46	4,412.20	Gross Receipts Secon	d Group	\$	82,005.95	9 Computation of Base Rate F and Syndicate Exclusivit Surcharge for Partially Distant Stations
3ase Rate Fee First G	roup	\$	0.00	Total DSEs Gross Receipts Second Group Base Rate Fee Second Group Base Rate Fee Second Group FOURTH SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP COMMUNITY/ AREA DUNKLIN COUNTY CENTRAL CALL SIGN DS CALL SIGN DS	0.00			
	THIRD	SUBSCRIBER GRO	MPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SECRIBER GROUP COMMUNITY/ AREA DUNKLIN COUNTY CENTE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN O.00 Total DSEs Gross Receipts Second Group Base Rate Fee Second Group SCRIBER GROUP COMMUNITY/ AREA DUNKLIN CO SOUTH FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA DUNKLIN CO SOUTH	JP				
COMMUNITY/ AREA	DUNKI	IN CO NORTH &	NEW MA	COMMUNITY/ AREA	DUNKL	IN CO SOUTH		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····					
			···				·····	
			ATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP COMMUNITY/ AREA DUNKLIN COUNTY CENTS CALL SIGN DSE CALL SIGN DSE CALL SIGN O.00 Total DSEs Gross Receipts Second Group Base Rate Fee Second Group BER GROUP ORTH & NEW MA COMMUNITY/ AREA DUNKLIN CO SOUTH					
					S FOR EACH SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP UNITY/ AREA DUNKLIN COUNTY CENTRAL SIGN DSE CALL SIGN CALL SIG			
	<u></u>				<u> </u>			
			····				·····	
								
Total DSEs			0.00	Total DSTa			0.00	
Total DSEs Gross Receipts Third 0	Froup	\$ 20	0.00 3,658.70	Total DSEs Gross Receipts Fourth	Group	s 3	0.00	
C. SOC I GOODPO TIMU C	очр	7 20	7,000.70	- Close Accepts Fourth	Jioup	<u>* </u>		
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			criber group	as shown in the boxes at	oove.	\$	0.00	

CABLE ONE, INC.		E SYSTEM: ARKLIGHT				`	10379	Name
	3LOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
	FIFTH	SUBSCRIBER GRO	UP		SIXTH	SUBSCRIBER GRO	UP	^
COMMUNITY/ AREA	CLAY 8	GREENE COUN	ITIES (AR	COMMUNITY/ AREA	PEMISO	COT COUNTY SOL	JTH	9 Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicate
								Exclusivit
								Surcharge
								for
								Partially
								Distant
								Stations
		 						
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			COMMUNITY/ AREA	0			OMMUNITY/ AREA
			COMMUNITY/ AREA	0			OMMUNITY/ AREA
			COMMUNITY/ AREA	0			OMMUNITY/ AREA
			COMMUNITY/ AREA	0			OMMUNITY/ AREA
			COMMUNITY/ AREA	0			
			COMMUNITY/ AREA	0			COMMUNITY/ AREA
			COMMUNITY/ AREA	0			COMMUNITY/ AREA
			COMMUNITY/ AREA	0			OMMUNITY/ AREA
			COMMUNITY/ AREA	0			OMMUNITY/ AREA
DSE			CALL SIGN	DSE			CALL SIGN
DSE	CALL SIGN	DSE	COMMUNITY/ AREA	0 DSE	CALL SIGN	DSE	CALL SIGN CALL SIGN Total DSEs
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DSE	CALL SIGN	DSE	COMMUNITY/ AREA	0 DSE	CALL SIGN	DSE	COMMUNITY/ AREA
DSE	CALL SIGN	DSE	COMMUNITY/ AREA	0 DSE	CALL SIGN	DSE	CALL SIGN CALL SIGN Total DSEs

	a SPARKI	TEM: LIGHT				•	10379	Nam
				ATE FEES FOR EAC				
	NTH SUBS	CRIBER GROU				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	٩		0	Computa
CALL SIGN DS	E CA	LL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
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			0.00	T			0.00	
otal DSEs			0.00	Total DSEs			0.00	
Fross Receipts First Group	\$		0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	\$		0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FIFTY-F	RST SUBS	CRIBER GROU	JP	FII	TY-SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			
CALL SIGN DS	E CA	LL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
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			•••					
Total DSEs			0.00	Total DSEs			0.00	
	\$		0.00	Total DSEs Gross Receipts Fou	rth Group		0.00	
Fotal DSEs Gross Receipts Third Group	\$		0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	

	SPARKLIGHT					10379	Name
	A: COMPUTATION (11				
FIFTY-THI COMMUNITY/ AREA	RD SUBSCRIBER GRO	DUP 0	COMMUNITY/ ARE		1 SUBSCRIBER GROU	UP 0	9
			COMMONT IT ARE	~			Computa
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate
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otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
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ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	TH SUBSCRIBER GRO				1 SUBSCRIBER GROU		
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α			
CALL SIGN DSE	II oarr olou		CALL SIGN	·····			
	CALL SIGN	DSE	II OTTEL CIOIT	DSE	CALL SIGN	DSE	
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	CALL SIGN	DSE	STEE STON	DSE	CALL SIGN	DSE	
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	CALL SIGN	DSE		DSE	CALL SIGN	DSE	
	CALL SIGN	DSE		DSE	CALL SIGN	DSE	
	CALL SIGN			DSE	CALL SIGN		
otal DSEs		0.00	Total DSEs			0.00	
Fotal DSEs Gross Receipts Third Group	\$				\$		

BLE ONE, INC. d/b/a SPA	SYSTEM: ARKLIGHT					10379	Name
			TE FEES FOR EACH				
	SUBSCRIBER GROU		ii		SUBSCRIBER GROU		9
MMUNITY/ AREA		0	COMMUNITY/ AREA			0	Computat
ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate
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							Surcharg
							for
							Partially
				····			Distant Stations
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			-		<u> </u>		
al DSEs		0.00	Total DSEs	<u> </u>	1	0.00	
	¢	0.00	Gross Receipts Seco	nd Croup		0.00	
ss Necelpls I list Gloup	\$	0.00	Gloss Receipts Seco	na Group	\$		
se Rate Fee First Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
FIFTY-NINTH S	SUBSCRIBER GROU	Р		SIXTIETH	SUBSCRIBER GROU	JP	
FIFTY-NINTH S	SUBSCRIBER GROU	P 0	COMMUNITY/ AREA		SUBSCRIBER GROU	UP 0	
	CALL SIGN		COMMUNITY/ AREA		SUBSCRIBER GROU		
MMUNITY/ AREA		0				0	
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MMUNITY/ AREA		0				0	
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ALL SIGN DSE ALL SIGN DSE ALL SIGN DSE ALL SIGN DSE		DSE	CALL SIGN	DSE		DSE	

	SPARKLIGH	Γ				10379	Name
			ATE FEES FOR EA				_
	RST SUBSCRIBE		11		SUBSCRIBER GRO		9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	A		0	Computati
CALL SIGN DS	E CALL SIG	SN DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate F
							and
							Syndicate
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	··········						Surcharg for
							Partially
							Distant
							Stations
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
	<u> </u>			•			
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
SIXTY-T	IIRD SUBSCRIBE	R GROUP	S	XTY-FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
CALL SIGN DS	E CALL SIG	ON DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	··········						
Total DSEs		0.00	Total DSEs			0.00	
Fotal DSEs		0.00	Total DSEs			0.00	
Fotal DSEs Gross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts For	urth Group	\$	0.00	

CABLE ONE, INC. 0/b/a	SPARKLIGHT					10379	Na
	A: COMPUTATION C		П				
SIXTY-FIF COMMUNITY/ AREA	TH SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		1 SUBSCRIBER GRO	0	•
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CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base F
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							Synd
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							Surc fe
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							Stat
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otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
rioco riocolpio i not Group			Cross rescripts ess	ona Oroap	<u> </u>		
			II				
ase Rate Fee First Group		0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SIXTY-SEVEN	TH SUBSCRIBER GRO	DUP	S	IXTY-EIGHTH	SUBSCRIBER GRO	UP	
SIXTY-SEVEN	TH SUBSCRIBER GRC			IXTY-EIGHTH			
SIXTY-SEVEN OMMUNITY/ AREA		DUP	S	IXTY-EIGHTH		UP	
SIXTY-SEVEN OMMUNITY/ AREA		0 0	S COMMUNITY/ ARE	IXTY-EIGHTH A	i SUBSCRIBER GRO	UP 0	
SIXTY-SEVEN OMMUNITY/ AREA		0 0	S COMMUNITY/ ARE	IXTY-EIGHTH A	i SUBSCRIBER GRO	UP 0	
SIXTY-SEVEN OMMUNITY/ AREA		0 0	S COMMUNITY/ ARE	IXTY-EIGHTH A	i SUBSCRIBER GRO	UP 0	
SIXTY-SEVEN OMMUNITY/ AREA		0 0	S COMMUNITY/ ARE	IXTY-EIGHTH A	i SUBSCRIBER GRO	UP 0	
SIXTY-SEVEN OMMUNITY/ AREA		0 0	S COMMUNITY/ ARE	IXTY-EIGHTH A	i SUBSCRIBER GRO	UP 0	
SIXTY-SEVEN OMMUNITY/ AREA		0 0	S COMMUNITY/ ARE	IXTY-EIGHTH A	i SUBSCRIBER GRO	UP 0	
SIXTY-SEVEN OMMUNITY/ AREA		0 0	S COMMUNITY/ ARE	IXTY-EIGHTH A	i SUBSCRIBER GRO	UP 0	
SIXTY-SEVEN OMMUNITY/ AREA		0 0	S COMMUNITY/ ARE	IXTY-EIGHTH A	i SUBSCRIBER GRO	UP 0	
SIXTY-SEVEN		0 0	S COMMUNITY/ ARE	IXTY-EIGHTH A	i SUBSCRIBER GRO	UP 0	
SIXTY-SEVEN		0 0	S COMMUNITY/ ARE	IXTY-EIGHTH A	i SUBSCRIBER GRO	UP 0	
SIXTY-SEVEN		0 0	S COMMUNITY/ ARE	IXTY-EIGHTH A	i SUBSCRIBER GRO	UP 0	
SIXTY-SEVEN		DUP O DSE	S COMMUNITY/ ARE	IXTY-EIGHTH A	i SUBSCRIBER GRO	UP 0	
SIXTY-SEVEN COMMUNITY/ AREA CALL SIGN DSE		0 0	S COMMUNITY/ ARE	IXTY-EIGHTH A	i SUBSCRIBER GRO	UP 0	
SIXTY-SEVEN COMMUNITY/ AREA CALL SIGN DSE		DUP O DSE	CALL SIGN	DSE	i SUBSCRIBER GRO	DSE	
COMMUNITY/ AREA	CALL SIGN	DUP O DSE O O O O O O O O O O O O O	CALL SIGN CALL SIGN Total DSEs	IXTY-EIGHTHA DSE	CALL SIGN	DSE	

CABLE ONE, INC. d/b/a	ABLE SYSTEM: SPARKLIGHT					10379	Name
	A: COMPUTATION C		TI .				
SIXTY-NIN' COMMUNITY/ AREA	TH SUBSCRIBER GRO	OUP 0	COMMUNITY/ ARE		SUBSCRIBER GRO	UP 0	9
			COMMONT I/ AICE	······································			Computa
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate and
							Syndicat
							Exclusiv
							Surchar
							for Partiall
							Distant
							Stations
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVENTY-FIR	ST SUBSCRIBER GRO)UP	SEVE	NTY-SECONE	SUBSCRIBER GRO	UP	
	ST SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ ARE.		SUBSCRIBER GRO	UP 0	
			TI .		CALL SIGN		
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE		DSE	COMMUNITY/ ARE.	Α		DSE	
CALL SIGN DSE	CALL SIGN	0 DSE	COMMUNITY/ ARE.	DSE	CALL SIGN	0 DSE	
COMMUNITY/ AREA		DSE	COMMUNITY/ ARE.	DSE		DSE	

LEGAL NAME OF OW CABLE ONE, INC			•				10379	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		ii .		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
	······							Surcharge for
								Partially
								Distant
								Stations
Total DSEs		!!	0.00	Total DSEs		!!	0.00	
	0				1 0			
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEV	ENTY-FIFTH	SUBSCRIBER GRO	UP	SE'	/ENTY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
			····	-				
			····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE						•	10379	Name
			E DAOE = :	TE EEEO EOO E : :	N.I. O. ID. C. T	NDED COOKS	1037 9	
		SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP H SUBSCRIBER GRO	IP.	
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL GIGIT	DOL	OALL GIGIN	DOL	CALL GIGIN	DOL	OALL GIGIT	DOL	Base Rate Fee
								and
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								Partially
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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 Second	ond Group	\$	0.00	
SEVEN	TY-NINTH	SUBSCRIBER GRO	UP		EIGHTIETH	H SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u> </u>		<u></u>					
								
			<u></u>					
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Foun	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.							10379	Name
			- DAGE -	TE EEEO = 0 = 0 = 0 = 0		WINER ORGER	103/3	
		SUBSCRIBER GRO		TE FEES FOR EAC		RIBER GROUP D SUBSCRIBER GROUP	LIP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
OALL GIGIT	DOL	OALL GIGIN	DOL	CALL GIGIN	DOL	CALL GIGIN	DOL	Base Rate Fee
								and
								Syndicated
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			<u></u>					Surcharge for
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								Distant
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	ond Group	\$	0.00	
EIGH'	TY-THIRD	SUBSCRIBER GRO	UP	EIGH	HTY-FOURTH	H SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
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			<u></u>	-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
	ı	<u> </u> *	0.50		- · P	L¥	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

10379					CABLE ONE, INC
R EACH SUBSCRIBER GROUP	RATE FEES FOR				Fi
EIGHTY-SIXTH SUBSCRIBER GROUP (/ AREA 0	0 COMMUNITY/	ROUP	SUBSCRIBER GR		COMMUNITY/ AREA
TANLA					SOMMONT IT AIRE
I DSE CALL SIGN DSE	E CALL SIGN	DS	CALL SIGN	DSE	CALL SIGN
			<u> </u>		
0.00	Total DSEs	0.0			otal DSEs
ots Second Group \$ 0.00	<u> </u>	0.0	\$	First Group	Fross Receipts First
	$\neg \parallel$				
ee Second Group \$ 0.00	Base Rate Fe	0.0	s		
			L'	·	
EIGHTY-EIGHTH SUBSCRIBER GROUP		ROUP	SUBSCRIBER GR	·	
	OCOMMUNITY/	ROUP	SUBSCRIBER GR	GHTY-SEVENTH	EIGHT
// AREA 0		ROUP	SUBSCRIBER GR	GHTY-SEVENTH	EIGHT OMMUNITY/ AREA
// AREA 0				GHTY-SEVENTH REA	EIGHT OMMUNITY/ AREA
// AREA 0				GHTY-SEVENTH REA	EIGHT OMMUNITY/ AREA
// AREA 0				GHTY-SEVENTH REA	EIGHT OMMUNITY/ AREA
// AREA 0				GHTY-SEVENTH	EIGHT OMMUNITY/ AREA
// AREA 0				GHTY-SEVENTH	EIGHT OMMUNITY/ AREA
// AREA 0				GHTY-SEVENTH	EIGHT OMMUNITY/ AREA
// AREA 0				GHTY-SEVENTH	EIGHT
// AREA 0				GHTY-SEVENTH	EIGHT
// AREA 0				GHTY-SEVENTH	EIGHT
// AREA 0				GHTY-SEVENTH	EIGHT
// AREA 0				GHTY-SEVENTH	EIGHT
// AREA 0				GHTY-SEVENTH	EIGHT
// AREA 0				GHTY-SEVENTH	EIGHT
DSE CALL SIGN DSE	E CALL SIGN	DS		GHTY-SEVENTH	EIGHT COMMUNITY/ AREA CALL SIGN
DSE CALL SIGN DSE	E CALL SIGN CALL SIGN Total DSEs	0.0	CALL SIGN	DSE DSE	EIGHT COMMUNITY/ AREA CALL SIGN
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DSE CALL SIGN DSE	E CALL SIGN CALL SIGN Total DSEs	0.0	CALL SIGN	DSE DSE	COMMUNITY/ AREA
DSE CALL SIGN DSE	E CALL SIGN CALL SIGN Total DSEs Gross Receipt	0.0	CALL SIGN	DSE DSE	EIGHT COMMUNITY/ AREA CALL SIGN Total DSEs

		ARKLIGHT					10379	
				ATE FEES FOR EAC			LID	
DMMUNITY/ AREA	IIY-NINIH	SUBSCRIBER GRO	0	COMMUNITY/ ADE		SUBSCRIBER GRO	0	9
MINUNITY AREA				COMMUNITY/ ARE/	*			Computat
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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tal DSEs			0.00	Total DSEs			0.00	
oss Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ise Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
KIIKII								
ININI	TY-FIRST	SUBSCRIBER GRO	UP	NINE	TY-SECONE	SUBSCRIBER GRO	UP	
OMMUNITY/ AREA	ETY-FIRST	SUBSCRIBER GRO	0 0	NINE COMMUNITY/ ARE/		SUBSCRIBER GRO	UP 0	
DMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
	DSE	SUBSCRIBER GRO		11		SUBSCRIBER GRO		
DMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
DMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
DMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
DMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
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DMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
DMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
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DMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
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DMMUNITY/ AREA CALL SIGN tal DSEs	DSE	CALL SIGN	0 DSE	COMMUNITY/ AREA	DSE	CALL SIGN	0.00	
DMMUNITY/ AREA	DSE		DSE	COMMUNITY/ AREA	DSE		DSE	
DMMUNITY/ AREA CALL SIGN tal DSEs oss Receipts Third (DSE	CALL SIGN	0.00 0.00	COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Four	DSE The Group	CALL SIGN	0 DSE	
DMMUNITY/ AREA CALL SIGN tal DSEs	DSE	CALL SIGN	0 DSE	COMMUNITY/ AREA	DSE The Group	CALL SIGN	0.00	

_	ID	IBER GROUP I SUBSCRIBER GRO		RATE FEES FOR EA		COMPUTATION (SUBSCRIBER GRO		
9	0	SUBSCRIBER GRO	T-FOURTH	 	0	SUBSCRIBER GRO	EIT-INKU	COMMUNITY/ AREA
Computa								
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and			.		<u>.</u>			
Syndicat					<u>.</u>			
Exclusiv Surchar								
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CABLE ONE, INC			-			\$	10379	Name
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
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Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
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Name	10379						. d/b/a SP	
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LEGAL NAME OF OWNER CABLE ONE, INC. d			•			(10379	Name
BL	OCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED TWEN	TY-FIRST	SUBSCRIBER GROUP)	ONE HUNDRED TWE	ENTY-SECONI	SUBSCRIBER GROUP)	0
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IGHT 10379						J. d/b/a SP	CABLE ONE, INC
UTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	BER GROUP	I SUBSCR	ATE FEES FOR EA				
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LEGAL NAME OF OW CABLE ONE, INC			•			\$	10379	Name
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ONE HUNDRED TH	HIRTY-FIFTH	SUBSCRIBER GRO	UP	ONE HUNDRED T	HIRTY-SIXTH	SUBSCRIBER GRO	JP	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
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Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

Name	10379					E SYSTEM: ARKLIGHT		CABLE ONE, INC.
		BER GROUP	SUBSCR	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	
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SYSTEM ID# 10379				ARKLIGHT	. d/b/a SP	CABLE ONE, INC				
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CABLE ONE, INC. o		E SYSTEM: ARKLIGHT				\$	10379	Name
				ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED FOR	TY-FIFTH	SUBSCRIBER GROUP	-	ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP				0
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Base Rate Fee First Gro	up	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FORTY-	SEVENTH	SUBSCRIBER GROUP	>	ONE HUNDRED F	ORTY-EIGHTH	SUBSCRIBER GROUF)	
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	oup	\$	0.00	Total DSEs Gross Receipts Fou	th Group	\$		
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Gross Receipts Third Gr			0.00	Gross Receipts Fou			0.00	

DNE, INC. d/b/a SPARKLIGHT	SYSTEM ID# 10379	Name		
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIB				
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TY/ AREA	COMMUNITY/ AREA 0			
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eipts First Group \$ 0.00 Gross Receipts Second Group	\$ 0.00			
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GN DSE CALL SIGN DSE CALL SIGN DSE	CALL SIGN DSE	İ		
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	10379						c. d/b/a SP					
				TE FEES FOR EAC								
9		SUBSCRIBER GROU	Y-FOURTH	ll		RED FIFTY-THIRD SUBSCRIBER GROUP AREA						
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of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN				
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			ia Oloup	Base Rate Fee Seco	0.00	\$	Group	ase Rate Fee First G				
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	UP 0	SUBSCRIBER GROI				SUBSCRIBER GROI	IFTY-FIFTH	ONE HUNDRED FIR				
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	C. d/b/a SP						10379	
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otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
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ase Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
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OMMUNITY/ ARE	4		0	COMMUNITY/ AREA 0				
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otal DSEs			0.00	Total DSEs			0.00	
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otal DSEs	d Group	\$			rth Group	\$	_	
Gross Receipts Thir		\$	0.00	Gross Receipts Fou			0.00	
		\$				\$		

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. d/b/a SPARKLIGHT 10379 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation ☐ First 50 major television market ☐ Second 50 major television market of Base Rate Fee INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. 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 vour actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group First Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. d/b/a SPARKLIGHT 10379 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation ☐ First 50 major television market ☐ Second 50 major television market of Base Rate Fee INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations vour actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group First Group SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. d/b/a SPARKLIGHT 10379 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation ☐ First 50 major television market ☐ Second 50 major television market of Base Rate Fee INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations vour actual calculations on this form. NINTH SUBSCRIBER GROUP TENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group First Group **ELEVENTH SUBSCRIBER GROUP** TWELVTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. d/b/a SPARKLIGHT 10379 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation ☐ First 50 major television market ☐ Second 50 major television market of Base Rate Fee INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations vour actual calculations on this form. THIRTEENTH SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs _ Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group First Group FIFTEENTH SUBSCRIBER GROUP SIXTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 20 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. d/b/a SPARKLIGHT 10379 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation ☐ First 50 major television market ☐ Second 50 major television market of Base Rate Fee INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations vour actual calculations on this form. SEVENTEENTH SUBSCRIBER GROUP EIGHTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group First Group NINEENTH SUBSCRIBER GROUP TWENTYTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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FORM SA3E. PAGE 20 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. d/b/a SPARKLIGHT 10379 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation ☐ First 50 major television market ☐ Second 50 major television market of Base Rate Fee INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations vour actual calculations on this form. NINETY-SEVENTH SUBSCRIBER GROUP NINETY-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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group ONE HUNDREDTH SUBSCRIBER GROUP NINETY-NINTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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