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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

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

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:							
Accounting Period	2020/2							
B	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. 25206 LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM							
	CABLE ONE, INC. d/b/a SPARKLIGHT							
				252062020/2				
				25206 2020/2				
	210 E EARLL DRIVE PHOENIX, AZ 85012							
С	INSTRUCTIONS: In line 1, give any business or trade names used to ic names already appear in space B. In line 2, give the mailing address of							
System	1 IDENTIFICATION OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT		3.3.1.1.3.1.1.3.1.3.3.3.3.3.3.3.3.3.3.3					
	MAILING ADDRESS OF CABLE SYSTEM: 3000 N. WESTWOOD BLVD. (Number, street, rural route, apartment, or suite number) POPLAR BLUFF, MO 63902 (City, town, state, zip code)							
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comn	nunity served below and rel	ist on page 1b				
Area Served	with all communities.	1						
First	CITY OR TOWN TAYLORVILLE	STATE						
Community	Below is a sample for reporting communities if you report multiple cha		nace G					
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#				
Sample	Alda	MD	Α	1				
Campio	Alliance	MD	В	2				
	Gering	MD	В	3				

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

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

IL

IL

IL

AB

AC

AC

5

6

6

GILLESPIE

AUBURN

THAYER

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#						
			25206						
CABLE ONE, INC. d/b/a SPARKLIGHT			23200						
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.									
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.									
If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).									
When reporting the carriage of television broadcast stations on a community-by-commun channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns be	subscriber grou								
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	1					
ROODHOUSE	IL	AE	8	First					
CARROLLTON	IL	AE	8	Community					
JERSEYVILLE	IL	AE	9						
BRIGHTON	IL	AE	9						
MANCHESTER	IL	AE	10						
				See instructions for					
				additional information					
				on alphabetization.					
				Add rows as necessary.					

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	1	i '	

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC. d/b/a SPARKLIGHT

SYSTEM ID#
25206

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).

Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service).

Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.

Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. Note: Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)."

Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BLOCK 1					BLOCK 2			
	NO. OF			Π		NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS		RATE	Ш	CATEGORY OF SERVICE	SUBSCRIBERS	RATE	
Residential:								
 Service to first set 	6,092	\$	40.00					
 Service to additional set(s) 								
 FM radio (if separate rate) 								
Motel, hotel	399	\$	40.50					
Commercial		T						
Converter				Ш				
 Residential 		T						
Non-residential		ļ						
i		4		1			†	

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

ACCOUNTING PERIOD: 2020/2 FORM SA3E, PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 25206 CABLE ONE, INC. d/b/a SPARKLIGHT PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

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

See instructions for additional information on alphabetization.

U.S. Copyright Office

FORM SA3E. PAGE 3.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC. d/b/a SPARKLIGHT

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

basis under specific FCC rules, regulations, or authorizations:

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

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

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

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

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

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

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

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

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

Primary Transmitters: Television

FORM SA3E, PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name CABLE ONE, INC. d/b/a SPARKLIGHT 25206 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections

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

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

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

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

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

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

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

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

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

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

Primary Transmitters: Television

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

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

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

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

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

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

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

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

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

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

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

G

Primary Transmitters: Television

Primary

Transmitters:

Television

FORM SA3E. PAGE 3.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC. d/b/a SPARKLIGHT

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	SYSTEM ID#			STEM:	ED OE CABLE SV	FORM SA3E. PAGE 3. LEGAL NAME OF OWN
Name	25206					CABLE ONE, IN
				N	RS: TELEVISIO	PRIMARY TRANSMITTE
Primary Transmitters Television	". If not, enter "No". For an ex- paper SA3 form. ating the basis on which your ring "LAC" if your cable system	1) stations carried carriage of ce (e)(2) and (4))] carried by your special State both on a subset, see page (v) program servior-the-air design blumn 1 (list ease television stangton, D.C. The station, an in or network multimetant"), enter "to plete column to the colu	period, except (1, permitting the ferring to 76.61 aragraph. distant stations rizations: it in space I (the ion was carried the basis station ording to its over the port origination ording to its over the period in color as assigned to the sassigned to the port origination ording to its over the period in color as assigned to the period in color as assigned to the period in color as assigned to the period in color as a network (i.e. "die educational), or general instruction is a network (i.e. "die eneral instruction in the period in the color as of lack of acam that is not support of the color and that is not support of the color and the color and the color arried arrived the color arried the color arried arrived the color arried arrived the color arrived arrived the color arrived arrived the color arrived arrived arrived the color arrived arrive	re accounting June 24, 198 June 24, 198 June 24, 198 June 26, 198 June 26, 198 June 26, 198 June 27, 198 June 27, 198 June 28, 198 June	ystem during the ons in effect on 61(e)(2) and (4 is, as explained in the cast of a space of of a sp	carried by your cable sy FCC rules and regulation (76.59(d)(2) and (4), 76. Substitute program bas Substitute Program of Column 4: In the paper SA3 for Column 1: List each multicast stream as "WETA-WETA-simulcast). Column 2: Give the station by (for independent multicate educational station, by (for independent multicate Program of the Column 4: If the station of local service Column 5: If you had cable system carried the cable system carried the cable system and a stion "E" (exempt). For significant cable system and a stion "E" (exempt). For significant cable system and a stion "E" (exempt). For significant cable system and a stion "E" (exempt). For significant cable system and a stion "E" (exempt). For significant cable system and a stion "E" (exempt). For significant cable system and a stion "E" (exempt). For significant cable system and a stion "E" (exempt). For significant cable system and a stion "E" (exempt). For significant cable system and a stion "E" (exempt). For significant cable system and a stion "E" (exempt). For significant cable system and a stion "E" (exempt). For significant cable system and a stion "E" (exempt). For significant cable system cable system and a stion "E" (exempt). For significant cable system cable system and a stion "E" (exempt). For significant cable system cable syst
	o which the station is licensed by the which the station is identifed. hannel line-up.	community w	the name of the	ns, if any, give	anadian statior	
		Al	EL LINE-UP	CHANNI		
			4. DISTANT?	3. TYPE	2. B'CAST	

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

CABLE ONE, INC. d/b/a SPARKLIGHT PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.	CABLE ONE, INC. d/b/a SPARKLIGHT RRMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs (sections 76.59(q)/2) and (4), 77.63 (referring to 76.51(e)/2) and (4),	FORM SA3E. PAGE 3. LEGAL NAME OF OWN	ER OF CABLE SYSTEM:			SYSTEM ID#	
General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here, and also in space (- If the station was carried by pour cable system on a substitute program basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the distant multicast). "Fig (for noncommercial educational multicast), "Fig (for independent multicast), "Fig (for noncommercial educational multicast). "Fig (for noncommercial educational multicast), and the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable syste	General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules an fefect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here, and also in space (—In the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast streams will sation according to its over-the-air designation. For example, report multicast streams will will be station. Column 2: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast streams may will report to report origination program services such as HBO, ESPN, etc. Identify each multicast streams will be reported in column 1 (list each stream separately; for example, report multicast streams will be reported in column 1 (list each stream separately; for example, report multicast). The column 1 (list each stream separately; for example, report multicast). The column 1 (list each stream separately; for example, report multicast). The column 1 (list each station, or example, report multicast). The column 1 (list each station, or example, report			г			Name
Court cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(a)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4)); and (2) certain stations carried on a substitute program basis, as explained in the next yeargargaph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast streams associated with a station according to its over-the-air designation. For example, report multicast streams associated with a station according to its over-the-air designation. For example, report multicast streams as a "WETA-2". Simulcast is reams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I' (for independent), "I-M" (for independent multicast), "E' (for moncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station of uniting the accounting	Gramed by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs (sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(PRIMARY TRANSMITTE	RS: TELEVISION				
FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AJ 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL OF (Yes or No) CARRIAGE	FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AJ 1. CALL 2. B'CAST CHANNEL OF 4. DISTANT? (Yes or No) CARRIAGE 6. LOCATION OF STATION CARRIAGE	carried by your cable s FCC rules and regulation 76.59(d)(2) and (4), 76 substitute program bass Substitute Basis Substitute Basis Substitute Basis Subsis under specific FC on the part of the station was carried to basis. For further in in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you had cable system carried the cable system carried the cable system carried the cable system and a strong "E" (exempt). For sexplanation of these the	ystem during the accounting one in effect on June 24, 15, 61(e)(2) and (4), or 76.63 (is, as explained in the next tations: With respect to an C rules, regulations, or autilihere in space G—but do lisonly on a substitute basis, and also in space I, if the stormation concerning substime. In station's call sign. Do not associated with a station accept. Simulcast streams must channel number the FCC e. For example, WRC is Chestem carried the station. In each case whether the sentering the letter "N" (for reast), "E" (for noncommerciase terms, see page (v) of the carea, see page (v) of the carea, see page (v) of the carea of the second of a distant multicast streams must entered "Yes" in column the on on a part-time basis become of a distant multicast streamer entered into on or before Ji a primary transmitter or an assimulcasts, also enter "E". If the categories, see page (v) of the categories	g period, except 81, permitting the referring to 76.6 paragraph. It is a distant stations to report origination cording to its own to be reported in contact and a sassigned to the station is a network etwork), "N-M" (If a distance area, (i.e. "cogeneral instruction is a network etwork), "N-M" (If a distance area, (i.e. "cogeneral instruction is a network etwork), "N-M" (If a distance area, (i.e. "cogeneral instruction etwork), and counting periodical etwork etwork) is not some 30, 2009, be sociation repreyou carried the solution of the general instruction	(1) stations carried e carriage of certail (e)(2) and (4))]; are carried by your case. Special Statement both on a substitute, see page (v) of a program services er-the-air designatic column 1 (list each the television static ington, D.C. This not static ington, D.C. This not static ington, an indeptor network multicat "E-M" (for noncoretions located in the listant"), enter "Yes on located in the column 5, sind. Indicate by enter citivated channel caubiject to a royalty tween a cable syst senting the primary channel on any other structions located in structions located on structions loca	only on a part-time basis under in network programs [sections and (2) certain stations carried on a suble system on a substitute program and and Program Log)—if the stee basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multistream separately; for example on for broadcasting over-the-air in may be different from the channel opendent station, or a noncommercial st), "I" (for independent), "I-M" numercial educational multicast). The paper SA3 form. Some stating the basis on which your string "LAC" if your cable system apacity. The payment because it is the subject ern or an association representing of transmitter, enter the designation the paper SA3 form.	
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION (Yes or No) CARRIAGE	1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION (Yes or No) CARRIAGE				•		
SIGN CHANNEL OF (Yes or No) CARRIAGE	SIGN CHANNEL OF (Yes or No) CARRIAGE		CHAN	IEL LINE-UP	AJ		
			CHANNEL OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION	
			l				

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

FORM SA3E. PAGE 3.	ACCOUNT	ING PERIOD: 2020/2
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	N
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television station (sarried by your cable system during the accounting period, except (1) stations carried only on a part-time basis up FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section can be called the carriage of certain network programs and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section can be called the carriage of certain network programs and low power television station (including translator stations and low power television station (including translator stations and low power television station (including translator stations and low power television stations (including translator stations).	nder [′]	G
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Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute basis under specific FCC rules, regulations, or authorizations:	program	Television
• Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.	•	1
• List the station here, and also in space I, if the station was carried both on a substitute basis and also on some basis. For further information concerning substitute basis stations, see page (v) of the general instructions locking the pages \$4.2 forms.		

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

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in

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

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

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

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

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

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

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

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

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

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

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

in the paper SA3 form.

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

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

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

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

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

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

	SYSTEM ID#			STEM:	ER OF CARLE SV	FORM SA3E. PAGE 3. LEGAL NAME OF OWNI
Name	25206					CABLE ONE, IN
						PRIMARY TRANSMITTE
G Primary Transmitter Television	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your sring "LAC" if your cable system	1) stations carried carriage of certain (e)(2) and (4))]; and carried by your carried by your carried by the carried by your carried by statement (e) the carried by the ca	period, except (1, permitting the efferring to 76.61 aragraph. distant stations rizations: it in space I (the ion was carried atte basis station eport origination ording to its over be reported in c as assigned to the number of the enditional tition is a network twork), "N-M" (for educational), or general instruction ce area, (i.e. "di eneral instruction counting perioduse of lack of act am that is not su the 30, 2009, bet sociation repres ou carried the counting perioducant of the general in the counting perioduse of the counting perioduse of the counting perioduse of the counting perioduse of the counting perioduse of the counting perioduse of the counting perioduse of the counting perioduse of the counting perioduse of the counting perioduse of the counting perioduse of the counting perioduse of co	television state accounting June 24, 1984), or 76.63 (red in the next prespect to anytions, or authors—but do list itute basis. It is it is a station accounting substitute sign. Do not red a station accounterams must be referenced by the station. The station is it is in column and the station accounter "N" (for new commercial page (v) of the station in column and uning the cample sign in column and uniticast stree or before Junitter or an assenter "E". If y see page (v)	is, identify every yestem during the one in effect on 61(e)(2) and (4 is, as explained tations: With record record in the record	In General: In space Grarried by your cable sy FCC rules and regulation 76.59(d)(2) and (4), 76. Substitute program bas Substitute Program basis under specific FC Do not list the station station was carried of Damin 1: List each basis. For further infinite paper SA3 for Column 1: List each each multicast stream as "WETA-Simulcast). Column 2: Give the scommunity of licension which your cable system Column 4: If the stational station, by (for independent multice For the meaning of the Column 5: If you had cable system carried the distant station For the retransmission of a written agreement the cable system and a stion "E" (exempt). For sexplanation of these this
	hannel line-up.	pace G for each c	se a separate s	nel line-ups, ι	g multiple chan	Note: If you are utilizinຸ
		AM	EL LINE-UP	CHANN	<u> </u>	
	6. LOCATION OF STATION	5. BASIS OF	4. DISTANT?	3. TYPE	2. B'CAST	1. CALL

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

FORM SA3E, PAGE 3.	ACCOUNT	ING PERIOD: 2020/2
	SYSTEM ID#	
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television staticarried by your cable system during the accounting period, except (1) stations carried only on a part-time basis un FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section	der [′]	G
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried	on a	Primary
substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute p	rogram	Transmitters: Television
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 c	ther	

in the paper SA3 form. **Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

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

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

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

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

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

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

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

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

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

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

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

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

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

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

FORM SA3E. PAGE 3.	ACCOUNTI	NG PERIOD: 2020/2
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	N
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television stations to carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis of FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute	under ons ons ed on a	G Primary Transmitters: Television
 basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some basis. For further information concerning substitute basis stations, see page (v) of the general instructions log in the paper SA3 form. 	other	

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

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in

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

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

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

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

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

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

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

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

FORM SA3E. PAGE 3.	ACCOUNTI	NG PERIOD: 2020/2
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sec 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations can substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute.	s under otions rried on a	G Primary Transmitters: Television
 basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on sor basis. For further information concerning substitute basis stations, see page (v) of the general instructions in the paper SA3 form. 	me other	

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

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

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

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

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

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

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

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

FORM SA3E. PAGE 3.	ACCOUNTII	NG PERIOD: 2020/2
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	M
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television station (sarried by your cable system during the accounting period, except (1) stations carried only on a part-time basis of FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section of the carriage of certain network programs].	under	G
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carrisubstitute program basis, as explained in the next paragraph.	ed on a	Primary Transmitters:
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute basis under specific FCC rules, regulations, or authorizations:	program	Television
 Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. 	е	
List the station here, and also in space I, if the station was carried both on a substitute basis and also on some basis. For further information concerning substitute basis stations, see page (v) of the general instructions lo in the paper SA3 form.		
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc.	Identify	

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

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

WETA-simulcast).

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

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

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

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

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

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

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

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

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in

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

in the paper SA3 form.

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

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

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

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

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

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

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

FORM SA3E. PAGE 3.	ACCOUNTI	ING PERIOD: 2020/2
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	N
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television stations by your cable system during the accounting period, except (1) stations carried only on a part-time basis upon FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section Including translators and Including translators and Including translators and Including translator stations and low power television stations are carried by your cable system.	nder	G
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carrie substitute program basis, as explained in the next paragraph.	d on a	Primary Transmitters:
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute	program	Television
basis under specifc FCC rules, regulations, or authorizations:		
• Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.	•	
• List the station here, and also in space I, if the station was carried both on a substitute basis and also on some basis. For further information concerning substitute basis stations, see page (v) of the general instructions located the page (A2 farms).		

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

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

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

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

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

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

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

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

	ACCOUNTI	NG PERIOD: 2020/2
FORM SA3E. PAGE 3.	SYSTEM ID#	
LEGAL NAME OF OWNER OF CABLE SYSTEM:		Name
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television station carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis upport of the carriage of certain network programs [section carried only on a part-time basis upport of the carriage of certain network programs [section carried only on a part-time basis upport of the carriage of certain network programs [section carried only on a part-time basis upport of the carriage of certain network programs [section carried only on a part-time basis upport of the carriage of certain network programs [section carried only on a part-time basis upport of the carriage of certain network programs [section carried only on a part-time basis upport of the carriage of certain network programs [section carried only on a part-time basis upport of the carriage of certain network programs [section carried only on a part-time basis upport of the carriage of certain network programs [section carried only on a part-time basis upport of the carriage of certain network programs [section carried only on a part-time basis upport of the carriage of certain network programs [section carried only on a part-time basis upport of the carriage of certain network programs [section carried only on a part-time basis upport of the carriage of certain network programs [section carried on carried	nder	G
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carrie		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	orogram	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	

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

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

in the paper SA3 form.

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

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

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

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

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

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

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

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

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

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

in the paper SA3 form.

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

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

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

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

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

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

	ACCOUNTI	NG PERIOD: 2020/2						
FORM SA3E. PAGE 3.								
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name						
CABLE ONE, INC. d/b/a SPARKLIGHT 25206								
PRIMARY TRANSMITTERS: TELEVISION								
In General: In space G, identify every television station (including translator stations and low power television station (arried by your cable system during the accounting period, except (1) stations carried only on a part-time basis up FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section 1].	inder [´]	G						
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried	d on a	Primary						
substitute program basis, as explained in the next paragraph.		Transmitters:						
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute	program	Television						
basis under specifc FCC rules, regulations, or authorizations:								
• Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the	<u>د</u>							
station was carried only on a substitute basis.								
• List the station here, and also in space I, if the station was carried both on a substitute basis and also on some	other							

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

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

in the paper SA3 form.

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

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

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

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

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

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

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

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

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC. d/b/a SPARKLIGHT

SYSTEM ID#
25206

Н

PRIMARY TRANSMITTERS: RADIO

In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period.

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

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

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

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

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

CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
		ļ					
							
		ļ					
	1						
	 						
		[
	 						

FORM SA3E. PAGE 5.						ACCOUNTING	PERIOD: 2020/2			
LEGAL NAME OF OWNER OF (CABLE SYST	EM:			5	SYSTEM ID#	Nama			
CABLE ONE, INC. d/b/a	a SPARKL	JGHT				25206	Name			
SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	T AND PROGRAM LOG	i			ı			
In General: In space I, identiful substitute basis during the ac explanation of the programmi	counting per	riod, under spec	cific present and former FC	C rules, regula	tions, or authorizations. F	or a further	▮ Substitute			
1. SPECIAL STATEMENT				<u> </u>	' '	-	Carriage:			
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?										
Note: If your answer is "No", 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	PROGRA	MS								
In General: List each subst	itute progra	m on a separat		wherever pos	sible, if their meaning is					
clear. If you need more space					dente o de constituir					
period, was broadcast by a			sion program (substitute p ur cable system substitute			on				
under certain FCC rules, reg	gulations, or	r authorizations	s. See page (vi) of the gen	eral instructio	ns located in the paper	0.1				
SA3 form for futher informat	tion. Do not	use general c	ategories like "movies", or	"basketball".	List specific program					
titles, for example, "I Love L			/bers vs. Bulls." "Yes." Otherwise enter "N	ο."						
			sting the substitute progra							
			e community to which the							
the case of Mexican or Can Column 5: Give the mon			community with which the sem carried the substitute p			:h				
first. Example: for May 7 giv	e "5/7."	, ,	·	J						
Column 6: State the time to the nearest five minutes.			gram was carried by your o			1				
stated as "6:00–6:30 p.m."	<u> глатіріс.</u> а	program came	d by a system from 0.01.	5 p.m. to 0.2	o.oo p.m. should be					
			was substituted for progra							
to delete under FCC rules a gram was substituted for pro										
effect on October 19, 1976.	ogramming	inat your syste	in was permitted to delete	under i oo i	ales and regulations in					
s	UBSTITUT	E PROGRAM		1 1	EN SUBSTITUTE IAGE OCCURRED	7. REASON				
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	FOR DELETION				
	100 01 110	07122 01011		7.11.2 27.1						
	 									
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ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 6.

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

J

Part-Time Carriage Log

time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and

hours your system carried that station. If you need more space, please attach additional pages.

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

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

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

		DATES	S AND HOURS (OF P	ART-TIME CAR	RIAGE			
CALL SIGN -	WHEN CARRIAGE OCCURRED				CALL SIGN -	WHE	WHEN CARRIAGE OCCURRED HOURS		
	5.475	HOU				5.475		JUK:	
	DATE	FROM	ТО			DATE	FROM		TO
		_						_	
								-=	
		_						_	
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LEGA	L NAME OF OWNER OF CABLE SYSTEM: BLE ONE, INC. d/b/a SPARKLIGHT		SYSTEM ID# 25206	Name	
Inst all a (as i page	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount mounts (gross receipts) paid to your cable system by subscribers for the system's second dentified in space E) during the accounting period. For a further explanation of how to content the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. DRTANT: You must complete a statement in space P concerning gross receipts.	ndary transmissic impute this amou	n service	K Gross Receipts	
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did carry any distant television stations, you must complete the applicable parts of the DSE schedule accompanying this form and attach the schedule to your statement of account. If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of block 3 below. If part 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 in block 3 below.					
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shou block 4 below.	ld be entered on	line		
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064				
	Enter the result here. This is your minimum fee.	\$	22,265.50		
Block 2	pistant television stations carried: Your answer here must agree with the ispace G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colum "Yes" in this block. • Did your cable system carry any distant television stations during the accounting perion X Yes—Complete the DSE schedule. No—Leave block 3 below blank and column television. In BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	n 4, you must cho	eck		
3	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		9,275.35		
	Line 3. Add lines 1 and 2 and enter here	\$	15,849.24		
Block 4	 Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet) 	\$	0.00 0.00	Cable systems submitting additional deposits under Section 111(d)(7) should contact	
	Line 4. FILING FEE.	\$	725.00	the Licensing additional fees.	
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ See page (i) of the	22,990.50	Division for the appropriate form for submitting the additional fees.	
	general instructions located in the paper SA3 form for more information.)	,			

ACCOUNTING PERIOD: 2020/2

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#						
Name	CABLE ONE, INC. d/b/a SPARKLIGHT	25206						
	CHANNELS							
M	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations							
Chamala	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.							
Channels	Enter the total number of channels on which the cable							
	system carried television broadcast stations	23						
	2. Enter the total number of activated channels							
	on which the cable system carried television broadcast stations and nonbroadcast services	243						
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual							
	we can contact about this statement of account.)							
Individual to								
Be Contacted for Further	Name EMERSON YEARWOOD Telephone 602-364	4-6195						
Information								
	Address 210 E. EARLL DRIVE	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	This statement of account must be certiled and signed in accordance with copyright office regulations.)							
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)							
	(Owner other than corporation or partnership) I am the owner of the cable system as 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 care							
	in line 1 of space B.	abic system						
	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 an							
	button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility setting	ıyə.						
	Typed or printed name: RAYMOND STORCK							
	Title: VICE PRESIDENT							
	(Title of official position held in corporation or partnership)							
	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.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTE	M ID#	Nome
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO		P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.		Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here		
	lays	
Line 3 Multiply line 2 by the number of days late and enter the sum here		
x 0.00274		
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	_	
(interest charge)		
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.		
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.		
Owner Address		
First community served		
Accounting period		
ID number		

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

ACCOUNTING PERIOD: 2020/2

DSE SCHEDULE. PAGE 10.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

• Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	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.

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

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

Base rate fee

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

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

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

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

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

\$1,907.71

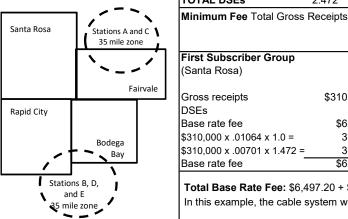
Base rate fee

\$1,604.03

EXAMPLE:

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

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



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

\$600,000.00

x .01064

\$6,384.00 First Subscriber Group Second Subscriber Group Third Subscriber Group (Santa Rosa) (Rapid City and Bodega Bay) (Fairvale) Gross receipts \$310,000.00 Gross receipts \$170,000.00 Gross receipts \$120,000.00 **DSFs IDSFs** 2.472 IDSFs 1.083 1.389 \$1,604.03 Base rate fee \$6.497.20 Base rate fee \$1.907.71 Base rate fee \$310,000 x .01064 x 1.0 = 3,298.40 \$170,000 x .01064 x 1.0 = 1,808.80 \$120,000 x .01064 x 1.0 = 1,276.80 3,198.80 327.23 \$310,000 x .00701 x 1.472 = $170,000 \times .00701 \times .083 =$ 98.91 $120,000 \times .00701 \times .389 =$

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

Base rate fee

\$6,497.20

DSE SCHEDULE. PAGE						/OTE: / := ::				
1	LEGAL NAME OF OWNER OF CAB				S	YSTEM ID#				
<u> </u>	CABLE ONE, INC. d/b/a	a SPARKLIGHT				25206				
	SUM OF DSEs OF CATEGO									
	Add the DSEs of each station				0.05					
	Enter the sum here and in line 1 of part 5 of this schedule. 0.25									
	Instructions:					-				
2	In the column headed "Call	Sign": list the call si	gns of all distant stations	s identified by the I	etter "O" in column 5					
Commutation	of space G (page 3).	", for each independ	lant station, give the DSI	⊏ as "1 0": for ass	h natwork or nancom					
Computation of DSEs for	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."									
Category "O"	mereiar eadeateriar etation, g		CATEGORY "O" STATIC	DNS: DSFs						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	KSDK	0.250			<u> </u>					
		0.200		····						
		·····		····						
		·····		····						
		····		····						
Add rows as		 								
necessary.										
Remember to copy all										
formula into new		·····		·····						
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4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			S'	YSTEM ID#			
1	CABLE ONE, INC. d/b/a	SPARKLIGHT	-			25206			
	SUM OF DSEs OF CATEGOR								
	Add the DSEs of each station		5:						
			schedule		0.50				
	Enter the sum here and in line 1 of part 5 of this schedule.								
	Instructions:								
2	In the column headed "Call	Sign": list the call	signs of all distant stations i	dentified by the	e letter "O" in column 5				
	of space G (page 3).								
Computation	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-								
of DSEs for	mercial educational station, gi	ve the DSE as ".25							
Category "O"			CATEGORY "O" STATION						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	KETC	0.250							
	KSDK	0.250							
				•					
		···							
		 							
Add rows as									
necessary.									
Remember to copy all						<u> </u>			
formula into new									
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DSE SCHEDULE. PAGE					<u> </u>	VOTEL : : :			
1	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#								
•	CABLE ONE, INC. d/b/a					25206			
	SUM OF DSEs OF CATEGOR		S:						
	Add the DSEs of each station From the sum here and in line in the sum here and in line in the sum here.		achadula		0.75				
	Enter the sum here and in line 1 of part 5 of this schedule.								
2	Instructions:	:	-:	-1 #:E:1 #	- I-H "O" iI				
_	In the column headed "Call S of space G (page 3).	ign": list the call	signs of all distant stations i	dentified by the	e letter "O" in column 5				
Computation	In the column headed "DSE"			as "1.0"; for ea	ach network or noncom-				
of DSEs for	mercial educational station, give	e the DSE as ".25							
Category "O"			CATEGORY "O" STATION	1	II				
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	KETC	0.250							
	WICS	0.250							
	KSDK	0.250							
Add rows as									
necessary.									
Remember to copy all									
formula into new									
rows.									

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

	WNER OF CABLE S						S	YSTEM ID# 25206	Name		
In block A: • If your answer if ' schedule.	ck A must be comp "Yes," leave the rei "No," complete bloo	mainder of pa	•	of the DSE schedu	ıle blank and	complete part {	3, (page 16) of the		6		
			BLOCK A:	TELEVISION MA	ARKETS				Computation of 3.75 Fee		
effect on June 24, Yes—Com	1981?	schedule—D	•	er markets as defin LETE THE REMAIN			C rules and regula	tions in	0.70100		
		BLOCK B: CARRIAGE OF PERMITTED DSEs									
Column 1: CALL SIGN	FCC rules and re	gulations pric e DSE Sched	or to June 25, 1 dule. (Note: The	part 2, 3, and 4 of the 981. For further ex the letter M below ref act of 2010.)	planation of p	ermitted station	ns, see the	•			
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerce D Grandfathered instructions fo 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 being the FCC markin 76.5(kk) (76) I station [76.59] (55) (see paragrule). I all waiver of FC don a part-time (thin grade-B co	e or substitute basi ontour, [76.59(d)(5)	e in effect on 3 57, 76.59(b), (1), 76.63(a) 1 8(a) referring to stitution of gra	June 24, 1981.) 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] ndfathered staff	.63(a) referring to 61(e)(1) tions in the				
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	of			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE			
	•	•	•	•		11		0.00			
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE						
Line 1: Enter the	total number of	DSEs from p	part 5 of this s	schedule							
ine 2: Enter the	sum of permitted	d DSEs from	n block B abo	ve							
				of DSEs subject 7 of this schedule		ate.					
Line 4: Enter gro	ess receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represen partially		
_ine 5: Multiply li	ine 4 by 0.0375 a	nd enter su	m here				x		permited/ partially nonpermitted		
Line 6: Enter tota	al number of DSE	Es from line	3						carriage? If yes, see part 9 instructions.		
ine 7: Multiply li	ine 6 by line 5 an	d enter here	and on line 1	2. block 3. space	I (nage 7)			0.00			

	WNER OF CABLE S						S	YSTEM ID# 25206	Name		
In block A: • If your answer if ' schedule.	ck A must be comp "Yes," leave the rei "No," complete bloc	mainder of pa	•	of the DSE schedu	ıle blank and	complete part {	3, (page 16) of the		6		
				TELEVISION MA					Computation of 3.75 Fee		
effect on June 24, X Yes—Com	n located wholly ou 1981? uplete part 8 of the solete blocks B and o	schedule—D0	•				C rules and regula	tions in	S S. S.		
		BLOCK B: CARRIAGE OF PERMITTED DSEs									
Column 1: CALL SIGN	FCC rules and re	gulations pric e DSE Sched	or to June 25, 1 Iule. (Note: The	part 2, 3, and 4 of the 981. For further extended letter M below refuct of 2010.)	planation of p	ermitted station	ns, see the	•			
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerce D Grandfathered instructions fo 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 pursuant to individuations wield to station wield process and the station wield process as defined a	ations cited be to the FCC mark in 76.5(kk) (76 I station [76.59 5) (see paragrule). all waiver of FC d on a part-timethin grade-B co	e or substitute basi ontour, [76.59(d)(5)	e in effect on 3 57, 76.59(b), (1), 76.63(a) 1 8(a) referring to stitution of gra	June 24, 1981.) 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] ndfathered staff	.63(a) referring to 61(e)(1) tions in the				
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	of			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE			
						II		0.00			
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE						
_ine 1: Enter the	e total number of	DSEs from բ	part 5 of this s	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	oss receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represen partially		
ine 5: Multiply li	ine 4 by 0.0375 a	ınd enter su	m here				x		permited/ partially nonpermitted		
_ine 6: Enter tota	al number of DSE	s from line	3						carriage? If yes, see part 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			

	WNER OF CABLE S						S	YSTEM ID# 25206	Name		
In block A: • If your answer if ' schedule.	ck A must be comp "Yes," leave the rei "No," complete bloc	mainder of pa	•	of the DSE schedu	ıle blank and	complete part {	3, (page 16) of the		6		
				TELEVISION MA					Computation of 3.75 Fee		
effect on June 24, X Yes—Com	n located wholly ou 1981? uplete part 8 of the solete blocks B and o	schedule—D0	•				C rules and regula	tions in	S S. S.		
		BLOCK B: CARRIAGE OF PERMITTED DSEs									
Column 1: CALL SIGN	FCC rules and re	gulations pric e DSE Sched	or to June 25, 1 Iule. (Note: The	part 2, 3, and 4 of the 981. For further extended letter M below refuct of 2010.)	planation of p	ermitted station	ns, see the	•			
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerce D Grandfathered instructions fo 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 pursuant to individuations wield to station wield process and the station wield process as defined a	ations cited be to the FCC mark in 76.5(kk) (76 I station [76.59 5) (see paragrule). all waiver of FC d on a part-timethin grade-B co	e or substitute basi ontour, [76.59(d)(5)	e in effect on 3 57, 76.59(b), (1), 76.63(a) 1 8(a) referring to stitution of gra	June 24, 1981.) 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] ndfathered staff	.63(a) referring to 61(e)(1) tions in the				
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	of			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE			
						II		0.00			
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE						
_ine 1: Enter the	e total number of	DSEs from բ	part 5 of this s	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	oss receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represen partially		
ine 5: Multiply li	ine 4 by 0.0375 a	ınd enter su	m here				x		permited/ partially nonpermitted		
_ine 6: Enter tota	al number of DSE	s from line	3						carriage? If yes, see part 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			

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

	WNER OF CABLE S						S	YSTEM ID# 25206	Name		
In block A: • If your answer if ' schedule.	ck A must be comp "Yes," leave the rei "No," complete bloc	mainder of pa	•	of the DSE schedu	ıle blank and	complete part {	3, (page 16) of the		6		
				TELEVISION MA					Computation of 3.75 Fee		
effect on June 24, X Yes—Com	n located wholly ou 1981? uplete part 8 of the solete blocks B and o	schedule—D0	•				C rules and regula	tions in	S S. S.		
		BLOCK B: CARRIAGE OF PERMITTED DSEs									
Column 1: CALL SIGN	FCC rules and re	gulations pric e DSE Sched	or to June 25, 1 Iule. (Note: The	part 2, 3, and 4 of the 981. For further extended letter M below refuct of 2010.)	planation of p	ermitted station	ns, see the	•			
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerce D Grandfathered instructions fo 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 pursuant to individuations wield to station wield process and the station wield process as defined a	ations cited be to the FCC mark in 76.5(kk) (76 I station [76.59 5) (see paragrule). all waiver of FC d on a part-timethin grade-B co	e or substitute basi ontour, [76.59(d)(5)	e in effect on 3 57, 76.59(b), (1), 76.63(a) 1 8(a) referring to stitution of gra	June 24, 1981.) 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] ndfathered staff	.63(a) referring to 61(e)(1) tions in the				
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	of			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE			
						II		0.00			
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE						
_ine 1: Enter the	e total number of	DSEs from բ	part 5 of this s	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	oss receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represen partially		
ine 5: Multiply li	ine 4 by 0.0375 a	ınd enter su	m here				x		permited/ partially nonpermitted		
_ine 6: Enter tota	al number of DSE	s from line	3						carriage? If yes, see part 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			

	WNER OF CABLE S						S	YSTEM ID# 25206	Name	
n block A:	ck A must be comp		art 6 and part 7	of the DSE schedu	ule blank and	complete part {	3, (page 16) of the		6	
If your answer if '	'No," complete blo	cks B and C I			ADVETO				Computation o	
s the cable eveten	n located wholly or	ıtside of all m		TELEVISION Με er markets as defin		ion 76 5 of FC	C rules and regula	tions in	3.75 Fee	
effect on June 24, Yes—Com	1981?	schedule—D	•	LETE THE REMAIN			o ruics and regula	10113 111		
No—Comp	DIELE DIOCKS D'AITU			RIAGE OF PERM	AITTED DS	Ec.				
Column 1: CALL SIGN	FCC rules and re	of distant stagulations price	ations listed in porto June 25, 1	part 2, 3, and 4 of tl 981. For further ex e letter M below ref	his schedule t	hat your systen	ns, see the	•		
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfatherec instructions fo E Carried pursus *F A station pre	les and reguled pursuant to on as defined al educationa distation (76.6 r DSE schedunt to individuationsly carried the station with the statio	ations cited be to the FCC mark in 76.5(kk) (76 I station [76.59 is) (see paragrule). all waiver of FC d on a part-time thin grade-B co	e or substitute basi ontour, [76.59(d)(5)	e in effect on 3.57, 76.59(b), (1), 76.63(a) (3) (a) referring the stitution of grass prior to June	June 24, 1981.) 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] ndfathered staff	.63(a) referring to 61(e)(1) tions in the			
Column 3:		e stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	l of		
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE		
KSDK	D	0.25								
								0.25		
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE					
ine 1: Enter the	total number of	DSEs from լ	oart 5 of this s	schedule						
ine 2: Enter the	sum of permitted	d DSEs from	n block B abo	ve						
				of DSEs subject 7 of this schedule		ate.				
ine 4: Enter gro	ss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represer partially	
ine 5: Multiply li	ine 4 by 0.0375 a	and enter su	m here				x		permited/ partially nonpermitted	
₋ine 6: Enter tota	ne 6: Enter total number of DSEs from line 3									
_ine 7: Multiplv li	ine 6 by line 5 an	d enter here	e and on line 2	2, block 3, space	L (page 7)			0.00		

	WNER OF CABLE S						S	YSTEM ID# 25206	Name		
In block A: • If your answer if ' schedule.	ck A must be comp "Yes," leave the rei "No," complete bloc	mainder of pa	•	of the DSE schedu	ıle blank and	complete part {	3, (page 16) of the		6		
				TELEVISION MA					Computation of 3.75 Fee		
effect on June 24, X Yes—Com	n located wholly ou 1981? uplete part 8 of the solete blocks B and o	schedule—D0	•				C rules and regula	tions in	S S. S.		
		BLOCK B: CARRIAGE OF PERMITTED DSEs									
Column 1: CALL SIGN	FCC rules and re	gulations pric e DSE Sched	or to June 25, 1 Iule. (Note: The	part 2, 3, and 4 of the 981. For further extended letter M below refuct of 2010.)	planation of p	ermitted station	ns, see the	•			
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerce D Grandfathered instructions fo 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 pursuant to individuations wield to station wield process and the station wield process as defined a	ations cited be to the FCC mark in 76.5(kk) (76 I station [76.59 5) (see paragrule). all waiver of FC d on a part-timethin grade-B co	e or substitute basi ontour, [76.59(d)(5)	e in effect on 3 57, 76.59(b), (1), 76.63(a) 1 8(a) referring to stitution of gra	June 24, 1981.) 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] ndfathered staff	.63(a) referring to 61(e)(1) tions in the				
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	of			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE			
						II		0.00			
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE						
_ine 1: Enter the	e total number of	DSEs from բ	part 5 of this s	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	oss receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represen partially		
ine 5: Multiply li	ine 4 by 0.0375 a	ınd enter su	m here				x		permited/ partially nonpermitted		
_ine 6: Enter tota	al number of DSE	s from line	3						carriage? If yes, see part 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			

	WNER OF CABLE S						S	YSTEM ID# 25206	Name		
In block A: • If your answer if ' schedule.	ck A must be comp "Yes," leave the rei "No," complete bloc	mainder of pa	•	of the DSE schedu	ıle blank and	complete part {	3, (page 16) of the		6		
				TELEVISION MA					Computation of 3.75 Fee		
effect on June 24, X Yes—Com	n located wholly ou 1981? uplete part 8 of the solete blocks B and o	schedule—D0	•				C rules and regula	tions in	S S. S.		
		BLOCK B: CARRIAGE OF PERMITTED DSEs									
Column 1: CALL SIGN	FCC rules and re	gulations pric e DSE Sched	or to June 25, 1 Iule. (Note: The	part 2, 3, and 4 of the 981. For further extended letter M below refuct of 2010.)	planation of p	ermitted station	ns, see the	•			
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerce D Grandfathered instructions fo 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 pursuant to individuations wield to station wield process and the station wield process as defined a	ations cited be to the FCC mark in 76.5(kk) (76 I station [76.59 5) (see paragrule). all waiver of FC d on a part-timethin grade-B co	e or substitute basi ontour, [76.59(d)(5)	e in effect on 3 57, 76.59(b), (1), 76.63(a) 1 8(a) referring to stitution of gra	June 24, 1981.) 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] ndfathered staff	.63(a) referring to 61(e)(1) tions in the				
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	of			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE			
						II		0.00			
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE						
_ine 1: Enter the	e total number of	DSEs from բ	part 5 of this s	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	oss receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represen partially		
ine 5: Multiply li	ine 4 by 0.0375 a	ınd enter su	m here				x		permited/ partially nonpermitted		
_ine 6: Enter tota	al number of DSE	s from line	3						carriage? If yes, see part 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			

	WNER OF CABLE S						S	YSTEM ID# 25206	Name		
In block A: • If your answer if ' schedule.	ck A must be comp "Yes," leave the rei "No," complete bloo	mainder of pa	•	of the DSE schedu	ıle blank and	complete part {	3, (page 16) of the		6		
			BLOCK A:	TELEVISION MA	ARKETS				Computation of 3.75 Fee		
effect on June 24, Yes—Com	1981?	schedule—D	•	er markets as defin LETE THE REMAIN			C rules and regula	tions in	0.70100		
		BLOCK B: CARRIAGE OF PERMITTED DSEs									
Column 1: CALL SIGN	FCC rules and re	gulations pric e DSE Sched	or to June 25, 1 dule. (Note: The	part 2, 3, and 4 of the 981. For further ex the letter M below ref act of 2010.)	planation of p	ermitted station	ns, see the	•			
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerce D Grandfathered instructions fo 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 being the FCC markin 76.5(kk) (76) I station [76.59 is) (see paragrule). I all waiver of FC don a part-time thin grade-B co	e or substitute basi ontour, [76.59(d)(5)	e in effect on 3 57, 76.59(b), (1), 76.63(a) 1 8(a) referring to stitution of gra	June 24, 1981.) 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] ndfathered staff	.63(a) referring to 61(e)(1) tions in the				
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	of			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE			
	•	•	•	•		11		0.00			
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE						
Line 1: Enter the	total number of	DSEs from p	part 5 of this s	schedule							
ine 2: Enter the	sum of permitted	d DSEs from	n block B abo	ve							
				of DSEs subject 7 of this schedule		ate.					
Line 4: Enter gro	ess receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represen partially		
_ine 5: Multiply li	ine 4 by 0.0375 a	nd enter su	m here				x		permited/ partially nonpermitted		
Line 6: Enter tota	al number of DSE	Es from line	3						carriage? If yes, see part 9 instructions.		
ine 7: Multiply li	ine 6 by line 5 an	d enter here	and on line 1	2. block 3. space	I (nage 7)			0.00			

	WNER OF CABLE S						S	YSTEM ID# 25206	Name		
In block A: • If your answer if ' schedule.	ck A must be comp "Yes," leave the rei "No," complete bloc	mainder of pa	•	of the DSE schedu	ıle blank and	complete part {	3, (page 16) of the		6		
				TELEVISION MA					Computation of 3.75 Fee		
effect on June 24, X Yes—Com	n located wholly ou 1981? uplete part 8 of the solete blocks B and o	schedule—D0	•				C rules and regula	tions in	S S. S.		
		BLOCK B: CARRIAGE OF PERMITTED DSEs									
Column 1: CALL SIGN	FCC rules and re	gulations pric e DSE Sched	or to June 25, 1 Iule. (Note: The	part 2, 3, and 4 of the 981. For further extended letter M below refuct of 2010.)	planation of p	ermitted station	ns, see the	•			
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerce D Grandfathered instructions fo 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 pursuant to individuations wield to station wield process and the station wield process as defined a	ations cited be to the FCC mark in 76.5(kk) (76 I station [76.59 5) (see paragrule). all waiver of FC d on a part-timethin grade-B co	e or substitute basi ontour, [76.59(d)(5)	e in effect on 3 57, 76.59(b), (1), 76.63(a) 1 8(a) referring to stitution of gra	June 24, 1981.) 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] ndfathered staff	.63(a) referring to 61(e)(1) tions in the				
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	of			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE			
						II		0.00			
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE						
_ine 1: Enter the	e total number of	DSEs from բ	part 5 of this s	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	oss receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represen partially		
ine 5: Multiply li	ine 4 by 0.0375 a	ınd enter su	m here				x		permited/ partially nonpermitted		
_ine 6: Enter tota	al number of DSE	s from line	3						carriage? If yes, see part 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			

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

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

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	,092,622.16	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? X Yes—Complete section 3 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	• Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1.)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ \$		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)		
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name		//E OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT	SYSTEM ID# 25206
		,	
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$	
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ _\$	
Surcharge		C. Multiply line B by 3.000 and enter here ▶ \$	
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ _\$	
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here	
		F. Multiply line D by line E and enter here	
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)	
		Syndicated Exclusivity Surcharge	<u></u> .
	Instruc	ctions:	
8		ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part	t
J		checked "Yes," use the total number of DSEs from part 5.	
Computation		ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	
of	1 1	r answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below	w
Base Rate Fee	blank.		
	What is	s a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
	were lo	ocated within that station's local service area and others were located outside that area. For the definition of a station's "local	
	service	e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did ve	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		Yes—Complete part 9 of this schedule. No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶\$	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes,"	
		use the total number of DSEs from part 5.).	
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts (the amount in section 1)	
		B. Enter 0.00701 of gross receipts (the amount in section 1) ▶	
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	
		E. Add lines A, and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7)	
		Base Rate Fee	0.00

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 25206 CABLE ONE, INC. d/b/a SPARKLIGHT Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

CABLE ONE, INC.	d/b/a SP	ARKLIGHT					25206	Name
B	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRIB	ER GROUP		
		SUBSCRIBER GROU		SECOND SUBSCRIBER GROUP		IP	_	
COMMUNITY/ AREA	CHRIST	IAN, SHELBY, M	OULTRIE	COMMUNITY/ AREA MONTGOMERY CO WEST			ST	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE CALL SIGN DSE			of
				KETC	0.25			Base Rate F
								and
			•					Syndicate
							•••••	Exclusivit
					-			
	 						·····	Surcharge
	ļ							for
								Partially
								Distant
								Stations
	†							
	 				 			
	 				.		·····	
otal DSEs			0.00	Total DSEs			0.25	
No D int. Fin.t On			476.20	O B into O				
Gross Receipts First Gro	oup	<u>\$ 563</u>	,176.38	Gross Receipts Secon	d Group	\$ 1	81,038.77	
Base Rate Fee First Gro	nun	¢	0.00	Base Rate Fee Second	d Group	\$	481.56	
Jase Nate i ee i list Oit	oup	\$	0.00	Dase Nate I ee Second	a Group	Þ	401.50	
	THIRD	SUBSCRIBER GROU	JP		FOURTH S	SUBSCRIBER GROU	IP.	
			,,	COMMUNITY// A DE A				
COMMUNITY/ AREA	FAYETT	E CO.		COMMUNITY/ AREA	WONTGC	DMERY CO N,C	& WACOU	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
KETC	0.25			KETC	0.25			
NICS	0.25							
	 		···				·····	
	 						·····	
	 				ļ			
	 							
	<u> </u>							
	†							
	 				 			
	 				-			
otal DSEs			0.50	Total DSEs			0.25	
Gross Receipts Third G	oup	\$ 440	,586.68	Gross Receipts Fourth	Group	\$ 2	36,454.15	
					_			
Base Rate Fee Third Gr	oup	\$ 2	,343.92	Base Rate Fee Fourth	Group	\$	628.97	
				II				
				!!				
				11				
ase Rate Fee: Add the			iber group a	s shown in the boxes ab	ove.		6,573.89	

LEGAL NAME OF OWNE CABLE ONE, INC.						S	25206	Name
E		COMPUTATION C		TE FEES FOR EACH		BER GROUP SUBSCRIBER GROU	ID	
COMMUNITY/ AREA		PIN CO-SE		COMMUNITY/ AREA				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE CALL SIGN DSE			of
KETC	0.25							Base Rate Fee and Syndicated
								Exclusivity Surcharge
								for Partially Distant
								Stations
Total DSEs			0.25	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 229	9,720.02	Gross Receipts Secon	d Group	\$ 2	245,155.36	
Base Rate Fee First G		\$	611.06	Base Rate Fee Secon		\$	0.00	
COMMUNITY/ AREA	BOND (SUBSCRIBER GRO		COMMUNITY/ AREA	GREEN	SUBSCRIBER GROU		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
WICS	0.25 0.25			KETC	0.25			
Total DSEs			0.50	Total DSEs			0.25	
Gross Receipts Third G	Group	\$ 19	9,309.89	Gross Receipts Fourth	Group	\$	68,413.84	
Base Rate Fee Third G	Group	\$	102.73	Base Rate Fee Fourth	Group	\$	181.98	
Base Rate Fee: Add th Enter here and in block			criber group a	as shown in the boxes at	oove.	\$		

CABLE ONE, INC.						\$	25206	Name
E	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCRII	BER GROUP		
	NINTH	SUBSCRIBER GRO)UP		TENTH	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA	JERSE	Y CO.		COMMUNITY/ AREA SCOTT CO.				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	DSE CALL SIGN DSE		
				KDNL	0.25			Base Rate Fee
				KDNL-DT2	1.00			and
				KMOV	0.25			Syndicated
				KETC	0.25			Exclusivity
				WRBU	1.00			Surcharge
								for
								Partially
			<u>.</u>					Distant
							······	Stations
	<u></u>							
				-				
			····					
							······	
Total DSEs			0.00	Total DSEs			2.75	
Gross Receipts First G	roup	\$ 1	1,695.15	Gross Receipts Sec	ond Group	\$	97,071.92	
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	2,223.68	
	LEVENTH	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 G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN						S	25206	Name	
				ATE FEES FOR EAC					
	THIRTEENTH SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O								
COMMUNITY/ AREA			U	COMMUNITY/ ARE	Α		0	9 Computatio	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fe	
								and Syndicated	
								Exclusivity	
								Surcharge	
								for	
								Partially Distant	
								Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
		SUBSCRIBER GRO				I SUBSCRIBER GROU			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
	·r	·			- P	·			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
				Ш					
Rase Rate Fee: ∆dd	the hase rat	e fees for each subs	criber aroun	as shown in the boxes	ahove				
Enter here and in blo			group			\$			

CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Syn Exc Sur	CABLE ONE, INC.						S	25206	Name
COMMUNITY AREA CALL SIGN DSE CALL SIGN									
CALL SIGN DSE CALL SIGN									9
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	COMMUNITY/ AREA			U	COMMUNITY/ ARE	Α			Computation
Symbol S	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
Synth Synt									Base Rate Fe
CALL SIGN DSE CALL SIGN									and
Sur Pa D D St Total DSEs O.00 Gross Receipts First Group Same Rate Fee First Group COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN				····					Syndicated Exclusivity
Page 10 St. Total DSEs		<u></u>		····					Surcharge
Total DSEs Total DSEs Gross Receipts First Group Base Rate Fee First Group MINITEENTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE CALL S									for
Total DSEs									Partially
Total DSEs TWENTIETH SUBSCRIBER GROUP TWENTIETH SUBSCRIBER GROUP TWENTIETH SUBSCRIBER GROUP TOMMUNITY/ AREA TOTAL DSES T									Distant Stations
Gross Receipts First Group Base Rate Fee First Group NINTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SI		····							Otations
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 NINTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN									
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 NINTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN				<u></u>					
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 NINTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN D									
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 NINTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN		···		····					
Base Rate Fee First Group NINTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL	Total DSEs			0.00	Total DSEs			0.00	
NINTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE C	Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
NINTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE									
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIG	Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs D.00 Gross Receipts Third Group S D.00 Gross Receipts Fourth Group S D.00 Gross Receipts Fourth Group S D.00 Gross Receipts Fourth Group S D.00		INTEENTH	SUBSCRIBER GRO				I SUBSCRIBER GROU		
Total DSEs O.00 Gross Receipts Third Group S O.00 Gross Receipts Fourth Group S O.00 Gross Receipts Fourth Group S O.00 Gross Receipts Fourth Group S O.00	COMMUNITY/ AREA			U	COMMUNITY/ ARE	Α		<u>U</u>	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00		···		····					
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
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Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
	Total DSEs			0.00	Total DSEs			0.00	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
	Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Raco Pato Foo: Add the haco rate food for each subscriber group as shown in the haves shows	Raco Pato Eco: Add th	no haco rot	o foos for each subs	oriber group	as shown in the house	above			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)				uner group	as shown in the doxes	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.						S	3YSTEM ID# 25206	Name
		COMPUTATION C SUBSCRIBER GRO		ATE FEES FOR EAC		IBER GROUP SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		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
	····		<u> </u>					Distant
								Stations
	····							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
TWEN	ITY-THIRD	SUBSCRIBER GRO	UP	TWEN	ITY-FOURTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		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	
	S	•			dh Cuarra	•		
Gross Receipts Third (эгоир	\$	0.00	Gross Receipts Four	и	\$	0.00	
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW CABLE ONE, INC						S	25206	Name
				ATE FEES FOR EAC				
TWENTY-FIFTH SUBSCRIBER GROUP TWENTY-SIXTH SUBSCRIBER G								9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	of			
								Base Rate Fo
		-						and
		-						Syndicated Exclusivity
								Surcharge
								for
		-						Partially
		-						Distant Stations
								Ottations
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO		П		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				Ш				
			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						S	25206	Name
OADLE ONE, INC							25206	
T\//E		SUBSCRIBER GRO		TE FEES FOR EAC				
COMMUNITY/ AREA			0	THIRTIETH SUBSCRIBER GROUP COMMUNITY/ AREA 0				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.122 0.0.1	202	07.22 0.0.1	232	07.22 0.01.	202	0,422 0.014	332	Base Rate Fee
								and
								Syndicated
								Exclusivity
			<u>.</u>					Surcharge for
					·····			Partially
								Distant
								Stations
			····	-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	•	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			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 Fourt	h Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	as shown in the boxes a	above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 25206									
CABLE ONE, III							25200			
ТЬ		SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP I SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA		. 23233 NDER GROOT	0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
07.122.01.011	332	07.22 3.3.1	332	07.22 57677	302	0,122 0.011	332	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 Seco		\$	0.00			
		SUBSCRIBER GRO		Ti .		I SUBSCRIBER GROU	JP			
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	4		0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
			····	-						
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00			
	- r	·			- · P	·				
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
			criber group a	as shown in the boxes	above.					
Enter here and in blo	ock 3, line 1, s	pace L (page 7)				\$				

EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 25206									
THIRTY		COMPUTATION C SUBSCRIBER GRO	DUP	11	IRTY-EIGHTH	IBER GROUP I SUBSCRIBER GROU	JP	a	
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 (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
	RTY-NINTH	SUBSCRIBER GRO				I SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			····						
	·····		····						
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 Third Base Rate Fee: Add t Enter here and in bloc	he base rat					\$	0.00		

EGAL NAME OF OWNER OF CABLE SYSTEM: SABLE ONE, INC. d/b/a SPARKLIGHT 25206									
FC		COMPUTATION C SUBSCRIBER GRO	UP	11	RTY-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 Fee	
			<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	ond Group	\$	0.00		
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
FO	RTY-THIRD	SUBSCRIBER GRO	UP	FOR	RTY-FOURTH	I SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			····						
			<u>.</u>						
			····		•••••				
Total DCTo			0.00	Total DSTo			0.00		
Total DSEs	_			Total DSEs					
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rın 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 bloo			criber group	as shown in the boxes	above.	\$			

	EGAL NAME OF OWNER OF CABLE SYSTEM: SABLE ONE, INC. d/b/a SPARKLIGHT 25206									
			NE DACE DA	TE FEE FOR FAC	LL CLIDCOD	IDED COOLID	20200			
		SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP I SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated		
				-				Exclusivity Surcharge		
								for		
								Partially		
								Distant		
								Stations		
			·····							
Total DSEs			0.00	Total DSEs			0.00			
ross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	ond Group	\$	0.00			
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco		\$	0.00			
		SUBSCRIBER GRO		Ti .		SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
			·····							
			····							
			<u>.</u>							
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
				Ш						
Base Rate Fee: Add t Enter here and in bloo			criber group a	as shown in the boxes	above.	\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 25206									
F		COMPUTATION C		ATE FEES FOR EAC		IBER GROUP	ID		
COMMUNITY/ ARE			0	COMMUNITY/ AREA			0	9	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fe	
								and Syndicated	
								Exclusivity	
								Surcharge	
								for Partially	
								Distant	
								Stations	
Total DSEs		!!	0.00	Total DSEs			0.00		
			0.00	Gross Receipts Sec	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00		
		SUBSCRIBER GRO)UP 0	1		SUBSCRIBER GROU	JP 0		
COMMUNITY/ AREA	٩			COMMUNITY/ ARE	ч				
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 Thire	d Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00		
				11					
			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 CABLE ONE, INC						S	25206	Name
				ATE FEES FOR EAC				
	FTY-THIRD	SUBSCRIBER GRO		Ti .		I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
			·····					Syndicated Exclusivity
								Surcharge
								for
								Partially
			·····					Distant Stations
			····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	FTY-FIFTH	SUBSCRIBER GRO				SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				Ш		_		
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxes	above.	\$		

				11	H SUBSCR	IBER GROUP				
	DSE									
CALL SIGN	DSE		0	COMMUNITY/ AREA	······		0	9 Computation		
		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and Syndicated		
			····					Exclusivity		
								Surcharge		
								for		
								Partially Distant		
								Stations		
			····							
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00			
	TY-NINTH	SUBSCRIBER GRO				I SUBSCRIBER GROU	IP			
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 C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00			
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
				П						
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.					

	EGAL NAME OF OWNER OF CABLE SYSTEM: SABLE ONE, INC. d/b/a SPARKLIGHT 25206									
,				TE FEES FOR EAC	LL CLIDOOD	IDED COOLID	20200			
:		SUBSCRIBER GRO		TI .		SUBSCRIBER GROUP	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
				-				Syndicated		
				-				Exclusivity Surcharge		
			••••	-				for		
								Partially		
								Distant		
								Stations		
Total DSEs			0.00	Total DSEs			0.00			
ross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	ond Group	\$	0.00			
Base Rate Fee First	•	\$	0.00	Base Rate Fee Seco		\$	0.00			
		SUBSCRIBER GRO		Ti .		SUBSCRIBER GROU	JP			
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
			••••							
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00			
,	•				,	_				
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
			criber group a	as shown in the boxes	above.					
Enter here and in blo			5 F			\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 25206								
				TE FEES FOR EAC				
	XTY-FIFTH	SUBSCRIBER GRO		TI .		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	0.00	
	-SEVENTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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	
				11				
Base Rate Fee: Add to Enter here and in bloc	he base rat k 3, line 1, s	e fees for each subs space L (page 7)	criber group a	as shown in the boxes	above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 25206									
,			TE BASE DA	ATE FEES FOR EACI		IRED CDOUD	20200			
;		SUBSCRIBER GRO		III		I SUBSCRIBER GROU	JP			
COMMUNITY/ ARE			0	COMMUNITY/ AREA			0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated		
				-				Exclusivity Surcharge		
				-				for		
								Partially		
								Distant		
	<u>.</u>							Stations		
Total DSEs			0.00	Total DSEs			0.00			
ross Receipts First Group \$ 0.0			0.00	Gross Receipts Seco	nd Group	\$	0.00			
Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00			
		SUBSCRIBER GRO		Ti .		SUBSCRIBER GROU	JP			
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA	0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
				-						
			·····	-						
					•••••					
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00			
										
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00			
				Ш						
			criber group	as shown in the boxes a	above.	•				
Enter here and in blo	оск 3, line 1, s	space L (page 7)				\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 25206								
E	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
SEVEN	ITY-THIRD	SUBSCRIBER GRO		Ħ		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	٩		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	CALL SIGN DSE CALL SIGN DSE			
								of Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
			···					Distant
								Stations
	<u></u>							
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
						·		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec		\$	0.00	
	NTY-FIFTH	SUBSCRIBER GRO		ii -		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 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	
				Ш				
Base Rate Fee: Add th Enter here and in block	e base rat 3, line 1, s	e fees for each subse pace L (page 7)	criber group a	as shown in the boxes	above.	\$		

CABLE ONE, INC						S	25206	Name
				ATE FEES FOR EAC				
SEVENT COMMUNITY/ AREA		SUBSCRIBER GRO	OUP 0	SEVE COMMUNITY/ ARE		SUBSCRIBER GROU	JP 0	9
COMMONT IT AREA								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				I 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	I 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	
				Ш				
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	¢		
inter riere and in blo	on o, iiile 1, S	space L (page /)				Ф		

LEGAL NAME OF OWNE CABLE ONE, INC.							25206	N
				ATE FEES FOR EAC				
EIGH COMMUNITY/ AREA	TY-FIRST	SUBSCRIBER GRO	0	COMMUNITY/ ARE		SUBSCRIBER GROU	0	
								Com
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base
								Base
								Syn
								Exc
								Sur
								Pa
								Di
								Sta
otal DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
•					•			
ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec		\$	0.00	
	TY-THIRD	SUBSCRIBER GRO		П		SUBSCRIBER GROU		
OMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	чр	•			О.очр	<u>*</u>	3.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the	e base rat e	e fees for each subs pace L (page 7)	criber group	as shown in the boxes	above.	\$		

	GAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. d/b/a SPARKLIGHT SYSTEM ID# 25206								
		COMPUTATION C		ATE FEES FOR EAC		IBER GROUP I SUBSCRIBER GROU	JP		
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	
								Surcharge	
								for Partially	
								Distant	
								Stations	
	····								
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		
	-SEVENTH	SUBSCRIBER GRO				SUBSCRIBER GROU	_		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	····								
			····						
	····		····						
Total DSEs	•	•	0.00	Total DSEs	•		0.00		
Gross Receipts Third (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		
Base Rate Fee: Add to Enter here and in bloc			criber group	as shown in the boxes	above.	\$			

	GAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. d/b/a SPARKLIGHT SYSTEM ID# 25206								
		COMPUTATION C		ATE FEES FOR EAC		IBER GROUP I SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		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 G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
•	·								
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00		
NIN COMMUNITY/ AREA	ETY-FIRST	SUBSCRIBER GRO	0 0	NINE COMMUNITY/ AREA		SUBSCRIBER GROU	JP O		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			<u></u>	-					
			····	-					
Total DSEs			0.00	Total DSEs	<u>'</u>		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 Four	th Group	\$	0.00		
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxes	above.	\$			

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

	GAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. d/b/a SPARKLIGHT SYSTEM ID# 25206								
NINETY		COMPUTATION C SUBSCRIBER GRO	UP	Ti .	ETY-EIGHTH	IBER GROUP I SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	<i></i>		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 C	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
	ETY-NINTH	SUBSCRIBER GRO		1		SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	·····								
	·····								
			<u></u>						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add t			criber group	as shown in the boxes	above.	\$			

LEGAL NAME OF OW						S	25206	Name
			LE DAGE D	TE FEES FOR EAC	H SHBOOD	IDED COOLD	20200	
ONE HUN		SUBSCRIBER GRO		П		SUBSCRIBER GROUP	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
				-				Exclusivity
				-				Surcharge for
			••••					Partially
								Distant
								Stations
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO		11		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····					
			••••	-				
			••••	-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				Ш				
			criber group	as shown in the boxes	above.			
Enter here and in blo	ock 3, line 1, s	space L (page 7)				\$		

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

EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT 25206								Name
				TE FEES FOR EAC				
	RED NINTH	SUBSCRIBER GRO		li .		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	٩		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
			···					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDBED I		SUBSCRIBER GRO	LID	ONE HUNDRE		SUBSCRIBER GROU	ID.	
COMMUNITY/ AREA		SUBSCRIBER GRO	0	COMMUNITY/ AREA		SUBSCRIBER GROU	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 Four	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc	ne base rat k 3, line 1, s	e rees for each subso space L (page 7)	criber group a	as snown in the boxes	above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: SABLE ONE, INC. d/b/a SPARKLIGHT 25206							
		COMPUTATION C		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	ID	
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge for
	•••••		····					Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	FIFTEENTH	SUBSCRIBER GRO		ll .		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 bloo			criber group a	as shown in the boxes	above.	\$		

	GAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. d/b/a SPARKLIGHT SYSTEM ID# No. 10							
ONE HUNDRED SEVE				ONE HUNDRED E	IGHTEENTH	IBER GROUP I SUBSCRIBER GROU	JP 0	9
oommonn 1, , a cel				Sommorth 1, 7 at 2.				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
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
C. 000 . 1000.pto	о цр			Cross (toss.pts cost	а О.оар			
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED N	INTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	TWENTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
			····					
Total DSEs		"	0.00	Total DSEs		11	0.00	
	Oralin	•	0.00		th Craun	•	0.00	
Gross Receipts Third (отоир	\$	0.00	Gross Receipts Four	ai Gioup	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add to Enter here and in block			criber group	as shown in the boxes	above.	\$		

	GAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. d/b/a SPARKLIGHT SYSTEM ID# 25206								
		COMPUTATION C SUBSCRIBER GRO		ONE HUNDRED TWE	NTY-SECONE	IBER GROUP SUBSCRIBER GROUP	0	9	
COMMUNITY AREA				COMMONITY AREA	······································			Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and Syndicated	
								Exclusivity	
								Surcharge	
			<u></u>					for	
								Partially	
			<u></u>					Distant Stations	
			<u></u>						
Total DSEs		!!	0.00	Total DSEs		11	0.00		
	ralin	•	0.00		and Craun	•	0.00		
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ona Group	\$	0.00		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
ONE HUNDRED TWE	NTY-THIRD	SUBSCRIBER GROU	Р	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP	'		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			····						
	···		····						
			····				······		
Total DSEs		'	0.00	Total DSEs	'	1	0.00		
Gross Receipts Third (-roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
	p	·			C.oup	<u>-</u>			
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$			

	GAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. d/b/a SPARKLIGHT SYSTEM ID# No. 10								
		COMPUTATION C SUBSCRIBER GROU		ONE HUNDRED T	WENTY-SIXTH	IBER GROUP	0	9	
								Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
	·····		····					and Syndicated	
	·····		····					Exclusivity	
								Surcharge	
			<u></u>					for	
								Partially	
	·····		····					Distant Stations	
								Stations	
	·····		····						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First C	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
ONE HUNDRED TWENT	Y-SEVENTH	SUBSCRIBER GROU		11		SUBSCRIBER GROUP	1		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			<u>.</u>						
	·····								
			····						
	••••								
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
,	•			' ' ' '					
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
Base Rate Fee: Add t			criber group	as shown in the boxes	above.	\$			

LEGAL NAME OF OWI						S	25206	Name
CABLE ONL, INC							25200	
ONE HUNDRED TW				ATE FEES FOR EAC				
COMMUNITY/ AREA		SUBSCRIBER GROU	0	COMMUNITY/ AREA		SUBSCRIBER GROUP	0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-				Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
			·····	-				Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED T	HIRTY-FIRST	SUBSCRIBER GROU		li		SUBSCRIBER GROUP	1	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>					
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
C. 000 Receipts Tillie	. Oloup	<u>*</u>	<u> </u>	Cross receipts rour	a. Group	*	3.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Dana Bets E. A. C.	46-6			the shares in the 1	alanca.			
Enter here and in blo			criber group a	as shown in the boxes	apove.	\$		

CABLE ONE, INC						S	25206	Name
				TE FEES FOR EAC	H SUBSCRI	BER GROUP		
	HRTY-THIRD	SUBSCRIBER GROU		H		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			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 0	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED T	HIRTY-FIFTH	SUBSCRIBER GROU	P	ONE HUNDRED	THIRTY-SIXTH	SUBSCRIBER GROUP	,	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
				-				
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	th Group	\$	0.00	
				<u> </u>				
Base Rate Fee: Add to Enter here and in blood	the base rat ck 3, line 1, s	e fees for each subso pace L (page 7)	criber group a	as shown in the boxes	above.	\$		

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

CABLE ONE, INC						S	3YSTEM ID# 25206	Name
		COMPUTATION C SUBSCRIBER GROU		ONE HUNDRED FO	RTY-SECOND	IBER GROUP SUBSCRIBER GROUP	0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
			····					and Syndicated
			····				······	Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
			····					Stations
			···					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FO	RTY-THIRD	SUBSCRIBER GROU	Р	ONE HUNDRED FO	RTY-FOURTH	I 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	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 t Enter here and in bloc			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC						S	25206	Name
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	ORTY-FIFTH	SUBSCRIBER GROU		1		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated Exclusivity
			····					Surcharge
								for
								Partially
								Distant Stations
			····					Otations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FORT	Y-SEVENTH	SUBSCRIBER GROU	P	ONE HUNDRED F	ORTY-EIGHTH	I 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	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC						S	25206	Name
				TE FEES FOR EAC				
ONE HUNDRED FO		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	<u>\$</u>	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	IFTY-FIRST	SUBSCRIBER GRO	UP	ONE HUNDRED FIF	TY-SECOND	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add	the base rat	e fees for each subs	criber aroup :	as shown in the boxes	above.			
Enter here and in bloo						\$		

LEGAL NAME OF OWNE CABLE ONE, INC.						S	25206	Name
ONE HUNDRED FIF				ONE HUNDRED FIF	TY-FOURTH	IBER GROUP SUBSCRIBER GROU	JP 0	9
oommonn 1, , a ce, c								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	····		<u></u>					and
	····							Syndicated Exclusivity
			<u> </u>					Surcharge
								for
								Partially
			<u></u>					Distant Stations
	····							Stations
			<u> </u>					
			<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	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP	ONE HUNDRED	FIFTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
			-					
			<u> </u>					
	····		<u></u>					
	····							
			<u></u>					
			0.00				2.00	
Total DSEs			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			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC.						S	3YSTEM ID# 25206	Name
		COMPUTATION O SUBSCRIBER GROU		ONE HUNDRED I	FIFTY-EIGHTH	IBER GROUP I SUBSCRIBER GROUP	0	9
OOMMONT IT THE				COMMONT 17 / ME				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 G	iroup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
3ase Rate Fee First G	iroup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED F	IFTY-NINTH	SUBSCRIBER GROU	Р	ONE HUNDI	RED SIXTIETH	SUBSCRIBER GROUP	1	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	<i></i>		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 tl Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.							25206	Name
E	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EACH	SUBSCRII	BER GROUP		
	FIRST	SUBSCRIBER GRO	UP		SECOND	SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA	CHRIST	ΓΙΑΝ, SHELBY, N	IOULTRI	COMMUNITY/ AREA	MONTG	OMERY CO WE	ST	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
KSDK	0.25			KSDK	0.25			Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
							······	for
								Partially
								Distant Stations
	···		···		···		······	Stations
					···			
Total DSEs			0.25	Total DSEs			0.25	
Gross Receipts First G	roun	s 563	3,176.38	Gross Receipts Secon	d Group	\$	181,038.77	
Stood Redelpto I hat Ol	очр		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Gross recorpts decor	и отоир	<u> </u>	101,000.77	
3ase Rate Fee First Gr	oup	\$ 5	5,279.78	Base Rate Fee Secon	d Group	\$	1,697.24	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	FAYET	TE CO.		COMMUNITY/ AREA	MONTG	OMERY CO N,C	C & MACOU	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-					······	
			···		···		·······	
	····		···		···			
	<u> </u>		-		<u>-</u>			
			<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$ 440	,586.68	Gross Receipts Fourth	Group	\$ 2	236,454.15	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes al	pove.	\$	9,275.35	

Nonpermitted 3.75 Stations

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

Nonpermitted 3.75 Stations

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

Nonpermitted 3.75 Stations

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

	25206					ARKLIGHT	u/b/a SF/	CABLE ONE, INC.
		BER GROUP	SUBSCRI	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	E
•	JP	SUBSCRIBER GROU	HTEENTH	EIG	UP	SUBSCRIBER GRO	NTEENTH	SEVE
9 Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fo								
and								
Syndicated					<u></u>		<u>.</u>	
Exclusivity								
Surcharge					<u></u>			
for								
Partially								
Distant								
Stations								
	······				<mark></mark>			
			·		 		····	
							-	
	·····							
	0.00			Total DSEs	0.00			Fotal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	iroup	Gross Receipts First Gr
		<u> </u>	. О.О.В					s. eee r teee, pte r ii et e.
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	VENTIETH	T\	UP	SUBSCRIBER GRO	INTEENTH	NI
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	······						····	
	······						····	
			······································		<mark></mark>		····	
					<u></u>		····	
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
				il			•	

	SPARKLIGHT					25206	Nar
	A: COMPUTATION C						
I WEN I Y-FIF	ST SUBSCRIBER GRO	<u>0</u>	COMMUNITY/ ARE		SUBSCRIBER GROU	0	9
							Compu
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	o Base Ra
							an
							Syndi
							Exclus
							Surch fo
							Parti
							Dist
							Statio
otal 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	<u> </u>	0.00	Base Rate Fee Sec		\$	0.00	
TWENTY-TH COMMUNITY/ AREA	RD SUBSCRIBER GRO	OUP 0	COMMUNITY/ ARE		SUBSCRIBER GROU	JP 0	
			COMMONT I/ ARE	······································			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				•••••		······	
Total DSEs		0.00	Total DSEs			0.00	
	\$			rth Group	.	0.00	
Fotal DSEs Gross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$		

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

	C. d/b/a SP						25206	Name
				TE FEES FOR EAC	H SUBSCR	IBER GROUP		
TWE	ENTY-NINTH	SUBSCRIBER GRO	DUP		THIRTIETH	SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
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COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
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COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
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COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
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CALL SIGN CALL SIGN Total DSEs	DSE	CALL SIGN	0 DSE	COMMUNITY/ AREA	DSE	CALL SIGN	0.00	
CALL SIGN	DSE		DSE	CALL SIGN	DSE		DSE	
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otal DSEs	II.		0.00	Total DSEs		11	0.00 0.00	
Gross Receipts First Group	•		0.00	Gross Receipts Seco	nd Group	¢		
Bioss Receipts Filst Gloup	<u>\$</u>			Gloss Receipts Seco	iu Group	\$	0.00	
Base Rate Fee First Group	\$		0.00	Base Rate Fee Second	nd Group	\$	0.00	
THIDTY I	TIETU CI IDC	CRIBER GROU	ID			LOUBOODIDED ODOL		
	-IF ITI 30B3	JOINIBER GROC			IRTY-SIXTE	I SUBSCRIBER GROU	JP	
			0	COMMUNITY/ AREA	IRTY-SIXTE	SUBSCRIBER GROU	_	
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				ATE FEES FOR EAC				
	VENTH S	SUBSCRIBER GROU		ii e		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0.00 0.00 0.00	Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs			0.00	Total DSEs			0.00 0.00	
Gross Receipts First Grou	р	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
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Base Rate Fee First Grou	p	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	-NINTH S	SUBSCRIBER GROU				SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSFs			0.00	
			0.00	Total DSEs	th Co		0.00	
otal DSEs	ıp	\$	0.00	Total DSEs Gross Receipts Four	th Group	\$	0.00	

	A: COMPUTATION OF SUBSCRIBER GROUND CALL SIGN			RTY-SECOND	BER GROUP SUBSCRIBER GROUP CALL SIGN	25206 UP	Q Computation of Base Rate Fer and Syndicated Exclusivity
FORTY-FIRS	T SUBSCRIBER GRO	0 0	FOR COMMUNITY/ ARE	RTY-SECOND	SUBSCRIBER GROU	0	Computation of Base Rate Fee and Syndicated Exclusivity
	CALL SIGN				CALL SIGN		Computation of Base Rate Fee and Syndicated Exclusivity
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fe and Syndicated Exclusivity
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Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec		\$	0.00	
FORTY-THIRI	D SUBSCRIBER GRO	DUP	FOR	RTY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ ARE.	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
		0.50		- ·		5.50	
Base Rate Fee: Add the base ra							

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

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

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

· ·	SPARKLIGHT				•	25206	Name
	(A: COMPUTATION		п				
	NTH SUBSCRIBER GR				SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ AREA			DSE	Computa
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Total DSEs		0.00	Total DSEs			0.00 0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FIFTY-NII	NTH SUBSCRIBER GR	OUP		SIXTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			Λ.	
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В	OCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
SIX	TY-FIFTH	SUBSCRIBER GRO	UP		SIXTY-SIXTH	I SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA			0	COMMUNITY/ ARE	٩		0	9 Computation
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Total DSEs			0.00	Total DSEs			0.00	
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Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SIXTY-S	EVENTH	SUBSCRIBER GRO)UP	S	XTY-EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٩		0	
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Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
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otal DSEs	_		0.00	Total DSEs			0.00	
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Base Rate Fee First Group	\$		0.00	Base Rate Fee Seco	nd Group	\$	0.00	
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SEVENTY-F		JBSCRIBER GROI	<u> </u>		TY-SECOND			
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SEVENTY-F	FIRST SU		UP 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-F OMMUNITY/ AREA	FIRST SU		UP 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-F	FIRST SU		UP 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
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SEVENTY-F COMMUNITY/ AREA CALL SIGN DO	FIRST SU		DSE	SEVEN COMMUNITY/ AREA CALL SIGN	TY-SECOND	SUBSCRIBER GROU	DSE	
SEVENTY-F COMMUNITY/ AREA CALL SIGN DS Total DSEs	PISSE DESCRIPTION OF THE PROPERTY OF THE PROPE	CALL SIGN	DSE DSE	SEVEN COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	DSE	
SEVENTY-F	PISSE DESCRIPTION OF THE PROPERTY OF THE PROPE	CALL SIGN	DSE	SEVEN COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	

CABLE ONE, INC. u/i		SYSTEM: ARKLIGHT				•	25206	Nam
				ATE FEES FOR EACH				
	-THIRD	SUBSCRIBER GRO		TI .		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs			0.00	Total DSEs		11	0.00	
			0.00		- d O	•		
Gross Receipts First Group	Þ	\$	0.00	Gross Receipts Seco	na Group	\$	0.00	
ase Rate Fee First Group	р	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
				+				
SEVENTY	'-FIFTH	SUBSCRIBER GRO	UP	SEVE	NTY-SIXTH	I SUBSCRIBER GROU	JP	
	'-FIFTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		I SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	DSE	CALL SIGN		1		CALL SIGN	_	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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CALL SIGN			DSE	COMMUNITY/ AREA CALL SIGN			DSE	
CALL SIGN CALL SIGN Total DSEs	DSE	CALL SIGN	0 DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	0.00	
COMMUNITY/ AREA	DSE		DSE	COMMUNITY/ AREA CALL SIGN	DSE		DSE	

BLE ONE, INC. d/b/a						25206	
	A: COMPUTATION		TI .			LID	
	ITH SUBSCRIBER GR		11		SUBSCRIBER GRO		9
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ALL SIGN DSE	E CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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al DSEs		0.00	Total DSEs	-		0.00	
aa Dagainta Firat Craun	•			and Craun	•		
ss Receipts First Group	<u>\$</u>	0.00	Gross Receipts Sec	ona Group	<u>\$</u>	0.00	
se Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVENTY-NIN	ITH SUBSCRIBER GR	OI IP			I OLIDOODIDED ODOL	UD.	
	TITI GODGOTTIDETT GIT			FIGHTIFTE			
MMINITY/ AREA			COMMUNITY/ ARE		SUBSCRIBER GRO		
MMUNITY/ AREA		0	COMMUNITY/ ARE		SUBSCRIBER GRO	0	
	E CALL SIGN	0		Α		0	
MMUNITY/ AREA ALL SIGN DSE	E CALL SIGN		COMMUNITY/ ARE		CALL SIGN		
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ALL SIGN DSE		0 DSE	Total DSEs	DSE	CALL SIGN	0 DSE	
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CABLE ONE, INC.						;	SYSTEM ID# 25206	Name
			E BASE DA	TE FEES FOR EAC	CH SURSOF	RIBER GROUP		
		SUBSCRIBER GRO		m e		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
EIGH	TY-THIRD	SUBSCRIBER GRO)UP	EIGH	TY-FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Foul	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group a	as shown in the boxes	above.	\$		

	COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC	GHTY-SIXTH	IBER GROUP I SUBSCRIBER GROU	JP	_
OMMUNITY/ AREA			1		I GUDGURIDER GRUL) T.	_
	CALL SIGN			۸		0	9
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		DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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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	
	-			·	·		
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
EIGHTY-SEVENTH	SUBSCRIBER GROU	JP	EIG	HTY-EIGHTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	4		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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otal DSEs		0.00	Total DSEs			0.00	
ross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
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ase Rate Fee Third Group	s	0.00	Base Rate Fee Four	rth Group	\$	0.00	
r	r.			r	<u> </u>		

• ,	SPARKLIGHT				•	25206	Name
			ATE FEES FOR EAC				
	NTH SUBSCRIBER GE				SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ AREA	······		0	Computat
CALL SIGN DS	E CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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							and
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							Surcharg
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Total DSEs	I	0.00	Total DSEs			0.00	
	•	0.00		d C	•		
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ona Group	\$	0.00	
3ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NINETY-FII	RST SUBSCRIBER GF	POLID	NINE	T) (OF OON I	ALIBOARINER ARA	u.b	
	to r cobcortibert of	NOUP	+ '\'''	TY-SECONL	SUBSCRIBER GRO	UP	
	- Control Cont	0	COMMUNITY/ AREA		SUBSCRIBER GROU	0	
	П		Ti .		CALL SIGN	_	
COMMUNITY/ AREA	П	0	COMMUNITY/ AREA		——————————————————————————————————————	0	
COMMUNITY/ AREA	П	0	COMMUNITY/ AREA		——————————————————————————————————————	0	
COMMUNITY/ AREA	П	0	COMMUNITY/ AREA		——————————————————————————————————————	0	
COMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A	——————————————————————————————————————	0	
COMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A	——————————————————————————————————————	0	
COMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A	——————————————————————————————————————	0	
COMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0	
COMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0	
COMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0	
COMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0	
COMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0	
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CALL SIGN DS	П	DSE	CALL SIGN	DSE		DSE	

_		ARKLIGHT					25206	
				ATE FEES FOR EAC			UD.	
COMMUNITY/ AREA	ו ז-ו חואט	SUBSCRIBER GRO	0	COMMUNITY/ ARE		SUBSCRIBER GROU	0	9
COMMONT IT AIREA				COMMONT IT ARE	^			Computat
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NINE	TY-FIFTH	SUBSCRIBER GRO	UP	N	INETY-SIXTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>					
			I					
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otal DSEs			0.00	Total DSEs			0.00	
	roup	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	
Total DSEs	roup	\$			rth Group	\$		
		\$			·	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.						:	SYSTEM ID# 25206	Name
			E BASE PA	TE FEES FOR EAC	H SUBSOR	RIBER GROUP		
		SUBSCRIBER GRO		TI .		SUBSCRIBER GRO	UP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
			<u></u>					Syndicated
								Exclusivity
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NINE	TY-NINTH	SUBSCRIBER GRO)UP	ONE H	HUNDREDTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Page Date For Third C	roun		0.00	Page Pate Fee Fee	th Crows		0.00	
Base Rate Fee Third G	ισαρ	<u> </u> \$	0.00	Base Rate Fee Four	ωι Θιουρ	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group a	as shown in the boxes	above.	\$		

CABLE ONE, INC.						;	SYSTEM ID# 25206	Name
			F BASE PA	TE FEES FOR EAC	H SUBSOR	IBER GROUP		
		SUBSCRIBER GRO		П		SUBSCRIBER GRO	UP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDR	ED THIRD	SUBSCRIBER GRO)UP	ONE HUNDR	ED FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	-1		0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
	•				•	<u> </u>		
Base Rate Fee: Add the Enter here and in block			criber group a	as shown in the boxes	above.	\$		

Name	25206						d/b/a SP	CABLE ONE, INC.
				TE FEES FOR EAC				
9	JP 0	I SUBSCRIBER GROU	RED SIXTH	ONE HUN COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	RED FIFTH	ONE HUNDF COMMUNITY/ AREA
Computa				COMMONT I/ AIL				SOMMONT I/ AILA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	DSE	I SUBSCRIBER GROU	DSE	ONE HUND COMMUNITY/ AREA CALL SIGN	DSE		DSE	COMMUNITY/ AREA

	a SPA	SYSTEM: ARKLIGHT				:	25206	Name
				ATE FEES FOR EACH				
	IINTH S	SUBSCRIBER GROU		11	ED TENTH	I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
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otal DSEs			0.00	Total DSEs			0.00	
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Gross Receipts First Group	-	\$	0.00	Gross Receipts Secon	ia Group	\$	0.00	
sase Rate Fee First Group	<u>!</u>	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED ELEVE	ENTH S	SUBSCRIBER GROU	JР	ONE HUNDRED	TWELVTH	SUBSCRIBER GROU	JP	
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LEGAL NAME OF OWNE						\$	25206	Name
				ATE FEES FOR EAC				
ONE HUNDRED THI COMMUNITY/ AREA	RTEENTH	SUBSCRIBER GRO)UP 0	ONE HUNDRED FO		I SUBSCRIBER GROU	JP 0	9
COMMUNITY AREA				COMMONT T/ AREA	H			Computation
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								Surcharge
								for Partially
								Distant
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otal 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 F	IFTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	SIXTEENTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
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Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Foun	rth Group	\$	0.00	
nird (Group le base rat	\$	0.00		rth Group			

	TEM ID# 25206 Name
COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
SUBSCRIBER GROUP ONE HUNDRED EIGHTEENTH SUBSCRIBER GROUP	<u> </u>
O COMMUNITY/ AREA	0 Computa
CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE of
	Base Rate
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3 U.UU HGross Receipts Second Group 3	
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ONE HUNDRED FORTY	-SEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRED F	ORTY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Foul	th Group	\$	0.00	
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	FTY-THIRD	SUBSCRIBER GRO		11		SUBSCRIBER GROU		9
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Gross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Rate Fee Third (Group		0.00		rth Group			

d/b/a SPARKLIGHT	25206	Name
LOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP		
-SEVENTH SUBSCRIBER GROUP ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA	0	9
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ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 20 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. d/b/a SPARKLIGHT 25206 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation ☐ First 50 major television market ☐ Second 50 major television market INSTRUCTIONS: **Base Rate Fee** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. d/b/a SPARKLIGHT 25206 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation ☐ First 50 major television market ☐ Second 50 major television market INSTRUCTIONS: **Base Rate Fee** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. d/b/a SPARKLIGHT 25206 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation ☐ First 50 major television market ☐ Second 50 major television market INSTRUCTIONS: **Base Rate Fee** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. NINTH SUBSCRIBER GROUP TENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE **ELEVENTH SUBSCRIBER GROUP** TWELVTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 20 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. d/b/a SPARKLIGHT 25206 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation ☐ First 50 major television market ☐ Second 50 major television market INSTRUCTIONS: **Base Rate Fee** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. THIRTEENTH SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE FIFTEENTH SUBSCRIBER GROUP SIXTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation 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 25206 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation ☐ First 50 major television market ☐ Second 50 major television market INSTRUCTIONS: **Base Rate Fee** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. SEVENTEENTH SUBSCRIBER GROUP EIGHTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE NINEENTH SUBSCRIBER GROUP TWENTYTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation 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 25206 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation ☐ First 50 major television market ☐ Second 50 major television market INSTRUCTIONS: **Base Rate Fee** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. TWENTY-FIRST SUBSCRIBER GROUP TWENTY-SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE TWENTY-THIRD SUBSCRIBER GROUP TWENTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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