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

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: 2020/2 Accounting Period Instructions: В Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo-Owner rate 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. 62443 Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM Atlantic Broadband (CT) LLC 624432020/2 62443 2020/2 2 Batterymarch Park, Suite 205 Quincy, MA 02169 INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these С names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. IDENTIFICATION OF CABLE SYSTEM: System 1 Atlantic Broadband MAILING ADDRESS OF CABLE SYSTEM: 295 Meridian Street 2 (Number, street, rural route, apartment, or suite number) Groton, CT 06340 (City, town, state, zip code) D Instructions: For complete space D instructions, see page 1b. Identify only the frst community served below and relist on page 1b Area with all communities. Served CITY OR TOWN ISTATE GROTON СТ First Community Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB GRP# Alda MD 1 Α Sample Alliance MD в 2 Gering MD в 3 Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office'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

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

3/1/2021

for Secondary Transmissions by Cable Systems (Long Form)

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

| FORM SA3E. PAGE 1b.   |   |  |   |                        |
|---|---|--|---|------------------------|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:  |   |  | SYSTEM ID#  |                        |
| Atlantic Broadband (CT) LLC   |   |  | 62443   |                        |
| Instructions: List each separate community served by the cable system. A "commun<br>in FCC rules: "a separate and distinct community or municipal entity (including uninco<br>areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The<br>of system identification hereafter known as the "first community." Please use it as the<br>Note: Entities and properties such as hotels, apartments, condominiums, or mobile h<br>below the identified city or town.<br>If all communities receive the same complement of television broadcast stations (i.e.,<br>all communities with the channel line-up "A" in the appropriate column below or leave<br>on a partially distant or partially permitted basis in the DSE Schedule, associate each<br>designated by a number (based on your reporting from Part 9). | rporated communitie<br>frst community that y<br>first community on al<br>ome parks should be<br>one channel line-up<br>the column blank. If | es within unincorpo<br>you list will serve as<br>I future filings.<br>I reported in parent<br>for all), then either<br>you report any stat | rated<br>s a form<br>theses<br>: associate<br>tions | D<br>Area<br>Served    |
| When reporting the carriage of television broadcast stations on a community-by-comr<br>channel line-up designated by an alpha-letter(s) (based on your Space G reporting) a<br>(based on your reporting from Part 9 of the DSE Schedule) in the appropriate column  | nd a subscriber grou<br>s below.  | p designated by a  | number  |                        |
| CITY OR TOWN  | STATE   | CH LINE UP   | SUB GRP#  | -                      |
| GROTON  | СТ  |  |   | First                  |
|   |   | <b> </b>   |   | Community              |
|   |   | 1  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   | See instructions for   |
|   |   |  |   | additional information |
|   |   |  |   | on alphabetization.    |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   | Add rows as necessary. |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   | 1  |   |                        |
|   |   |  |   |                        |
|   |   | <b> </b>   |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |
|   |   |  |   |                        |

|     |   |   | _ |                                       |  |
|-----|---|---|---|---------------------------------------|--|
| . I | , |   | 1 |                                       |  |
|     |   |   |   | 1                                     |  |
|     |   | 1 | 1 | · · · · · · · · · · · · · · · · · · · |  |
| 11  | , |   |   | 1                                     |  |
| 11  |   |   | 1 |                                       |  |
| 11  | , |   |   | 1                                     |  |
| 11  |   |   |   | ····· ·                               |  |
| 11  |   |   |   | 1                                     |  |
| 1 - | J |   | / | <u> </u>                              |  |
|     |   |   |   |                                       |  |

## ACCOUNTING PERIOD: 2020/2

| Name                       | LEGAL NAME OF OWNER OF CABLE  | E SYSTEM:  |  |  |   |             |  |              | S              | YSTEM I |  |  |  |
|----------------------------|---|--|--|--|---|-------------|--|--------------|----------------|---------|--|--|--|
| Name                       | Atlantic Broadband (CT)   | LLC  |  |  |   |             |  |              |                | 624     |  |  |  |
| F                          | SECONDARY TRANSMISSION  | SERVICE: SU  | JBSCRI                                 | BERS   | S AND R   | ATES        |  |              |                |         |  |  |  |
| E                          | In General: The information in s  |  |  |  |   |             |  |              |                |         |  |  |  |
| Secondary                  | 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         |  |  |  |   |             |  |              |                |         |  |  |  |
| Transmission               | last day of the accounting period   |  |  |  |   |             |  | LINDSE EXIST |                |         |  |  |  |
| Service: Sub-              | Number of Subscribers: Both   |  |  |  |   |             |  | able system  | , broken       |         |  |  |  |
| scribers and               | 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                      |  |  |  |   |             |  |              |                |         |  |  |  |
| Rates                      | 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).                              |  |  |  |   |             |  |              |                |         |  |  |  |
|                            | separately for the particular service at the rate indicated—not the number of sets receiving service).<br><b>Rate:</b> 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.   | -  | -                                      | -  |   |             |  |              | -              |         |  |  |  |
|                            | category, but do not include disc   | ounts allowed  | for adv                                | ance   | payment.  |             |  |              | 41 4 1. 1 .    |         |  |  |  |
|                            |   | <b>Block 1:</b> 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. <b>Note:</b> 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   |  |  |  |   |             |  |              |                |         |  |  |  |
|                            | irst set" and would be counted once again under "Service to additional set(s)."<br>Block 2: If your cable system has rate categories for secondary transmission service that are different from those   |  |  |  |   |             |  |              |                |         |  |  |  |
|                            | printed in block 1 (for example, t  |  |  |  |   |             |  |              |                |         |  |  |  |
|                            | with the number of subscribers a  |  |  |  |   |             |  |              |                |         |  |  |  |
|                            | sufficient.   | DCK 1  |  |  |   |             |  | BLOC         | 2              |         |  |  |  |
|                            |   |  |  |  | BLUC  | NO. OF      |  |              |                |         |  |  |  |
|                            |   |  |  |  |   |             | SUBSCRIBERS                                  | RATE         |                |         |  |  |  |
|                            | Residential:  |  |  |  |   |             |  |              |                |         |  |  |  |
|                            | Service to first set  |  | 5,141                                  | \$   | 17.95   |             |  |              |                |         |  |  |  |
|                            | Service to additional set(s)  |  |  |  |   |             |  |              |                |         |  |  |  |
|                            | • FM radio (if separate rate)   |  | 700                                    |  | 4 00  |             |  |              |                |         |  |  |  |
|                            | Motel, hotel<br>Commercial  |  | 708<br>411                             | \$<br>\$   | 1.00<br>1.00                                      |             |  |              |                |         |  |  |  |
|                            | Converter   |  | 411                                    | <b>.</b> .   | 1.00  |             |  |              |                |         |  |  |  |
|                            | Residential   |  | 3,530                                  | \$   | 1.00  |             |  |              |                |         |  |  |  |
|                            | Non-residential   |  | 68                                     | \$   | 1.00  |             |  |              |                |         |  |  |  |
|                            |   |  |  |  |   |             |  |              |                |         |  |  |  |
|                            | SERVICES OTHER THAN SEC   |  |  |  | -   |             |  |              |                |         |  |  |  |
| F                          | In General: Space F calls for rat<br>not covered in space E, that is, t   |  | ,                                      |  |   | •           | • •  |              |                |         |  |  |  |
| •                          | service for a single fee. There ar  |  |  |  |   |             |  |              |                |         |  |  |  |
| Services                   | furnished at cost or (2) services   |  |  |  |   |             |  |              |                |         |  |  |  |
| Other Than                 | amount of the charge and the un   |  | usually                                | billed   | d. If any r                                       | ates are cl | narged on a var                              | iable per-p  | rogram basis,  |         |  |  |  |
| Secondary<br>ransmissions: | enter only the letters "PP" in the rate column.   |  |  |  |   |             |  |              |                |         |  |  |  |
| Rates                      | Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.<br>Block 2: List any services that your cable system furnished or offered during the accounting period that were not                          |  |  |  |   |             |  |              |                |         |  |  |  |
|                            | <b>Block 2:</b> 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) descrip  | otion and inclue   | de the r                               | ate fo   | r each.   |             |  |              |                |         |  |  |  |
|                            |   | BLO  |  |  |   |             |  |              | BLOCK 2        |         |  |  |  |
|                            | CATEGORY OF SERVICE   | RATE   |  |  | OF SEF  |             | RATE   | CATEGO       | DRY OF SERVICE | RATE    |  |  |  |
|                            | Continuing Services:  |  |  |  |   | sidential   |  |              |                |         |  |  |  |
|                            | • Pay cable   |  | •                                      | tel, h   |   |             |  |              |                |         |  |  |  |
|                            | Pay cable—add'l channel   |  | -I                                     | mmer   |   |             | ¢ 1.00                                       |              |                |         |  |  |  |
|                            |   |  | ·                                      | y cabl   |   | hannal      | \$ 1.96                                      |              |                |         |  |  |  |
|                            | Fire protection     Burglar protection  | • Pay cable-add'l ch   |  | nannei   |   |             |  |              |                |         |  |  |  |
|                            | •Burglar protection   |  | Fire protection                        |  |   |             |  |              |                |         |  |  |  |
|                            | •Burglar protection<br>Installation: Residential  | \$ 45.99   |  | e prot   | ection  | h           |  |              |                |         |  |  |  |
|                            | •Burglar protection<br>Installation: Residential<br>• First set   | \$ 45.99<br>\$ 15.99   | • Bu                                   | e prot<br>rglar p  | ection<br>protection                              | ı           |  |              |                |         |  |  |  |
|                            | •Burglar protection<br>Installation: Residential<br>• First set<br>• Additional set(s)  |  | • Bu<br>Other                          | e prot<br>rglar µ<br><b>servi</b> e                            | ection<br>protectior<br><b>ces:</b>               | 1           | \$ 21 99                                     |              |                |         |  |  |  |
|                            | •Burglar protection<br>Installation: Residential<br>• First set   |  | • Bu<br>Other<br>• Re                  | e prot<br>rglar p  | ection<br>protectior<br><b>ces:</b><br>ect        | 1           | \$ 21.99                                     |              |                |         |  |  |  |
|                            | •Burglar protection<br>Installation: Residential<br>• First set<br>• Additional set(s)<br>• FM radio (if separate rate)   |  | • Bu<br>Other<br>• Re<br>• Dis         | e prot<br>rglar µ<br>servi<br>conne                            | ection<br>protectior<br><b>ces:</b><br>ect        | 1           |  |              |                |         |  |  |  |
|                            | •Burglar protection<br>Installation: Residential<br>• First set<br>• Additional set(s)<br>• FM radio (if separate rate)   |  | • Bu<br>Other<br>• Re<br>• Dis<br>• Ou | e prot<br>rglar p<br><b>servi</b><br>conne<br>conne<br>tlet re | ection<br>protection<br><b>ces:</b><br>ect<br>ect |             | \$ 21.99<br>\$ 21.99<br>\$ 21.99<br>\$ 21.99 |              |                |         |  |  |  |

| FORM SA3E. PAGE 3.   |  |  |   |  |  |   |
|--|--|--|---|--|--|---|
| LEGAL NAME OF OWN  |  |  |   |  | SYSTEM ID  | Name  |
| Atlantic Broadb  | oand (CT) LL   | C  |   |  | 6244   | 3   |
| PRIMARY TRANSMITTE   | RS: TELEVISIO  | N  |   |  |  |   |
| In General: In space G<br>carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>Substitute Basis S<br>basis under specifc FC<br>• Do not list the station<br>station was carried<br>• List the station here, a<br>basis. For further in<br>in the paper SA3 for<br>Column 1: List eac<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multic<br>For the meaning of the<br>Column 5: If you ha<br>cable system carried th<br>carried the distant stati<br>For the retransmiss<br>of a written agreement<br>the cable system and a<br>tion "E" (exempt). For s<br>explanation of these th<br>Column 6: Give the | G, identify every<br>ystem during th<br>ons in effect on<br>.61(e)(2) and (4<br>is, as explained<br><b>tations:</b> With r<br>Crules, regulat<br>here in space (<br>only on a subst<br>and also in space<br>formation conce<br>rm.<br>h station's call s<br>associated with<br>-2". Simulcast s<br>e channel numb<br>ise. For example<br>stem carried th<br>in each case w<br>entering the left<br>cast), "E" (for no<br>se terms, see p<br>ation is outside<br>ce area, see pa<br>ave entered "Ye<br>he distant statio<br>on on a part-tim<br>ion of a distant<br>entered into on<br>a primary transr<br>simulcasts, also<br>ree categories,<br>e location of eac<br>Canadian statior | television sta<br>e accounting<br>June 24, 198<br>(), or 76.63 (red<br>in the next p<br>espect to any<br>cions, or author<br>G—but do list<br>tute basis.<br>ce I, if the state<br>erning substitu-<br>sign. Do not red<br>a station account<br>citreams must<br>er the FCC has<br>(WRC is Chase<br>e station.<br>hether the stater "N" (for ne<br>ncommercial<br>age (v) of the g<br>s" in column 4<br>ne basis beca<br>multicast strea-<br>or before Jur-<br>nitter or an as<br>enter "E". If y<br>see page (v)<br>ch station. For<br>is, if any, give | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>orizations:<br>it in space I (the<br>tion was carried<br>ute basis station<br>eport origination<br>ording to its over<br>be reported in c<br>as assigned to th<br>nnel 4 in Washi<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>general instruc-<br>ice area, (i.e. "di<br>general instruc-<br>ice area, (i.e. "di<br>general instruc-<br>ice area, (i.e. "di<br>general instruc-<br>ice of lack of ac<br>am that is not su-<br>has 30, 2009, bet<br>sociation repres-<br>you carried the co<br>of the general in-<br>the name of the | 1) stations carried<br>e carriage of certa<br>(e)(2) and (4))]; at<br>carried by your ca<br>e Special Stateme<br>both on a substitu<br>s, see page (v) of<br>program services<br>r-the-air designat<br>olumn 1 (list each<br>ne television station<br>ngton, D.C. This r<br>k station, an indep<br>or network multica<br>"E-M" (for noncor<br>tions located in the<br>istant"), enter "Ye<br>ons located in the<br>plete column 5, st<br>d. Indicate by enter<br>ctivated channel co<br>ubject to a royalty<br>ween a cable syst<br>enting the primar<br>thannel on any oth<br>structions located<br>ist the community<br>e community with | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>stating the basis on which your<br>ering "LAC" if your cable system<br>sapacity.<br>payment because it is the subject<br>tem or an association representing<br>y transmitter, enter the designa-<br>ner basis, enter "O." For a further<br>d in the paper SA3 form.<br>to which the station is licensed by the<br>which the station is identifed. | G<br>Primary<br>Transmitters:<br>Television |
| ,  | <u> </u>   | •  | EL LINE-UP  |  | · ·  | -   |
|  |  |  | _   |  |  | _   |
| 1. CALL  | 2. B'CAST  | 3. TYPE<br>OF  | 4. DISTANT?   | 5. BASIS OF  | 6. LOCATION OF STATION   |   |
| SIGN   | CHANNEL<br>NUMBER  | STATION  | (Yes or No)   | CARRIAGE<br>(If Distant)   |  |   |
| WFSB   | 3  | N  | No  | (  | Hartford, CT   | -   |
| WVIT   | 4  | N  | No  |  | New Britain, CT  |   |
| WTIC   | 6  | N  | No  |  | Hartford, CT   | additional information                      |
| WEDN   | 7  | E  | No  |  | Norwich, CT  | on alphabetization.                         |
| WEDN   | 8  | N  | No  |  | New Haven, CT  |   |
| WCTX   | 9  | N  | NO  |  | New Havent, CT   |   |
| WCTX   |  |  |   |  |  |   |
|  | 11   | N  | No  |  | waterbury, CT  |   |
| WGNA   | 21   | E  | YES   | 0  | Boston, MA   |   |
| WHPX<br>WUVN   | 14   | N  | No  |  | New London, CT   |   |
|  | 18   | N  | No  |  | Hartford, CT   |   |
|  |  |  |   |  |  |   |

| LEGAL NAME OF OWN  |  |  |   |   |  |     |   |
|--|--|--|---|---|--|-----|---|
|  |  |  |   |   | SYSTEM   |     | Name  |
| Atlantic Broad   | and (CT) LL  | .C   |   |   | 62   | 443 |   |
| PRIMARY TRANSMITTE   | RS: TELEVISIO  | N  |   |   |  |     |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>Substitute Basis S<br>basis under specifc FC<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 fo<br>Column 1: List eace<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multid<br>For the meaning of the<br>Column 5: If you has<br>cable system carried th<br>carried the distant stati<br>For the retransmiss<br>of a written agreement | RS: TELEVISIO<br>G, identify every<br>ystem during th<br>ons in effect on<br>.61(e)(2) and (4<br>is, as explained<br>tations: With rr<br>CC rules, regulat<br>here in space (<br>only on a subst<br>and also in space<br>formation concern,<br>h station's call s<br>associated with<br>-2". Simulcast s<br>e channel numb<br>ise. For example<br>stem carried th<br>in each case w<br>entering the let<br>cast), "E" (for no<br>ise terms, see p<br>ation is outside<br>ce area, see pa<br>ave entered "Ye<br>he distant statio<br>ion on a part-tin<br>ion of a distant<br>entered into on | N<br>r television state<br>the accounting<br>June 24, 198<br>4), or 76.63 (red<br>d in the next p<br>espect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>ce I, if the state<br>erning substitute<br>sign. Do not red<br>a station access<br>the FCC has<br>, WRC is Chase<br>e station.<br>whether the state<br>the rocal server<br>incommercial<br>bage (v) of the g<br>iss" in column and<br>multicast strean<br>or before Jun | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>orizations:<br>it in space I (the<br>tion was carried<br>ute basis station<br>eport origination<br>ording to its ove<br>be reported in c<br>as assigned to th<br>nnel 4 in Washin<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>general instruction<br>(i.e. "dig<br>general instruction<br>4, you must com-<br>accounting period<br>use of lack of acc<br>am that is not su-<br>tion 3, 2009, betw | 1) stations carried<br>e carriage of certa<br>(e)(2) and (4))]; and<br>carried by your car-<br>e Special Stateme<br>both on a substitu<br>s, see page (v) of<br>program services<br>r-the-air designati<br>olumn 1 (list each<br>ne television station<br>ngton, D.C. This makes the<br>station, an indep<br>or network multica<br>"E-M" (for noncor<br>tions located in the<br>istant"), enter "Yes<br>ons located in the<br>statt"), enter "Yes<br>ons located in the<br>statt"), enter "Yes<br>ons located in the<br>statt"), enter "Yes<br>ons located in the<br>statt" (for noncor<br>tions located in the<br>statt"), enter "Yes<br>ons located in the<br>statt" (for noncor<br>tions located in the<br>statt") and the statt"<br>on the statt" (for noncor<br>tions located in the<br>statt") and the statt"<br>statt" (for noncor<br>tions located in the<br>statt") and the statt" | and low power television stations)<br>only on a part-time basis under<br>in network programs [sections<br>ad (2) certain stations carried on a<br>ble system on a substitute program<br>nt and Program Log)—if the<br>the basis and also on some other<br>the general instructions located<br>such as HBO, ESPN, etc. Identify<br>on. For example, report multi-<br>stream separately; for example<br>on for broadcasting over-the-air in<br>hay be different from the channel<br>pendent station, or a noncommercial<br>st), "I" (for independent), "I-M"<br>numercial educational multicast).<br>e paper SA3 form.<br>".". If not, enter "No". For an ex-<br>paper SA3 form.<br>tating the basis on which your<br>ering "LAC" if your cable system<br>apacity.<br>payment because it is the subject<br>em or an association representing |     | G<br>Primary<br>Transmitters:<br>Television |
| carried the distant stati<br>For the retransmiss<br>of a written agreement<br>the cable system and a<br>tion "E" (exempt). For s<br>explanation of these th<br><b>Column 6:</b> Give the   | ion on a part-tin<br>ion of a distant<br>entered into on<br>a primary transr<br>simulcasts, also<br>ree categories,<br>b location of eac<br>canadian statior   | ne basis beca<br>multicast stre<br>or before Jur<br>nitter or an as<br>o enter "E". If y<br>see page (v)<br>ch station. For<br>ns, if any, give<br>nel line-ups, u   | use of lack of ac<br>am that is not su<br>association repres<br>you carried the c<br>of the general in<br>U.S. stations, li<br>the name of the  | tivated channel c<br>ubject to a royalty<br>ween a cable syst<br>enting the primary<br>hannel on any oth<br>astructions located<br>st the community<br>e community with   | apacity.<br>payment because it is the subject<br>em or an association representing<br>/ transmitter, enter the designa-<br>ier basis, enter "O." For a further<br>l in the paper SA3 form.<br>to which the station is licensed by the<br>which the station is identifed.   |     |   |
| 1. CALL  |  | •••••••••••••••••••••••••••••••••••••••  | EL LINE-OF  | AB  |  |     |   |
| SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE   | 6. LOCATION OF STATION   |     |   |
| SIGN   | CHANNEL  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF   | 6. LOCATION OF STATION   |     |   |
| SIGN   | CHANNEL  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE   | 6. LOCATION OF STATION   |     |   |
| SIGN   | CHANNEL  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE   | 6. LOCATION OF STATION   |     |   |
| SIGN   | CHANNEL  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE   | 6. LOCATION OF STATION   |     |   |
| SIGN   | CHANNEL  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE   | 6. LOCATION OF STATION   |     |   |
| SIGN   | CHANNEL  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE   | 6. LOCATION OF STATION   |     |   |
| SIGN   | CHANNEL  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE   | 6. LOCATION OF STATION   |     |   |
| SIGN   | CHANNEL  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE   | 6. LOCATION OF STATION   |     |   |
|  | CHANNEL  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE   | 6. LOCATION OF STATION   |     |   |
|  | CHANNEL  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE   | 6. LOCATION OF STATION   |     |   |
|  | CHANNEL  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE   | 6. LOCATION OF STATION   |     |   |
|  | CHANNEL  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE   | 6. LOCATION OF STATION   |     |   |
|  | CHANNEL  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE   | 6. LOCATION OF STATION   |     |   |
|  | CHANNEL  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE   | 6. LOCATION OF STATION   |     |   |
|  | CHANNEL  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE   | 6. LOCATION OF STATION   |     |   |
|  | CHANNEL  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE   | 6. LOCATION OF STATION   |     |   |
|  | CHANNEL  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE   | 6. LOCATION OF STATION   |     |   |

| FORM SA3E. PAGE 3.   |  |   |  |   |   |         |   |
|--|--|---|--|---|---|---------|---|
| LEGAL NAME OF OWN  |  |   |  |   | SYS   | TEM ID# | Name  |
| Atlantic Broad   | oand (CT) LL   | .C  |  |   |   | 62443   |   |
| PRIMARY TRANSMITTE   | ERS: TELEVISIO   | N   |  |   |   |         |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulat<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>Substitute Basis S<br>basis under specific FC<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further ir<br>in the paper SA3 for<br>Column 1: List eace<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multi<br>For the meaning of the<br>Column 4: If the st<br>planation of local servi<br>Column 5: If you h<br>cable system carried t | <b>ERS: TELEVISIO</b><br>G, identify every<br>system during the<br>ions in effect on<br>0.61(e)(2) and (4<br>sis, as explained<br><b>Stations:</b> With r<br>CC rules, regula<br>there in space<br>only on a subst<br>and also in space<br>formation concerns.<br>The station's call<br>associated with<br>A-2". Simulcast st<br>associated with<br>A-2". Simulcast st<br>e channel numb<br>se. For example<br>stem carried the<br>e in each case w<br>or entering the left<br>cast), "E" (for no<br>ses terms, see p<br>ation is outside<br>ice area, see pa<br>ave entered "Ye<br>he distant statio<br>ion on a part-tim | N<br>v television state<br>the accounting<br>a June 24, 198<br>4), or 76.63 (red<br>d in the next p<br>espect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>ce I, if the state<br>erning substitut<br>sign. Do not red<br>a station acc<br>streams must<br>ber the FCC has<br>ber the Station.<br>whether the state<br>tter "N" (for ne<br>box commercial<br>bage (v) of the g<br>bage (v) of the g<br>basis beca | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>rizations:<br>it in space I (the<br>tion was carried<br>ute basis stations<br>eport origination<br>ording to its ove<br>be reported in ca<br>as assigned to the<br>nnel 4 in Washin<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>general instruction<br>4, you must com<br>accounting period<br>use of lack of accounting the state<br>ation is a network<br>the state of the state<br>the state of the state<br>the state of the state<br>distant state of the state<br>the state of the state of t | 1) stations carried<br>e carriage of certai<br>(e)(2) and (4))]; ar<br>carried by your ca<br>e Special Statement<br>both on a substitu<br>s, see page (v) of<br>program services<br>r-the-air designati<br>olumn 1 (list each<br>ne television static<br>ngton, D.C. This n<br>k station, an indep<br>or network multica<br>"E-M" (for noncor<br>tions located in the<br>stant"), enter "Yes<br>ons located in the<br>uplete column 5, si<br>d. Indicate by enter | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>tating the basis on which your<br>pring "LAC" if your cable system<br>apacity.   | 1       | G<br>Primary<br>Transmitters:<br>Television |
| of a written agreement<br>the cable system and<br>tion "E" (exempt). For<br>explanation of these th<br><b>Column 6:</b> Give the   | entered into or<br>a primary transr<br>simulcasts, also<br>aree categories,<br>e location of eac<br>Canadian station   | n or before Jur<br>mitter or an as<br>o enter "E". If y<br>see page (v)<br>ch station. For<br>ns, if any, give  | the 30, 2009, between sociation repression repression contract the construct the general in the general in the stations, lite the name of the state  | ween a cable syst<br>enting the primary<br>hannel on any oth<br>istructions located<br>st the community<br>e community with   | payment because it is the subject<br>em or an association representing<br>/ transmitter, enter the designa-<br>er basis, enter "O." For a further<br>in the paper SA3 form.<br>to which the station is licensed by t<br>which the station is identifed. | he      |   |
| Note. Il you are utilizit  |  | •   | •  |   |   |         |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION  | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION  |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |
|  |  |   |  |   |   |         |   |

| FORM SA3E. PAGE 3.   |   |  |  |   |  |         |   |
|--|---|--|--|---|--|---------|---|
| LEGAL NAME OF OWN  |   |  |  |   | SYS  | TEM ID# | Name  |
| Atlantic Broad   | oand (CT) LL  | .C   |  |   |  | 62443   |   |
| PRIMARY TRANSMITTE   | ERS: TELEVISIO  | N  |  |   |  |         |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulat<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>basis under specifc FC<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 for<br>Column 1: List eace<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multic<br>For the meaning of the<br>Column 5: If you h<br>cable system carried t<br>carried the distant stat<br>For the retransmiss<br>of a written agreement<br>the cable system and<br>tion "E" (exempt). For | <b>ERS: TELEVISIO</b><br>G, identify every<br>system during the<br>ions in effect on<br>5.61(e)(2) and (2<br>sis, as explained<br><b>Stations:</b> With r<br>CC rules, regula<br>a here in space -<br>only on a subst<br>and also in space<br>-formation conco-<br>trm.<br>the station's call st<br>associated with<br>sec. For example<br>yeation is outside<br>is e channel numb<br>sec. For example<br>yeation is outside<br>ice area, see pa<br>ave entered "Ye<br>he distant statio<br>ion on a part-tim<br>ion of a distant<br>is entered into or<br>a primary transr<br>simulcasts, also | N<br>v television state<br>the accounting<br>a June 24, 198<br>4), or 76.63 (ref<br>d in the next p<br>espect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>ce I, if the state<br>erning substitut<br>sign. Do not ref<br>a station acc<br>streams must<br>ber the FCC hat<br>ber the Iocal server<br>uge (v) of the gass'' in column 4<br>on during the a<br>multicast stream<br>or before Jur<br>mitter or an as<br>be enter "E". If y | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>orizations:<br>it in space I (the<br>tion was carried<br>ute basis stations<br>eport origination<br>ording to its ove<br>be reported in co<br>as assigned to th<br>nnel 4 in Washin<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>general instruction<br>4, you must com<br>incounting period<br>use of lack of ac<br>am that is not su-<br>te 30, 2009, betw<br>sociation represerved<br>the council the council the council<br>the council the council the council the council<br>the council the council th | 1) stations carried<br>e carriage of certai<br>(e)(2) and (4))]; ar<br>carried by your ca<br>e Special Statement<br>both on a substitut<br>s, see page (v) of<br>program services<br>r-the-air designati<br>olumn 1 (list each<br>ne television station<br>ngton, D.C. This n<br>k station, an indep<br>or network multica<br>"E-M" (for noncor<br>tions located in the<br>stant"), enter "Yes<br>ons located in the<br>stant"), enter "Yes<br>ons located in the<br>state of the stant", sid<br>d. Indicate by enter<br>tivated channel ca-<br>ubject to a royalty<br>ween a cable syst<br>enting the primary<br>hannel on any oth | ". If not, enter "No". For an ex-<br>paper SA3 form.<br>ating the basis on which your<br>ring "LAC" if your cable system | 1       | G<br>Primary<br>Transmitters:<br>Television |
|  |   |  |  |   | to which the station is licensed by t  | he      |   |
| FCC. For Mexican or (  | Canadian statior  | ns, if any, give   | the name of the  | e community with  | which the station is identifed.  |         |   |
| Note: If you are utilizir  | ng multiple chan  | nel line-ups, ι  | ise a separate s   | pace G for each c   | hannel line-up.  |         |   |
|  |   | CHANN  | EL LINE-UP   | AD  |  |         |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION   |         |   |
|  |   |  |  |   |  |         |   |
|  |   |  |  |   |  |         |   |
|  |   |  |  |   | Τ  |         |   |
|  |   |  |  |   |  |         |   |
|  |   |  |  |   |  |         |   |
|  |   |  |  |   |  |         |   |
|  |   |  |  |   |  |         |   |
|  |   |  |  |   |  |         |   |
|  |   |  |  |   |  |         |   |
|  |   |  |  |   |  |         |   |
|  |   |  |  |   |  |         |   |
|  |   |  |  |   |  |         |   |
|  |   |  |  |   |  |         |   |
|  |   |  |  |   |  |         |   |
|  |   |  |  |   |  |         |   |
|  |   | 1  |  | 1   |  |         |   |
|  |   |  |  |   |  |         |   |

| FORM SA3E. PAGE 3.  |   |  |   |  |  |        |   |
|---|---|--|---|--|--|--------|---|
| LEGAL NAME OF OWN   |   |  |   |  | SYST   | EM ID# | Name  |
| Atlantic Broad  | oand (CT) LL  | .C   |   |  |  | 62443  |   |
| PRIMARY TRANSMITTE  | RS: TELEVISIO   | N  |   |  |  |        |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>Substitute Basis S<br>basis under specifc FC<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 fo<br>Column 1: List eace<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multid<br>For the meaning of the<br>Column 5: If you h<br>cable system carried tt<br>carried the distant stat<br>For the retransmiss<br>of a written agreement | RS: TELEVISIO<br>G, identify every<br>system during th<br>ons in effect on<br>6.61(e)(2) and (4<br>sis, as explained<br>stations: With r<br>CC rules, regular<br>here in space (<br>only on a subst<br>and also in spa<br>formation concern.<br>h station's call s<br>associated with<br>-2". Simulcast s<br>e channel numb<br>se. For example<br>stem carried th<br>in each case w<br>entering the lef<br>cast), "E" (for no<br>se terms, see p<br>ation is outside<br>ce area, see pa<br>ave entered "Ye<br>ne distant statio<br>ion on a part-tin<br>ion of a distant<br>entered into on | N<br>t television state<br>accounting<br>June 24, 198<br>4), or 76.63 (red<br>d in the next p<br>espect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>ce I, if the state<br>erning substitute<br>sign. Do not red<br>a station access<br>ter the FCC has<br>, WRC is Chase<br>e station.<br>the ther the state<br>of the bocal server<br>ge (v) of the g<br>the local server<br>ge (v) of the g<br>the local server<br>ge (v) of the g<br>the basis becas<br>multicast stree<br>or before Jur | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>orizations:<br>it in space I (the<br>tion was carried<br>ute basis station<br>eport origination<br>ording to its ove<br>be reported in c<br>as assigned to th<br>nnel 4 in Washin<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>general instruction<br>(i.e. "dig<br>general instruction<br>4, you must com-<br>accounting period<br>use of lack of acc<br>am that is not su-<br>tion 3, 2009, betw | 1) stations carried<br>e carriage of certa<br>(e)(2) and (4))]; and<br>carried by your car-<br>e Special Stateme<br>both on a substitu<br>s, see page (v) of<br>program services<br>r-the-air designati<br>olumn 1 (list each<br>ne television station<br>ngton, D.C. This makes<br>k station, an indep<br>or network multica<br>"E-M" (for noncor<br>tions located in the<br>istant"), enter "Yes<br>ons located in the<br>plete column 5, s<br>d. Indicate by enter<br>citivated channel c<br>ubject to a royalty<br>ween a cable syst | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>tating the basis on which your<br>ering "LAC" if your cable system  |        | G<br>Primary<br>Transmitters:<br>Television |
| of a written agreement<br>the cable system and<br>tion "E" (exempt). For<br>explanation of these th<br><b>Column 6:</b> Give the  | entered into on<br>a primary transmisimulcasts, also<br>irree categories,<br>e location of eac<br>Canadian station  | or before Jur<br>nitter or an as<br>e enter "E". If y<br>see page (v)<br>ch station. For<br>ns, if any, give<br>nel line-ups, u  | ne 30, 2009, bet<br>sociation repres<br>you carried the c<br>of the general ir<br>U.S. stations, li<br>the name of the  | ween a cable syst<br>senting the primary<br>channel on any oth<br>astructions located<br>ist the community<br>e community with<br>pace G for each o  | em or an association representing<br>y transmitter, enter the designa-<br>ter basis, enter "O." For a further<br>I in the paper SA3 form.<br>to which the station is licensed by th<br>which the station is identifed. | e      |   |
| 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)   |  |        |   |
|   |   |  |   |  |  |        |   |
|   |   |  |   |  |  |        |   |
|   |   |  |   |  |  |        |   |
|   |   |  |   |  |  |        |   |
|   |   |  |   |  |  |        |   |
|   |   |  |   |  |  |        |   |
|   |   |  |   |  |  |        |   |
|   |   |  |   |  |  |        |   |
|   |   |  |   |  |  | I      |   |
|   |   |  |   |  |  |        |   |
|   |   |  |   |  |  |        |   |
|   |   |  |   |  |  |        |   |
|   |   |  |   |  |  |        |   |
|   |   |  |   |  |  |        |   |
|   |   |  |   |  |  |        |   |
|   |   |  |   |  |  |        |   |
|   |   |  |   |  |  |        |   |
|   |   |  |   |  |  |        |   |
|   |   |  |   |  |  |        |   |

| FORM SA3E. PAGE 3.   |   |  |   |  |   |         |   |
|--|---|--|---|--|---|---------|---|
| LEGAL NAME OF OWN  |   |  |   |  | SYST  | FEM ID# | Name  |
| Atlantic Broad   | oand (CT) LL  | .C   |   |  |   | 62443   |   |
| PRIMARY TRANSMITTE   | ERS: TELEVISIO  | N  |   |  |   |         |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulat<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>basis under specifc FC<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 for<br>Column 1: List eace<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multic<br>For the meaning of the<br>Column 5: If you h<br>cable system carried t<br>carried the distant stat<br>For the retransmiss<br>of a written agreement<br>the cable system and<br>tion "E" (exempt). For | <b>ERS: TELEVISIO</b><br>G, identify every<br>system during the<br>ions in effect on<br>5.61(e)(2) and (4<br>sis, as explained<br><b>Stations:</b> With rr<br>CC rules, regular<br>a here in space (<br>only on a subst<br>and also in space<br>formation concor-<br>rm.<br>th station's call st<br>associated with<br>set. For example<br>yeation is outside<br>in each case w<br>r entering the left<br>cast), "E" (for no<br>ese terms, see p<br>ation is outside<br>ice area, see pa<br>ave entered "Ye<br>he distant statio<br>ion on a part-tim<br>ion of a distant<br>is entered into or<br>a primary transr<br>simulcasts, also | N<br>r television state<br>the accounting<br>June 24, 198<br>4), or 76.63 (ref<br>d in the next p<br>espect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>cc l, if the state<br>erning substitut<br>sign. Do not ref<br>a station acc<br>streams must<br>wer the FCC ha<br>, WRC is Cha<br>e station.<br>whether the state<br>ter "N" (for ne<br>page (v) of the g<br>ss" in column 4<br>multicast stream<br>a nulticast stream<br>n or before Jur<br>mitter or an as<br>penter "E". If y | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>orizations:<br>it in space I (the<br>tion was carried<br>ute basis station<br>eport origination<br>ording to its ove<br>be reported in co<br>as assigned to th<br>nnel 4 in Washin<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>general instruction<br>4, you must com<br>incounting period<br>use of lack of ac<br>am that is not su<br>he 30, 2009, bett<br>sociation repression | 1) stations carried<br>e carriage of certai<br>(e)(2) and (4))]; ar<br>carried by your ca<br>e Special Stateme<br>both on a substitu<br>s, see page (v) of<br>program services<br>r-the-air designati<br>olumn 1 (list each<br>ne television static<br>ngton, D.C. This n<br>k station, an indep<br>or network multica<br>"E-M" (for noncor<br>tions located in the<br>stant"), enter "Yes<br>ons located in the<br>splete column 5, st<br>d. Indicate by enter<br>stivated channel ca-<br>ubject to a royalty<br>ween a cable syst<br>enting the primary<br>hannel on any oth | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>tating the basis on which your<br>rring "LAC" if your cable system |         | G<br>Primary<br>Transmitters:<br>Television |
|  |   |  |   |  | to which the station is licensed by the   | ne      |   |
|  |   |  |   | •  | which the station is identifed.   |         |   |
| Note: If you are utilizir  | ng multiple chan  | nel line-ups, u  | ise a separate s  | pace G for each c  | hannel line-up.   |         |   |
|  |   | CHANN  | EL LINE-UP  | AF   |   |         |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION  |         |   |
|  |   |  |   |  |   |         |   |
|  |   |  |   |  |   |         |   |
|  |   |  |   |  |   |         |   |
|  |   |  |   |  |   |         |   |
|  |   |  |   |  |   |         |   |
|  |   |  |   |  |   |         |   |
|  |   |  |   |  |   |         |   |
|  |   |  |   |  |   |         |   |
|  |   |  |   |  |   |         |   |
|  |   |  |   |  |   |         |   |
|  |   |  |   |  |   |         |   |
|  |   |  |   |  |   |         |   |
|  |   |  |   |  |   |         |   |
|  |   |  |   |  |   |         |   |
|  |   |  |   |  |   |         |   |
|  |   |  |   |  |   |         |   |
|  |   |  |   |  |   |         |   |

| FORM SA3E. PAGE 3.   |   |   |  |  |   |         |   |
|--|---|---|--|--|---|---------|---|
| LEGAL NAME OF OWN  |   |   |  |  | SYST  | FEM ID# | Name  |
| Atlantic Broad   | oand (CT) LL  | .C  |  |  |   | 62443   |   |
| PRIMARY TRANSMITTE   | ERS: TELEVISIO  | N   |  |  |   |         |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulat<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>basis under specifc FC<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 for<br>Column 1: List eace<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multic<br>For the meaning of the<br>Column 5: If you h<br>cable system carried t<br>carried the distant stat<br>For the retransmiss<br>of a written agreement<br>the cable system and<br>tion "E" (exempt). For | <b>ERS: TELEVISIO</b><br>G, identify every<br>system during the<br>ions in effect on<br>5.61(e)(2) and (2<br>sis, as explained<br><b>Stations:</b> With r<br>CC rules, regula<br>a here in space -<br>only on a subst<br>and also in space<br>-formation conco-<br>trm.<br>the station's call st<br>associated with<br>sec. For example<br>yeation is outside<br>is e channel numb<br>sec. For example<br>yeation is outside<br>ice area, see pa<br>ave entered "Ye<br>he distant statio<br>ion on a part-tim<br>ion of a distant<br>is entered into or<br>a primary transr<br>simulcasts, also | N<br>r television state<br>the accounting<br>June 24, 198<br>4), or 76.63 (red<br>d in the next p<br>espect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>cce I, if the state<br>erning substitut<br>sign. Do not red<br>a station access<br>streams must<br>wer the FCC ha<br>be station.<br>whether the state<br>ther "N" (for ne<br>page (v) of the gass" in column 4<br>multicast stream<br>multicast stream<br>or before Jur<br>mitter or an as<br>penter "E". If y | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>orizations:<br>it in space I (the<br>tion was carried<br>ute basis station<br>ording to its ove<br>be reported in co<br>as assigned to the<br>nnel 4 in Washin<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>general instruction<br>4, you must com<br>to counting period<br>use of lack of ac<br>am that is not su<br>to 30, 2009, bethes<br>sociation repression | 1) stations carried<br>e carriage of certai<br>(e)(2) and (4))]; ar<br>carried by your ca<br>e Special Statement<br>both on a substitut<br>s, see page (v) of<br>program services<br>r-the-air designati<br>olumn 1 (list each<br>ne television station<br>ngton, D.C. This n<br>k station, an indep<br>or network multica<br>"E-M" (for noncor<br>tions located in the<br>stant"), enter "Yes<br>ons located in the<br>stant"), enter "Yes<br>ons located in the<br>state of the stant", sid<br>d. Indicate by enter<br>stivated channel ca-<br>ubject to a royalty<br>ween a cable syst<br>enting the primary<br>hannel on any oth | ". If not, enter "No". For an ex-<br>paper SA3 form.<br>ating the basis on which your<br>ring "LAC" if your cable system<br>apacity.<br>payment because it is the subject<br>em or an association representing<br>r transmitter, enter the designa-<br>er basis, enter "O." For a further |         | G<br>Primary<br>Transmitters:<br>Television |
|  |   |   |  |  | in the paper SA3 form.<br>to which the station is licensed by th  | ne      |   |
|  |   |   |  |  | which the station is identifed.   |         |   |
| Note: If you are utilizir  | ng multiple chan  | nel line-ups, ι   | ise a separate s   | pace G for each c  | hannel line-up.   |         |   |
|  |   | CHANN   | EL LINE-UP   | AG   |   |         |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION  | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION  |         |   |
|  |   |   |  |  |   |         |   |
|  |   |   |  |  | Ι   |         |   |
|  |   |   |  |  |   |         |   |
|  |   |   |  |  |   |         |   |
|  |   |   |  |  |   |         |   |
|  |   |   |  |  |   |         |   |
|  |   |   |  |  |   |         |   |
|  |   |   |  |  |   |         |   |
|  |   |   |  |  |   |         |   |
|  |   |   |  |  |   |         |   |
|  |   |   |  |  |   |         |   |
|  |   |   |  |  |   |         |   |
|  |   |   |  |  |   |         |   |
|  |   |   |  |  |   |         |   |
|  |   |   |  |  |   |         |   |
|  |   |   |  |  |   |         |   |
|  |   |   |  |  |   |         |   |

| FORM SA3E. PAGE 3.   |   |  |  |  |   |         |   |
|--|---|--|--|--|---|---------|---|
| LEGAL NAME OF OWN  |   |  |  |  | SYS <sup>-</sup>  | TEM ID# | Name  |
| Atlantic Broad   | oand (CT) LL  | .C   |  |  |   | 62443   |   |
| PRIMARY TRANSMITTE   | ERS: TELEVISIO  | N  |  |  |   |         |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulat<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>basis under specifc FC<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 for<br>Column 1: List eace<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multic<br>For the meaning of the<br>Column 5: If you h<br>cable system carried t<br>carried the distant stat<br>For the retransmiss<br>of a written agreement<br>the cable system and<br>tion "E" (exempt). For | <b>ERS: TELEVISIO</b><br>G, identify every<br>system during the<br>ions in effect on<br>5.61(e)(2) and (2<br>sis, as explained<br><b>Stations:</b> With r<br>CC rules, regula<br>a here in space -<br>only on a subst<br>and also in space<br>-formation conco-<br>trm.<br>the station's call st<br>associated with<br>sec. For example<br>yeation is outside<br>is e channel numb<br>sec. For example<br>yeation is outside<br>ice area, see pa<br>ave entered "Ye<br>he distant statio<br>ion on a part-tim<br>ion of a distant<br>is entered into or<br>a primary transr<br>simulcasts, also | N<br>r television state<br>the accounting<br>June 24, 198<br>4), or 76.63 (ref<br>d in the next p<br>espect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>cc l, if the state<br>erning substitut<br>sign. Do not ref<br>a station acc<br>streams must<br>wer the FCC ha<br>, WRC is Cha<br>e station.<br>whether the state<br>ter "N" (for ne<br>page (v) of the g<br>ss" in column 4<br>multicast stream<br>a nulticast stream<br>n or before Jur<br>mitter or an as<br>penter "E". If y | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>orizations:<br>it in space I (the<br>tion was carried<br>ute basis station<br>ording to its ove<br>be reported in co<br>as assigned to the<br>nnel 4 in Washin<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>general instruction<br>4, you must com<br>to counting period<br>use of lack of ac<br>am that is not su<br>to 30, 2009, beth<br>sociation repression | 1) stations carried<br>e carriage of certai<br>(e)(2) and (4))]; ar<br>carried by your ca<br>e Special Statement<br>both on a substitut<br>s, see page (v) of<br>program services<br>r-the-air designati<br>olumn 1 (list each<br>ne television station<br>ngton, D.C. This n<br>k station, an indep<br>or network multica<br>"E-M" (for noncor<br>tions located in the<br>stant"), enter "Yes<br>ons located in the<br>stant"), enter "Yes<br>ons located in the<br>state of the stant", sid<br>d. Indicate by enter<br>stivated channel ca-<br>ubject to a royalty<br>ween a cable syst<br>enting the primary<br>hannel on any oth | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>tating the basis on which your<br>rring "LAC" if your cable system |         | G<br>Primary<br>Transmitters:<br>Television |
|  |   |  |  |  | l in the paper SA3 form.<br>to which the station is licensed by th  | ne      |   |
| FCC. For Mexican or (  | Canadian statior  | ns, if any, give   | the name of the  | e community with   | which the station is identifed.   |         |   |
| Note: If you are utilizir  | ng multiple chan  | nel line-ups, ι  | ise a separate s   | pace G for each c  | hannel line-up.   |         |   |
|  |   | CHANN  | EL LINE-UP   | AH   |   |         |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION  |         |   |
|  |   |  |  |  |   |         |   |
|  |   |  |  |  |   |         |   |
|  |   |  |  |  |   |         |   |
|  |   |  |  |  |   |         |   |
|  |   |  |  |  |   |         |   |
|  |   |  |  |  |   |         |   |
|  |   |  |  |  |   |         |   |
|  |   |  |  |  |   |         |   |
|  |   |  |  |  |   |         |   |
|  |   |  |  |  |   |         |   |
|  |   |  |  |  |   |         |   |
|  |   |  |  |  |   |         |   |
|  |   |  |  |  |   |         |   |
|  |   |  |  |  |   |         |   |
|  |   |  |  |  |   |         |   |
|  |   |  |  |  |   |         |   |
|  |   |  |  |  |   |         |   |

| FORM SA3E. PAGE 3.   |  |  |  |  |  |         |   |
|--|--|--|--|--|--|---------|---|
| LEGAL NAME OF OWN  |  |  |  |  | SYS  | TEM ID# | Name  |
| Atlantic Broad   | oand (CT) LL   | .C   |  |  |  | 62443   |   |
| PRIMARY TRANSMITTE   | RS: TELEVISIO  | N  |  |  |  |         |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>Substitute Basis S<br>basis under specific FC<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 fo<br>Column 1: List eace<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multi<br>For the meaning of the<br>Column 4: If the st<br>planation of local servi<br>Column 5: If you his | RS: TELEVISIO<br>G, identify every<br>system during the<br>ons in effect on<br>6.61(e)(2) and (4<br>sis, as explained<br>stations: With r<br>CC rules, regula<br>here in space<br>only on a subst<br>and also in spa<br>formation concor-<br>rm.<br>h station's call<br>associated with<br>-2". Simulcast s<br>e channel numb<br>se. For example<br>stem carried th<br>in each case w<br>entering the lef-<br>cast), "E" (for no<br>se terms, see p<br>ation is outside<br>ce area, see pa<br>ave entered "Ye<br>he distant statio | N<br>v television state<br>the accounting<br>a June 24, 198<br>4), or 76.63 (red<br>d in the next p<br>espect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>ce I, if the state<br>erning substitut<br>sign. Do not red<br>a station account<br>streams must<br>ber the FCC has<br>ber the Station account<br>ber the station account<br>ber the station account<br>be a station ac | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>orizations:<br>it in space I (the<br>tion was carried<br>ute basis station<br>eport origination<br>ording to its over<br>be reported in c<br>as assigned to the<br>nnel 4 in Washing<br>ation is a networe<br>twork), "N-M" (fer<br>educational), or<br>e general instruction<br>(i.e. "di<br>general instruction<br>4, you must com- | 1) stations carried<br>e carriage of certa<br>(e)(2) and (4))]; and<br>carried by your car-<br>e Special Stateme<br>both on a substitut<br>s, see page (v) of<br>program services<br>er-the-air designati<br>olumn 1 (list each<br>ne television station<br>ngton, D.C. This r<br>k station, an indep<br>or network multicar<br>"E-M" (for noncon-<br>tions located in the<br>istant"), enter "Yei-<br>ons located in the<br>plete column 5, s<br>d. Indicate by enter | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>tating the basis on which your<br>ering "LAC" if your cable system  |         | G<br>Primary<br>Transmitters:<br>Television |
| of a written agreement<br>the cable system and<br>tion "E" (exempt). For<br>explanation of these th<br><b>Column 6:</b> Give the   | ion of a distant<br>entered into or<br>a primary transr<br>simulcasts, also<br>ree categories,<br>e location of eac  | multicast stre<br>o or before Jur<br>mitter or an as<br>o enter "E". If y<br>see page (v)<br>ch station. For   | am that is not su<br>ne 30, 2009, bet<br>sociation repres<br>you carried the c<br>of the general ir<br>' U.S. stations, li   | ubject to a royalty<br>ween a cable syst<br>senting the primary<br>channel on any oth<br>instructions located<br>ist the community   | apacity.<br>payment because it is the subject<br>em or an association representing<br>y transmitter, enter the designa-<br>ter basis, enter "O." For a further<br>I in the paper SA3 form.<br>to which the station is licensed by<br>which the station is identifed. | the     |   |
| Note: If you are utilizin  |  | nel line-ups, u  |  | pace G for each o  |  |         |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  |  |         |   |
|  |  |  |  |  | 1  |         |   |

| FORM SA3E. PAGE 3.   |   |   |   |   |   |         |   |
|--|---|---|---|---|---|---------|---|
| LEGAL NAME OF OWN  |   |   |   |   | SYS   | TEM ID# | Name  |
| Atlantic Broad   | pand (CT) LL  | _C  |   |   |   | 62443   |   |
| PRIMARY TRANSMITTE   | RS: TELEVISIO   | N   |   |   |   |         |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>Substitute Basis S<br>basis under specif C<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 fo<br>Column 1: List eace<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multic<br>For the meaning of the<br>Column 5: If you h<br>cable system carried tt<br>carried the distant stat<br>For the retransmiss<br>of a written agreement<br>the cable system and a<br>tion "E" (exempt). For<br>explanation of these th | <b>RS: TELEVISIO</b><br>G, identify every<br>system during the<br>ions in effect on<br>5.61(e)(2) and (2<br>sis, as explained<br><b>Stations:</b> With r<br>CC rules, regula<br>there in space<br>only on a subst<br>and also in space<br>only on a subst<br>and also in space<br>formation concor-<br>rm.<br>the station's call st<br>associated with<br>-2". Simulcasts<br>e channel numb<br>se. For example<br>vstem carried the<br>in each case w<br>entering the lefe<br>cast), "E" (for no<br>ese terms, see p<br>ation is outside<br>ce area, see pa<br>ave entered "Ye<br>the distant statio<br>ion of a distant<br>entered into or<br>a primary transr<br>simulcasts, also<br>aree categories, | N<br>v television state<br>the accounting<br>a June 24, 198<br>4), or 76.63 (red<br>d in the next prespect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>cce I, if the state<br>erning substitut<br>sign. Do not red<br>a station account<br>streams must<br>ber the FCC has<br>ber the Iscal server<br>age (v) of the gas<br>in column of<br>the local server<br>age (v) of the gas<br>in column of<br>multicast stream<br>multicast stream<br>multicast stream<br>in or before Jurn<br>mitter or an as<br>be enter "E". If y<br>see page (v) | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>orizations:<br>it in space I (the<br>tion was carried<br>ute basis station<br>eport origination<br>ording to its ove<br>be reported in co<br>as assigned to th<br>nnel 4 in Washin<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>general instruction<br>4, you must com<br>accounting period<br>use of lack of acc<br>am that is not su<br>he 30, 2009, bet<br>isociation repress<br>you carried the c<br>of the general in repress | 1) stations carried<br>e carriage of certai<br>(e)(2) and (4))]; ar<br>carried by your ca<br>e Special Stateme<br>both on a substitu<br>s, see page (v) of<br>program services<br>r-the-air designati<br>olumn 1 (list each<br>ne television static<br>ngton, D.C. This n<br>k station, an indep<br>or network multica<br>"E-M" (for noncor<br>tions located in the<br>splete column 5, st<br>d. Indicate by ente<br>ctivated channel ca-<br>ubject to a royalty<br>ween a cable syst<br>enting the primary<br>channel on any oth | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>tating the basis on which your<br>ering "LAC" if your cable system<br>apacity.<br>payment because it is the subject<br>em or an association representing<br>y transmitter, enter the designa-<br>ter basis, enter "O." For a further<br>in the paper SA3 form. | 1       | G<br>Primary<br>Transmitters:<br>Television |
| explanation of these the Column 6: Give the  | ree categories,<br>e location of eac  | see page (v)<br>ch station. For   | of the general ir<br>U.S. stations, li  | nstructions located<br>ist the community  |   | he      |   |
| Note: If you are utilizin  |   | inel line-ups, u  |   | pace G for each c   |   |         |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION  |         |   |
|  |   |   |   |   |   |         |   |
|  |   |   |   |   |   |         |   |
|  |   |   |   |   |   |         |   |
|  |   |   |   |   |   |         |   |
|  |   |   |   |   |   |         |   |
|  |   |   |   |   |   |         |   |
|  |   |   |   |   |   |         |   |
|  |   |   |   |   |   |         |   |
|  |   |   |   |   |   |         |   |
|  |   |   |   |   |   |         |   |
|  |   |   |   |   |   |         |   |
|  |   |   |   |   |   |         |   |
|  |   |   |   |   | 1   |         |   |
|  | 1   |   |   |   |   |         |   |
|  |   |   |   |   |   |         |   |
|  |   |   |   |   |   |         |   |
|  |   |   |   |   |   |         |   |
|  |   |   |   |   |   |         |   |
|  |   |   |   |   |   |         |   |

| FORM SA3E. PAGE 3.   |   |  |  |   |   |         |   |
|--|---|--|--|---|---|---------|---|
| LEGAL NAME OF OWN  |   |  |  |   | SYS   | TEM ID# | Name  |
| Atlantic Broad   | oand (CT) LL  | .C   |  |   |   | 62443   |   |
| PRIMARY TRANSMITTE   | ERS: TELEVISIO  | N  |  |   |   |         |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulat<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>basis under specifc FC<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 for<br>Column 1: List eace<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multic<br>For the meaning of the<br>Column 5: If you h<br>cable system carried t<br>carried the distant stat<br>For the retransmiss<br>of a written agreement<br>the cable system and<br>tion "E" (exempt). For | <b>ERS: TELEVISIO</b><br>G, identify every<br>system during the<br>ions in effect on<br>5.61(e)(2) and (2<br>sis, as explained<br><b>Stations:</b> With r<br>CC rules, regula<br>a here in space -<br>only on a subst<br>and also in space<br>-formation conco-<br>trm.<br>the station's call st<br>associated with<br>sec. For example<br>yeation is outside<br>is e channel numb<br>sec. For example<br>yeation is outside<br>ice area, see pa<br>ave entered "Ye<br>he distant statio<br>ion on a part-tim<br>ion of a distant<br>is entered into or<br>a primary transr<br>simulcasts, also | N<br>v television state<br>the accounting<br>a June 24, 198<br>4), or 76.63 (ref<br>d in the next p<br>espect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>ce I, if the state<br>erning substitut<br>sign. Do not ref<br>a station acc<br>streams must<br>ber the FCC hat<br>ber the Station.<br>whether the state<br>ter "N" (for ne<br>procommercial<br>page (v) of the g<br>process" in column 4<br>on during the a<br>multicast strean<br>or before Jur<br>mitter or an as<br>penter "E". If y | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>orizations:<br>it in space I (the<br>tion was carried<br>ute basis stations<br>eport origination<br>ording to its ove<br>be reported in co<br>as assigned to th<br>nnel 4 in Washin<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>general instruction<br>4, you must com<br>incounting period<br>use of lack of ac<br>am that is not su-<br>te 30, 2009, betw<br>sociation represerved<br>the council the council the council<br>the council the council the council the council<br>the council the council th | 1) stations carried<br>e carriage of certai<br>(e)(2) and (4))]; ar<br>carried by your ca<br>e Special Statement<br>both on a substitut<br>s, see page (v) of<br>program services<br>r-the-air designati<br>olumn 1 (list each<br>ne television station<br>ngton, D.C. This n<br>k station, an indep<br>or network multica<br>"E-M" (for noncor<br>tions located in the<br>stant"), enter "Yes<br>ons located in the<br>plete column 5, sid<br>d. Indicate by enter<br>stivated channel ca<br>ubject to a royalty<br>ween a cable syst<br>enting the primary<br>hannel on any oth | ". If not, enter "No". For an ex-<br>paper SA3 form.<br>ating the basis on which your<br>ring "LAC" if your cable system<br>apacity.<br>payment because it is the subject<br>em or an association representing<br>r transmitter, enter the designa-<br>er basis, enter "O." For a further | 1       | G<br>Primary<br>Transmitters:<br>Television |
|  |   |  |  |   | in the paper SA3 form.<br>to which the station is licensed by t   | he      |   |
| FCC. For Mexican or (  | Canadian statior  | ns, if any, give   | the name of the  | e community with  | which the station is identifed.   |         |   |
| Note: If you are utilizir  | ig multiple chan  | •  | •  |   | nannei line-up.   |         |   |
|  | 1   | CHANN  | EL LINE-UP   | AK  |   |         |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION  |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |

| FORM SA3E. PAGE 3.  |                   |               |                    |                      |  |         |               |
|---|-------------------|---------------|--------------------|----------------------|--|---------|---------------|
| LEGAL NAME OF OWN   |                   |               |                    |                      | SYST   | TEM ID# | Name          |
| Atlantic Broad  | pand (CT) LL      | .C            |                    |                      |  | 62443   |               |
| PRIMARY TRANSMITTE  | RS: TELEVISIO     | N             |                    |                      |  |         |               |
|   |                   |               |                    |                      | and low power television stations)                                     |         | G             |
|   |                   |               |                    |                      | only on a part-time basis under  |         | G             |
|   |                   |               |                    |                      | n network programs [sections<br>nd (2) certain stations carried on a   |         | Primary       |
| substitute program bas  |                   |               | •                  | (e)(z) anu (4))], ai | iu (2) certain stations carned on a                                    |         | Transmitters: |
|   |                   |               |                    | carried by your ca   | ble system on a substitute program                                     |         | Television    |
| basis under specifc FC  |                   |               |                    |                      |  |         |               |
|   | •                 |               | it in space I (the | e Special Stateme    | nt and Program Log)—if the   |         |               |
| <ul> <li>station was carried</li> <li>I ist the station here</li> </ul> |                   |               | tion was carried   | both on a substitu   | te basis and also on some other  |         |               |
|   | •                 |               |                    |                      | the general instructions located                                       |         |               |
| in the paper SA3 fo   |                   |               |                    |                      |  |         |               |
|   |                   | -             |                    |                      | such as HBO, ESPN, etc. Identify                                       |         |               |
|   |                   |               | U                  | •                    | on. For example, report multi-<br>stream separately; for example       |         |               |
| WETA-simulcast).  |                   |               | be reported in e   |                      | stream separately, for example   |         |               |
| Column 2: Give the  | e channel numb    | er the FCC ha | as assigned to th  | ne television statio | n for broadcasting over-the-air in                                     |         |               |
|   |                   | ,             | nnel 4 in Washi    | ngton, D.C. This n   | nay be different from the channel                                      |         |               |
| on which your cable sy  |                   |               | ation is a networ  | k station an inder   | endent station, or a noncommercial                                     | ,       |               |
|   |                   |               |                    |                      | st), "I" (for independent), "I-M"                                      | .       |               |
|   | •                 | ```           | <i>/</i> ·· (      |                      | nmercial educational multicast).                                       |         |               |
| For the meaning of the  |                   |               |                    |                      |  |         |               |
|   |                   |               | ,                  | ,                    | s". If not, enter "No". For an ex-                                     |         |               |
| planation of local servi  |                   |               |                    |                      | ating the basis on which your  |         |               |
| · · ·   |                   |               | •                  |                      | ring "LAC" if your cable system  |         |               |
| carried the distant stat  | ion on a part-tin | ne basis beca | use of lack of ac  | tivated channel c    | apacity.   |         |               |
|   |                   |               |                    |                      | payment because it is the subject                                      |         |               |
| -   |                   |               |                    |                      | em or an association representing<br>v transmitter, enter the designa- |         |               |
|   |                   |               |                    |                      | er basis, enter "O." For a further                                     |         |               |
| explanation of these th   | ree categories,   | see page (v)  | of the general ir  | structions located   | in the paper SA3 form.   |         |               |
|   |                   |               |                    | •                    | to which the station is licensed by th                                 | ne      |               |
| FCC. For Mexican or C<br>Note: If you are utilizin                      |                   |               |                    |                      | which the station is identifed.  |         |               |
| Note. Il you are utiliziti  |                   | •             | •                  |                      |  |         |               |
|   |                   | CHANN         | EL LINE-UP         | AL                   | 1  |         |               |
| 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  |         |               |
|   | ·                 |               |                    |                      |  |         |               |
|   |                   |               |                    |                      |  |         |               |
|   |                   |               |                    |                      |  |         |               |
|   |                   | 1             |                    |                      |  |         |               |
|   |                   |               |                    |                      |  |         |               |
|   |                   |               |                    |                      |  |         |               |

| FORM SA3E. PAGE 3.   |  |  |   |  |  |         |   |
|--|--|--|---|--|--|---------|---|
| LEGAL NAME OF OWN  |  |  |   |  | SYS  | TEM ID# | Name  |
| Atlantic Broad   | oand (CT) LL   | .C   |   |  |  | 62443   |   |
| PRIMARY TRANSMITTE   | ERS: TELEVISIO   | N  |   |  |  |         |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>Substitute Basis S<br>basis under specif C<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 fo<br>Column 1: List eace<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multic<br>For the meaning of the<br>Column 5: If you h<br>cable system carried tt<br>carried the distant stat<br>For the retransmiss<br>of a written agreement<br>the cable system and a<br>tion "E" (exempt). For<br>explanation of these th | <b>ERS: TELEVISIO</b><br>G, identify every<br>system during the<br>ions in effect on<br>5.61(e)(2) and (2<br>sis, as explained<br><b>Stations:</b> With r<br>CC rules, regula<br>a here in space -<br>only on a subst<br>and also in space<br>only on a subst<br>and also in space<br>on example<br>vertices and also in space<br>in each case w<br>or entering the lefe<br>cast), "E" (for no<br>ese terms, see p<br>ation is outside<br>ice area, see pa<br>ave entered "Yee<br>he distant statio<br>ion on a part-tim<br>ion of a distant<br>is entered into or<br>a primary transr<br>simulcasts, also<br>precedent stations of the state of the state of the<br>simulcasts, also<br>precedent state of the state of the state of the state of the<br>simulcasts, also<br>precedent state of the | N<br>r television state<br>a accounting<br>June 24, 198<br>4), or 76.63 (red<br>d in the next p<br>espect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>cc l, if the state<br>erning substitut<br>sign. Do not red<br>a station account<br>streams must<br>her the FCC ha<br>e station.<br>Another the state<br>ther "N" (for ne<br>page (v) of the gass" in column a<br>multicast stream<br>n during the a<br>multicast stream<br>o refore Jur<br>mitter or an as<br>p enter "E". If y<br>see page (v) | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>orizations:<br>it in space I (the<br>tion was carried<br>ute basis station<br>eport origination<br>ording to its ove<br>be reported in co<br>as assigned to th<br>nnel 4 in Washin<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>general instruction<br>4, you must com<br>accounting period<br>use of lack of acc<br>am that is not su<br>he 30, 2009, bet<br>isociation repress<br>you carried the c<br>of the general in repress | 1) stations carried<br>e carriage of certa<br>(e)(2) and (4))]; and<br>carried by your car-<br>e Special Stateme<br>both on a substitut<br>s, see page (v) of<br>program services<br>r-the-air designation<br>olumn 1 (list each<br>ne television station<br>ngton, D.C. This makes<br>k station, an indep<br>or network multicar<br>"E-M" (for noncor-<br>tions located in the<br>splete column 5, st<br>d. Indicate by enter<br>stivated channel co-<br>ubject to a royalty<br>ween a cable syste-<br>enting the primary<br>channel on any ott | ". If not, enter "No". For an ex-<br>paper SA3 form.<br>tating the basis on which your<br>ering "LAC" if your cable system<br>apacity.<br>payment because it is the subject<br>em or an association representing<br>r transmitter, enter the designa-<br>ter basis, enter "O." For a further<br>in the paper SA3 form. | n       | G<br>Primary<br>Transmitters:<br>Television |
| Column 6: Give the   | e location of eac  | ch station. For  | U.S. stations, li   | ist the community  | to which the station is licensed by  | the     |   |
| FCC. For Mexican or C<br><b>Note:</b> If you are utilizin  |  |  |   |  | which the station is identifed.  |         |   |
| Note. Il you are utilizit  | ig multiple chan   | • ·  | •   |  |  |         |   |
|  | 1  | CHANN  | EL LINE-UP  | AM   |  |         |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |         |   |
|  |  |  |   |  |  |         |   |
|  |  |  |   |  |  |         |   |
|  |  |  |   |  |  |         |   |
|  |  |  |   |  |  |         |   |
|  |  |  |   |  |  |         |   |
|  |  |  |   |  |  |         |   |
|  |  |  |   |  |  |         |   |
|  |  |  |   |  |  |         |   |
|  |  |  |   |  |  |         |   |
|  |  |  |   |  |  |         |   |
|  |  |  |   |  |  |         |   |
|  |  |  |   |  |  |         |   |
|  |  |  |   |  |  |         |   |
|  |  |  |   |  |  |         |   |
|  |  |  |   |  |  |         |   |
|  |  |  |   |  |  |         |   |
|  |  |  |   |  |  |         |   |

| FORM SA3E. PAGE 3.  |  |   |   |  |   |         |   |
|---|--|---|---|--|---|---------|---|
| LEGAL NAME OF OWN   |  |   |   |  | SYS   | TEM ID# | Name  |
| Atlantic Broad  | pand (CT) LL   | .C  |   |  |   | 62443   |   |
| PRIMARY TRANSMITTE  | ERS: TELEVISIO   | N   |   |  |   |         |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>Substitute Basis S<br>basis under specifc FC<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 fo<br>Column 1: List eace<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multid<br>For the meaning of the<br>Column 5: If you h<br>cable system carried tt<br>carried the distant stat<br>For the retransmiss<br>of a written agreement | <b>IRS: TELEVISIO</b><br><b>G</b> , identify every<br>system during the<br>ions in effect on<br>3.61(e)(2) and (4<br>sis, as explained<br><b>Stations:</b> With re-<br>Corules, regular<br>and also in space (<br>only on a subst<br>and also in space (<br>only on a subst<br>associated with<br>the station's call s<br>associated with<br>the sta | N<br>v television state<br>the accounting<br>a June 24, 198<br>4), or 76.63 (red<br>d in the next p<br>espect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>ce I, if the state<br>erning substitute<br>sign. Do not red<br>a station account<br>streams must<br>ber the FCC has<br>ber the Station.<br>whether the station<br>commercial<br>bage (v) of the g<br>ses" in column<br>and during the and<br>multicast stream<br>or before Jun | period, except (<br>1, permitting the<br>eferring to 76.61<br>paragraph.<br>distant stations<br>orizations:<br>it in space I (the<br>tion was carried<br>ute basis station<br>eport origination<br>cording to its over<br>be reported in c<br>as assigned to the<br>nnel 4 in Washi<br>ation is a network<br>etwork), "N-M" (for<br>educational), or<br>e general instruc-<br>ice area, (i.e. "di<br>general instruc-<br>de ducational), or<br>a general instruc-<br>ice area, (i.e. "di<br>general instruc-<br>de ducational), or<br>a general instruc-<br>ice area, (i.e. "di<br>general instruc-<br>de ducational), or<br>a general instruc- | 1) stations carried<br>e carriage of certa<br>(e)(2) and (4))]; and<br>carried by your car-<br>e Special Stateme<br>both on a substitu<br>s, see page (v) of<br>program services<br>r-the-air designati<br>olumn 1 (list each<br>ne television station<br>ngton, D.C. This makes the<br>station, an indep<br>or network multica<br>"E-M" (for noncor<br>tions located in the<br>istant"), enter "Yes<br>ons located in the<br>statt"), enter "Yes<br>ons located in the<br>statt"), enter "Yes<br>ons located in the<br>statt"), enter "Yes<br>ons located in the<br>statt" (for noncor<br>tions located in the<br>statt") and the statt"<br>of indicate by enter<br>tivated channel c<br>ubject to a royalty<br>ween a cable syst | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>tating the basis on which your<br>ering "LAC" if your cable system<br>apacity.<br>payment because it is the subject<br>em or an association representing | 1       | G<br>Primary<br>Transmitters:<br>Television |
| the cable system and a<br>tion "E" (exempt). For<br>explanation of these th<br><b>Column 6:</b> Give the  | a primary transr<br>simulcasts, also<br>iree categories,<br>e location of ead<br>Canadian statior  | nitter or an as<br>o enter "E". If y<br>see page (v)<br>ch station. For<br>ns, if any, give<br>nel line-ups, u  | sociation repres<br>you carried the c<br>of the general ir<br>r U.S. stations, li<br>the name of the  | enting the primary<br>hannel on any oth<br>astructions located<br>st the community<br>e community with<br>pace G for each c  | v transmitter, enter the designa-<br>er basis, enter "O." For a further<br>in the paper SA3 form.<br>to which the station is licensed by t<br>which the station is identifed.                                     | he      |   |
| SIGN  | CHANNEL  | OF  | (Yes or No)   | CARRIAGE   |   |         |   |
|   | NUMBER   | STATION   |   | (If Distant)   |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   | I       |   |

| FORM SA3E. PAGE 3.   |  |   |   |  |  |         |   |
|--|--|---|---|--|--|---------|---|
| LEGAL NAME OF OWN  |  |   |   |  | SYS  | TEM ID# | Name  |
| Atlantic Broad   | oand (CT) LL   | .C  |   |  |  | 62443   |   |
| PRIMARY TRANSMITTE   | ERS: TELEVISIO   | N   |   |  |  |         |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulat<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>Substitute Basis S<br>basis under specifc FC<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 fo<br>Column 1: List each<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multid<br>For the meaning of the<br>Column 4: If the st<br>planation of local servi<br>Column 5: If you h<br>cable system carried t<br>carried the distant stat<br>For the retransmiss | <b>ERS: TELEVISIO</b><br>G, identify every<br>system during the<br>ions in effect on<br>5.61(e)(2) and (2<br>sis, as explained<br><b>Stations:</b> With r<br>CC rules, regula<br>there in space<br>only on a subst<br>and also in space<br>formation concurrent<br>the station's call<br>associated with<br>A-2". Simulcast st<br>e channel numb<br>se. For example<br>(stem carried the<br>e in each case w<br>or entering the lei<br>cast), "E" (for no<br>seater terms, see pa<br>ave entered "Ye<br>he distant statio<br>ion on a part-tim-<br>sion of a distant | N<br>v television state<br>the accounting<br>a June 24, 198<br>4), or 76.63 (red<br>d in the next p<br>espect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>ce I, if the state<br>erning substitut<br>sign. Do not red<br>a station acc<br>streams must<br>ber the FCC has<br>ber the Station.<br>whether the state<br>the local serving<br>ge (v) of the g<br>ses" in column and<br>multicast stre | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>rizations:<br>it in space I (the<br>tion was carried<br>ute basis stations<br>eport origination<br>ording to its ove<br>be reported in co<br>as assigned to th<br>nnel 4 in Washin<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>general instruction<br>(i.e. "di<br>general instruction<br>4, you must com<br>use of lack of ac<br>am that is not su   | 1) stations carried<br>e carriage of certai<br>(e)(2) and (4))]; ar<br>carried by your ca<br>e Special Statement<br>both on a substitu<br>s, see page (v) of<br>program services<br>r-the-air designati<br>olumn 1 (list each<br>ne television static<br>ngton, D.C. This n<br>k station, an indep<br>or network multica<br>"E-M" (for noncor<br>tions located in the<br>stant"), enter "Yes<br>ons located in the<br>plete column 5, si<br>d. Indicate by enter<br>stivated channel ca<br>ubject to a royalty | ". If not, enter "No". For an ex-<br>paper SA3 form.<br>tating the basis on which your<br>wring "LAC" if your cable system<br>apacity.<br>payment because it is the subject  | 1       | G<br>Primary<br>Transmitters:<br>Television |
| of a written agreement<br>the cable system and<br>tion "E" (exempt). For<br>explanation of these th<br><b>Column 6:</b> Give the   | entered into or<br>a primary transr<br>simulcasts, also<br>aree categories,<br>e location of eac<br>Canadian station   | n or before Jur<br>mitter or an as<br>o enter "E". If y<br>see page (v)<br>ch station. For<br>ns, if any, give  | the 30, 2009, between sociation repression repression contract the construct the general in the general in the stations, lite the name of the state | ween a cable syst<br>enting the primary<br>hannel on any oth<br>istructions located<br>st the community<br>e community with  | em or an association representing<br>y transmitter, enter the designa-<br>er basis, enter "O." For a further<br>in the paper SA3 form.<br>to which the station is licensed by t<br>which the station is identifed. | he      |   |
|  |  | CHANN   | EL LINE-UP  | AO   |  |         |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |         |   |
|  |  |   |   |  |  |         |   |
|  |  |   |   |  |  |         |   |
|  |  |   |   |  |  |         |   |
|  |  |   |   |  |  |         |   |
|  |  |   |   |  |  |         |   |
|  |  |   |   |  |  |         |   |
|  |  |   |   |  |  |         |   |
|  |  |   |   |  |  |         |   |
|  |  |   |   |  |  |         |   |
|  |  |   |   |  |  |         |   |
|  |  |   |   |  |  |         |   |
|  |  |   |   |  |  |         |   |
|  |  |   |   |  |  |         |   |
|  |  |   |   |  |  |         |   |
|  |  |   |   |  | 1  |         |   |
|  |  |   |   |  |  |         |   |
|  |  |   |   |  |  |         |   |
|  |  |   |   |  |  |         |   |
|  |  |   |   |  |  |         |   |

| FORM SA3E. PAGE 3.   |   |  |   |   |  |         |   |
|--|---|--|---|---|--|---------|---|
| LEGAL NAME OF OWN  |   |  |   |   | SYS  | TEM ID# | Name  |
| Atlantic Broad   | oand (CT) LL  | .C   |   |   |  | 62443   |   |
| PRIMARY TRANSMITTE   | ERS: TELEVISIO  | N  |   |   |  |         |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulat<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>basis under specifc FC<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 for<br>Column 1: List eace<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multic<br>For the meaning of the<br>Column 5: If you h<br>cable system carried t<br>carried the distant stat<br>For the retransmiss<br>of a written agreement<br>the cable system and<br>tion "E" (exempt). For | <b>ERS: TELEVISIO</b><br>G, identify every<br>system during the<br>ions in effect on<br>5.61(e)(2) and (2<br>sis, as explained<br><b>Stations:</b> With r<br>CC rules, regula<br>a here in space -<br>only on a subst<br>and also in space<br>-formation conco-<br>trm.<br>the station's call st<br>associated with<br>sec. For example<br>yeation is outside<br>is e channel numb<br>sec. For example<br>yeation is outside<br>ice area, see pa<br>ave entered "Ye<br>he distant statio<br>ion on a part-tim<br>ion of a distant<br>is entered into or<br>a primary transr<br>simulcasts, also | N<br>r television state<br>the accounting<br>June 24, 198<br>4), or 76.63 (red<br>d in the next p<br>espect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>cc l, if the state<br>erning substitut<br>sign. Do not red<br>a station acc<br>streams must<br>wer the FCC ha<br>, WRC is Cha<br>e station.<br>whether the state<br>ter "N" (for ne<br>page (v) of the g<br>ss" in column 4<br>multicast stream<br>a nulticast stream<br>n or before Jur<br>mitter or an as<br>penter "E". If y | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>orizations:<br>it in space I (the<br>tion was carried<br>ute basis station<br>eport origination<br>ording to its ove<br>be reported in co<br>as assigned to th<br>nnel 4 in Washin<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>general instruction<br>4, you must com<br>incounting period<br>use of lack of ac<br>am that is not su<br>he 30, 2009, betw<br>sociation repression | 1) stations carried<br>e carriage of certai<br>(e)(2) and (4))]; ar<br>carried by your ca<br>e Special Statement<br>both on a substitut<br>s, see page (v) of<br>program services<br>r-the-air designati<br>olumn 1 (list each<br>ne television station<br>ngton, D.C. This n<br>k station, an indep<br>or network multica<br>"E-M" (for noncor<br>tions located in the<br>stant"), enter "Yes<br>ons located in the<br>stant"), enter "Yes<br>ons located in the<br>stant"), enter a cable syst<br>enting the primary<br>hannel on any oth | ". If not, enter "No". For an ex-<br>paper SA3 form.<br>ating the basis on which your<br>ring "LAC" if your cable system | 1       | G<br>Primary<br>Transmitters:<br>Television |
|  |   |  |   |   | to which the station is licensed by the  | ne      |   |
| FCC. For Mexican or (  | Canadian statior  | ns, if any, give   | the name of the   | e community with  | which the station is identifed.  |         |   |
| Note: If you are utilizir  | ng multiple chan  | nel line-ups, ι  | ise a separate s  | pace G for each c   | hannel line-up.  |         |   |
|  |   | CHANN  | EL LINE-UP  | AP  |  |         |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION   |         |   |
|  |   |  |   |   |  |         |   |
|  |   |  |   |   |  |         |   |
|  |   |  |   |   |  |         |   |
|  |   |  |   |   |  |         |   |
|  |   |  |   |   |  |         |   |
|  |   |  |   |   |  |         |   |
|  |   |  |   |   |  |         |   |
|  |   |  |   |   |  |         |   |
|  |   |  |   |   |  |         |   |
|  |   |  |   |   |  |         |   |
|  |   |  |   |   |  |         |   |
|  |   |  |   |   |  |         |   |
|  |   |  |   |   |  |         |   |
|  |   |  |   |   |  |         |   |
|  |   |  |   |   |  |         |   |
|  |   |  |   |   | 1  |         |   |
|  |   |  |   |   |  |         |   |

| FORM SA3E. PAGE 3.   |   |  |  |   |   |         |   |
|--|---|--|--|---|---|---------|---|
| LEGAL NAME OF OWN  |   |  |  |   | SYST  | TEM ID# | Name  |
| Atlantic Broad   | oand (CT) LL  | .C   |  |   |   | 62443   |   |
| PRIMARY TRANSMITTE   | ERS: TELEVISIO  | N  |  |   |   |         |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulat<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>basis under specifc FC<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 for<br>Column 1: List eace<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multic<br>For the meaning of the<br>Column 5: If you h<br>cable system carried t<br>carried the distant stat<br>For the retransmiss<br>of a written agreement<br>the cable system and<br>tion "E" (exempt). For | <b>ERS: TELEVISIO</b><br>G, identify every<br>system during the<br>ions in effect on<br>5.61(e)(2) and (4<br>sis, as explained<br><b>Stations:</b> With rr<br>CC rules, regular<br>a here in space (<br>only on a subst<br>and also in space<br>formation concor-<br>rm.<br>th station's call st<br>associated with<br>set. For example<br>yeation is outside<br>in each case w<br>r entering the left<br>cast), "E" (for no<br>ese terms, see p<br>ation is outside<br>ice area, see pa<br>ave entered "Ye<br>he distant statio<br>ion on a part-tim<br>ion of a distant<br>is entered into or<br>a primary transr<br>simulcasts, also | N<br>r television state<br>the accounting<br>June 24, 198<br>4), or 76.63 (ref<br>d in the next p<br>espect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>cc l, if the state<br>erning substitut<br>sign. Do not ref<br>a station acc<br>streams must<br>wer the FCC ha<br>, WRC is Cha<br>e station.<br>whether the state<br>ter "N" (for ne<br>page (v) of the g<br>ss" in column 4<br>multicast stream<br>a nulticast stream<br>n or before Jur<br>mitter or an as<br>penter "E". If y | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>orizations:<br>it in space I (the<br>tion was carried<br>ute basis station<br>eport origination<br>ording to its ove<br>be reported in co<br>as assigned to th<br>nnel 4 in Washin<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>general instruction<br>4, you must com<br>accounting period<br>use of lack of acc<br>am that is not su<br>he 30, 2009, beth<br>sociation repression | 1) stations carried<br>e carriage of certai<br>(e)(2) and (4))]; ar<br>carried by your ca<br>e Special Stateme<br>both on a substitu<br>s, see page (v) of<br>program services<br>r-the-air designati<br>olumn 1 (list each<br>ne television static<br>ngton, D.C. This n<br>k station, an indep<br>or network multica<br>"E-M" (for noncor<br>tions located in the<br>splete column 5, st<br>d. Indicate by ente<br>stivated channel ca<br>ubject to a royalty<br>ween a cable syst<br>enting the primary<br>hannel on any oth | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>tating the basis on which your<br>rring "LAC" if your cable system |         | G<br>Primary<br>Transmitters:<br>Television |
|  |   |  |  |   | to which the station is licensed by the   | ne      |   |
|  |   |  |  | •   | which the station is identifed.   |         |   |
| Note: If you are utilizir  | ng multiple chan  | nel line-ups, u  | ise a separate s   | pace G for each c   | hannel line-up.   |         |   |
|  |   | CHANN  | EL LINE-UP   | AQ  |   |         |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION  |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |
|  |   |  |  |   |   |         |   |

| FORM SA3E. PAGE 3.   |  |  |   |  |   |         |   |
|--|--|--|---|--|---|---------|---|
| LEGAL NAME OF OWN  |  |  |   |  | SYS   | TEM ID# | Name  |
| Atlantic Broad   | pand (CT) LL   | .C   |   |  |   | 62443   |   |
| PRIMARY TRANSMITTE   | RS: TELEVISIO  | N  |   |  |   |         |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>Substitute Basis S<br>basis under specif C<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 fo<br>Column 1: List eace<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multic<br>For the meaning of the<br>Column 5: If you h<br>cable system carried tt<br>carried the distant stat<br>For the retransmiss<br>of a written agreement<br>the cable system and a<br>tion "E" (exempt). For<br>explanation of these th | <b>RS: TELEVISIO</b><br>G, identify every<br>system during the<br>ions in effect on<br>5.61(e)(2) and (2<br>sis, as explained<br><b>Stations:</b> With r<br>CC rules, regula<br>there in space<br>only on a subst<br>and also in space<br>only on a subst<br>and also in space<br>formation concor-<br>rm.<br>the station's call st<br>associated with<br>-2". Simulcasts<br>e channel numb<br>se. For example<br>rystem carried the<br>in each case w<br>entering the lefe<br>cast), "E" (for no<br>ese terms, see p<br>ation is outside<br>ce area, see pa<br>ave entered "Ye<br>the distant statio<br>ion of a distant<br>entered into or<br>a primary transr<br>simulcasts, also<br>aree categories, | N<br>v television state<br>the accounting<br>a June 24, 198<br>4), or 76.63 (red<br>d in the next p<br>espect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>ce I, if the state<br>erning substitut<br>sign. Do not red<br>a station account<br>streams must<br>ber the FCC has<br>e station.<br>whether the state<br>ther "N" (for ne<br>page (v) of the<br>the local server<br>uge of the local server<br>uge of the local server<br>the local s | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>orizations:<br>it in space I (the<br>tion was carried<br>ute basis station<br>eport origination<br>ording to its ove<br>be reported in co<br>as assigned to th<br>nnel 4 in Washin<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>general instruction<br>4, you must com<br>accounting period<br>use of lack of acc<br>am that is not su<br>he 30, 2009, bet<br>isociation repress<br>you carried the c<br>of the general in repress | 1) stations carried<br>e carriage of certa<br>(e)(2) and (4))]; and<br>carried by your car-<br>e Special Stateme<br>both on a substitut<br>s, see page (v) of<br>program services<br>r-the-air designation<br>olumn 1 (list each<br>ne television station<br>ngton, D.C. This makes<br>k station, an indep<br>or network multicar<br>"E-M" (for noncor-<br>tions located in the<br>splete column 5, st<br>d. Indicate by enter<br>stivated channel co-<br>ubject to a royalty<br>ween a cable syste-<br>enting the primary<br>channel on any ott | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>tating the basis on which your<br>ering "LAC" if your cable system<br>apacity.<br>payment because it is the subject<br>em or an association representing<br>y transmitter, enter the designa-<br>ter basis, enter "O." For a further<br>I in the paper SA3 form. | 1       | G<br>Primary<br>Transmitters:<br>Television |
|  |  |  |   |  | to which the station is licensed by t<br>which the station is identifed.  | ne      |   |
| Note: If you are utilizin  |  |  |   |  |   |         |   |
|  | <u> </u>   | CHANN  | EL LINE-UP  |  | ·   |         |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION  |         |   |
|  |  |  |   |  |   |         |   |
|  |  |  |   |  |   |         |   |
|  |  |  |   |  |   |         |   |
|  |  |  |   |  |   |         |   |
|  |  |  |   |  |   |         |   |
|  |  |  |   |  |   |         |   |
|  |  |  |   |  |   |         |   |
|  |  |  |   |  |   |         |   |
|  |  |  |   |  |   |         |   |
|  |  |  |   |  |   |         |   |
|  |  |  |   |  | 1   |         |   |
|  | 1  |  |   |  |   | 1       |   |
|  |  |  |   |  |   |         |   |
|  |  |  |   |  |   |         |   |
|  |  |  |   |  |   |         |   |
|  |  |  |   |  |   |         |   |
|  |  |  |   |  |   |         |   |

| LEGAL NAME OF OWNER OF CABLE S<br>Atlantic Broadband (CT) L  |  |  |   |  |   |
|--|--|--|---|--|---|
| Atlantic Broadband (CT)  |  |  |   | SYSTEM ID  | Name  |
|  | LC   |  |   | 6244   | .3  |
| PRIMARY TRANSMITTERS: TELEVISI   | ON   |  |   |  |   |
| <ul> <li>PRIMARY TRANSMITTERS: TELEVISION</li> <li>In General: In space G, identify event carried by your cable system during a FCC rules and regulations in effect of 76.59(d)(2) and (4), 76.61(e)(2) and substitute program basis, as explained Substitute Basis Stations: With basis under specific FCC rules, regule</li> <li>Do not list the station here in spaced station was carried only on a subsetiation was carried the column 1: List each station's call each multicast stream associated with cast stream as "WETA-2". Simulcast WETA-simulcast).</li> <li>Column 2: Give the channel numities community of license. For examplion which your cable system carried the Column 3: Indicate in each case educational station, by entering the law (for independent multicast), "E" (for refor the meaning of these terms, see Column 4: If the station is outsidd planation of local service area, see p Column 5: If you have entered "Y cable system carried the distant station on a part-ti For the retransmission of a distant of a written agreement entered into contexplanation of a written agreement entered into contexplanation of a written agreement entered into contexplanation of a distant of a written agreement entered into contexplanation of a distant of a written agreement entered into contexplanation of a distant of a written agreement entered into contexplanation of a distant of a written agreement entered into contexplanation of a distant of a written agreement entered into contexplanation of a written agreement entered into contexplanati</li></ul> | DN<br>ry television stathe accounting<br>In June 24, 198<br>(4), or 76.63 (methylic)<br>respect to any<br>ations, or authylic)<br>account of the station<br>account of the static<br>stitute basis.<br>accel, if the static<br>conting substituely<br>account of the static<br>streams must<br>ber the FCC has<br>ber the focal server<br>whether the station.<br>whether the station<br>concommercial<br>page (v) of the<br>ation of the station<br>on during the ation<br>on during the ation<br>on or before Jung<br>smitter or an as | period, except (<br>B1, permitting the<br>eferring to 76.61<br>paragraph.<br>distant stations<br>prizations:<br>it in space I (the<br>tion was carried<br>ute basis station<br>eport origination<br>cording to its over<br>be reported in co<br>as assigned to the<br>annel 4 in Washing<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>e general instruction<br>4, you must com<br>accounting period<br>use of lack of ac-<br>am that is not su-<br>ne 30, 2009, betw<br>sociation repres | 1) stations carried<br>e carriage of certa<br>(e)(2) and (4))]; and<br>carried by your car-<br>e Special Stateme<br>both on a substitut<br>s, see page (v) of<br>program services<br>r-the-air designati-<br>olumn 1 (list each<br>ne television station<br>ngton, D.C. This makes<br>the television station<br>ngton, D.C. This makes<br>and the television station<br>in the television station<br>ngton, D.C. This makes<br>and the television station<br>ngton, D.C. This makes<br>and the television station<br>ngton, be the television station<br>ngton, be the television station<br>ngton, be the television station<br>ngton, be the television station<br>of the television station<br>ngton, be the television station<br>of the television station<br>ngton, be television station<br>of the television station<br>ngton, be television station<br>to the television station<br>to the television station<br>to the television station<br>ngton, be television station<br>to the television station<br>television station<br>television station station<br>television station station<br>television station stati | and low power television stations)<br>only on a part-time basis under<br>in network programs [sections<br>ad (2) certain stations carried on a<br>able system on a substitute program<br>ant and Program Log)—if the<br>the basis and also on some other<br>the general instructions located<br>such as HBO, ESPN, etc. Identify<br>on. For example, report multi-<br>stream separately; for example<br>on for broadcasting over-the-air in<br>may be different from the channel<br>pendent station, or a noncommercial<br>st), "I" (for independent), "I-M"<br>numercial educational multicast).<br>e paper SA3 form.<br>s". If not, enter "No". For an ex-<br>paper SA3 form.<br>tating the basis on which your<br>ering "LAC" if your cable system<br>apacity.<br>payment because it is the subject<br>em or an association representing<br>y transmitter, enter the designa- | G<br>Primary<br>Transmitters:<br>Television |
| the cable system and a primary trans<br>tion "E" (exempt). For simulcasts, als<br>explanation of these three categories  | smitter or an as<br>o enter "E". If y<br>s, see page (v)<br>ach station. For<br>ons, if any, give<br>nnel line-ups, u  | sociation repres<br>you carried the c<br>of the general ir<br>r U.S. stations, li<br>the name of the   | senting the primary<br>channel on any oth<br>astructions located<br>ist the community<br>e community with<br>pace G for each o  | / transmitter, enter the designa-<br>ner basis, enter "O." For a further<br>I in the paper SA3 form.<br>to which the station is licensed by the<br>which the station is identifed.   |   |
| SIGN CHANNEL   | OF   |  | J. DASIS UF   | 6. LOCATION OF STATION   | _   |
| NUMBER   |  | (Yes or No)  | CARRIAGE  | 6. LOCATION OF STATION   |   |
| NUMBER   | STATION  | · · · ·  |   | 6. LOCATION OF STATION   |   |
| NUMBER   | -  | · · · ·  | CARRIAGE  | 6. LOCATION OF STATION   |   |
|  | -  | · · · ·  | CARRIAGE  | 6. LOCATION OF STATION   |   |
|  | -  | · · · ·  | CARRIAGE  | 6. LOCATION OF STATION   |   |
|  | -  | · · · ·  | CARRIAGE  | 6. LOCATION OF STATION   |   |
|  | -  | · · · ·  | CARRIAGE  | 6. LOCATION OF STATION   |   |
|  | -  | · · · ·  | CARRIAGE  | 6. LOCATION OF STATION   |   |
|  | -  | · · · ·  | CARRIAGE  | 6. LOCATION OF STATION   |   |
|  | -  | · · · ·  | CARRIAGE  | 6. LOCATION OF STATION   |   |
|  | -  | · · · ·  | CARRIAGE  | 6. LOCATION OF STATION   |   |
|  | -  | · · · ·  | CARRIAGE  | 6. LOCATION OF STATION   |   |
|  | -  | · · · ·  | CARRIAGE  | 6. LOCATION OF STATION   |   |
|  | -  | · · · ·  | CARRIAGE  | 6. LOCATION OF STATION   |   |
|  | -  | · · · ·  | CARRIAGE  | 6. LOCATION OF STATION   |   |
|  | -  | · · · ·  | CARRIAGE  | 6. LOCATION OF STATION   |   |
|  | -  | · · · ·  | CARRIAGE  | 6. LOCATION OF STATION   |   |
|  | -  | · · · ·  | CARRIAGE  | 6. LOCATION OF STATION   |   |

| FORM SA3E. PAGE 3.   |   |   |   |  |  |         |   |
|--|---|---|---|--|--|---------|---|
| LEGAL NAME OF OWN  |   |   |   |  | SYS <sup>-</sup>   | TEM ID# | Name  |
| Atlantic Broad   | band (CT) LL  | _C  |   |  |  | 62443   |   |
| PRIMARY TRANSMITTE   | ERS: TELEVISIO  | N   |   |  |  |         |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulat<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>Substitute Basis S<br>basis under specifc FC<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 fo<br>Column 1: List each<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multid<br>For the meaning of the<br>Column 4: If the st<br>planation of local servi<br>Column 5: If you h<br>cable system carried t<br>carried the distant stat<br>For the retransmiss<br>of a written agreement | <b>ERS: TELEVISIO</b><br>G, identify every<br>system during the<br>ions in effect on<br>5.61(e)(2) and (4<br>sis, as explained<br><b>Stations:</b> With r<br>CC rules, regula<br>there in space<br>only on a subst<br>and also in space<br>formation concurrent<br>the station's call<br>associated with<br>A-2". Simulcast st<br>e channel numb<br>se. For example<br>ystem carried the<br>in each case w<br>or entering the lei<br>cast), "E" (for no<br>ese terms, see pa<br>ave entered "Ye<br>he distant statio<br>ion on a part-tim<br>sion of a distant<br>t entered into or | N<br>v television state<br>the accounting<br>a June 24, 198<br>4), or 76.63 (red<br>d in the next p<br>respect to any<br>tions, or author<br>G—but do list<br>ce l, if the state<br>erning substitut<br>sign. Do not red<br>a station acc<br>streams must<br>ber the FCC has<br>be the FCC has<br>be station.<br>whether the state<br>the station.<br>whether the state<br>the station.<br>whether the state<br>the local server<br>age (v) of the g<br>age (v) of the g<br>and during the a<br>multicast strean<br>or before Jur | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>orizations:<br>it in space I (the<br>tion was carried<br>ute basis station<br>eport origination<br>ording to its ove<br>be reported in c<br>as assigned to th<br>nnel 4 in Washin<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>general instruction<br>(i.e. "dig<br>general instruction<br>4, you must com-<br>accounting period<br>use of lack of acc<br>am that is not su-<br>tion 3, 2009, betw | 1) stations carried<br>e carriage of certai<br>(e)(2) and (4))]; ar<br>carried by your ca<br>e Special Statement<br>both on a substitu<br>s, see page (v) of<br>program services<br>r-the-air designati<br>olumn 1 (list each<br>ne television static<br>ngton, D.C. This n<br>k station, an indep<br>or network multica<br>"E-M" (for noncor<br>tions located in the<br>istant"), enter "Yes<br>ons located in the<br>plete column 5, si<br>d. Indicate by enter<br>cubject to a royalty<br>ween a cable syst | ". If not, enter "No". For an ex-<br>paper SA3 form.<br>tating the basis on which your<br>wing "LAC" if your cable system<br>apacity.<br>payment because it is the subject<br>em or an association representing      | 1       | G<br>Primary<br>Transmitters:<br>Television |
| of a written agreement<br>the cable system and<br>tion "E" (exempt). For<br>explanation of these th<br><b>Column 6:</b> Give the   | t entered into or<br>a primary transr<br>simulcasts, also<br>nree categories,<br>e location of eao<br>Canadian statior  | n or before Jur<br>mitter or an as<br>b enter "E". If y<br>see page (v)<br>ch station. For<br>ns, if any, give<br>nnel line-ups, u  | ne 30, 2009, bet<br>sociation repres<br>you carried the c<br>of the general ir<br>U.S. stations, li<br>the name of the  | ween a cable syst<br>senting the primary<br>channel on any oth<br>astructions located<br>ist the community<br>e community with<br>pace G for each c  | em or an association representing<br>r transmitter, enter the designa-<br>er basis, enter "O." For a further<br>in the paper SA3 form.<br>to which the station is licensed by the<br>which the station is identifed. | ne      |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL  | 3. TYPE<br>OF   | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE  | 6. LOCATION OF STATION   |         |   |
| SIGN   | NUMBER  | STATION   | . ,   | (If Distant)   |  |         |   |
|  |   |   |   | (  |  |         |   |
|  |   |   |   |  |  |         |   |
|  |   |   |   |  |  |         |   |
|  |   |   |   |  |  |         |   |
|  |   |   |   |  |  |         |   |
|  |   |   |   |  |  |         |   |
|  |   |   |   |  |  |         |   |
|  |   |   |   |  |  |         |   |
|  |   |   |   |  |  |         |   |
|  |   |   |   |  |  |         |   |
|  |   |   |   |  |  |         |   |
|  |   |   |   |  |  |         |   |
|  |   |   |   |  |  |         |   |
|  |   |   |   | •  |  |         |   |
|  |   |   |   |  |  |         |   |
|  |   |   |   |  |  |         |   |
|  |   |   |   |  |  |         |   |
|  |   |   |   |  |  |         |   |
|  |   |   |   |  |  |         |   |

| FORM SA3E. PAGE 3.  |  |   |   |  |   |         |   |
|---|--|---|---|--|---|---------|---|
| LEGAL NAME OF OWN   |  |   |   |  | SYS   | TEM ID# | Name  |
| Atlantic Broad  | pand (CT) LL   | .C  |   |  |   | 62443   |   |
| PRIMARY TRANSMITTE  | ERS: TELEVISIO   | N   |   |  |   |         |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>Substitute Basis S<br>basis under specifc FC<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 fo<br>Column 1: List eace<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multic<br>For the meaning of the<br>Column 4: If the st<br>planation of local servi<br>Carried the distant stat<br>For the retransmiss<br>of a written agreement<br>the cable system and a | <b>RS: TELEVISIO</b><br>G, identify every<br>system during the<br>ions in effect on<br>3.61(e)(2) and (2<br>sis, as explained<br><b>Stations:</b> With r<br>CC rules, regula<br>there in space<br>only on a subst<br>and also in spa<br>formation concerns.<br>the station's call st<br>associated with<br>section of a classes<br>e channel numb<br>section case we<br>entering the left<br>coast), "E" (for no<br>ces terms, see p<br>ation is outside<br>ce area, see pa<br>ave entered "Ye<br>he distant statio<br>ion on a part-tim<br>ion of a distant<br>entered into or<br>a primary transit | N<br>v television state<br>the accounting<br>a June 24, 198<br>4), or 76.63 (red<br>d in the next p<br>espect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>ce I, if the state<br>erning substitut<br>sign. Do not red<br>a station account<br>streams must<br>ber the FCC has<br>ber the for her the station.<br>whether the station.<br>whether the station.<br>whether the station.<br>ber the local server<br>the local server<br>the local server<br>and uring the a<br>multicast streen<br>or before Jurn<br>mitter or an as | period, except (<br>1, permitting the<br>eferring to 76.61<br>paragraph.<br>distant stations<br>prizations:<br>it in space I (the<br>tion was carried<br>ute basis station<br>eport origination<br>cording to its over<br>be reported in co<br>as assigned to the<br>nnel 4 in Washing<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>e general instruction<br>4, you must com<br>accounting period<br>use of lack of ac<br>am that is not su<br>tes 30, 2009, betw<br>association repres | 1) stations carried<br>e carriage of certa<br>(e)(2) and (4))]; and<br>carried by your car-<br>e Special Stateme<br>both on a substitut<br>s, see page (v) of<br>program services<br>r-the-air designati-<br>olumn 1 (list each<br>ne television station<br>ngton, D.C. This makes<br>the television station<br>ngton, D.C. This makes<br>and the television station<br>in the television station<br>ngton, D.C. This makes<br>and the television station<br>ngton, D.C. This makes<br>and the television station<br>ngton, be the television station<br>ngton, be the television station<br>ngton, be the television station<br>of the television station<br>ngton, be the television station<br>ngton, be the television station<br>of the television station<br>ngton, be television station<br>of the television station<br>ngton, be television station<br>to the television station<br>ngton, be television station<br>ngton, be television station<br>to the television station<br>ngton, be television station<br>to the television station<br>television station<br>television station<br>television station<br>television station<br>television station<br>television station<br>television station<br>television station<br>television station station<br>television station station station<br>television station station station<br>television station station station station station station station station<br>television statio | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>tating the basis on which your<br>string "LAC" if your cable system<br>apacity.<br>payment because it is the subject<br>em or an association representing<br>y transmitter, enter the designa- | 1       | G<br>Primary<br>Transmitters:<br>Television |
| tion "E" (exempt). For sexplanation of these the <b>Column 6:</b> Give the  | simulcasts, also<br>aree categories,<br>e location of eac<br>Canadian station  | enter "E". If y<br>see page (v)<br>ch station. For<br>ns, if any, give<br>nel line-ups, u   | you carried the c<br>of the general in<br>r U.S. stations, li<br>e the name of the  | channel on any oth<br>nstructions located<br>ist the community<br>e community with<br>pace G for each c  | er basis, enter "O." For a further<br>I in the paper SA3 form.<br>to which the station is licensed by t<br>which the station is identifed.  | he      |   |
| SIGN  | CHANNEL  | OF  | (Yes or No)   | CARRIAGE   |   |         |   |
|   | NUMBER   | STATION   |   | (If Distant)   |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |
|   |  |   |   |  |   |         |   |

| FORM SA3E. PAGE 3.   |  |  |  |   |  |         |   |
|--|--|--|--|---|--|---------|---|
| LEGAL NAME OF OWN  |  |  |  |   | SYS  | TEM ID# | Name  |
| Atlantic Broad   | pand (CT) LL   | .C   |  |   |  | 62443   |   |
| PRIMARY TRANSMITTE   | ERS: TELEVISIO   | N  |  |   |  |         |   |
| PRIMARY TRANSMITTE<br>In General: In space (<br>carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute program bas<br>Substitute Basis S<br>basis under specifc FC<br>• Do not list the station<br>station was carried<br>• List the station here,<br>basis. For further in<br>in the paper SA3 fo<br>Column 1: List eace<br>each multicast stream<br>cast stream as "WETA<br>WETA-simulcast).<br>Column 2: Give the<br>its community of licens<br>on which your cable sy<br>Column 3: Indicate<br>educational station, by<br>(for independent multid<br>For the meaning of the<br>Column 4: If the st<br>planation of local servi<br>Column 5: If you h<br>cable system carried tt<br>carried the distant stat<br>For the retransmiss | <b>FRS: TELEVISIO</b><br>G, identify every<br>system during the<br>ions in effect on<br>5.61(e)(2) and (2<br>sis, as explained<br><b>Stations:</b> With r<br>CC rules, regula<br>there in space<br>only on a subst<br>and also in space<br>formation concerns.<br>the station's call<br>associated with<br>the station's call<br>associated with<br>the cast, "E" (for no<br>ese terms, see p<br>ation is outside<br>ce area, see pa<br>ave entered "Ye<br>he distant statio<br>ion on a part-tim-<br>ion of a distant | N<br>v television state<br>the accounting<br>a June 24, 198<br>4), or 76.63 (red<br>d in the next p<br>espect to any<br>tions, or author<br>G—but do list<br>itute basis.<br>ce I, if the state<br>erning substitute<br>sign. Do not red<br>a station account<br>streams must<br>ber the FCC has<br>ber the Station.<br>whether the state<br>the local serving<br>ge (v) of the gest<br>an olumn of<br>a multicast streen<br>multicast streen<br>the local serving<br>the local serving<br>an olumn of the state<br>an olumn of the state<br>multicast streen<br>the local serving<br>the local serving<br>the local serving<br>the local serving<br>an olumn of the state<br>the local serving<br>the local | period, except (<br>1, permitting the<br>eferring to 76.61<br>aragraph.<br>distant stations<br>orizations:<br>it in space I (the<br>tion was carried<br>ute basis station<br>eport origination<br>ording to its over<br>be reported in c<br>as assigned to the<br>nnel 4 in Washi<br>ation is a network<br>twork), "N-M" (for<br>educational), or<br>general instruc-<br>ice area, (i.e. "di-<br>general instruc-<br>ice area, (i.e. di-<br>general instruc-<br>ice area, (i.e. di-<br>general instruc-<br>ice area, for any<br>ation is a network), "or any<br>general instruc-<br>ice area, (i.e. "di-<br>general instruc-<br>ice area, for any<br>the for any for any for any for any<br>any for any for any for any for<br>any for any for any for any for<br>any for any for any for any for<br>any for any for any for<br>any for any for any for any for<br>any for any for any for any for any for<br>any for any for any for any for any for any for<br>any for any for any for any for<br>any for any for any for any for any for<br>any for any for any for any for any for any for any for<br>any for any for any for any for any for any for any for<br>any for any for any for any for any for any for any for<br>any for any for any for any for any for any for a | 1) stations carried<br>e carriage of certa<br>(e)(2) and (4))]; and<br>carried by your car-<br>e Special Stateme<br>both on a substitut<br>s, see page (v) of<br>program services<br>r-the-air designati<br>olumn 1 (list each<br>ne television station<br>ngton, D.C. This ri-<br>k station, an indep<br>or network multica<br>"E-M" (for noncor-<br>tions located in the<br>istant"), enter "Yei-<br>ons located in the<br>uplete column 5, s<br>d. Indicate by enter<br>cubject to a royalty | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>tating the basis on which your<br>ering "LAC" if your cable system  | n       | G<br>Primary<br>Transmitters:<br>Television |
| carried the distant stat<br>For the retransmiss<br>of a written agreement<br>the cable system and<br>tion "E" (exempt). For<br>explanation of these th<br><b>Column 6:</b> Give the  | ion on a part-tin<br>ion of a distant<br>entered into or<br>a primary transr<br>simulcasts, also<br>rree categories,<br>e location of eao<br>Canadian station  | ne basis beca<br>multicast stre<br>n or before Jur<br>mitter or an as<br>b enter "E". If y<br>see page (v)<br>ch station. For<br>ns, if any, give<br>nel line-ups, u   | use of lack of ac<br>am that is not su<br>the 30, 2009, bet<br>asociation represe<br>you carried the co<br>of the general in<br>tr U.S. stations, li<br>the name of the<br>use a separate s  | ctivated channel c<br>ubject to a royalty<br>ween a cable syst<br>centing the primary<br>channel on any oth<br>astructions located<br>ist the community<br>e community with<br>pace G for each o  | apacity.<br>payment because it is the subject<br>em or an association representing<br>/ transmitter, enter the designa-<br>uer basis, enter "O." For a further<br>I in the paper SA3 form.<br>to which the station is licensed by the<br>which the station is identifed. | he      |   |
|  | 1  | CHANN  | EL LINE-UP   | AV  |  |         |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION   |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |
|  |  |  |  |   |  |         |   |

| LEGAL NAME OF OWN                          |                      |                        |  |  |  |      |                             |  |
|--|----------------------|------------------------|--|--|--|------|-----------------------------|--|
| 1  |                      |                        |  |  | SYSTEM   |      | Name                        |  |
| Atlantic Broadb                            | and (CT) LL          | .C                     |  |  | 62   | 2443 |                             |  |
| PRIMARY TRANSMITTE                         | RS: TELEVISIO        | N                      |  |  |  |      |                             |  |
| In General: In space (                     | 6, identify every    | television sta         | ition (including t                                   | ranslator stations   | and low power television stations)                                     |      | •                           |  |
|  |                      |                        |  |  | only on a part-time basis under  |      | G                           |  |
|  |                      |                        |  |  | n network programs [sections   |      |                             |  |
|  |                      |                        | •  | (e)(2) and (4))]; ar   | nd (2) certain stations carried on a                                   |      | Primary                     |  |
| substitute program bas                     |                      |                        |  | carried by your ca   | ble system on a substitute program                                     |      | Transmitters:<br>Television |  |
| basis under specifc FC                     |                      | •                      |  | carried by your ca   | ble system on a substitute program                                     |      | relevision                  |  |
| · ·  |                      |                        |  | e Special Stateme  | nt and Program Log)—if the   |      |                             |  |
| station was carried                        | only on a subst      | itute basis.           |  |  |  |      |                             |  |
|  | •                    |                        |  |  | ite basis and also on some other                                       |      |                             |  |
|  |                      | erning substitu        | ite basis station                                    | s, see page (v) of   | the general instructions located                                       |      |                             |  |
| in the paper SA3 for<br>Column 1: List eac |                      | sian Do not re         | port origination                                     | program services   | such as HBO, ESPN, etc. Identify                                       |      |                             |  |
|  |                      | -                      |  |  | on. For example, report multi-   |      |                             |  |
|  |                      |                        | 0  | •  | stream separately; for example   |      |                             |  |
| WETA-simulcast).                           |                      |                        |  |  |  |      |                             |  |
|  |                      |                        | •  |  | n for broadcasting over-the-air in                                     |      |                             |  |
| on which your cable sy                     |                      | ,                      | nnei 4 in washi                                      | ngion, D.C. This n   | nay be different from the channel                                      |      |                             |  |
|  |                      |                        | ation is a networ                                    | k station, an indep  | endent station, or a noncommercial                                     |      |                             |  |
| educational station, by                    | entering the let     | ter "N" (for ne        | twork), "N-M" (fo                                    | or network multica   | st), "I" (for independent), "I-M"                                      |      |                             |  |
|  |                      |                        |  |  | nmercial educational multicast).                                       |      |                             |  |
| For the meaning of the                     |                      |                        |  |  |  |      |                             |  |
| planation of local servi                   |                      |                        | ,  | ,  | s". If not, enter "No". For an ex-                                     |      |                             |  |
|  |                      |                        |  |  | tating the basis on which your   |      |                             |  |
|  |                      |                        | •  |  | ring "LAC" if your cable system  |      |                             |  |
| carried the distant stati                  | •                    |                        |  |  |  |      |                             |  |
|  |                      |                        |  |  | payment because it is the subject                                      |      |                             |  |
| -  |                      |                        |  | •  | em or an association representing<br>/ transmitter, enter the designa- |      |                             |  |
|  |                      |                        |  |  | er basis, enter "O." For a further                                     |      |                             |  |
|  |                      |                        |  |  | in the paper SA3 form.   |      |                             |  |
|  |                      |                        |  | ist the community  | to which the station is licensed by the                                |      |                             |  |
|  | anadian statior      |                        |  | ,  | to which the station is licensed by the                                |      |                             |  |
| Note: If you are utilizin                  | 102 1 1              |                        |  | e community with   | which the station is identifed.  |      |                             |  |
| CHANNEL LINE-UP AW                         |                      |                        |  |  |  |      |                             |  |
|  | g multiple chan      | nel line-ups, u        | ise a separate s                                     | e community with<br>pace G for each c                                  | which the station is identifed.  |      |                             |  |
|  |                      | nel line-ups, u        | ise a separate s<br>EL LINE-UP                       | e community with pace G for each c                                     | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
| 1. CALL                                    | 2. B'CAST            | CHANN<br>3. TYPE       | ise a separate s<br><b>EL LINE-UP</b><br>4. DISTANT? | e community with<br>pace G for each c<br>AW<br>5. BASIS OF             | which the station is identifed.  |      |                             |  |
| 1. CALL<br>SIGN                            | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST            | CHANN<br>3. TYPE       | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF             | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |
|  | 2. B'CAST<br>CHANNEL | CHANN<br>3. TYPE<br>OF | EL LINE-UP<br>4. DISTANT?<br>(Yes or No)             | e community with<br>pace G for each c<br>AW<br>5. BASIS OF<br>CARRIAGE | which the station is identifed.<br>hannel line-up.                     |      |                             |  |

|                        |   |   | E OVOTE                                   |   |  |                                  |                        |                                |
|------------------------|---|---|---|---|--|----------------------------------|------------------------|--------------------------------|
| Name                   | LEGAL NAME OF C   |   |   | И:  |  |                                  |                        | SYSTEM ID#                     |
|                        | Atlantic Bro  | adband (C   | ) LLC                                     |   |  |                                  |                        | 62443                          |
| H                      | all-band basis v  | t every radio s<br>vhose signals  | tation ca<br>were "ge                     | rried on a separate and discre<br>nerally receivable" by your ca<br>-Band FM Carriage: Under C  | ble system during                      | the accountir                    | ng perioo              | d.                             |
| Transmitters:<br>Radio | receivable if (1) on the basis of                               | it is carried by monitoring, to   | the syst                                  | tem whenever it is received at<br>ved at the headend, with the s  | t the system's hea<br>system's FM ante | adend, and (2)<br>nna, during ce | it can b<br>ertain sta | e expected,<br>ited intervals. |
|                        | located in the p<br>Column 1: lo<br>Column 2: S<br>Column 3: lf | aper SA3 form<br>dentify the call<br>State whether t<br>the radio stati | n.<br>sign of e<br>he statio<br>on's sigr | Copyright Office regulations of<br>each station carried.<br>n is AM or FM.<br>nal was electronically processor<br>mark in the "S/D" column. |  |                                  | -                      |                                |
|                        |   |   |   | on (the community to which th<br>he community with which the  |  |                                  | C or, in th            | ne case of                     |
|                        | CALL SIGN   | AM or FM  | S/D                                       | LOCATION OF STATION   | CALL SIGN                              | AM or FM                         | S/D                    | LOCATION OF STATION            |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        |                                |
|                        |   |   |   |   |  |                                  |                        | <u> </u>                       |

| ACCOUNTING PERIOD: 2020/2 |  |
|---------------------------|--|
| OVOTEM ID#                |  |

| LEGAL NAME OF OWNER OF   | CABLE SYST   | EM:   |   |  |   | SYSTEM ID#  |                      |  |
|--|--|---|---|--|---|---|----------------------|--|
| Atlantic Broadband (C  | T) LLC   |   |   |  |   | 62443   | Name                 |  |
| SUBSTITUTE CARRIAGE  |  |   |   |  |   |   | I                    |  |
| In General: In space I, identi<br>substitute basis during the ac<br>explanation of the programm  | counting pe  | riod, under spe   | cific present and former FC   | C rules, regula  | tions, or authorizatio  | ons. For a further  | Substitute           |  |
| 1. SPECIAL STATEMENT   |  | NING SUBST  | ITUTE CARRIAGE  |  |   |   | Carriage:<br>Special |  |
| During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program<br>broadcast by a distant station?     Yes XNo Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program   |  |   |   |  |   |   |                      |  |
| Note: If your answer is "No"<br>log in block 2.<br>2. LOG OF SUBSTITUTE  |  |   | e blank. If your answer is "  | Yes," you mu   | st complete the pro   | ogram   |                      |  |
| period, was broadcast by a<br>under certain FCC rules, re<br>SA3 form for futher informa<br>titles, for example, "I Love L<br>Column 2: If the program<br>Column 3: Give the call<br>Column 4: Give the broat<br>the case of Mexican or Can<br>Column 5: Give the mon<br>first. Example: for May 7 giv<br>Column 6: State the time<br>to the nearest five minutes.<br>stated as "6:00–6:30 p.m." | ce, please a<br>of every nor<br>distant stati<br>gulations, o<br>tion. Do no<br>.ucy" or "NE<br>n was broad<br>sign of the s<br>adcast statio<br>adian statio<br>ath and day<br><i>ve</i> "5/7."<br>es when the<br>Example: a<br>er "R" if the<br>and regulatio<br>ogramming | attach additiona<br>nnetwork televi<br>ion and that yo<br>r authorizations<br>t use general of<br>BA Basketball:<br>dcast live, entel<br>station broadca<br>on's location (th<br>ons, if any, the of<br>when your system<br>substitute pro-<br>program carrie<br>listed program<br>ons in effect du | al pages.<br>sion program (substitute p<br>ur cable system substituted<br>s. See page (vi) of the gen<br>ategories like "movies", or<br>76ers vs. Bulls."<br>r "Yes." Otherwise enter "N<br>sting the substitute progra<br>te community to which the<br>community with which the s<br>tem carried the substitute p<br>gram was carried by your of<br>ed by a system from 6:01:1<br>was substituted for progra<br>ring the accounting period | rogram) that,<br>I for the program<br>ral instructio<br>"basketball".<br>o."<br>m.<br>station is licer<br>station is licer<br>tation is licer<br>station | during the account<br>ramming of another<br>ns located in the pa<br>List specific progra<br>hsed by the FCC or<br>tified).<br>numerals, with the<br>List the times accu<br>8:30 p.m. should be<br>pur system was req<br>cer "P" if the listed p | ing<br>r station<br>aper<br>am<br>r, in<br>month<br>urately<br>e<br>uuired<br>oro |                      |  |
| s  | UBSTITUT   | E PROGRAM   |   |  | N SUBSTITUTE  | 7. REASON<br>FOR  |                      |  |
| 1. TITLE OF PROGRAM  | 2. LIVE?<br>Yes or No  | 3. STATION'S<br>CALL SIGN   | 4. STATION'S LOCATION   | 5. MONTH<br>AND DAY  | 6. TIMES<br>FROM —  | DELETION<br>TO  |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |
|  |  |   |   |  |   |   |                      |  |

FORM SA3E. PAGE 5.

⊢

|                                   | LEGAL NAME OF (  | WNER OF CABLE  | SYSTEM:         |             |      |              |       | S               | SYSTEM ID# |
|-----------------------------------|--|--|-----------------|-------------|------|--------------|-------|-----------------|------------|
| Name                              | Atlantic Broa  | adband (CT)  | LLC             |             |      |              |       |                 | 62443      |
|                                   | PART-TIME CA   | RRIAGE LOG   |                 |             |      |              |       |                 |            |
| J<br>Part-Time<br>Carriage<br>Log | time carriage du<br>hours your syste<br>Column 1 (C<br>column 5 of spa<br>Column 2 (D<br>curred during th<br>• Give the mont<br>"4/10."<br>• State the start<br>television statio<br>"app." Example: | State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the elevision 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."<br>You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.– |                 |             |      |              |       |                 |            |
|                                   |  |  | DATES           | AND HOURS ( | DF F | ART-TIME CAR | RIAGE |                 |            |
|                                   |  | WHEN   | I CARRIAGE OCCU | RRED        |      |              | WHEN  | I CARRIAGE OCCU | RRED       |
|                                   | CALL SIGN  | DATE   | HOUR            |             |      | CALL SIGN    | DATE  | HOUR            |            |
|                                   |  | DATE   | FROM            | TO          |      |              | DATE  | FROM            | то         |
|                                   |  |  |                 |             |      |              |       |                 |            |
|                                   |  |  |                 |             |      |              |       |                 |            |
|                                   |  |  |                 |             |      |              |       |                 |            |
|                                   |  |  |                 |             |      |              |       | <u> </u>        |            |
|                                   |  |  |                 |             |      |              |       | <mark></mark>   |            |
|                                   |  |  |                 |             |      |              |       |                 |            |
|                                   |  |  |                 |             |      |              |       |                 |            |
|                                   |  |  | _               |             |      |              |       |                 |            |
|                                   |  |  |                 |             |      |              |       |                 |            |
|                                   |  |  |                 |             |      |              |       |                 |            |
|                                   |  |  |                 |             |      |              |       |                 |            |
|                                   |  |  |                 |             |      |              |       | <u> </u>        |            |
|                                   |  |  |                 |             |      |              |       |                 |            |
|                                   |  |  |                 |             |      |              |       |                 |            |
|                                   |  |  |                 |             |      |              |       |                 |            |
|                                   |  |  |                 |             |      |              |       |                 |            |
|                                   |  |  |                 |             |      |              |       |                 |            |
|                                   |  |  |                 |             |      |              |       |                 |            |
|                                   |  |  |                 |             |      |              |       |                 |            |
|                                   |  |  |                 |             |      |              |       | <mark></mark>   |            |
|                                   |  |  |                 |             |      |              |       |                 |            |
|                                   |  |  | -               |             |      |              |       |                 |            |
|                                   |  |  |                 |             |      |              |       |                 |            |
|                                   |  |  | _               |             |      |              |       | _               |            |
|                                   |  |  | _               |             |      |              |       | _               |            |
|                                   |  |  | _               |             |      |              |       |                 |            |

| FORM  | SA3E. PAGE 7.   |                  |  |
|---|---|------------------|--|
| LEGA  | AL NAME OF OWNER OF CABLE SYSTEM:   | SYSTEM ID#       | Name   |
| Atla  | antic Broadband (CT) LLC  | 62443            | Name   |
| Inst<br>all a<br>(as i<br>page  | OSS RECEIPTS         tructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the tot amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission serie identified in space E) during the accounting period. For a further explanation of how to compute this amount, s ge (vii) of the general instructions.         Gross receipts from subscribers for secondary transmission service(s)         during the accounting period.         PORTANT: You must complete a statement in space P concerning gross receipts.  | ee<br>603,948.05 | K<br>Gross Receipts                                  |
| <ul> <li>Instru</li> <li>Con</li> <li>Con</li> <li>If yo<br/>fee t</li> <li>If yo<br/>accord</li> </ul> | YRIGHT ROYALTY FEE<br>Juctions: Use the blocks in this space L to determine the royalty fee you owe:<br>mplete block 1, showing your minimum fee.<br>mplete block 2, showing whether your system carried any distant television stations.<br>our system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum<br>from block 1 on line 1 of block 4, and calculate the total royalty fee.<br>our system did carry any distant television stations, you must complete the applicable parts of the DSE Schedu<br>companying this form and attach the schedule to your statement of account.<br>art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of | ıle              | L<br>Copyright<br>Royalty Fee                        |
| bloc  | ck 3 below.   |                  |  |
|   | art 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 in blo<br>elow.  | ck               |  |
|   | art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be entered on line block 4 below.  |                  |  |
|   | MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are required to pay at least the minimum fee, regardless of whether they carried any distant stations. This fee is 1.064 percent of the system's gross receipts for the accounting period.   | e                |  |
|   | Line 2. Multiply the amount in line 1 by 0.01064  | 603,948.05       |  |
|   | Enter the result here. This is your minimum fee. \$   | 6,426.01         |  |
| Block<br>2  | <ul> <li>DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the information you gave is space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column 4, you must check "Yes" in this block.</li> <li>Did your cable system carry any distant television stations during the accounting period?</li> <li>X Yes—Complete the DSE schedule.</li> <li>No—Leave block 3 below blank and complete line 1, block 4.</li> </ul>   |                  |  |
| Block<br>3  | Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero  | -                |  |
| 5   | Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero  | 5,662.01         |  |
|   | Line 3. Add lines 1 and 2 and enter<br>here \$  | 5,662.01         |  |
| Block<br>4  | Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee<br>from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3,<br>whichever is larger   | 6,426.01         | Cable systems  |
|   | Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7<br>(block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter<br>zero.  | 0.00             | submitting<br>additional<br>deposits under           |
|   | Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)   | 0.00             | Section 111(d)(7)<br>should contact<br>the Licensing |
|   | Line 4. FILING FEE  | 725.00           | additional fees.<br>Division for the<br>appropriate  |
|   | TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.         Add Lines 1, 2 and 3 of block 4 and enter total here         \$  | 7,151.01         | form for<br>submitting the<br>additional fees.       |
|   | Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See page (i) of the general instructions located in the paper SA3 form for more information.)   |                  |  |

| ACCOUNTING PERIO                           | IOD: 2020/2   | FORM SA3E. PAGE 8.                                 |
|--|---|--|
| Name                                       | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>Atlantic Broadband (CT) LLC   | SYSTEM ID#<br>62443                                |
| M<br>Channels                              | CHANNELS         Instructions: You must give (1) the number of channels on which the cable system carried te to its subscribers and (2) the cable system's total number of activated channels, during the act         1. Enter the total number of channels on which the cable system carried television broadcast stations         2. Enter the total number of activated channels on which the cable system carried television broadcast stations         on which the cable system carried television broadcast stations and nonbroadcast services | counting period.                                   |
| N<br>Individual to                         | INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an in we can contact about this statement of account.)   | dividual   |
| Be Contacted<br>for Further<br>Information | Name Patrick Bratton  | Telephone 617-786-8800                             |
|  | Address 2 Batterymarch Park, Suite 205<br>(Number, street, rural route, apartment, or suite number)   |  |
|  | Quincy, MA 02169<br>(City, town, state, zip)  |  |
|  | Email pbratton@atlanticbb.com Fax (o  | ptional)   |
| 0  | CERTIFICATION (This statement of account must be certifed and signed in accordance with Co  | pyright Office regulations.)                       |
| Certifcation                               | • I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)  |  |
|  | (Owner other than corporation or partnership) I am the owner of the cable system as identife  | d in line 1 of space B; or                         |
|  | (Agent of owner other than corporation or partnership) I am the duly authorized agent of the in line 1 of space B and that the owner is not a corporation or partnership; or  | owner of the cable system as identified            |
|  | (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal er in line 1 of space B.   | ntity identifed as owner of the cable system       |
|  | <ul> <li>I have examined the statement of account and hereby declare under penalty of law that all statement<br/>are true, complete, and correct to the best of my knowledge, information, and belief, and are made<br/>[18 U.S.C., Section 1001(1986)]</li> </ul>  |  |
|  | X /s/ Patrick Bratton   |  |
|  | Enter an electronic signature on the line above using an "/s/" signature to certify (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature button, then type /s/ and your name. Pressing the "F" button will avoid enabling   | e, place your cursor in the box and press the "F2" |
|  | Typed or printed name: Patrick Bratton  |  |
|  | Title: Chief Financial Officer<br>(Title of official position held in corporation or partnership)   |  |
|  | Date: March 1, 2021      E: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally in   |  |

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.

| paper SA3 cm.       Exclusion         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?       Exclusion         Image       Image       Image         VES. Enter the total here and list the satellite carrier(s) below.       S         Name       Maing Address       Image         Maing Address       Maing Address       Image         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.       Imterest assessment         Line 1 Enter the amount of late payment or underpayment .  | LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#Atlantic Broadband (CT) LLC62443   | Name   |
|---|--|--|
| Mailing Address       Mailing Address       Image: Complete the second s | <ul> <li>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:</li> <li>"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."</li> <li>For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.</li> <li>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?</li> <li>X NO</li> </ul> | Special<br>Statement<br>Concerning<br>Gross Receipts |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments for the sum here is a sessent or complete this worksheet for those royalty payment and on line 3, block 4, space L, (page 7).       Image: Complete this work for the line set for those royalty for the sessent for one day late.       Image: Complete the line set for the comprised for the line set for the line set for the comprised for the comprised for the set for the comprised for the original filling.       Image: Complete the original set for those royalty submitted to the Copyright Office, please list below the owner, address, first community served, accounting period, and ID number as given in the original filling.       Image: Complete the original set for those royalty submitted to the Copyright office, please list below the owner, a  |  | -  |
| For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.       Interest         Line 1       Enter the amount of late payment or underpayment  | INTEREST ASSESSMENTS   |  |
| Line 1       Enter the aniount of rate payment of underpayment       x  |  | Q  |
| Line 2 Multiply line 1 by the interest rate* and enter the sum here   | Line 1 Enter the amount of late payment or underpayment  |  |
| space L, (page 7)   | x days Line 3 Multiply line 2 by the number of days late and enter the sum here  |  |
| (interest charge) * To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf</i> . 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   |  |  |
| ID number   | (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  |  |

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

# 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.

tems 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, noncommercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24, 1981.

4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.

5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

NOTE: If your cable system carried a station that you believe qualifies as a permitted station but does not fall into one of the above categories, please attach written documentation to the statement of account detailing the basis for its classification.

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

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

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

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

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

### DSE SCHEDULE. PAGE 11.

### COMPUTING THE BASE RATE FEE-PART 8 OF THE DSE SCHEDULE

Determine whether any of the stations you carried were partially distantthat 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 schedule.

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

**Distant Stations Carried** 

STATION

A (independent)

B (independent)

C (part-time)

D (part-time)

E (network)

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

6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.

7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

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

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

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

## EXAMPLE:

DSE

1.0

1.0

0.083

0.139

0.25

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

Santa Rosa

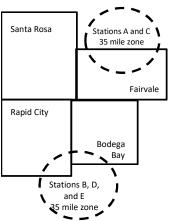
Bodega Bay

Rapid City

Fairvale

CITY

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.



| TOTAL DSEs                   | TAL DSEs         2.472         TOTAL GROSS RECEIPTS |                                       |              |                             |              |
|------------------------------|---|---------------------------------------|--------------|-----------------------------|--------------|
| Minimum Fee Total Gross R    | Receipts  | \$600,000.00<br><u>x</u> .01064       |              |                             |              |
| First Subscriber Group       |   | \$6,384.00<br>Second Subscriber Group |              | Third Subscriber Group      |              |
| (Santa Rosa)                 |   | (Rapid City and Bodega Bay)           |              | (Fairvale)                  |              |
| Gross receipts               | \$310,000.00  | Gross receipts                        | \$170,000.00 | Gross receipts              | \$120,000.00 |
| DSEs                         | 2.472   | DSEs                                  | 1.083        | DSEs                        | 1.389        |
| Base rate fee                | \$6,497.20  | Base rate fee                         | \$1,907.71   | Base rate fee               | \$1,604.03   |
| \$310,000 x .01064 x 1.0 =   | 3,298.40  | \$170,000 x .01064 x 1.0 =            | 1,808.80     | \$120,000 x .01064 x 1.0 =  | 1,276.80     |
| \$310,000 x .00701 x 1.472 = | 3,198.80  | \$170,000 x .00701 x .083 =           | 98.91        | \$120,000 x .00701 x .389 = | 327.23       |
| Base rate fee                | \$6,497.20  | Base rate fee                         | \$1,907.71   | Base rate fee               | \$1,604.03   |

Identification of Subscriber Groups

OUTSIDE LOCAL

Stations A and C

Stations A and C

SERVICE AREA OF

Stations A, B, C, D ,E

Stations B, D, and E

GROSS RECEIPTS

\$310,000.00

100.000.00

70.000.00

120,000.00

FROM SUBSCRIBERS

## DSE SCHEDULE. PAGE 11. (CONTINUED)

| 4                          | LEGAL NAME OF OWNER OF CABLE SYSTEM: SYST   |       |  |  |  |       |
|----------------------------|---|-------|--|--|--|-------|
| 1                          | Atlantic Broadband (CT) LLC 624   |       |  |  |  | 62443 |
|                            | SUM OF DSEs OF CATEGORY "O" STATIONS:         • Add the DSEs of each station.         Enter the sum here and in line 1 of part 5 of this schedule.         0.25     |       |  |  |  |       |
| 2                          | Instructions:<br>In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5                             |       |  |  |  |       |
|                            | of space G (page 3).  |       |  |  |  |       |
| Computation<br>of DSEs for | In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-<br>mercial educational station, give the DSE as ".25." |       |  |  |  |       |
| Category "O"               | CATEGORY "O" STATIONS: DSEs   |       |  |  |  |       |
| Stations                   | CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE   |       |  |  |  |       |
|                            | WGNA  | 0.250 |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
| Add rows as                |   |       |  |  |  |       |
| necessary.                 |   |       |  |  |  |       |
| Remember to copy all       |   |       |  |  |  |       |
| formula into new           |   |       |  |  |  |       |
| rows.                      |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |
|                            |   |       |  |  |  |       |

|  | LEGAL NAME OF   | OWNER OF CABLE SYSTEM:   |   |  |   |  |  | DSE SCHEDU                                      | SYSTEM ID# |  |
|--|---|--|---|--|---|--|--|---|------------|--|
| Name   | Atlantic Bro  | adband (CT) LLC  |   |  |   |  |  | -   | 62443      |  |
| <b>3</b><br>Computation<br>of DSEs for<br>Stations<br>Carried Part<br>Time Due to<br>Lack of<br>Activated<br>Channel | Column 2<br>figure should<br>Column 2<br>be carried out<br>Column 4<br>give the type-<br>Column 6                   | <ul> <li>CAPACITY</li> <li>ist the call sign of all distar</li> <li>2: For each station, give th correspond with the inform</li> <li>3: For each station, give th</li> <li>4: Divide the figure in coluit tat least to the third decim</li> <li>5: For each independent sizvalue as ".25."</li> <li>6: Multiply the figure in coluit point. This is the station's</li> </ul>   | e number of hours<br>nation given in space<br>e total number of h<br>nn 2 by the figure in<br>al point. This is the<br>tation, give the "typ<br>umn 4 by the figure | your cable system<br>the J. Calculate only<br>ours that the station<br>in column 3, and giv<br>"basis of carriage<br>e-value" as "1.0." F<br>in column 5, and g  | carried the station<br>one DSE for each<br>n broadcast over t<br>e the result in dec<br>value" for the stati<br>or each network o | during the acc<br>a station.<br>the air during the<br>simals in colum<br>on.<br>or noncommerco | ne accounting<br>in 4. This figu<br>ial education<br>d to no less th | g period.<br>Ire must<br>al station,<br>nan the |            |  |
| Capacity   |   |  | CATEGORY LA   | C STATIONS:  | COMPUTATIO  | ON OF DSE  | s  |   |            |  |
|  | 1. CALL<br>SIGN   | 2. NUMBE<br>OF HOL<br>CARRIE<br>SYSTEM   | IRS 0<br>D BY 9   | NUMBER<br>DF HOURS<br>STATION<br>DN AIR  | 4. BASIS OF<br>CARRIAGI<br>VALUE  |  | 5. TYPE<br>VALUE   | 6. DS   | E          |  |
|  |   |  | ÷<br>÷  |  |   | x  |  | =   |            |  |
|  |   |  | ÷   |  |   |  |  |   |            |  |
|  |   |  | ÷   |  |   | x  |  | =   |            |  |
|  |   |  | ÷<br>÷  |  |   | x<br>x   |  | =   |            |  |
|  |   |  | ÷   |  | =   | x  |  | =   |            |  |
|  |   |  | ÷   |  | -   | x  |  | =   |            |  |
|  | Add the DSEs  | s OF CATEGORY LAC ST<br>of each station.<br>um here and in line 2 of pa  |   | 9,   |   |  | 0.00   |   |            |  |
| <b>4</b><br>Computation<br>of DSEs for<br>Substitute-<br>Basis Stations  | Was carried<br>tions in effe<br>Broadcast of<br>space I).<br>Column 2:<br>at your option.<br>Column 3:<br>Column 4: | ve the call sign of each sta<br>d by your system in substit<br>ect on October 19, 1976 (a<br>one or more live, nonnetwo<br>For each station give the i<br>This figure should corres<br>Enter the number of days<br>Divide the figure in column<br>This is the station's DSE (  | ution for a program<br>s shown by the lett<br>rk programs during<br>number of live, noni<br>bond with the inform<br>in the calendar yea<br>n 2 by the figure in o   | that your system w<br>er "P" in column 7 of<br>that optional carriag<br>network programs of<br>nation in space I.<br>r: 365, except in a l<br>column 3, and give | vas permitted to de<br>of space I); and<br>e (as shown by the<br>carried in substitut<br>leap year.<br>the result in colun        | elete under FC<br>word "Yes" in c<br>ion for program   | C rules and i<br>column 2 of<br>ns that were<br>no less than         | deleted<br>the third                            |            |  |
|  |   |  |   | SIS STATION  | 1   |  |  |   | 1          |  |
|  | 1. CALL<br>SIGN   | 2. NUMBER<br>OF<br>PROGRAMS  | 3. NUMBER<br>OF DAYS<br>IN YEAR   | 4. DSE   | 1. CALL<br>SIGN   | 2. NUMB<br>OF<br>PROG  | ER<br>RAMS   | 3. NUMBER<br>OF DAYS<br>IN YEAR                 | 4. DSE     |  |
|  |   |  |   | =  |   |  | ÷  |   | =          |  |
|  |   |  |   | =  |   |  | +<br>+   |   | =          |  |
|  |   |  |   | =  |   |  | ÷  |   | =          |  |
|  |   |  |   | =  |   |  | +  |   | =          |  |
|  | Add the DSEs  | ÷       =       ÷       =         SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS:  |   |  |   |  |  |   |            |  |
| 5  |   | ER OF DSEs: Give the american set of the set |   | s in parts 2, 3, and 4   | 4 of this schedule a  | and add them to  | o provide the  | total   |            |  |
| Total Number   | 1. Number   | of DSEs from part 2●   |   |  |   | •  |  | 0.25  |            |  |
| of DSEs  |   | of DSEs from part 3●   |   |  |   | -  |  | 0.00  |            |  |
|  | 3. Number   | r of DSEs from part 4 ●  |   |  | <b>)</b>  | >  |  | 0.00  |            |  |
|  |   |  |   |  |   |  | Г  |   | ]          |  |
|  | TOTAL NUMBE   | ER OF DSEs   |   |  |   |  | ►  |   | 0.25       |  |

| LEGAL NAME OF C   | WNER OF CABLE S   | SYSTEM:                       |                                      |  |                  |                 | S                     | YSTEM ID#       |  |
|---|---|-------------------------------|--------------------------------------|--|------------------|-----------------|-----------------------|-----------------|--|
| Atlantic Broad  | lband (CT) LLC  | ;                             |                                      |  |                  |                 |                       | 62443           | Name   |
| In block A:<br>• If your answer if<br>schedule.   | ck A must be comp<br>"Yes," leave the rer<br>"No," complete bloo              | mainder of pa                 |                                      | of the DSE schedu  | ule blank and o  | complete part ( | 8, (page 16) of the   |                 | 6  |
| n your unowor n   |   |                               |                                      | TELEVISION M   | ARKETS           |                 |                       |                 | Computation o                                    |
| effect on June 24,  | n located wholly ou<br>1981?<br>plete part 8 of the s<br>plete blocks B and ( | schedule—D                    |                                      |  |                  |                 | C rules and regula    | tions in        | 3.75 Fee   |
|   |   | BLO                           | CK B: CARR                           | RIAGE OF PERM  | <b>MITTED DS</b> | Es              |                       |                 |  |
| Column 1:<br>CALL SIGN  | FCC rules and re  | gulations pric<br>e DSE Scheo | or to June 25, 1<br>Jule. (Note: The | part 2, 3, and 4 of th<br>981. For further ex<br>e letter M below ref<br>Act of 2010.) | planation of p   | ermitted statio | ns, see the           |                 |  |
| Column 2:       Enter the appropriate letter indicating the basis on which you carried a permitted station.         BASIS OF       (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)         PERMITTED       A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)]         B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1)         C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)]         D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule).         E Carried pursuant to individual waiver of FCC rules (76.7)         *F A station previously carried on a part-time or substitute basis prior to June 25, 1981         G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)]         M Retransmission of a distant multicast stream. |   |                               |                                      |  |                  |                 |                       |                 |  |
| Column 3:   |   | e stations ider               | ntified by the le                    | parts 2, 3, and 4 of<br>tter "F" in column 2   |                  |                 | rksheet on page 14    | l of            |  |
| 1. CALL<br>SIGN   | 2. PERMITTED<br>BASIS   | 3. DSE                        | 1. CALL<br>SIGN                      | 2. PERMITTED<br>BASIS  | 3. DSE           | 1. CALL<br>SIGN | 2. PERMITTED<br>BASIS | 3. DSE          |  |
|   |   |                               |                                      |  |                  |                 |                       |                 |  |
|   |   |                               |                                      |  |                  |                 |                       |                 |  |
|   |   |                               |                                      |  |                  |                 |                       |                 |  |
|   |   |                               |                                      |  |                  |                 |                       |                 |  |
|   |   |                               | 1                                    | 1  | <u> </u>         | 1               |                       | 0.00            | •  |
|   |   | E                             | BLOCK C: CC                          | MPUTATION OF   | - 3.75 FEE       |                 |                       |                 |  |
| Line 1: Enter the   | e total number of l   | DSEs from p                   | part 5 of this s                     | schedule   |                  |                 |                       | 0.25            |  |
| _ine 2: Enter the   | sum of permittee  | d DSEs from                   | n block B abo                        | ve   |                  |                 |                       | -               |  |
|   | line 2 from line 1<br>eave lines 4–7 bl                                       |                               |                                      |  |                  | ate.            |                       | 0.25            |  |
| Line 4: Enter gro   | oss receipts from   | space K (pa                   | ige 7)                               |  |                  |                 | \$ 60<br>× 0.03       | <b>3,948.05</b> | Do any of the<br>DSEs represen<br>partially      |
| Line 5: Multiply I  | ine 4 by 0.0375 a   | ind enter su                  | m here                               |  |                  |                 | \$2<br>×              | 2,648.05        | permited/<br>partially<br>nonpermitted           |
| Line 6: Enter tot   | al number of DSE  | Es from line                  | 3                                    |  |                  |                 |                       | 0.25            | carriage?<br>If yes, see part<br>9 instructions. |
| Line 7: Multiply I  | ine 6 by line 5 an  | d enter here                  | e and on line :                      | 2, block 3, space  | L (page 7)       |                 | \$                    | 5,662.01        |  |

DSE SCHEDULE. PAGE 13.

|         | OWNER OF CABLE :<br>adband (CT) LLC |        |                 |               |        |                 | S                     | YSTEM ID#<br>62443 | Name                      |
|---------|-------------------------------------|--------|-----------------|---------------|--------|-----------------|-----------------------|--------------------|---------------------------|
| 1. CALL | 2. PERMITTED                        |        | 11              | VISION MARKET |        | UED)<br>1. CALL | 2. PERMITTED          | 3. DSE             | 6                         |
| SIGN    | BASIS                               | 3. DSE | 1. CALL<br>SIGN | BASIS         | 3. DSE | SIGN            | 2. PERMITTED<br>BASIS | 3. DSE             | _                         |
|         |                                     |        |                 |               |        |                 |                       |                    | Computation o<br>3.75 Fee |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |
|         |                                     |        |                 |               |        |                 |                       |                    |                           |

Γ

|   |  |  |                   |  |                   |                        | DSE SCHEDULE. PAGE 14. |  |  |  |  |
|---|--|--|-------------------|--|-------------------|------------------------|------------------------|--|--|--|--|
| Name  |  | ER OF CABLE SYSTEM:                                  |                   |  |                   |                        | SYSTEM ID#             |  |  |  |  |
| Name  | Atlantic Broadb  | and (CT) LLC   |                   |  |                   |                        | 62443                  |  |  |  |  |
| Worksheet for<br>Computating<br>the DSE<br>Schedule for<br>Permitted<br>Part-Time and<br>Substitute<br>Carriage | <ul> <li>Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.)</li> <li>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.</li> <li>Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981.</li> <li>Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1).</li> <li>Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters:         <ul> <li>(Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)</li> <li>A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)).</li> <li>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)).</li> </ul> </li> <li>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.</li> <li>Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule.</li> <li>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.</li> <li>IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verifcation from the designated statement of account on fle in the Licensing Division.</li> </ul> |  |                   |  |                   |                        |                        |  |  |  |  |
|   | PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS   |  |                   |  |                   |                        |                        |  |  |  |  |
|   | 1. CALL  | 2. PRIOR   | 3. ACCOU          |  | 4. BASIS OF       | 5. PRESENT             | 6. PERMITTED           |  |  |  |  |
|   | SIGN   | DSE  | PERIC             | D  | CARRIAGE          | DSE                    | DSE                    |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
| 7<br>Computation<br>of the  | Instructions: Block A must be completed.<br>In block A:<br>If your answer is "Yes," complete blocks B and C, below.<br>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<br>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?     Yes—Complete blocks B and C .     No—Proceed to part 8  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  | arriage of \/HE/Grade [                              | R Contour Stati   | one  |                   | (C: Computation of Eva | umpt DSEs              |  |  |  |  |
|   | 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 commercial VHF station that places a grade B contour, in whole or in part, over the cable system?       Was any station listed in block B of part 7 carried in any community served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159)  |  |                   |  |                   |                        |                        |  |  |  |  |
|   | Yes—List each sta  | ation below with its approp<br>nd proceed to part 8. | Yes—List each sta | ation below with its appropri<br>ad proceed to part 8. | ate permitted DSE |                        |                        |  |  |  |  |
|   | CALL SIGN  | DSE CAL  | L SIGN            | DSE  | CALL SIGN         | DSE CALL S             | SIGN DSE               |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  |  |                   |  |                   |                        |                        |  |  |  |  |
|   |  | тот  | AL DSEs           | 0.00   | ·                 | TOTAL                  | DSEs 0.00              |  |  |  |  |

| LEGAL NA      | ME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Atlantic Broadband (CT) LLC 62443  | Name                      |
|---------------|--|---------------------------|
|               | BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE   |                           |
| Section<br>1  | Enter the amount of gross receipts from space K (page 7)   | 7                         |
| Section<br>2  | A. Enter the total DSEs from block B of part 7   | Computation<br>of the     |
|               | B. Enter the total number of exempt DSEs from block C of part 7  | Syndicated<br>Exclusivity |
|               | C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8   | Surcharge                 |
| • Is any      | y portion of the cable system within a top 50 television market as defined by the FCC?           Yes—Complete section 3 below.         X   |                           |
|               | SECTION 3: TOP 50 TELEVISION MARKET  | -                         |
| Section<br>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.<br>Enter here and on line 2 of block 4 in space L (page 7)<br>Syndicated Exclusivity Surcharge   |                           |
| Section       | If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.   |                           |
| 3b            |  |                           |
|               | 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.<br>Enter here and on line 2 of block 4 in space L (page 7)<br>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<br>4a | X       Yes—Complete part 9 of this schedule.  |                           |
|               | 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.<br>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)<br>and enter here  |                           |
|               | D. Multiply line B by line C and enter here  |                           |
|               | E. Add lines A and D. This is your surcharge.<br>Enter here and on line 2 of block 4 in space L (page 7)<br>Syndicated Exclusivity Surcharge   |                           |

| Name  |   | DSE SCHEI<br>ME OF OWNER OF CABLE SYSTEM:<br>Atlantic Broadband (CT) LLC  | SYSTEM ID#<br>62443 |  |  |  |  |  |
|---|---|---|---------------------|--|--|--|--|--|
| <b>7</b><br>Computation<br>of the<br>Syndicated<br>Exclusivity<br>Surcharge | Section<br>4b   | If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.  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. Multiply line B by 3.000 and enter here.  C. Multiply line B by 3.000 and enter here.  D. Enter 0.00089 of gross receipts (the amount in section 1).  \$ 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.  S 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.  C. Multiply S |                     |  |  |  |  |  |
| <b>8</b><br>Computation<br>of<br>Base Rate Fee                              | You m<br>6 was<br>• In blo<br>• If you<br>• If you<br>blank<br>What i<br>were k   | ctions:<br>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<br>checked "Yes," use the total number of DSEs from part 5.<br>bck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.<br>ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.<br>ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below<br>to<br>is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers<br>bocated within that station's local service area and others were located outside that area. For the definition of a station's "local<br>e area," see page (v) of the general instructions.   |                     |  |  |  |  |  |
|   | BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS         • Did your cable system retransmit the signals of any partially distant television stations during the accounting period?         Image: Ima |   |                     |  |  |  |  |  |
|   | 1<br>Section<br>2<br>Section<br>3   | Enter the amount of gross receipts from space K (page 7)  |                     |  |  |  |  |  |

L

#### DSE SCHEDULE. PAGE 17.

|                           | AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#<br>tic Broadband (CT) LLC 62443   | Name   |
|---------------------------|--|--|
| Allan                     |  |  |
| Section                   | If the figure in section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.  |  |
| 4                         | A. Enter 0.01064 of gross receipts (the amount in section 1) ▶\$   | 8  |
|                           | B. Enter 0.00701 of gross receipts<br>(the amount in section 1) ▶ \$   | Computation<br>of<br>Base Rate Fee                   |
|                           | C. Multiply line B by 3.000 and enter here <b>▶</b>  | Dase Nale 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.<br>Enter here and in block 3, line 1, space L (page 7)<br>Base Rate Fee \$\$0.00   |  |
|                           |  |  |
|                           | <b>TANT:</b> It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in G.  | 9  |
|                           | eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this  | Computation<br>of                                    |
|                           | on, you must:  | Base Rate Fee  |
| station<br>DSEs a         | Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same<br>or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of<br>and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.<br>: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system. | and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for |
| also co                   | If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must<br>mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However,<br>cable system is wholly located outside all major television markets, complete block A only.  | Partially<br>Distant<br>Stations, and                |
| Step 1                    | • Identify a Subscriber Group for Partially Distant Stations<br>: For each community served, determine the local service area of each wholly distant and each partially distant station you<br>to that community.  | for Partially<br>Permitted<br>Stations               |
| outside                   | : For each wholly distant and each partially distant station you carried, determine which of your subscribers were located<br>the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by<br>ne token, the station is distant to the subscriber.)   |  |
| subscri                   | Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.   |  |
| Compu<br>groups           | uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber  |  |
| • ·                       | section:   |  |
| • Give                    | fy the communities/areas represented by each subscriber group.<br>he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the<br>bers in the group.   |  |
| , .                       | system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, and schedule; or,   |  |
| 2) any                    | portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B,<br>6 of this schedule.  |  |
| •                         | ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.   |  |
|                           | late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions paper SA3 form.   |  |
| • Comp<br>page.<br>DSEs f | In making this computation, use the DSE and gross receipts figure applicable to the part 8 of this schedule on the preceding or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your calculations on the form.   |  |

| Name   | LEGAL NAME OF OWNER OF CABLE SYSTEM: SYS  | STEM II |
|--------|---|---------|
|        | Atlantic Broadband (CT) LLC   | 6244    |
|        | 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  |         |
|        | <ul> <li>.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.</li> <li>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.</li> <li>Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams</li> </ul> |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        | 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.  |         |
| entere | You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement  |         |
|        | entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary  |         |
|        | transmitter or an association representing the primary transmitter.   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |
|        |   |         |

| / |  |
|---|--|
|   |  |
|   |  |
|   |  |

| LEGAL NAME OF OWNE<br>Atlantic Broadban          |                                   |  |               |                        |                             | 5                | 62443 | Name             |  |
|--|-----------------------------------|--|---------------|------------------------|-----------------------------|------------------|-------|------------------|--|
|  | BLOCK A:                          | COMPUTATION O                                    | F BASE RA     | TE FEES FOR EAC        | CH SUBSCR                   | IBER GROUP       |       |                  |  |
|  |                                   | SUBSCRIBER GROU                                  | JP            |                        | UP                          | 9                |       |                  |  |
| COMMUNITY/ AREA                                  | Groton                            |  |               | COMMUNITY/ ARE         |                             | Computation      |       |                  |  |
| CALL SIGN  | DSE                               | CALL SIGN  | DSE           | CALL SIGN              | CALL SIGN DSE CALL SIGN DSE |                  |       |                  |  |
|  |                                   |  |               |                        |                             |                  |       | Base Rate Fee    |  |
|  |                                   |  |               |                        |                             |                  |       | and              |  |
|  |                                   |  |               |                        |                             |                  |       | Syndicated       |  |
|  |                                   |  |               |                        |                             |                  |       | Exclusivity      |  |
|  |                                   |  |               |                        |                             |                  |       | Surcharge<br>for |  |
|  |                                   |  |               |                        |                             |                  |       | Partially        |  |
|  |                                   |  |               |                        |                             |                  |       | Distant          |  |
|  |                                   |  |               |                        |                             |                  |       | Stations         |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
| Total DSEs                                       |                                   |  | 0.00          | Total DSEs             |                             |                  | 0.00  |                  |  |
| Gross Receipts First G                           | roup                              | \$ 60  | 3,948.05      | Gross Receipts Sec     | ond Group                   | \$               | 0.00  |                  |  |
| Base Rate Fee First G                            | roup                              | \$   | 0.00          | Base Rate Fee Sec      | ond Group                   | \$               | 0.00  |                  |  |
|  |                                   | SUBSCRIBER GROU                                  |               |                        |                             |                  | •     |                  |  |
| COMMUNITY/ AREA                                  | THILD                             | CODOCINIDEN CINC                                 | 0             | COMMUNITY/ ARE         |                             | T OODOORIDER ORO | 0     |                  |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
| CALL SIGN  | DSE                               | CALL SIGN  | DSE           | CALL SIGN              | DSE                         | CALL SIGN        | DSE   |                  |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
|  |                                   |  |               |                        |                             |                  |       |                  |  |
| Total DSEs                                       | - <b>I</b>                        | ······   | 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<br>Enter here and in block | e <b>base rat</b><br>3, line 1, s | <b>e fees</b> for each subscr<br>pace L (page 7) | iber group as | s shown in the boxes a | above.                      | \$               | 0.00  |                  |  |

| FORM SA3E. PA | ١GE | 19. |
|---------------|-----|-----|
|---------------|-----|-----|

| LEGAL NAME OF OWNER                            |                                     |   |               |                          |         | SI                            | STEM ID# | Name                      |
|--|-------------------------------------|---|---------------|--------------------------|---------|-------------------------------|----------|---------------------------|
| Atlantic Broadband                             | d (CT) LL                           | .C  |               |                          |         |                               | 62443    | Name                      |
| В  |                                     |   |               | TE FEES FOR EACH         |         | BER GROUP<br>SUBSCRIBER GROUI |          |                           |
| COMMUNITY/ AREA                                | FIFTH                               | SUBSCRIBER GROU                                   | P<br>0        | COMMUNITY/ AREA          | 0       | 9<br>Computation              |          |                           |
| CALL SIGN                                      | DSE                                 | CALL SIGN   | CALL SIGN DSE | CALL SIGN                | DSE     | CALL SIGN                     | DSE      | Computation<br>of         |
|  |                                     |   |               |                          |         |                               |          | Base Rate Fee             |
|  |                                     |   |               |                          |         |                               |          | and                       |
|  |                                     |   |               |                          |         |                               |          | Syndicated<br>Exclusivity |
|  |                                     |   |               |                          |         |                               |          | Surcharge                 |
|  |                                     |   |               |                          |         |                               |          | for                       |
|  |                                     |   |               |                          |         |                               |          | Partially<br>Distant      |
|  |                                     |   |               |                          |         |                               |          | Stations                  |
|  |                                     |   |               |                          |         |                               |          |                           |
|  |                                     |   |               |                          |         |                               |          |                           |
|  |                                     |   |               |                          |         |                               |          |                           |
|  |                                     |   |               |                          |         |                               |          |                           |
|  |                                     |   |               |                          |         |                               |          |                           |
| Total DSEs                                     |                                     |   | 0.00          | Total DSEs               |         |                               | 0.00     |                           |
| Gross Receipts First Gro                       | oup                                 | \$  | 0.00          | Gross Receipts Second    | d Group | \$                            | 0.00     |                           |
| Base Rate Fee First Gro                        | oup                                 | \$  | 0.00          | Base Rate Fee Second     | d Group | \$                            | 0.00     |                           |
| 5  | SEVENTH                             | SUBSCRIBER GROU                                   | Р             |                          | EIGHTH  | SUBSCRIBER GROUP              | 2        |                           |
| 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 G                         | roup                                | \$  | 0.00          | Gross Receipts Fourth    | Group   | \$                            | 0.00     |                           |
| Base Rate Fee Third G                          | roup                                | \$  | 0.00          | Base Rate Fee Fourth     | Group   | \$                            | 0.00     |                           |
| Base Rate Fee: Add the Enter here and in block | e <b>base rate</b><br>3, line 1, sp | e <b>fees</b> for each subscri<br>pace L (page 7) | ber group a   | s shown in the boxes abo | ove.    | \$                            |          |                           |

| FORM SA3E. PAG |
|----------------|
|----------------|

| LEGAL NAME OF OWNER                                      |        |                 |             |                          |         | SY          | STEM ID#<br>62443 | Name              |
|--|--------|-----------------|-------------|--------------------------|---------|-------------|-------------------|-------------------|
| В  |        |                 |             | TE FEES FOR EACH         | SUBSCRI | BER GROUP   |                   |                   |
|  | NINTH  | SUBSCRIBER GROU |             | TENTH SUBSCRIBER GROUP   |         |             |                   | 9                 |
| COMMUNITY/ AREA  |        |                 | 0           | COMMUNITY/ AREA          | 0       | Computation |                   |                   |
| CALL SIGN  | DSE    | CALL SIGN       | DSE         | CALL SIGN                | DSE     | CALL SIGN   | DSE               | of                |
|  |        |                 |             |                          |         |             |                   | Base Rate Fee     |
|  |        |                 |             |                          |         |             |                   | and<br>Syndicated |
|  |        |                 |             |                          |         |             |                   | Exclusivity       |
|  |        |                 |             |                          |         |             |                   | Surcharge         |
|  |        |                 |             |                          |         |             |                   | for<br>Partially  |
|  |        |                 |             |                          |         |             |                   | Distant           |
|  |        |                 |             |                          |         |             |                   | Stations          |
|  |        |                 |             |                          |         |             |                   |                   |
|  |        |                 |             |                          |         |             |                   |                   |
|  |        |                 |             |                          |         |             |                   |                   |
|  |        |                 |             |                          |         |             |                   |                   |
| Total DSEs   |        |                 | 0.00        | Total DSEs               |         |             | 0.00              |                   |
| Gross Receipts First Gro                                 | aun    | <u> </u>        | 0.00        | Gross Receipts Second    | Group   | \$          | 0.00              |                   |
|  | oup    |                 |             |                          |         | ÷           |                   |                   |
| Base Rate Fee First Gro                                  |        | \$              | 0.00        | Base Rate Fee Second     |         | \$          | 0.00              |                   |
|  | EVENTH | SUBSCRIBER GROU |             | 11                       |         |             |                   |                   |
| 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 G                                   | roup   | \$              | 0.00        | Gross Receipts Fourth    | Group   | \$          | 0.00              |                   |
| Base Rate Fee Third G                                    | roup   | \$              | 0.00        | Base Rate Fee Fourth     | Group   | \$          | 0.00              |                   |
| <b>Base Rate Fee:</b> Add the<br>Enter here and in block |        |                 | ber group a | s shown in the boxes abo | ove.    | \$          |                   |                   |

| LEGAL NAME OF OWNER                              |                                     |   |             |   |         | SY        | STEM ID#<br>62443 | Name                     |
|--|-------------------------------------|---|-------------|---|---------|-----------|-------------------|--------------------------|
| В  | LOCK A: (                           | COMPUTATION OF                                  | BASE RA     | TE FEES FOR EACH  | SUBSCRI | BER GROUP |                   |                          |
| THIF<br>COMMUNITY/ AREA                          | RTEENTH                             | SUBSCRIBER GROU                                 | P<br>0      | FOURTEENTH SUBSCRIBER GROUP       COMMUNITY/ AREA     0 |         |           |                   | 9<br>Computation         |
| CALL SIGN  | DSE                                 | CALL SIGN                                       | DSE         | CALL SIGN   | DSE     | CALL SIGN | DSE               | Computation<br>of        |
|  |                                     |   |             |   |         |           |                   | Base Rate Fee            |
|  |                                     |   |             |   |         |           |                   | and                      |
|  |                                     |   |             |   |         |           |                   | Syndicated               |
|  |                                     |   |             |   |         |           |                   | Exclusivity<br>Surcharge |
|  |                                     |   |             |   |         |           |                   | for                      |
|  |                                     |   |             |   |         |           |                   | Partially                |
|  |                                     |   |             |   |         |           |                   | Distant                  |
|  |                                     |   |             |   |         |           |                   | Stations                 |
|  |                                     |   |             |   |         |           |                   |                          |
|  |                                     |   |             |   |         |           |                   |                          |
|  |                                     |   |             |   |         |           |                   |                          |
|  |                                     |   |             |   |         |           |                   |                          |
| Total DSEs                                       | II                                  |   | 0.00        | Total DSEs  |         |           | 0.00              |                          |
| Gross Receipts First Gro                         | oup                                 | \$  | 0.00        | Gross Receipts Second Group \$ 0.00                     |         |           |                   |                          |
|  |                                     |   |             |   |         |           |                   |                          |
| Base Rate Fee First Gro                          |                                     | \$  | 0.00        | Base Rate Fee Second                                    |         | \$        | 0.00              |                          |
|  | TEENTH                              | SUBSCRIBER GROU                                 |             | 11  | _       |           |                   |                          |
| 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 Gr                          | roup                                | \$  | 0.00        | Gross Receipts Fourth                                   | Group   | \$        | 0.00              |                          |
| Base Rate Fee Third Gr                           | oup                                 | \$  | 0.00        | Base Rate Fee Fourth                                    | Group   | \$        | 0.00              |                          |
| Base Rate Fee: Add the Enter here and in block 3 | e <b>base rate</b><br>3, line 1, sp | <b>fees</b> for each subscri<br>bace L (page 7) | ber group a | is shown in the boxes abo                               | ove.    | \$        |                   |                          |

| LEGAL NAME OF OWNER<br>Atlantic Broadbanc        |         |                 |             |                                     |         | S                                     | YSTEM ID#<br>62443 | Name                    |
|--|---------|-----------------|-------------|-------------------------------------|---------|---------------------------------------|--------------------|-------------------------|
| В  | LOCK A: | COMPUTATION OF  | BASE RA     | ATE FEES FOR EACH                   | SUBSCRI | BER GROUP                             |                    |                         |
| SEVEN  | ITEENTH | SUBSCRIBER GROU |             | EIG                                 | Р       | 9                                     |                    |                         |
| COMMUNITY/ AREA                                  |         |                 | 0           | COMMUNITY/ AREA                     |         |                                       | 0                  | <b>J</b><br>Computation |
| CALL SIGN  | DSE     | CALL SIGN       | DSE         | CALL SIGN                           | DSE     | CALL SIGN                             | DSE                | of                      |
|  |         |                 |             |                                     |         |                                       |                    | Base Rate Fee           |
|  |         |                 |             |                                     |         |                                       |                    | and<br>Syndicated       |
|  |         |                 |             |                                     |         |                                       |                    | Exclusivity             |
|  |         |                 |             |                                     |         |                                       |                    | Surcharge               |
|  |         |                 |             |                                     |         |                                       |                    | for                     |
|  |         |                 |             |                                     |         |                                       |                    | Partially               |
|  |         |                 |             |                                     |         |                                       |                    | Distant                 |
|  |         |                 |             |                                     |         |                                       |                    | Stations                |
|  |         |                 |             |                                     |         |                                       |                    |                         |
|  |         |                 |             |                                     |         |                                       |                    |                         |
|  |         |                 |             |                                     |         |                                       |                    |                         |
|  |         |                 |             |                                     |         |                                       |                    |                         |
| Total DSEs                                       |         |                 | 0.00        | Total DSEs                          |         |                                       | 0.00               |                         |
| Gross Receipts First Gro                         | מוור    | <u> </u>        | 0.00        | Gross Receipts Second Group \$ 0.00 |         |                                       |                    |                         |
|  | Sub     | <u>•</u>        |             |                                     | loroup  | · · · · · · · · · · · · · · · · · · · |                    |                         |
| Base Rate Fee First Gro                          |         | \$              | 0.00        | Base Rate Fee Second                |         | \$<br>SUBSCRIBER GROU                 | 0.00               |                         |
|  | ITEENTH | SUBSCRIBER GROU |             | 11                                  |         |                                       |                    |                         |
| 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 Gr                          | oup     | \$              | 0.00        | Gross Receipts Fourth               | Group   | \$                                    | 0.00               |                         |
| Base Rate Fee Third Gr                           | oup     | \$              | 0.00        | Base Rate Fee Fourth                | Group   | \$                                    | 0.00               |                         |
| Base Rate Fee: Add the Enter here and in block 3 |         |                 | ber group a | as shown in the boxes abo           | ove.    | \$                                    |                    |                         |

| FORM SA3E. PAG |
|----------------|
|----------------|

| LEGAL NAME OF OWNER                            |                                     |   |             |                                 |        | S           | YSTEM ID#<br>62443 | Name                     |
|--|-------------------------------------|---|-------------|---------------------------------|--------|-------------|--------------------|--------------------------|
| В  | LOCK A:                             | COMPUTATION OF                                    | BASE RA     | ATE FEES FOR EACH               | SUBSCR | IBER GROUP  |                    |                          |
|  | TY-FIRST                            | SUBSCRIBER GROU                                   |             | TWENT                           |        | 9           |                    |                          |
| COMMUNITY/ AREA                                |                                     |   | 0           | COMMUNITY/ AREA                 | 0      | Computation |                    |                          |
| CALL SIGN                                      | DSE                                 | CALL SIGN   | DSE         | CALL SIGN                       | DSE    | CALL SIGN   | DSE                | of                       |
|  |                                     |   |             |                                 |        |             |                    | Base Rate Fee            |
|  |                                     |   |             |                                 |        |             |                    | and                      |
|  |                                     |   |             |                                 |        |             |                    | Syndicated               |
|  |                                     |   |             |                                 |        |             |                    | Exclusivity<br>Surcharge |
|  |                                     |   |             |                                 |        |             |                    | for                      |
|  |                                     |   |             |                                 |        |             |                    | Partially                |
|  |                                     |   |             |                                 |        |             |                    | Distant                  |
|  |                                     |   |             |                                 |        |             |                    | Stations                 |
|  |                                     |   |             |                                 |        |             |                    |                          |
|  |                                     |   |             |                                 |        |             |                    |                          |
|  |                                     |   |             |                                 |        |             |                    |                          |
|  |                                     |   |             |                                 |        |             |                    |                          |
|  |                                     |   |             |                                 |        |             |                    |                          |
| Total DSEs                                     |                                     |   | 0.00        | Total DSEs                      | 0.00   |             |                    |                          |
| Gross Receipts First Gro                       | oup                                 | \$  | 0.00        | Gross Receipts Second           | Group  | \$          | 0.00               |                          |
| Base Rate Fee First Gro                        | oup                                 | \$  | 0.00        | Base Rate Fee Second            | Group  | \$          | 0.00               |                          |
| TWEN   | TY-THIRD                            | SUBSCRIBER GROU                                   | Р           | TWENT                           |        |             |                    |                          |
| COMMUNITY/ AREA                                |                                     |   | 0           | COMMUNITY/ AREA                 | 0      |             |                    |                          |
| CALL SIGN                                      | DSE                                 | CALL SIGN   | DSE         | CALL SIGN                       | DSE    | CALL SIGN   | DSE                |                          |
|  |                                     |   |             |                                 |        |             |                    |                          |
|  |                                     |   |             |                                 |        |             |                    |                          |
|  |                                     |   |             |                                 |        |             |                    |                          |
|  |                                     |   |             |                                 |        |             |                    |                          |
|  |                                     |   |             |                                 |        |             |                    |                          |
|  |                                     |   |             |                                 |        |             |                    |                          |
|  |                                     |   |             |                                 |        |             |                    |                          |
|  |                                     |   |             |                                 |        |             |                    |                          |
|  | ·                                   |   |             |                                 |        |             |                    |                          |
|  |                                     |   |             |                                 |        |             |                    |                          |
|  |                                     |   |             |                                 |        |             |                    |                          |
| Total DSEs                                     | <b>.</b> I                          |   | 0.00        | Total DSEs                      |        |             | 0.00               |                          |
| Gross Receipts Third G                         | roup                                | \$  | 0.00        | Gross Receipts Fourth           | Group  | \$          | 0.00               |                          |
| Base Rate Fee Third G                          | roup                                | \$  | 0.00        | Base Rate Fee Fourth            | Group  | \$          | 0.00               |                          |
| Base Rate Fee: Add the Enter here and in block | e <b>base rate</b><br>3, line 1, sp | e <b>fees</b> for each subscri<br>bace L (page 7) | ber group a | II<br>as shown in the boxes abo | ve.    | \$          |                    |                          |

| FORM SA3E | . PAGE | 19. |
|-----------|--------|-----|
|-----------|--------|-----|

| LEGAL NAME OF OWNER   |          |                 |        |   |          | SI               | YSTEM ID#<br>62443 | Name                     |
|---|----------|-----------------|--------|---|----------|------------------|--------------------|--------------------------|
|   |          |                 |        | TE FEES FOR EACH  |          |                  |                    |                          |
| TWEN<br>COMMUNITY/ AREA   | TY-FIFTH | SUBSCRIBER GROU | P<br>0 | TWENTY-SIXTH SUBSCRIBER GROUP       COMMUNITY/ AREA         0 |          |                  |                    | 9                        |
| CALL SIGN   | DSE      | CALL SIGN       | DSE    | CALL SIGN   | DSE      | CALL SIGN        | DSE                | Computation<br>of        |
|   | DOL      |                 | DOL    |   | DOL      |                  | DOL                | Base Rate Fee            |
|   |          |                 |        |   |          |                  |                    | and                      |
|   |          |                 |        |   |          |                  |                    | Syndicated               |
|   |          |                 |        |   |          |                  |                    | Exclusivity<br>Surcharge |
|   |          |                 |        |   |          |                  |                    | for                      |
|   |          |                 |        |   |          |                  |                    | Partially                |
|   |          |                 |        |   |          |                  |                    | Distant                  |
|   |          |                 |        |   |          |                  |                    | Stations                 |
|   |          |                 |        |   |          |                  |                    |                          |
|   |          |                 |        |   |          |                  |                    |                          |
|   |          |                 |        |   |          |                  |                    |                          |
|   |          |                 |        |   |          |                  |                    |                          |
| Total DSEs  |          |                 | 0.00   | Total DSEs  |          |                  | 0.00               |                          |
| Gross Receipts First Gro  | oup      | \$              | 0.00   | Gross Receipts Second Group \$ 0.00                           |          |                  |                    |                          |
|   |          |                 |        |   |          |                  |                    |                          |
| Base Rate Fee First Gro   | oup      | \$              | 0.00   | Base Rate Fee Second  | l Group  | \$               | 0.00               |                          |
|   | SEVENTH  | SUBSCRIBER GROU |        |   | Y-EIGHTH | SUBSCRIBER GROUI |                    |                          |
| 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 G  | roup     | \$              | 0.00   | Gross Receipts Fourth   | Group    | \$               | 0.00               |                          |
| Base Rate Fee Third G   | roup     | \$              | 0.00   | Base Rate Fee Fourth  | Group    | \$               | 0.00               |                          |
| Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |          |                 |        |   |          |                  |                    |                          |

| LEGAL NAME OF OWNER<br>Atlantic Broadbanc        |          |                 |             |                                |          | SYS              | STEM ID#<br>62443 | Name                 |
|--|----------|-----------------|-------------|--------------------------------|----------|------------------|-------------------|----------------------|
|  |          |                 |             | TE FEES FOR EACH               |          |                  |                   |                      |
| TWENT<br>COMMUNITY/ AREA                         | Y-NINTH  | SUBSCRIBER GROU | ⊃<br>0      | COMMUNITY/ AREA                | HIRTIETH | SUBSCRIBER GROUP | 0                 | 9                    |
|  |          |                 |             |                                |          |                  |                   | Computation          |
| CALL SIGN  | DSE      | CALL SIGN       | DSE         | CALL SIGN                      | DSE      | CALL SIGN        | DSE               | of                   |
|  |          |                 |             |                                |          |                  |                   | Base Rate Fee<br>and |
|  |          |                 |             |                                |          |                  |                   | Syndicated           |
|  |          |                 |             |                                |          |                  |                   | Exclusivity          |
|  |          |                 |             |                                |          |                  |                   | Surcharge            |
|  |          |                 |             |                                |          |                  |                   | for                  |
|  |          |                 |             |                                |          |                  |                   | Partially<br>Distant |
|  |          |                 |             |                                |          |                  |                   | Stations             |
|  |          |                 |             |                                |          |                  |                   |                      |
|  |          |                 |             |                                |          |                  |                   |                      |
|  |          |                 |             |                                |          |                  |                   |                      |
|  |          |                 |             |                                |          |                  |                   |                      |
|  |          |                 |             |                                |          |                  |                   |                      |
| Total DSEs                                       |          |                 | 0.00        | Total DSEs                     |          |                  | 0.00              |                      |
| Gross Receipts First Gro                         | oup      | \$              | 0.00        | Gross Receipts Second          | Group    | \$               | 0.00              |                      |
| Base Rate Fee First Gro                          | oup      | \$              | 0.00        | Base Rate Fee Second           | Group    | \$               | 0.00              |                      |
| THIR   | TY-FIRST | SUBSCRIBER GROU | Ρ           | THIRTY-SECOND SUBSCRIBER GROUP |          |                  |                   |                      |
| 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 Gr                          | oup      | \$              | 0.00        | Gross Receipts Fourth          | Group    | <u>\$</u>        | 0.00              |                      |
| Base Rate Fee Third Gr                           | oup      | \$              | 0.00        | Base Rate Fee Fourth           | Group    | \$               | 0.00              |                      |
| Base Rate Fee: Add the Enter here and in block 3 |          |                 | per group a | is shown in the boxes abo      | ve.      | \$               |                   |                      |

| FORM SA3E. PAG | iΕ | 19. |
|----------------|----|-----|
|----------------|----|-----|

| LEGAL NAME OF OWNE                               |                                     |   |               |                          |           | S                | 62443 | Name                 |
|--|-------------------------------------|---|---------------|--------------------------|-----------|------------------|-------|----------------------|
|  |                                     |   |               | TE FEES FOR EACH         |           |                  |       |                      |
|  | THIRTY-THIRD SUBSCRIBER GROUP       |   |               | 11                       | Y-FOURTH  | I SUBSCRIBER GRO |       | 9                    |
| COMMUNITY/ AREA                                  |                                     |   | 0             | COMMUNITY/ AREA          |           |                  | 0     | Computation          |
| CALL SIGN  | DSE                                 | CALL SIGN                                       | DSE           | CALL SIGN                | DSE       | CALL SIGN        | DSE   | of                   |
|  |                                     |   |               |                          |           |                  |       | Base Rate Fee        |
|  |                                     |   |               |                          |           |                  |       | and<br>Syndicated    |
|  |                                     |   |               |                          |           |                  |       | Exclusivity          |
|  |                                     |   |               |                          |           |                  |       | Surcharge            |
|  |                                     |   |               |                          |           |                  |       | for                  |
|  |                                     |   |               |                          |           |                  |       | Partially<br>Distant |
|  |                                     |   |               |                          |           |                  |       | Stations             |
|  |                                     |   |               |                          |           |                  |       |                      |
|  |                                     |   |               |                          |           |                  |       |                      |
|  |                                     |   |               |                          |           |                  |       |                      |
|  |                                     |   |               |                          |           |                  |       |                      |
|  |                                     |   |               |                          |           |                  |       |                      |
| Total DSEs                                       |                                     |   | 0.00          | Total DSEs               |           |                  | 0.00  |                      |
| Gross Receipts First Gr                          | oup                                 | \$  | 0.00          | Gross Receipts Secon     | d Group   | \$               | 0.00  |                      |
| Base Rate Fee First Gr                           | oup                                 | \$  | 0.00          | Base Rate Fee Secon      | d Group   | \$               | 0.00  |                      |
| THIR   | TY-FIFTH                            | SUBSCRIBER GRO                                  | JP            | ТНІ                      | RTY-SIXTH | SUBSCRIBER GRO   | JP    |                      |
| COMMUNITY/ AREA                                  |                                     |   | 0             | COMMUNITY/ AREA          |           |                  |       |                      |
| CALL SIGN  | DSE                                 | CALL SIGN                                       | DSE           | CALL SIGN                | DSE       | CALL SIGN        | DSE   |                      |
|  |                                     |   |               |                          |           |                  |       |                      |
|  |                                     |   |               |                          |           |                  |       |                      |
|  |                                     |   |               |                          |           |                  |       |                      |
|  |                                     |   |               |                          |           |                  |       |                      |
|  |                                     |   |               |                          |           |                  |       |                      |
|  |                                     |   |               |                          |           |                  |       |                      |
|  |                                     |   |               |                          |           |                  |       |                      |
|  |                                     |   |               |                          |           |                  |       |                      |
|  |                                     |   |               |                          |           |                  |       |                      |
|  |                                     |   |               |                          |           |                  |       |                      |
|  |                                     |   |               |                          |           |                  |       |                      |
| Total DSEs                                       |                                     |   | 0.00          | Total DSEs               |           |                  | 0.00  |                      |
| Gross Receipts Third G                           | iroup                               | \$  | 0.00          | Gross Receipts Fourth    | Group     | \$               | 0.00  |                      |
| Base Rate Fee Third G                            | roup                                | \$  | 0.00          | Base Rate Fee Fourth     | Group     | \$               | 0.00  |                      |
| Base Rate Fee: Add th<br>Enter here and in block | e <b>base rate</b><br>3, line 1, sj | e <b>fees</b> for each subsc<br>pace L (page 7) | riber group a | is shown in the boxes ab | ove.      | \$               |       |                      |

| FORM SA3E | . PAGE | 19. |
|-----------|--------|-----|
|-----------|--------|-----|

| LEGAL NAME OF OWNER<br>Atlantic Broadband   |         |                 |                 |                           |          | SI               | STEM ID#<br>62443 | Name                     |
|---|---------|-----------------|-----------------|---------------------------|----------|------------------|-------------------|--------------------------|
|   |         |                 |                 | TE FEES FOR EACH          |          |                  |                   |                          |
| THIRTY-SEVENTH SUBSCRIBER GROUP   |         |                 |                 |                           | Y-EIGHTH | SUBSCRIBER GROUP |                   | 9                        |
| COMMUNITY/ AREA 0   |         |                 | COMMUNITY/ AREA |                           |          | 0                | Computation       |                          |
| CALL SIGN DSE CALL SIGN DSE   |         |                 |                 | CALL SIGN                 | DSE      | CALL SIGN        | DSE               | of                       |
|   |         |                 |                 |                           |          |                  |                   | Base Rate Fee            |
|   |         |                 |                 |                           |          |                  |                   | and                      |
|   |         |                 |                 |                           |          |                  |                   | Syndicated               |
|   |         |                 |                 |                           |          |                  |                   | Exclusivity<br>Surcharge |
|   |         |                 |                 |                           |          |                  |                   | for                      |
|   |         |                 |                 |                           |          |                  |                   | Partially                |
|   |         |                 |                 |                           |          |                  |                   | Distant                  |
|   |         |                 |                 |                           |          |                  |                   | Stations                 |
|   |         |                 |                 |                           |          |                  |                   |                          |
|   |         |                 |                 |                           |          |                  |                   |                          |
|   |         |                 |                 |                           |          |                  |                   |                          |
|   |         |                 |                 |                           |          |                  |                   |                          |
|   |         |                 |                 |                           |          |                  |                   |                          |
| Total DSEs  |         |                 | 0.00            | Total DSEs                |          |                  | 0.00              |                          |
| Gross Receipts First Gro  | oup     | \$              | 0.00            | Gross Receipts Second     | Group    | \$               | 0.00              |                          |
| Base Rate Fee First Gro   | oup     | \$              | 0.00            | Base Rate Fee Second      | Group    | \$               | 0.00              |                          |
| THIRT   | Y-NINTH | SUBSCRIBER GROU | Р               | FORTIETH SUBSCRIBER GROUP |          |                  |                   |                          |
| 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 Gr   | oup     | \$              | 0.00            | Gross Receipts Fourth     | Group    | \$               | 0.00              |                          |
| Base Rate Fee Third Gr  | oup     | \$              | 0.00            | Base Rate Fee Fourth      | Group    | \$               | 0.00              |                          |
| Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |         |                 |                 |                           |          |                  |                   |                          |

I

| FORM SA3E. PAG | iΕ | 19. |
|----------------|----|-----|
|----------------|----|-----|

| LEGAL NAME OF OWNER<br>Atlantic Broadbanc   |          |                 |         |                       |          | S               | YSTEM ID#<br>62443 | Name                |
|---|----------|-----------------|---------|-----------------------|----------|-----------------|--------------------|---------------------|
| В   | LOCK A:  | COMPUTATION OF  | BASE RA | TE FEES FOR EACH      |          |                 |                    |                     |
|   | TY-FIRST | SUBSCRIBER GROU |         |                       | Y-SECOND | SUBSCRIBER GROU |                    | 9                   |
| COMMUNITY/ AREA   |          |                 | 0       | COMMUNITY/ AREA       |          |                 | 0                  | •                   |
| CALL SIGN DSE CALL SIGN DSE   |          |                 |         | CALL SIGN             | DSE      | CALL SIGN       | DSE                | Computation<br>of   |
| CALL SIGN   | DSL      |                 | DOL     |                       | DGL      |                 | DOL                | Base Rate Fee       |
|   |          | _               |         |                       |          |                 |                    | and                 |
|   |          |                 |         |                       |          |                 |                    | Syndicated          |
|   |          |                 |         |                       |          |                 |                    | Exclusivity         |
|   |          |                 |         |                       |          |                 |                    | Surcharge           |
|   |          |                 |         |                       |          |                 |                    | for                 |
|   |          |                 |         |                       |          |                 |                    | Partially           |
|   |          |                 |         |                       |          |                 |                    | Distant<br>Stations |
|   |          |                 |         |                       |          |                 | •••••              | otations            |
|   |          |                 |         |                       |          |                 |                    |                     |
|   |          |                 |         |                       |          |                 |                    |                     |
|   |          |                 |         |                       |          |                 |                    |                     |
|   |          |                 |         |                       |          |                 |                    |                     |
|   |          |                 |         |                       |          |                 |                    |                     |
| Total DSEs  |          |                 | 0.00    | Total DSEs            |          |                 | 0.00               |                     |
| Gross Receipts First Gro  | oup      | \$              | 0.00    | Gross Receipts Secon  | d Group  | \$              | 0.00               |                     |
| Base Rate Fee First Gro   | oup      | \$              | 0.00    | Base Rate Fee Secon   | d Group  | \$              | 0.00               |                     |
| FORT  | Y-THIRD  | SUBSCRIBER GROU | Ρ       | FORT                  |          |                 |                    |                     |
| 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 Gr   | oup      | \$              | 0.00    | Gross Receipts Fourth | Group    | \$              | 0.00               |                     |
| Base Rate Fee Third Gr  | oup      | \$              | 0.00    | Base Rate Fee Fourth  | Group    | \$              | 0.00               |                     |
| Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |          |                 |         |                       |          |                 |                    |                     |

I

| FORM | SA3E. | PAGE | 19. |
|------|-------|------|-----|
|------|-------|------|-----|

| LEGAL NAME OF OWNER  |          |                 |      |                               |           | S               | YSTEM ID#<br>62443 | Name                     |
|--|----------|-----------------|------|-------------------------------|-----------|-----------------|--------------------|--------------------------|
|  |          |                 |      | TE FEES FOR EACH              |           |                 |                    |                          |
|  | TY-FIFTH | SUBSCRIBER GROU |      | 11                            | RTY-SIXTH | SUBSCRIBER GROU |                    | 9                        |
| COMMUNITY/ AREA  |          |                 | 0    | COMMUNITY/ AREA               |           |                 | 0                  | Computation              |
| CALL SIGN  | DSE      | CALL SIGN       | DSE  | CALL SIGN                     | DSE       | CALL SIGN       | DSE                | of                       |
|  |          |                 |      |                               |           |                 |                    | Base Rate Fee            |
|  |          |                 |      |                               |           |                 |                    | and                      |
|  |          |                 |      |                               |           |                 |                    | Syndicated               |
|  |          |                 |      |                               |           |                 |                    | Exclusivity<br>Surcharge |
|  |          |                 |      |                               |           |                 |                    | for                      |
|  |          |                 |      |                               |           |                 |                    | Partially                |
|  |          |                 |      |                               |           |                 |                    | Distant                  |
|  |          |                 |      |                               |           |                 |                    | Stations                 |
|  |          |                 |      |                               |           |                 |                    |                          |
|  |          |                 |      |                               |           |                 |                    |                          |
|  |          |                 |      |                               |           |                 |                    |                          |
|  |          |                 |      |                               |           |                 |                    |                          |
|  |          |                 |      |                               |           |                 |                    |                          |
| Total DSEs   |          |                 | 0.00 | Total DSEs                    |           |                 | 0.00               |                          |
| Gross Receipts First Gr  | oup      | \$              | 0.00 | Gross Receipts Second         | l Group   | \$              | 0.00               |                          |
| Base Rate Fee First Group \$ 0.00  |          |                 | 0.00 | Base Rate Fee Second          | I Group   | \$              | 0.00               |                          |
|  | SEVENTH  | SUBSCRIBER GROU |      | FORTY-EIGHTH SUBSCRIBER GROUP |           |                 |                    |                          |
| 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 G   | roup     | \$              | 0.00 | Gross Receipts Fourth         | Group     | \$              | 0.00               |                          |
|  |          |                 |      |                               |           |                 | ]                  |                          |
| Base Rate Fee Third G  | roup     | \$              | 0.00 | Base Rate Fee Fourth          | Group     | \$              | 0.00               |                          |
|  |          |                 |      |                               |           |                 | ,                  |                          |
| Base Rate Fee: Add the 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) |          |                 |      |                               |           |                 |                    |                          |

| LEGAL NAME OF OWNER                               |          |                 |                 |                               |          | S                                     | YSTEM ID#<br>62443      | Name                |
|---|----------|-----------------|-----------------|-------------------------------|----------|---------------------------------------|-------------------------|---------------------|
| В   | LOCK A:  | COMPUTATION OF  | BASE RA         | ATE FEES FOR EACH             | SUBSCRI  | BER GROUP                             |                         |                     |
| FORT  | TY-NINTH | SUBSCRIBER GROU |                 |                               | FIFTIETH | SUBSCRIBER GROU                       | P                       | 9                   |
| COMMUNITY/ AREA 0                                 |          |                 | COMMUNITY/ AREA |                               |          | 0                                     | <b>J</b><br>Computation |                     |
| CALL SIGN   | DSE      | CALL SIGN       | DSE             | CALL SIGN                     | DSE      | CALL SIGN                             | DSE                     | of                  |
|   |          |                 |                 |                               |          |                                       |                         | Base Rate Fee       |
|   |          |                 |                 |                               |          |                                       |                         | and<br>Syndicated   |
|   |          |                 |                 |                               |          |                                       |                         | Exclusivity         |
|   |          |                 |                 |                               |          |                                       |                         | Surcharge           |
|   |          |                 |                 |                               |          |                                       |                         | for                 |
|   |          |                 |                 |                               |          |                                       |                         | Partially           |
|   |          |                 |                 |                               |          |                                       |                         | Distant<br>Stations |
|   |          |                 |                 |                               |          |                                       |                         | Stations            |
|   |          |                 |                 |                               |          |                                       |                         |                     |
|   |          |                 |                 |                               |          |                                       |                         |                     |
|   |          |                 |                 |                               |          |                                       |                         |                     |
|   |          |                 |                 |                               |          |                                       |                         |                     |
| Total DSEs  |          |                 | 0.00            | Total DSEs                    |          |                                       | 0.00                    |                     |
| Gross Receipts First Gro                          | nun      | \$              | 0.00            | Gross Receipts Second         | Group    | \$                                    | 0.00                    |                     |
|   | oup      | <u>•</u>        |                 |                               | loroup   | · · · · · · · · · · · · · · · · · · · |                         |                     |
| Base Rate Fee First Gro                           |          | \$              | 0.00            | Base Rate Fee Second          |          | \$                                    | 0.00                    |                     |
|   | TY-FIRST | SUBSCRIBER GROU |                 | FIFTY-SECOND SUBSCRIBER GROUP |          |                                       |                         |                     |
| 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 Gr                           | roup     | \$              | 0.00            | Gross Receipts Fourth         | Group    | \$                                    | 0.00                    |                     |
| Base Rate Fee Third G                             | roup     | \$              | 0.00            | Base Rate Fee Fourth          | Group    | \$                                    | 0.00                    |                     |
| Base Rate Fee: Add the<br>Enter here and in block |          |                 | ber group a     | as shown in the boxes abo     | ove.     | \$                                    |                         |                     |

| FORM SA3E. PAG | iΕ | 19. |
|----------------|----|-----|
|----------------|----|-----|

| LEGAL NAME OF OWNER<br>Atlantic Broadband        |                                     |   |                      |                           |          | S               | YSTEM ID#<br>62443 | Name                |  |
|--|-------------------------------------|---|----------------------|---------------------------|----------|-----------------|--------------------|---------------------|--|
|  |                                     |   |                      | TE FEES FOR EACH          |          |                 |                    |                     |  |
|  | Y-THIRD                             | SUBSCRIBER GROU                                   |                      |                           | Y-FOURTH | SUBSCRIBER GROU |                    | 9                   |  |
| COMMUNITY/ AREA                                  |                                     |   | 0                    | COMMUNITY/ AREA           |          |                 | 0                  | Computation         |  |
| CALL SIGN  | DSE                                 | CALL SIGN   | DSE                  | CALL SIGN                 |          |                 |                    |                     |  |
| ON LE CICIT                                      | DOL                                 |   |                      |                           | DOL      | ON LE CICIL     | 002                | of<br>Base Rate Fee |  |
|  |                                     |   |                      |                           |          |                 |                    | and                 |  |
|  |                                     |   |                      |                           |          |                 |                    | Syndicated          |  |
|  |                                     |   |                      |                           |          |                 |                    | Exclusivity         |  |
|  |                                     |   |                      |                           |          |                 | •••••              | Surcharge<br>for    |  |
|  |                                     |   |                      |                           |          |                 |                    | Partially           |  |
|  |                                     |   |                      |                           |          |                 |                    | Distant             |  |
|  |                                     |   |                      |                           |          |                 |                    | Stations            |  |
|  |                                     |   |                      |                           |          |                 |                    |                     |  |
|  |                                     |   |                      |                           |          |                 |                    |                     |  |
|  |                                     |   |                      |                           |          |                 |                    |                     |  |
|  |                                     |   |                      |                           |          |                 |                    |                     |  |
|  |                                     |   |                      |                           |          |                 |                    |                     |  |
| Total DSEs                                       |                                     |   | 0.00                 | Total DSEs                |          |                 | 0.00               |                     |  |
| Gross Receipts First Gro                         | oup                                 | \$  | 0.00                 | Gross Receipts Second     | l Group  | \$              | 0.00               |                     |  |
| Base Rate Fee First Group \$ 0.00                |                                     |   | Base Rate Fee Second | l Group                   | \$       | 0.00            |                    |                     |  |
| FIF  | TY-FIFTH                            | SUBSCRIBER GROU                                   | P                    | FII                       | TY-SIXTH | SUBSCRIBER GROU | IP                 |                     |  |
| COMMUNITY/ AREA                                  |                                     |   | 0                    |                           |          |                 | 0                  |                     |  |
| CALL SIGN  | DSE                                 | CALL SIGN   | DSE                  | CALL SIGN                 | DSE      | CALL SIGN       | DSE                |                     |  |
|  |                                     |   |                      |                           |          |                 |                    |                     |  |
|  |                                     |   |                      |                           |          |                 |                    |                     |  |
|  |                                     |   |                      |                           |          |                 |                    |                     |  |
|  |                                     |   |                      |                           |          |                 |                    |                     |  |
|  |                                     |   |                      |                           |          |                 |                    |                     |  |
|  |                                     |   |                      |                           |          |                 |                    |                     |  |
|  |                                     |   |                      |                           |          |                 |                    |                     |  |
|  |                                     |   |                      |                           |          |                 |                    |                     |  |
|  |                                     |   |                      |                           |          |                 |                    |                     |  |
|  |                                     |   |                      |                           |          |                 |                    |                     |  |
|  |                                     |   |                      |                           |          |                 | ····               |                     |  |
|  |                                     |   |                      |                           |          |                 |                    |                     |  |
| Total DSEs                                       | •                                   |   | 0.00                 | Total DSEs                | •        |                 | 0.00               |                     |  |
| Gross Receipts Third Gr                          | oup                                 | \$  | 0.00                 | Gross Receipts Fourth     | Group    | \$              | 0.00               |                     |  |
| Base Rate Fee Third Gr                           | oup                                 | \$  | 0.00                 | Base Rate Fee Fourth      | Group    | \$              | 0.00               |                     |  |
| Base Rate Fee: Add the Enter here and in block 3 | e <b>base rate</b><br>3, line 1, sp | e <b>fees</b> for each subscri<br>bace L (page 7) | ber group a          | as shown in the boxes abo | ove.     | \$              |                    |                     |  |

I

| FORM | SA3E. | PAGE | 19. |
|------|-------|------|-----|
|------|-------|------|-----|

| LEGAL NAME OF OWNER  |          |                 |      |                             |          | S               | YSTEM ID#<br>62443 | Name                     |
|--|----------|-----------------|------|-----------------------------|----------|-----------------|--------------------|--------------------------|
|  |          |                 |      | TE FEES FOR EACH            |          |                 |                    |                          |
|  | SEVENTH  | SUBSCRIBER GROU |      | 11                          | Y-EIGHTH | SUBSCRIBER GROU |                    | 9                        |
| COMMUNITY/ AREA  |          |                 | 0    | COMMUNITY/ AREA             |          |                 | 0                  | Computation              |
| CALL SIGN  | DSE      | CALL SIGN       | DSE  | CALL SIGN DSE CALL SIGN DSE |          |                 |                    | of                       |
|  |          |                 |      |                             |          |                 |                    | Base Rate Fee            |
|  |          |                 |      |                             |          |                 |                    | and                      |
|  |          |                 |      |                             |          |                 |                    | Syndicated               |
|  |          |                 |      |                             |          |                 |                    | Exclusivity<br>Surcharge |
|  |          |                 |      |                             |          |                 |                    | for                      |
|  |          |                 |      |                             |          |                 |                    | Partially                |
|  |          |                 |      |                             |          |                 |                    | Distant                  |
|  |          |                 |      |                             |          |                 |                    | Stations                 |
|  |          |                 |      |                             |          |                 |                    |                          |
|  |          |                 |      |                             |          |                 |                    |                          |
|  |          |                 |      |                             |          |                 |                    |                          |
|  |          |                 |      |                             |          |                 |                    |                          |
|  |          |                 |      |                             |          |                 |                    |                          |
| Total DSEs   |          |                 | 0.00 | Total DSEs                  |          |                 | 0.00               |                          |
| Gross Receipts First Gr  | oup      | \$              | 0.00 | Gross Receipts Second       | l Group  | \$              | 0.00               |                          |
| Base Rate Fee First Group \$ 0.00  |          |                 |      | Base Rate Fee Second        |          | \$              | 0.00               |                          |
|  | TY-NINTH | SUBSCRIBER GROU |      | SIXTIETH SUBSCRIBER GROUP   |          |                 |                    |                          |
| 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 G   | roup     | \$              | 0.00 | Gross Receipts Fourth       | Group    | \$              | 0.00               |                          |
|  |          |                 |      |                             |          |                 |                    |                          |
| Base Rate Fee Third G  | roup     | \$              | 0.00 | Base Rate Fee Fourth        | Group    | \$              | 0.00               |                          |
|  |          |                 |      |                             |          |                 |                    |                          |
| Base Rate Fee: Add the 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) |          |                 |      |                             |          |                 |                    |                          |

| FORM SA3E. PAG | iΕ | 19. |
|----------------|----|-----|
|----------------|----|-----|

| LEGAL NAME OF OWNER                              |   |                 |             |   |         | SY                | STEM ID#<br>62443 | Name             |
|--|---|-----------------|-------------|---|---------|-------------------|-------------------|------------------|
|  |   |                 |             | TE FEES FOR EACH  |         |                   |                   |                  |
| SIX <sup>®</sup><br>COMMUNITY/ AREA              | SIXTY-FIRST SUBSCRIBER GROUP OMMUNITY/ AREA O |                 |             | SIXTY-SECOND SUBSCRIBER GROUP       COMMUNITY/ AREA         0 |         |                   |                   | 9                |
| CALL SIGN  | DSE   | CALL SIGN       | DSE         | CALL SIGN   | DSE     | Computation<br>of |                   |                  |
| CALL SIGN  | DGL   |                 | DOL         | CALL SIGN   | DSE     | CALL SIGN         | DOL               | Base Rate Fee    |
|  |   |                 |             |   |         |                   |                   | and              |
|  |   |                 |             |   |         |                   |                   | Syndicated       |
|  |   |                 |             |   |         |                   |                   | Exclusivity      |
|  |   |                 |             |   |         |                   |                   | Surcharge        |
|  |   |                 |             |   |         |                   |                   | for<br>Partially |
|  |   |                 |             |   |         |                   |                   | Distant          |
|  |   |                 |             |   |         |                   |                   | Stations         |
|  |   |                 |             |   |         |                   |                   |                  |
|  |   |                 |             |   |         |                   |                   |                  |
|  |   |                 |             |   |         |                   |                   |                  |
|  |   |                 |             |   |         |                   |                   |                  |
|  |   |                 |             |   |         |                   |                   |                  |
| Total DSEs                                       |   |                 | 0.00        | Total DSEs  |         |                   | 0.00              |                  |
| Gross Receipts First Gro                         | oup   | <u>\$</u>       | 0.00        | Gross Receipts Second   | l Group | \$                | 0.00              |                  |
| Base Rate Fee First Gro                          |   | \$              | 0.00        | Base Rate Fee Second  |         | \$                | 0.00              |                  |
|  | Y-THIRD                                       | SUBSCRIBER GROU |             | SIXTY   |         |                   |                   |                  |
| COMMUNITY/ AREA                                  |   |                 | 0           | COMMUNITY/ AREA   | 0       |                   |                   |                  |
| CALL SIGN  | DSE   | CALL SIGN       | DSE         | CALL SIGN   | DSE     | CALL SIGN         | DSE               |                  |
|  |   |                 |             |   |         |                   |                   |                  |
|  |   |                 |             |   |         |                   |                   |                  |
|  |   |                 |             |   |         |                   |                   |                  |
|  |   |                 |             |   |         |                   |                   |                  |
|  |   |                 |             |   |         |                   |                   |                  |
|  |   |                 |             |   |         |                   |                   |                  |
|  |   |                 |             |   |         |                   |                   |                  |
|  |   |                 |             |   |         |                   |                   |                  |
|  |   |                 |             |   |         |                   |                   |                  |
|  |   |                 |             |   |         |                   |                   |                  |
|  |   |                 |             |   |         |                   |                   |                  |
|  |   |                 |             |   |         |                   |                   |                  |
| Total DSEs                                       | II  |                 | 0.00        | Total DSEs  |         |                   | 0.00              |                  |
| Gross Receipts Third Gr                          | oup   | \$              | 0.00        | Gross Receipts Fourth   | Group   | \$                | 0.00              |                  |
| Base Rate Fee Third Gr                           | roup  | \$              | 0.00        | Base Rate Fee Fourth  | Group   | \$                | 0.00              |                  |
| Base Rate Fee: Add the Enter here and in block 3 |   |                 | per group a | as shown in the boxes abo                                     | ve.     | \$                |                   |                  |

| LEGAL NAME OF OWNER                              |                                     |  |             |                              |         | SY        | STEM ID#<br>62443 | Name                     |
|--|-------------------------------------|--|-------------|------------------------------|---------|-----------|-------------------|--------------------------|
| В  | LOCK A:                             | COMPUTATION OF                                     | BASE RA     | TE FEES FOR EACH             | SUBSCRI | BER GROUP |                   |                          |
| SIX  | TY-FIFTH                            | SUBSCRIBER GROU                                    |             | SIXTY-SIXTH SUBSCRIBER GROUP |         |           |                   | 9                        |
| COMMUNITY/ AREA 0                                |                                     |  | 0           | COMMUNITY/ AREA              |         |           | 0                 | Computation              |
| CALL SIGN  | DSE                                 | CALL SIGN  | DSE         | CALL SIGN DSE CALL SIGN DSE  |         |           |                   | of                       |
|  |                                     |  |             |                              |         |           |                   | Base Rate Fee            |
|  |                                     |  |             |                              |         |           |                   | and                      |
|  |                                     |  |             |                              |         |           |                   | Syndicated               |
|  |                                     |  |             |                              |         |           |                   | Exclusivity<br>Surcharge |
|  |                                     |  |             |                              |         |           |                   | for                      |
|  |                                     |  |             |                              |         |           |                   | Partially                |
|  |                                     |  |             |                              |         |           |                   | Distant                  |
|  |                                     |  |             |                              |         |           |                   | Stations                 |
|  |                                     |  |             |                              |         |           |                   |                          |
|  |                                     |  |             |                              |         |           |                   |                          |
|  |                                     |  |             |                              |         |           |                   |                          |
|  |                                     |  |             |                              |         |           |                   |                          |
|  |                                     |  |             |                              |         |           |                   |                          |
| Total DSEs                                       |                                     |  | 0.00        | Total DSEs                   |         |           | 0.00              |                          |
| Gross Receipts First Gro                         | oup                                 | \$   | 0.00        | Gross Receipts Second        | l Group | \$        | 0.00              |                          |
| Base Rate Fee First Group \$ 0.00                |                                     |  | 0.00        | Base Rate Fee Second         | l Group | \$        | 0.00              |                          |
| SIXTY-S  | SEVENTH                             | SUBSCRIBER GROU                                    | P           | SIXT                         |         |           |                   |                          |
| 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 Gr                          | oup                                 | \$   | 0.00        | Gross Receipts Fourth        | Group   | \$        | 0.00              |                          |
| Base Rate Fee Third Gr                           | oup                                 | \$   | 0.00        | Base Rate Fee Fourth         | Group   | \$        | 0.00              |                          |
| Base Rate Fee: Add the Enter here and in block 3 | e <b>base rate</b><br>3, line 1, sp | e <b>fees</b> for each subscril<br>bace L (page 7) | per group a | s shown in the boxes abo     | ve.     | \$        |                   |                          |

| LEGAL NAME OF OWNER                              |                                     |   |             |   |         | SY               | STEM ID#<br>62443 | Name                      |
|--|-------------------------------------|---|-------------|---|---------|------------------|-------------------|---------------------------|
|  |                                     |   |             | TE FEES FOR EACH  |         |                  |                   |                           |
| SIXT<br>COMMUNITY/ AREA                          | Y-NINTH                             | SUBSCRIBER GROU                                 | P<br>0      | SEVENTIETH SUBSCRIBER GROUP           COMMUNITY/ AREA         0 |         |                  |                   | <b>9</b><br>Computation   |
| CALL SIGN  | DSE                                 | CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI       | DSE         | of  |         |                  |                   |                           |
|  |                                     |   |             |   |         |                  |                   | Base Rate Fee             |
|  |                                     |   |             |   |         |                  |                   | and                       |
|  |                                     |   |             |   |         |                  |                   | Syndicated<br>Exclusivity |
|  |                                     |   |             |   |         |                  |                   | Surcharge                 |
|  |                                     |   |             |   |         |                  |                   | for                       |
|  |                                     |   |             |   |         |                  |                   | Partially                 |
|  |                                     |   |             |   |         |                  |                   | Distant<br>Stations       |
|  |                                     |   |             |   |         |                  |                   | Stations                  |
|  |                                     |   |             |   |         |                  |                   |                           |
|  |                                     |   |             |   |         |                  |                   |                           |
|  |                                     |   |             |   |         |                  |                   |                           |
|  |                                     |   |             |   |         |                  |                   |                           |
| Total DSEs                                       | II                                  |   | 0.00        | Total DSEs  |         |                  | 0.00              |                           |
| Gross Receipts First Gro                         | oup                                 | \$  | 0.00        | Gross Receipts Second   | l Group | \$               | 0.00              |                           |
| Base Rate Fee First Group \$ 0.00                |                                     |   | 0.00        | Base Rate Fee Second  | l Group | \$               | 0.00              |                           |
| SEVENTY-FIRST SUBSCRIBER GROUP                   |                                     |   | Р           | SEVENTY   | -SECOND | SUBSCRIBER GROUP | )                 |                           |
| 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 Gr                          | roup                                | \$  | 0.00        | Gross Receipts Fourth   | Group   | \$               | 0.00              |                           |
| Base Rate Fee Third Gr                           | roup                                | \$  | 0.00        | Base Rate Fee Fourth  | Group   | \$               | 0.00              |                           |
| Base Rate Fee: Add the Enter here and in block 3 | e <b>base rate</b><br>3, line 1, sp | <b>fees</b> for each subscri<br>pace L (page 7) | ber group a | s shown in the boxes abc  | ove.    | \$               |                   |                           |

| FORM SA3E. PAG |
|----------------|
|----------------|

| LEGAL NAME OF OWNER                                      |                                     |   |             |                           |                                 | S         | YSTEM ID#<br>62443 | Name                     |
|--|-------------------------------------|---|-------------|---------------------------|---------------------------------|-----------|--------------------|--------------------------|
|  |                                     |   |             | ATE FEES FOR EACH         | SUBSCR                          | BER GROUP |                    |                          |
|  | SEVENTY-THIRD SUBSCRIBER GROUP      |   |             |                           | SEVENTY-FOURTH SUBSCRIBER GROUP |           |                    |                          |
| COMMUNITY/ AREA  | MMUNITY/ AREA 0                     |   |             | COMMUNITY/ AREA           |                                 |           | 0                  | <b>9</b><br>Computation  |
| CALL SIGN  | DSE                                 | CALL SIGN   | DSE         | CALL SIGN                 | DSE                             | CALL SIGN | DSE                | of                       |
|  |                                     |   |             |                           |                                 |           |                    | Base Rate Fee            |
|  |                                     |   |             |                           |                                 |           |                    | and                      |
|  |                                     |   |             |                           |                                 |           |                    | Syndicated               |
|  |                                     |   |             |                           |                                 |           |                    | Exclusivity<br>Surcharge |
|  |                                     |   |             |                           |                                 |           |                    | for                      |
|  |                                     |   |             |                           |                                 |           |                    | Partially                |
|  |                                     |   |             |                           |                                 |           |                    | Distant                  |
|  |                                     |   |             |                           |                                 |           |                    | Stations                 |
|  |                                     |   |             |                           |                                 |           |                    |                          |
|  |                                     |   |             |                           |                                 |           |                    |                          |
|  |                                     |   |             |                           |                                 |           |                    |                          |
|  |                                     |   |             |                           |                                 |           |                    |                          |
|  |                                     |   |             |                           |                                 |           |                    |                          |
| Total DSEs   |                                     |   | 0.00        | Total DSEs                |                                 |           | 0.00               |                          |
| Gross Receipts First Gro                                 | oup                                 | \$  | 0.00        | Gross Receipts Second     | Group                           | \$        | 0.00               |                          |
| Base Rate Fee First Gro                                  | oup                                 | \$  | 0.00        | Base Rate Fee Second      | l Group                         | \$        | 0.00               |                          |
| SEVEN  | TY-FIFTH                            | SUBSCRIBER GROU                                   | Р           | SEVE                      |                                 |           |                    |                          |
| 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 G                                   | roup                                | \$  | 0.00        | Gross Receipts Fourth     | Group                           | \$        | 0.00               |                          |
| Base Rate Fee Third G                                    | roup                                | \$  | 0.00        | Base Rate Fee Fourth      | Group                           | \$        | 0.00               |                          |
| <b>Base Rate Fee:</b> Add the<br>Enter here and in block | e <b>base rate</b><br>3, line 1, sp | e <b>fees</b> for each subscri<br>bace L (page 7) | ber group a | as shown in the boxes abo | ove.                            | \$        |                    |                          |

| FORM SA3E. PAG |
|----------------|
|----------------|

| LEGAL NAME OF OWNE                               |   |   |                 |                                 |          | \$        | SYSTEM ID#<br>62443 | Name                      |
|--|---|---|-----------------|---------------------------------|----------|-----------|---------------------|---------------------------|
|  |   |   |                 | TE FEES FOR EAC                 |          |           |                     |                           |
| SEVENTY-SEVENTH SUBSCRIBER GROUP                 |   |   |                 | SEVENTY-EIGHTH SUBSCRIBER GROUP |          |           |                     | 9                         |
| COMMUNITY/ AREA 0                                |   |   | COMMUNITY/ AREA |                                 |          | 0         | Computation         |                           |
| CALL SIGN  | DSE   | CALL SIGN                                       | DSE             | CALL SIGN                       | DSE      | CALL SIGN | DSE                 | of                        |
|  |   |   |                 |                                 |          |           |                     | Base Rate Fee             |
|  |   |   |                 |                                 |          |           |                     | and                       |
|  |   |   |                 |                                 |          |           |                     | Syndicated<br>Exclusivity |
|  |   |   |                 |                                 |          |           |                     | Surcharge                 |
|  |   |   |                 |                                 |          |           |                     | for                       |
|  |   |   |                 |                                 |          |           |                     | Partially                 |
|  |   |   |                 |                                 |          |           |                     | Distant<br>Stations       |
|  |   |   |                 |                                 |          |           |                     | Stations                  |
|  |   |   |                 |                                 |          |           |                     |                           |
|  |   |   |                 |                                 |          |           |                     |                           |
|  |   |   |                 |                                 |          |           |                     |                           |
|  |   |   |                 |                                 | •••••    |           |                     |                           |
| Total DSEs                                       |   |   | 0.00            | Total DSEs                      |          |           | 0.00                |                           |
| Gross Receipts First Gr                          | oup   | \$  | 0.00            | Gross Receipts Seco             | nd Group | \$        | 0.00                |                           |
|  |   |   |                 |                                 |          |           |                     |                           |
| Base Rate Fee First Gr                           |   | \$  | 0.00            | Base Rate Fee Seco              |          | \$        | 0.00                |                           |
| SEVEN<br>COMMUNITY/ AREA                         | TY-NINTH  | SUBSCRIBER GRO                                  | <u>UP</u>       | EIGHTIETH SUBSCRIBER GROUP      |          |           |                     |                           |
| COMMONT Y/ AREA                                  |   |   | U               |                                 |          |           |                     |                           |
| CALL SIGN  | DSE   | CALL SIGN                                       | DSE             | CALL SIGN                       | DSE      | CALL SIGN | DSE                 |                           |
|  |   |   |                 |                                 |          |           |                     |                           |
|  |   |   |                 |                                 |          |           |                     |                           |
|  |   |   |                 |                                 |          |           |                     |                           |
|  |   |   |                 |                                 |          |           |                     |                           |
|  |   |   |                 |                                 |          |           |                     |                           |
|  |   |   |                 |                                 |          |           |                     |                           |
|  |   |   |                 |                                 |          |           |                     |                           |
|  |   |   |                 |                                 |          |           |                     |                           |
|  |   |   |                 |                                 |          |           |                     |                           |
|  |   |   |                 |                                 | •••••    |           |                     |                           |
|  |   |   |                 |                                 |          |           |                     |                           |
| Total DSEs                                       |   |   | 0.00            | Total DSEs                      |          |           | 0.00                |                           |
| Gross Receipts Third G                           | iroup   | \$  | 0.00            | Gross Receipts Fourt            | h Group  | \$        | 0.00                |                           |
|  |   |   |                 |                                 |          | ·         |                     |                           |
| Base Rate Fee Third G                            | roup  | \$  | 0.00            | Base Rate Fee Fourt             | h Group  | \$        | 0.00                |                           |
| Base Rate Fee: Add th<br>Enter here and in block | e <b>base rate</b><br>3, line 1, s <sub>i</sub> | <b>e fees</b> for each subsc<br>pace L (page 7) | riber group a   | s shown in the boxes a          | bove.    | \$        |                     |                           |

| FORM SA3E. PAG | iΕ | 19. |
|----------------|----|-----|
|----------------|----|-----|

| LEGAL NAME OF OWNEF                            |           |                 |                 |                           |         | SY               | STEM ID#<br>62443 | Name                     |
|--|-----------|-----------------|-----------------|---------------------------|---------|------------------|-------------------|--------------------------|
| В  | LOCK A: ( | COMPUTATION OF  | BASE RA         | TE FEES FOR EACH          | SUBSCRI | BER GROUP        |                   |                          |
|  | TY-FIRST  | SUBSCRIBER GROU |                 |                           | -SECOND | SUBSCRIBER GROUP |                   | 9                        |
| COMMUNITY/ AREA 0                              |           |                 | COMMUNITY/ AREA |                           |         | 0                | Computation       |                          |
| CALL SIGN                                      | DSE       | CALL SIGN       | DSE             | CALL SIGN                 | DSE     | CALL SIGN        | DSE               | of                       |
|  |           |                 |                 |                           |         |                  |                   | Base Rate Fee            |
|  |           |                 |                 |                           |         |                  |                   | and                      |
|  |           |                 |                 |                           |         |                  |                   | Syndicated               |
|  |           |                 |                 |                           |         |                  |                   | Exclusivity<br>Surcharge |
|  |           |                 |                 |                           |         |                  |                   | for                      |
|  |           |                 |                 |                           |         |                  |                   | Partially                |
|  |           |                 |                 |                           |         |                  |                   | Distant                  |
|  |           |                 |                 |                           |         |                  |                   | Stations                 |
|  |           |                 |                 |                           |         |                  |                   |                          |
|  |           |                 |                 |                           |         |                  |                   |                          |
|  |           |                 |                 |                           |         |                  |                   |                          |
|  |           |                 |                 |                           |         |                  |                   |                          |
| Total DSEs                                     |           |                 | 0.00            | Total DSEs                |         |                  | 0.00              |                          |
| Gross Receipts First Gro                       | oup       | \$              | 0.00            | Gross Receipts Second     | l Group | \$               | 0.00              |                          |
|  |           |                 |                 |                           |         |                  |                   |                          |
| Base Rate Fee First Gro                        | oup       | \$              | 0.00            | Base Rate Fee Second      |         | \$               | 0.00              |                          |
|  | Y-THIRD   | SUBSCRIBER GROU |                 | EIGHT                     |         |                  |                   |                          |
| 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 G                         | roup      | \$              | 0.00            | Gross Receipts Fourth     | Group   | \$               | 0.00              |                          |
| Base Rate Fee Third G                          | oup       | \$              | 0.00            | Base Rate Fee Fourth      | Group   | \$               | 0.00              |                          |
| Base Rate Fee: Add the Enter here and in block |           |                 | ber group a     | is shown in the boxes abc | we.     | \$               |                   |                          |

| FORM SA3E | . PAGE | 19. |
|-----------|--------|-----|
|-----------|--------|-----|

| LEGAL NAME OF OWNER                                       |               |                 |                         |                          |                  | SI               | YSTEM ID#<br>62443 | Name                |
|---|---------------|-----------------|-------------------------|--------------------------|------------------|------------------|--------------------|---------------------|
|   |               |                 |                         | TE FEES FOR EACH         |                  |                  |                    |                     |
| EIGHTY-FIFTH SUBSCRIBER GROUP       COMMUNITY/ AREA     0 |               |                 | EIGH<br>COMMUNITY/ AREA | ITY-SIXTH                | SUBSCRIBER GROUI | P<br>0           | 9                  |                     |
|   |               |                 |                         |                          |                  |                  |                    | Computation         |
| CALL SIGN   | DSE           | CALL SIGN       | DSE                     | CALL SIGN                | DSE              | CALL SIGN        | DSE                | of<br>Base Rate Fee |
|   |               |                 |                         |                          |                  |                  |                    | and                 |
|   |               |                 |                         |                          |                  |                  |                    | Syndicated          |
|   |               |                 |                         |                          |                  |                  |                    | Exclusivity         |
|   |               |                 |                         |                          |                  |                  |                    | Surcharge<br>for    |
|   |               |                 |                         |                          |                  |                  |                    | Partially           |
|   |               |                 |                         |                          |                  |                  |                    | Distant             |
|   |               |                 |                         |                          |                  |                  |                    | Stations            |
|   |               |                 |                         |                          |                  |                  |                    |                     |
|   |               |                 |                         |                          |                  |                  |                    |                     |
|   |               |                 |                         |                          |                  |                  |                    |                     |
|   |               |                 |                         |                          |                  |                  |                    |                     |
|   |               |                 |                         |                          |                  |                  |                    |                     |
| Total DSEs  |               |                 | 0.00                    | Total DSEs               |                  |                  | 0.00               |                     |
| Gross Receipts First Gr                                   | oup           | \$              | 0.00                    | Gross Receipts Second    | I Group          | \$               | 0.00               |                     |
| Base Rate Fee First Gr                                    | oup           | \$              | 0.00                    | Base Rate Fee Second     | l Group          | \$               | 0.00               |                     |
| EIGHTY-   | SEVENTH       | SUBSCRIBER GROU | P                       | EIGHT                    | Y-EIGHTH         | SUBSCRIBER GROUI | P                  |                     |
| COMMUNITY/ AREA   |               |                 | 0                       | COMMUNITY/ AREA 0        |                  |                  |                    |                     |
| CALL SIGN   | DSE           | CALL SIGN       | DSE                     | CALL SIGN                | DSE              | CALL SIGN        | DSE                |                     |
|   |               |                 |                         |                          |                  |                  |                    |                     |
|   |               |                 |                         |                          |                  |                  |                    |                     |
|   |               |                 |                         |                          |                  |                  |                    |                     |
|   |               |                 |                         |                          |                  |                  |                    |                     |
|   |               |                 |                         |                          |                  |                  |                    |                     |
|   |               |                 |                         |                          |                  |                  |                    |                     |
|   |               |                 |                         |                          |                  |                  |                    |                     |
|   |               |                 |                         |                          |                  |                  |                    |                     |
|   |               |                 |                         |                          |                  |                  |                    |                     |
|   |               |                 |                         |                          |                  |                  |                    |                     |
|   |               |                 |                         |                          |                  |                  |                    |                     |
|   |               |                 |                         |                          |                  |                  |                    |                     |
| Total DSEs  |               |                 | 0.00                    | Total DSEs               |                  | LI               | 0.00               |                     |
| Gross Receipts Third G                                    | roup          | \$              | 0.00                    | Gross Receipts Fourth    | Group            | \$               | 0.00               |                     |
|   |               |                 |                         |                          |                  |                  |                    |                     |
| Base Rate Fee Third G                                     | roup          | \$              | 0.00                    | Base Rate Fee Fourth     | Group            | \$               | 0.00               |                     |
| <b>Base Rate Fee:</b> Add the<br>Enter here and in block  |               |                 | ber group a             | s shown in the boxes abo | ve.              | \$               |                    |                     |
|   | e, iii e i, o |                 |                         |                          |                  | •                |                    |                     |

| LEGAL NAME OF OWNER                              |          |                 |                 |                          |          | S               | YSTEM ID#<br>62443 | Name                     |
|--|----------|-----------------|-----------------|--------------------------|----------|-----------------|--------------------|--------------------------|
| В  | LOCK A:  | COMPUTATION OF  | BASE RA         | TE FEES FOR EACH         | SUBSCRI  | BER GROUP       |                    |                          |
| EIGHTY-NINTH SUBSCRIBER GROUP                    |          |                 |                 |                          | NINTIETH | SUBSCRIBER GROU |                    | 9                        |
| COMMUNITY/ AREA 0                                |          |                 | COMMUNITY/ AREA |                          |          | 0               | Computation        |                          |
| CALL SIGN  | DSE      | CALL SIGN       | DSE             | CALL SIGN                | DSE      | CALL SIGN       | DSE                | of                       |
|  |          |                 |                 |                          |          |                 |                    | Base Rate Fee            |
|  |          |                 |                 |                          |          |                 |                    | and                      |
|  |          |                 |                 |                          |          |                 |                    | Syndicated               |
|  |          |                 |                 |                          |          |                 |                    | Exclusivity<br>Surcharge |
|  |          |                 |                 |                          |          |                 |                    | for                      |
|  |          |                 |                 |                          |          |                 |                    | Partially                |
|  |          |                 |                 |                          |          |                 |                    | Distant                  |
|  |          |                 |                 |                          |          |                 |                    | Stations                 |
|  |          |                 |                 |                          |          |                 |                    |                          |
|  |          |                 |                 |                          |          |                 |                    |                          |
|  |          |                 |                 |                          |          |                 |                    |                          |
|  |          |                 |                 |                          |          |                 |                    |                          |
|  |          |                 |                 |                          |          |                 | 0.00               |                          |
| Total DSEs                                       |          |                 | 0.00            | Total DSEs               |          |                 | 0.00               |                          |
| Gross Receipts First Gro                         | oup      | \$              | 0.00            | Gross Receipts Second    | d Group  | \$              | 0.00               |                          |
| Base Rate Fee First Gro                          | oup      | \$              | 0.00            | Base Rate Fee Second     | d Group  | \$              | 0.00               |                          |
| NINE   | TY-FIRST | SUBSCRIBER GROU | Р               | NINET                    |          |                 |                    |                          |
| 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 Gr                          | oup      | \$              | 0.00            | Gross Receipts Fourth    | Group    | \$              | 0.00               |                          |
| Base Rate Fee Third Gr                           | oup      | \$              | 0.00            | Base Rate Fee Fourth     | Group    | \$              | 0.00               |                          |
| Base Rate Fee: Add the Enter here and in block 3 |          |                 | ber group a     | s shown in the boxes abo | ove.     | \$              |                    |                          |

| FORM SA3E. PAG | iΕ | 19. |
|----------------|----|-----|
|----------------|----|-----|

| LEGAL NAME OF OWNER                             |          |                 |                          |                          |                  | SY        | STEM ID#<br>62443 | Name                 |
|---|----------|-----------------|--------------------------|--------------------------|------------------|-----------|-------------------|----------------------|
|   |          |                 |                          | TE FEES FOR EACH         |                  |           |                   |                      |
| NINETY-THIRD SUBSCRIBER GROUP COMMUNITY/ AREA 0 |          |                 | NINET<br>COMMUNITY/ AREA | Y-FOURTH                 | SUBSCRIBER GROUP | 0         | 9                 |                      |
|   |          |                 |                          |                          |                  |           |                   | Computation          |
| CALL SIGN                                       | DSE      | CALL SIGN       | DSE                      | CALL SIGN                | DSE              | CALL SIGN | DSE               | of                   |
|   |          |                 |                          |                          |                  |           |                   | Base Rate Fee<br>and |
|   |          |                 |                          |                          |                  |           |                   | Syndicated           |
|   |          |                 |                          |                          |                  |           |                   | Exclusivity          |
|   |          |                 |                          |                          |                  |           |                   | Surcharge            |
|   |          |                 |                          |                          |                  |           |                   | for                  |
|   |          |                 |                          |                          |                  |           |                   | Partially<br>Distant |
|   |          |                 |                          |                          |                  | -         |                   | Stations             |
|   |          |                 |                          |                          |                  |           |                   |                      |
|   |          |                 |                          |                          |                  |           |                   |                      |
|   |          |                 |                          |                          |                  |           |                   |                      |
|   |          |                 |                          |                          |                  |           |                   |                      |
|   |          |                 |                          |                          |                  |           |                   |                      |
| Total DSEs                                      |          |                 | 0.00                     | Total DSEs               |                  |           | 0.00              |                      |
| Gross Receipts First Gro                        | oup      | \$              | 0.00                     | Gross Receipts Second    | l Group          | \$        | 0.00              |                      |
| Base Rate Fee First Gro                         | oup      | \$              | 0.00                     | Base Rate Fee Second     | l Group          | \$        | 0.00              |                      |
| NINE  | TY-FIFTH | SUBSCRIBER GROU | Р                        | NINI                     | )                |           |                   |                      |
| 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 G                          | roup     | \$              | 0.00                     | Gross Receipts Fourth    | Group            | \$        | 0.00              |                      |
| Base Rate Fee Third G                           | roup     | \$              | 0.00                     | Base Rate Fee Fourth     | Group            | \$        | 0.00              |                      |
| Base Rate Fee: Add the Enter here and in block  |          |                 | ber group a              | s shown in the boxes abo | ove.             | \$        |                   |                      |

| FORM SA | 3E. PA | GE 19. |
|---------|--------|--------|
|---------|--------|--------|

| LEGAL NAME OF OWNER<br>Atlantic Broadband  |         |                 |                 |                       |                  | SI        | STEM ID#<br>62443 | Name              |
|--|---------|-----------------|-----------------|-----------------------|------------------|-----------|-------------------|-------------------|
|  |         |                 |                 | TE FEES FOR EACH      |                  |           |                   |                   |
| NINETY-SEVENTH SUBSCRIBER GROUP       COMMUNITY/ AREA     0  |         |                 | COMMUNITY/ AREA | Y-EIGHTH              | SUBSCRIBER GROUI | <u> </u>  | 9                 |                   |
| CALL SIGN DSE CALL SIGN DSE  |         |                 |                 | CALL SIGN             | DSE              | CALL SIGN | DSE               | Computation<br>of |
| CALL SIGN  | DOL     |                 | DGL             | CALL SIGN             | DGL              | CALL SIGN | DOL               | Base Rate Fee     |
|  |         |                 |                 |                       |                  |           |                   | and               |
|  |         |                 |                 |                       |                  |           |                   | Syndicated        |
|  |         |                 |                 |                       |                  |           |                   | Exclusivity       |
|  |         |                 |                 |                       |                  |           | ··· ···           | Surcharge<br>for  |
|  |         |                 |                 |                       |                  |           |                   | Partially         |
|  |         |                 |                 |                       |                  |           |                   | Distant           |
|  |         |                 |                 |                       |                  |           |                   | Stations          |
|  |         |                 |                 |                       |                  |           |                   |                   |
|  |         |                 |                 |                       |                  |           |                   |                   |
|  |         |                 |                 |                       |                  |           |                   |                   |
|  |         |                 |                 |                       |                  |           |                   |                   |
|  |         |                 |                 |                       |                  |           |                   |                   |
| Total DSEs   |         |                 | 0.00            | Total DSEs            |                  |           | 0.00              |                   |
| Gross Receipts First Gro   | oup     | \$              | 0.00            | Gross Receipts Second | l Group          | \$        | 0.00              |                   |
| Base Rate Fee First Gro  | oup     | \$              | 0.00            | Base Rate Fee Second  | l Group          | \$        | 0.00              |                   |
| NINET  | Y-NINTH | SUBSCRIBER GROU |                 | ONE HU                | C                |           |                   |                   |
| COMMUNITY/ AREA  |         |                 | 0               | COMMUNITY/ AREA       |                  |           |                   |                   |
| CALL SIGN  | DSE     | CALL SIGN       | DSE             | CALL SIGN             | DSE              | CALL SIGN | DSE               |                   |
|  |         |                 |                 |                       |                  |           |                   |                   |
|  |         |                 |                 |                       |                  |           |                   |                   |
|  |         |                 |                 |                       |                  |           |                   |                   |
|  |         |                 |                 |                       |                  |           |                   |                   |
|  |         |                 |                 |                       |                  |           | <mark></mark>     |                   |
|  |         |                 |                 |                       |                  |           |                   |                   |
|  |         |                 |                 |                       |                  |           |                   |                   |
|  |         |                 |                 |                       |                  |           |                   |                   |
|  |         |                 |                 |                       |                  |           |                   |                   |
|  |         |                 |                 |                       |                  |           |                   |                   |
|  |         |                 |                 |                       |                  |           |                   |                   |
|  |         |                 |                 |                       |                  |           |                   |                   |
| Total DSEs   |         |                 | 0.00            | Total DSEs            |                  |           | 0.00              |                   |
| Gross Receipts Third Gr  | oup     | \$              | 0.00            | Gross Receipts Fourth | Group            | \$        | 0.00              |                   |
| Base Rate Fee Third Gr   | oup     | \$              | 0.00            | Base Rate Fee Fourth  | Group            | \$        | 0.00              |                   |
| 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) |         |                 |                 |                       |                  |           |                   |                   |

I

| FORM SA3E. PAG |
|----------------|
|----------------|

| LEGAL NAME OF OWNER                                 |          |                 |             |                          |          | SYS              | 62443 | Name                    |
|---|----------|-----------------|-------------|--------------------------|----------|------------------|-------|-------------------------|
| В   | LOCK A:  | COMPUTATION OF  | BASE RA     | TE FEES FOR EACH         | SUBSCRI  | BER GROUP        |       |                         |
| ONE HUNDRE  | ED FIRST | SUBSCRIBER GROU | Р           | ONE HUNDRED              |          | 0                |       |                         |
| COMMUNITY/ AREA                                     |          |                 | 0           | COMMUNITY/ AREA 0        |          |                  |       | <b>9</b><br>Computation |
| CALL SIGN   | DSE      | CALL SIGN       | DSE         | CALL SIGN                | DSE      | CALL SIGN        | DSE   | of                      |
|   |          |                 |             |                          |          |                  |       | Base Rate Fee           |
|   |          |                 |             |                          |          |                  |       | and<br>Syndicated       |
|   |          |                 |             |                          |          |                  |       | Exclusivity             |
|   |          |                 |             |                          |          |                  |       | Surcharge               |
|   |          |                 |             |                          |          |                  |       | for                     |
|   |          |                 |             |                          |          |                  |       | Partially               |
|   |          |                 |             |                          |          |                  |       | Distant<br>Stations     |
|   |          |                 |             |                          |          |                  |       | Stations                |
|   |          |                 |             |                          |          |                  |       |                         |
|   |          |                 |             |                          |          |                  |       |                         |
|   |          |                 |             |                          |          |                  |       |                         |
|   |          |                 |             |                          |          |                  |       |                         |
| Total DSEs  | II       |                 | 0.00        | Total DSEs               |          |                  | 0.00  |                         |
| Gross Receipts First Gro                            | oup      | \$              | 0.00        | Gross Receipts Second    | l Group  | \$               | 0.00  |                         |
|   | -        |                 |             |                          |          |                  |       |                         |
| Base Rate Fee First Gro                             | oup      | \$              | 0.00        | Base Rate Fee Second     | l Group  | \$               | 0.00  |                         |
|   | DTHIRD   | SUBSCRIBER GROU |             | 11                       | D FOURTH | SUBSCRIBER GROUP |       |                         |
| COMMUNITY/ AREA                                     |          |                 | 0           | COMMUNITY/ AREA          |          |                  | 0     |                         |
| CALL SIGN   | DSE      | CALL SIGN       | DSE         | CALL SIGN                | DSE      | CALL SIGN        | DSE   |                         |
|   |          |                 |             |                          |          |                  |       |                         |
|   |          |                 |             |                          |          |                  |       |                         |
|   |          |                 |             |                          |          |                  |       |                         |
|   |          |                 |             |                          |          |                  |       |                         |
|   |          |                 |             |                          |          |                  |       |                         |
|   |          |                 |             |                          |          |                  |       |                         |
|   |          |                 |             |                          |          |                  |       |                         |
|   |          |                 |             |                          |          |                  |       |                         |
|   |          |                 |             |                          |          |                  |       |                         |
|   |          |                 |             |                          |          |                  |       |                         |
|   |          |                 |             |                          |          |                  |       |                         |
|   |          |                 |             |                          |          |                  |       |                         |
| Total DSEs  | II       |                 | 0.00        | Total DSEs               |          |                  | 0.00  |                         |
| Gross Receipts Third Gr                             | oup      | \$              | 0.00        | Gross Receipts Fourth    | Group    | \$               | 0.00  |                         |
| Base Rate Fee Third Gr                              | oup      | \$              | 0.00        | Base Rate Fee Fourth     | Group    | \$               | 0.00  |                         |
| Base Rate Fee: Add the<br>Enter here and in block 3 |          |                 | ber group a | s shown in the boxes abc | we.      | \$               |       |                         |

| FORM SA3E. PAG |
|----------------|
|----------------|

| LEGAL NAME OF OWNER                            |          |                 |             |                          |           | S               | YSTEM ID#<br>62443 | Name              |
|--|----------|-----------------|-------------|--------------------------|-----------|-----------------|--------------------|-------------------|
|  |          |                 |             | TE FEES FOR EACH         |           |                 |                    |                   |
|  | ED FIFTH | SUBSCRIBER GROU |             |                          |           | 9               |                    |                   |
| COMMUNITY/ AREA                                |          |                 | 0           | COMMUNITY/ AREA          | 0         | Computation     |                    |                   |
| CALL SIGN                                      | DSE      | CALL SIGN       | DSE         | CALL SIGN                | DSE       | CALL SIGN       | DSE                | of                |
|  |          |                 |             |                          |           |                 |                    | Base Rate Fee     |
|  |          |                 |             |                          |           |                 |                    | and<br>Syndicated |
|  |          |                 |             |                          |           |                 |                    | Exclusivity       |
|  |          |                 |             |                          |           |                 |                    | Surcharge         |
|  |          |                 |             |                          |           |                 |                    | for<br>Partially  |
|  |          |                 |             |                          |           |                 |                    | Distant           |
|  |          |                 |             |                          |           |                 |                    | Stations          |
|  |          |                 |             |                          |           |                 |                    |                   |
|  |          |                 |             |                          |           |                 |                    |                   |
|  |          |                 |             |                          |           |                 |                    |                   |
|  |          |                 |             |                          |           |                 |                    |                   |
| Total DSEs                                     |          |                 | 0.00        | Total DSEs               |           |                 | 0.00               |                   |
| Gross Receipts First Gro                       | aua      |                 | 0.00        | Gross Receipts Second    | d Croup   | ¢               | 0.00               |                   |
|  | oup      | -               | 0.00        |                          | Gloup     | <u>\$</u>       |                    |                   |
| Base Rate Fee First Gr                         |          | \$              | 0.00        | Base Rate Fee Second     |           | \$              | 0.00               |                   |
|  | SEVENTH  | SUBSCRIBER GROU |             | 11                       | ED EIGHTH | SUBSCRIBER GROU |                    |                   |
| COMMUNITY/ AREA                                |          |                 | 0           | COMMUNITY/ AREA          |           |                 | 0                  |                   |
| CALL SIGN                                      | DSE      | CALL SIGN       | DSE         | CALL SIGN                | DSE       | CALL SIGN       | DSE                |                   |
|  |          |                 |             |                          |           |                 |                    |                   |
|  |          |                 |             |                          |           |                 |                    |                   |
|  |          |                 |             |                          |           |                 |                    |                   |
|  |          |                 |             |                          |           |                 |                    |                   |
|  |          |                 |             |                          |           |                 |                    |                   |
|  |          |                 |             |                          |           |                 |                    |                   |
|  |          |                 |             |                          |           |                 |                    |                   |
|  |          |                 |             |                          |           |                 |                    |                   |
|  |          |                 |             |                          |           |                 |                    |                   |
|  |          |                 |             |                          |           |                 |                    |                   |
|  |          |                 |             |                          |           |                 |                    |                   |
| Total DSEs                                     |          |                 | 0.00        | Total DSEs               |           |                 | 0.00               |                   |
| Gross Receipts Third G                         | roup     | \$              | 0.00        | Gross Receipts Fourth    | Group     | \$              | 0.00               |                   |
| Base Rate Fee Third G                          | roup     | \$              | 0.00        | Base Rate Fee Fourth     | Group     | \$              | 0.00               |                   |
| Base Rate Fee: Add the Enter here and in block |          |                 | ber group a | s shown in the boxes abo | ove.      | \$              |                    |                   |

| FORM SA3E. PAG |
|----------------|
|----------------|

| LEGAL NAME OF OWNI<br>Atlantic Broadbai |           |                              |                |                      |            |                  | 62443 | Name                    |
|---|-----------|------------------------------|----------------|----------------------|------------|------------------|-------|-------------------------|
|   |           |                              |                | TE FEES FOR EAG      |            |                  |       |                         |
|   | RED NINTH | SUBSCRIBER GRO               |                | 11                   |            | I SUBSCRIBER GRO |       | 9                       |
| COMMUNITY/ AREA                         |           |                              | 0              | COMMUNITY/ ARE       | A          |                  | 0     | <b>S</b><br>Computation |
| CALL SIGN                               | DSE       | CALL SIGN                    | DSE            | CALL SIGN            | DSE        | CALL SIGN        | DSE   | of                      |
|   |           |                              |                |                      |            |                  |       | Base Rate Fe            |
|   |           |                              |                |                      |            |                  |       | and                     |
|   |           |                              |                |                      |            |                  |       | Syndicated              |
|   |           |                              |                |                      |            |                  |       | Exclusivity             |
|   |           |                              |                |                      |            |                  |       | Surcharge<br>for        |
|   |           |                              |                |                      |            |                  |       | Partially               |
|   |           | -                            |                |                      |            |                  |       | Distant                 |
|   |           |                              |                |                      |            |                  |       | Stations                |
|   |           |                              |                |                      |            |                  |       |                         |
|   |           |                              |                |                      |            |                  |       |                         |
|   |           |                              |                |                      |            |                  |       |                         |
|   |           |                              |                |                      |            |                  |       |                         |
|   |           |                              |                |                      |            |                  |       |                         |
| otal DSEs                               |           |                              | 0.00           | Total DSEs           |            |                  | 0.00  |                         |
| Bross Receipts First G                  | Group     | \$                           | 0.00           | Gross Receipts Sec   | ond Group  | \$               | 0.00  |                         |
| a <b>se Rate Fee</b> First G            | Group     | \$                           | 0.00           | Base Rate Fee Sec    | ond Group  | \$               | 0.00  |                         |
| ONE HUNDRED                             | ELEVENTH  | SUBSCRIBER GRO               | DUP            | ONE HUNDR            | ED TWELVTH | I SUBSCRIBER GRO | UP    |                         |
| OMMUNITY/ AREA                          |           |                              | 0              | COMMUNITY/ ARE       | A          |                  | 0     |                         |
| CALL SIGN                               | DSE       | CALL SIGN                    | DSE            | CALL SIGN            | DSE        | CALL SIGN        | DSE   |                         |
|   |           |                              |                |                      |            |                  |       |                         |
|   |           |                              |                |                      |            |                  |       |                         |
|   |           |                              |                |                      |            |                  |       |                         |
|   |           |                              |                |                      |            |                  |       |                         |
|   |           |                              |                |                      |            |                  |       |                         |
|   |           |                              |                |                      |            |                  |       |                         |
|   |           |                              |                |                      |            |                  |       |                         |
|   |           |                              |                |                      |            |                  |       |                         |
|   |           |                              |                |                      |            |                  |       |                         |
|   |           |                              |                |                      |            |                  |       |                         |
|   |           |                              |                |                      |            |                  |       |                         |
|   |           |                              |                |                      |            |                  |       |                         |
| otal DSEs                               |           |                              | 0.00           | Total DSEs           |            |                  | 0.00  |                         |
| Gross Receipts Third                    | Group     | \$                           | 0.00           | Gross Receipts Fou   | rth Group  | \$               | 0.00  |                         |
| Base Rate Fee Third                     | Group     | \$                           | 0.00           | Base Rate Fee Fou    | rth Group  | \$               | 0.00  |                         |
|   |           | <b>e fees</b> for each subso | criber group a | s shown in the boxes | above.     |                  |       |                         |

| FORM SA3E. PAGE | 19. |
|-----------------|-----|
|-----------------|-----|

| LEGAL NAME OF OWNER                            |         |                 |             |                         |          | S               | YSTEM ID#<br>62443 | Name                     |
|--|---------|-----------------|-------------|-------------------------|----------|-----------------|--------------------|--------------------------|
| В  | LOCK A: | COMPUTATION OF  | BASE RA     | TE FEES FOR EACH        | SUBSCRI  | BER GROUP       |                    |                          |
| ONE HUNDRED THIF                               | RTEENTH | SUBSCRIBER GROU |             | 11                      | JRTEENTH | SUBSCRIBER GROU |                    | 9                        |
| COMMUNITY/ AREA                                |         |                 | 0           | COMMUNITY/ AREA         |          |                 | 0                  | Computation              |
| CALL SIGN                                      | DSE     | CALL SIGN       | DSE         | CALL SIGN               | DSE      | CALL SIGN       | DSE                | of                       |
|  |         |                 |             |                         |          |                 |                    | Base Rate Fee            |
|  |         |                 |             |                         |          |                 |                    | and                      |
|  |         |                 |             |                         |          |                 |                    | Syndicated               |
|  |         |                 |             |                         |          |                 |                    | Exclusivity<br>Surcharge |
|  |         |                 |             |                         |          |                 |                    | for                      |
|  |         |                 |             |                         |          |                 |                    | Partially                |
|  |         |                 |             |                         |          |                 |                    | Distant                  |
|  |         |                 |             |                         |          |                 |                    | Stations                 |
|  |         |                 |             |                         |          |                 |                    |                          |
|  |         |                 |             |                         |          |                 |                    |                          |
|  |         |                 |             |                         |          |                 |                    |                          |
|  |         |                 |             |                         |          |                 |                    |                          |
|  |         |                 |             |                         |          |                 |                    |                          |
| Total DSEs                                     |         |                 | 0.00        | Total DSEs              |          |                 | 0.00               |                          |
| Gross Receipts First Gro                       | oup     | \$              | 0.00        | Gross Receipts Secon    | d Group  | \$              | 0.00               |                          |
| Base Rate Fee First Gro                        | oup     | \$              | 0.00        | Base Rate Fee Secon     | d Group  | \$              | 0.00               |                          |
| ONE HUNDRED FI                                 | TEENTH  | SUBSCRIBER GROU | Р           | ONE HUNDRED S           | IXTEENTH | SUBSCRIBER GROU | Р                  |                          |
| COMMUNITY/ AREA                                |         |                 | 0           | COMMUNITY/ AREA         |          |                 |                    |                          |
| CALL SIGN                                      | DSE     | CALL SIGN       | DSE         | CALL SIGN               | DSE      | CALL SIGN       | DSE                |                          |
|  |         |                 |             |                         |          |                 |                    |                          |
|  |         |                 |             |                         |          |                 |                    |                          |
|  |         |                 |             |                         |          |                 |                    |                          |
|  |         |                 |             |                         |          |                 |                    |                          |
|  |         |                 |             |                         |          |                 |                    |                          |
|  |         |                 |             |                         |          |                 |                    |                          |
|  |         |                 |             |                         |          |                 |                    |                          |
|  |         |                 |             |                         |          |                 |                    |                          |
|  |         |                 |             |                         |          |                 |                    |                          |
|  |         |                 |             |                         |          |                 |                    |                          |
|  |         |                 |             |                         |          |                 |                    |                          |
|  |         |                 |             |                         |          |                 |                    |                          |
| Total DSEs                                     |         |                 | 0.00        | Total DSEs              |          |                 | 0.00               |                          |
| Gross Receipts Third G                         | roup    | \$              | 0.00        | Gross Receipts Fourth   | Group    | \$              | 0.00               |                          |
| Base Rate Fee Third G                          | roup    | \$              | 0.00        | Base Rate Fee Fourth    | Group    | \$              | 0.00               |                          |
| Base Rate Fee: Add the Enter here and in block |         |                 | ber group a | s shown in the boxes ab | ove.     | \$              |                    |                          |

| FORM SA | 3E. PA | GE 19. |
|---------|--------|--------|
|---------|--------|--------|

|                                       |                |                 |                |                         |           |                  | SYSTEM ID# |                           |
|---------------------------------------|----------------|-----------------|----------------|-------------------------|-----------|------------------|------------|---------------------------|
| LEGAL NAME OF OWN<br>Atlantic Broadba |                |                 |                |                         |           |                  | 62443      | Name                      |
|                                       |                |                 |                | TE FEES FOR EAC         |           |                  |            |                           |
| ONE HUNDRED SEV                       |                | SUBSCRIBER GRO  |                |                         |           | SUBSCRIBER GRO   |            | 9                         |
| COMMUNITY/ AREA 0                     |                |                 |                | COMMUNITY/ AREA         |           |                  | 0          | Computation               |
| CALL SIGN DSE CALL SIGN DSE           |                |                 |                | CALL SIGN               | DSE       | CALL SIGN        | DSE        | of                        |
|                                       |                |                 |                |                         |           |                  |            | Base Rate Fee             |
|                                       |                |                 |                |                         |           |                  |            | and<br>Sundiacted         |
|                                       |                |                 |                |                         |           |                  |            | Syndicated<br>Exclusivity |
|                                       |                |                 |                |                         |           |                  |            | Surcharge                 |
|                                       |                |                 |                |                         |           |                  |            | for                       |
|                                       |                |                 |                |                         |           |                  |            | Partially<br>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       |                           |
|                                       |                |                 |                |                         |           | I SUBSCRIBER GRO |            |                           |
| COMMUNITY/ AREA                       |                | SUBSCRIBER GRO  | 0P<br>0        | COMMUNITY/ AREA         | 0         |                  |            |                           |
|                                       |                |                 |                |                         |           |                  |            |                           |
| CALL SIGN                             | DSE            | CALL SIGN       | DSE            | CALL SIGN               | DSE       | CALL SIGN        | DSE        |                           |
|                                       |                |                 |                |                         |           |                  |            |                           |
|                                       |                |                 |                |                         |           |                  |            |                           |
|                                       |                |                 |                |                         |           |                  |            |                           |
|                                       |                |                 |                |                         |           |                  |            |                           |
|                                       |                |                 |                |                         |           |                  |            |                           |
|                                       |                |                 |                |                         |           |                  |            |                           |
|                                       |                |                 |                |                         |           |                  |            |                           |
|                                       |                |                 |                |                         |           |                  |            |                           |
|                                       |                |                 |                |                         |           |                  |            |                           |
|                                       |                |                 |                |                         |           |                  |            |                           |
|                                       |                |                 |                |                         |           |                  |            |                           |
| Total DSEs                            |                |                 | 0.00           | Total DSEs              |           |                  | 0.00       |                           |
| Gross Receipts Third                  | Group          | \$              | 0.00           | Gross Receipts Four     | th Group  | \$               | 0.00       |                           |
|                                       |                |                 |                |                         |           |                  |            |                           |
| Base Rate Fee Third                   | Group          | \$              | 0.00           | Base Rate Fee Four      | th Group  | \$               | 0.00       |                           |
|                                       |                |                 |                | 11                      |           |                  |            |                           |
|                                       |                |                 | criber group a | is shown in the boxes a | bove.     | ¢                |            |                           |
| Enter here and in bloc                | ж 3, IINE 1, S | pace L (page /) |                |                         |           | \$               |            |                           |

| FORM SA3E | . PAGE | 19. |
|-----------|--------|-----|
|-----------|--------|-----|

| LEGAL NAME OF OWNER                                      |                                     |  |             |                           |           | S                | STEM ID#<br>62443 | Name                 |
|--|-------------------------------------|--|-------------|---------------------------|-----------|------------------|-------------------|----------------------|
|  |                                     |  |             | TE FEES FOR EACH          | SUBSCRI   | BER GROUP        |                   |                      |
|  | NTY-FIRST                           | SUBSCRIBER GROU                                  |             |                           | Y-SECOND  | SUBSCRIBER GROUP |                   | 9                    |
| COMMUNITY/ AREA 0  |                                     |  |             | COMMUNITY/ AREA           |           |                  | 0                 | Computation          |
| CALL SIGN DSE CALL SIGN DSE                              |                                     |  |             | CALL SIGN                 | DSE       | CALL SIGN        | DSE               | of                   |
|  |                                     |  |             |                           |           |                  |                   | Base Rate Fee        |
|  |                                     |  |             |                           |           |                  |                   | and<br>Syndicated    |
|  |                                     |  |             |                           |           |                  | ··· ···           | Exclusivity          |
|  |                                     |  |             |                           |           |                  |                   | Surcharge            |
|  |                                     |  |             |                           |           |                  |                   | for<br>Dortiolly     |
|  |                                     |  |             |                           |           |                  |                   | Partially<br>Distant |
|  |                                     |  |             |                           |           |                  |                   | Stations             |
|  |                                     |  |             |                           |           |                  |                   |                      |
|  |                                     |  |             |                           |           |                  |                   |                      |
|  |                                     |  |             |                           |           |                  |                   |                      |
|  |                                     |  |             |                           |           |                  |                   |                      |
|  |                                     |  |             |                           |           |                  |                   |                      |
| Total DSEs   |                                     |  | 0.00        | Total DSEs                |           |                  | 0.00              |                      |
| Gross Receipts First Gro                                 | oup                                 | \$   | 0.00        | Gross Receipts Second     | l Group   | \$               | 0.00              |                      |
| Base Rate Fee First Gro                                  | oup                                 | \$   | 0.00        | Base Rate Fee Second      | l Group   | \$               | 0.00              |                      |
| ONE HUNDRED TWEN   | ITY-THIRD                           | SUBSCRIBER GROUP                                 |             | ONE HUNDRED TWENT         | TY-FOURTH | SUBSCRIBER GROUP |                   |                      |
| COMMUNITY/ AREA  |                                     |  | 0           | COMMUNITY/ AREA           |           |                  | 0                 |                      |
| CALL SIGN  | DSE                                 | CALL SIGN  | DSE         | CALL SIGN                 | DSE       | CALL SIGN        | DSE               |                      |
|  |                                     |  |             |                           |           |                  |                   |                      |
|  |                                     |  |             |                           |           |                  |                   |                      |
|  |                                     |  |             |                           |           |                  |                   |                      |
|  |                                     |  |             |                           |           |                  |                   |                      |
|  |                                     |  |             |                           |           |                  |                   |                      |
|  |                                     |  |             |                           |           |                  |                   |                      |
|  |                                     |  |             |                           |           |                  | <mark></mark>     |                      |
|  |                                     |  |             |                           |           |                  |                   |                      |
|  |                                     |  |             |                           |           |                  |                   |                      |
|  |                                     |  |             |                           |           |                  | <mark></mark>     |                      |
|  |                                     |  |             |                           |           |                  |                   |                      |
| Total DSEs   |                                     |  | 0.00        | Total DSEs                |           |                  | 0.00              |                      |
| Gross Receipts Third Gr                                  | roup                                | \$   | 0.00        | Gross Receipts Fourth     | Group     | \$               | 0.00              |                      |
| Base Rate Fee Third Gr                                   | roup                                | \$   | 0.00        | Base Rate Fee Fourth      | Group     | \$               | 0.00              |                      |
| <b>Base Rate Fee:</b> Add the<br>Enter here and in block | e <b>base rate</b><br>3, line 1, sp | <b>fees</b> for each subscril<br>pace L (page 7) | ber group a | is shown in the boxes abo | ve.       | \$               |                   |                      |

| FORM SA3E. PAG | iΕ | 19. |
|----------------|----|-----|
|----------------|----|-----|

| LEGAL NAME OF OWNER                              |           |                  |             |   |         | SY        | STEM ID#<br>62443 | Name                     |
|--|-----------|------------------|-------------|---|---------|-----------|-------------------|--------------------------|
| В  | LOCK A:   | COMPUTATION OF   | BASE RA     | TE FEES FOR EACH                          | SUBSCRI | BER GROUP |                   |                          |
| ONE HUNDRED TWE                                  | NTY-FIFTH | SUBSCRIBER GROUP |             | ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP |         |           |                   | 9                        |
| COMMUNITY/ AREA 0                                |           |                  |             | COMMUNITY/ AREA                           |         |           | 0                 | Computation              |
| CALL SIGN  | DSE       | CALL SIGN        | DSE         | CALL SIGN                                 | DSE     | CALL SIGN | DSE               | of                       |
|  |           |                  |             |   |         |           |                   | Base Rate Fee            |
|  |           |                  |             |   |         |           |                   | and                      |
|  |           |                  |             |   |         |           |                   | Syndicated               |
|  |           |                  |             |   |         |           |                   | Exclusivity<br>Surcharge |
|  |           |                  |             |   |         |           |                   | for                      |
|  |           |                  |             |   |         |           |                   | Partially                |
|  |           |                  |             |   |         |           |                   | Distant                  |
|  |           |                  |             |   |         |           |                   | Stations                 |
|  |           |                  |             |   |         |           |                   |                          |
|  |           |                  |             |   |         |           |                   |                          |
|  |           |                  |             |   |         |           |                   |                          |
|  |           |                  |             |   |         |           |                   |                          |
|  |           |                  |             |   |         |           |                   |                          |
| Total DSEs                                       |           |                  | 0.00        | Total DSEs                                |         |           | 0.00              |                          |
| Gross Receipts First Gro                         | oup       | \$               | 0.00        | Gross Receipts Second                     | d Group | \$        | 0.00              |                          |
| Base Rate Fee First Gro                          | oup       | \$               | 0.00        | Base Rate Fee Second                      | d Group | \$        | 0.00              |                          |
| ONE HUNDRED TWENTY-                              | -SEVENTH  | SUBSCRIBER GROUP |             | ONE HUNDRED TWEN                          |         |           |                   |                          |
| 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 Gr                          | roup      | \$               | 0.00        | Gross Receipts Fourth                     | Group   | \$        | 0.00              |                          |
| Base Rate Fee Third Gr                           | roup      | \$               | 0.00        | Base Rate Fee Fourth                      | Group   | \$        | 0.00              |                          |
| Base Rate Fee: Add the Enter here and in block 3 |           |                  | ber group a | s shown in the boxes abo                  | ove.    | \$        |                   |                          |

| LEGAL NAME OF OWNE<br>Atlantic Broadban                 |            |                  |               |  |           | Ş                | 62443  | Name                 |
|---|------------|------------------|---------------|--|-----------|------------------|--------|----------------------|
|   | BLOCK A:   | COMPUTATION O    | F BASE RA     | TE FEES FOR EAC                        | H SUBSCR  | IBER GROUP       |        |                      |
|   | NTY-NINTH  | SUBSCRIBER GROUP |               | ONE HUNDRED THIRTIETH SUBSCRIBER GROUP |           |                  |        | 9                    |
| COMMUNITY/ AREA 0                                       |            |                  |               | COMMUNITY/ AREA                        |           |                  | 0      | Computation          |
| CALL SIGN   | DSE        | CALL SIGN        | DSE           | CALL SIGN                              | DSE       | CALL SIGN        | DSE    | of                   |
|   |            |                  |               |  |           |                  |        | Base Rate Fee<br>and |
|   |            |                  |               |  |           |                  |        | Syndicated           |
|   |            |                  |               |  |           |                  |        | Exclusivity          |
|   |            |                  |               |  |           |                  |        | Surcharge<br>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   |                      |
|   | IRTY-FIRST | SUBSCRIBER GROUP |               | 11                                     |           | SUBSCRIBER GROUP | ,<br>0 |                      |
| COMMUNITY/ AREA   |            |                  | 0             | COMMUNITY/ AREA                        |           |                  |        |                      |
| CALL SIGN   | DSE        | CALL SIGN        | DSE           | CALL SIGN                              | DSE       | CALL SIGN        | DSE    |                      |
|   |            |                  |               |  |           |                  |        |                      |
|   |            |                  |               |  |           |                  |        |                      |
|   |            |                  |               |  |           |                  |        |                      |
|   |            | _                |               |  |           |                  |        |                      |
|   |            |                  |               |  |           |                  |        |                      |
|   |            |                  |               |  |           |                  |        |                      |
|   |            |                  |               |  |           |                  |        |                      |
|   |            |                  |               |  |           |                  |        |                      |
|   |            |                  |               |  |           |                  |        |                      |
|   |            |                  |               |  |           |                  |        |                      |
|   |            |                  |               |  |           |                  |        |                      |
| Total DSEs  |            |                  | 0.00          | Total DSEs                             |           |                  | 0.00   |                      |
| Gross Receipts Third 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   |                      |
| <b>Base Rate Fee:</b> Add th<br>Enter here and in block |            |                  | riber group a | s shown in the boxes a                 | bove.     | \$               |        |                      |

| FORM SA3E. P | AGE 19. |
|--------------|---------|
|--------------|---------|

| LEGAL NAME OF OWNER   |           |                  |                      |  |         | S         | YSTEM ID#<br>62443 | Name                     |
|---|-----------|------------------|----------------------|--|---------|-----------|--------------------|--------------------------|
| В   | LOCK A:   | COMPUTATION OF   | BASE RA              | TE FEES FOR EACH                           | SUBSCRI | BER GROUP |                    |                          |
| ONE HUNDRED THIRTY-THIRD SUBSCRIBER GROUP   |           |                  |                      | ONE HUNDRED THIRTY-FOURTH SUBSCRIBER GROUP |         |           |                    | 9                        |
| COMMUNITY/ AREA 0   |           |                  |                      | COMMUNITY/ AREA                            |         |           | 0                  | Computation              |
| CALL SIGN DSE CALL SIGN DSE   |           |                  |                      | CALL SIGN                                  | DSE     | CALL SIGN | DSE                | of                       |
|   |           |                  |                      |  |         |           |                    | Base Rate Fee            |
|   |           |                  |                      |  |         |           |                    | and                      |
|   |           |                  |                      |  |         |           |                    | Syndicated               |
|   |           |                  |                      |  |         |           |                    | Exclusivity<br>Surcharge |
|   |           |                  |                      |  |         |           |                    | for                      |
|   |           |                  |                      |  |         |           |                    | Partially                |
|   |           |                  |                      |  |         |           |                    | Distant                  |
|   |           |                  |                      |  |         |           |                    | Stations                 |
|   |           |                  |                      |  |         |           |                    |                          |
|   |           |                  |                      |  |         |           |                    |                          |
|   |           |                  |                      |  |         |           |                    |                          |
|   |           |                  |                      |  |         |           |                    |                          |
|   |           |                  |                      |  |         |           |                    |                          |
| Total DSEs  |           |                  | 0.00                 | Total DSEs                                 |         |           | 0.00               |                          |
| Gross Receipts First Gro  | oup       | \$               | 0.00                 | Gross Receipts Second                      | l Group | \$        | 0.00               |                          |
| Base Rate Fee First Group \$ 0.00   |           |                  | 0.00                 | Base Rate Fee Second                       | l Group | \$        | 0.00               |                          |
| ONE HUNDRED THI   | RTY-FIFTH | SUBSCRIBER GROUP |                      | ONE HUNDRED TH                             |         |           |                    |                          |
| 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 Gr   | roup      | \$               | 0.00                 | Gross Receipts Fourth                      | Group   | \$        | 0.00               |                          |
| Base Rate Fee Third Group \$ 0.00   |           | 0.00             | Base Rate Fee Fourth | Group                                      | \$      | 0.00      |                    |                          |
| Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |           |                  |                      |  |         |           |                    |                          |

| FORM SA | 3E. PA | GE 19. |
|---------|--------|--------|
|---------|--------|--------|

| LEGAL NAME OF OWNER                            |           |                  |             |                          |           | SI               | STEM ID#<br>62443 | Name                     |
|--|-----------|------------------|-------------|--------------------------|-----------|------------------|-------------------|--------------------------|
|  |           |                  | BASE RA     | TE FEES FOR EACH         | SUBSCRI   | BER GROUP        |                   |                          |
| ONE HUNDRED THIRTY-                            | SEVENTH   | SUBSCRIBER GROUP |             |                          | TY-EIGHTH | SUBSCRIBER GROUP |                   | 9                        |
| COMMUNITY/ AREA                                |           |                  | 0           | COMMUNITY/ AREA          |           |                  | 0                 | Computation              |
| CALL SIGN                                      | DSE       | CALL SIGN        | DSE         | CALL SIGN                | DSE       | CALL SIGN        | DSE               | of                       |
|  |           |                  |             |                          |           |                  |                   | Base Rate Fee            |
|  |           |                  |             |                          |           |                  |                   | and                      |
|  |           |                  |             |                          |           |                  |                   | Syndicated               |
|  |           |                  |             |                          |           |                  |                   | Exclusivity<br>Surcharge |
|  |           |                  |             |                          |           |                  |                   | for                      |
|  |           |                  |             |                          |           |                  |                   | Partially                |
|  |           |                  |             |                          |           |                  |                   | Distant                  |
|  |           |                  |             |                          |           |                  |                   | Stations                 |
|  |           |                  |             |                          |           |                  |                   |                          |
|  |           |                  |             |                          |           |                  |                   |                          |
|  |           |                  |             |                          |           |                  |                   |                          |
|  |           |                  |             |                          |           |                  |                   |                          |
|  |           |                  | 0.00        | T. ( ) DOF               |           |                  | 0.00              |                          |
| Total DSEs                                     |           |                  | 0.00        | Total DSEs               |           |                  | 0.00              |                          |
| Gross Receipts First Gro                       | oup       | \$               | 0.00        | Gross Receipts Second    | l Group   | \$               | 0.00              |                          |
| Base Rate Fee First Gro                        | oup       | \$               | 0.00        | Base Rate Fee Second     | l Group   | \$               | 0.00              |                          |
| ONE HUNDRED THIF                               | RTY-NINTH | SUBSCRIBER GROUP |             |                          | FORTIETH  | SUBSCRIBER GROUP | >                 |                          |
| 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 G                         | oup       | \$               | 0.00        | Gross Receipts Fourth    | Group     | \$               | 0.00              |                          |
| Base Rate Fee Third G                          | oup       | \$               | 0.00        | Base Rate Fee Fourth     | Group     | \$               | 0.00              |                          |
| Base Rate Fee: Add the Enter here and in block |           |                  | ber group a | s shown in the boxes abo | ve.       | \$               |                   |                          |

| FORM SA3E. P | AGE 19. |
|--------------|---------|
|--------------|---------|

| LEGAL NAME OF OWNER<br>Atlantic Broadbanc        |                                     |  |             |                           |           | S                | YSTEM ID#<br>62443 | Name                     |
|--|-------------------------------------|--|-------------|---------------------------|-----------|------------------|--------------------|--------------------------|
| В  | LOCK A:                             | COMPUTATION OF                                     | BASE RA     | ATE FEES FOR EACH         | SUBSCRI   | BER GROUP        |                    |                          |
|  | RTY-FIRST                           | SUBSCRIBER GROUP                                   |             |                           | Y-SECOND  | SUBSCRIBER GROUP |                    | 9                        |
| COMMUNITY/ AREA                                  |                                     |  | 0           | COMMUNITY/ AREA           |           |                  | 0                  | Computation              |
| CALL SIGN  | DSE                                 | CALL SIGN  | DSE         | CALL SIGN                 | DSE       | CALL SIGN        | DSE                | of                       |
|  |                                     |  |             |                           |           |                  |                    | Base Rate Fee            |
|  |                                     |  |             |                           |           |                  |                    | and                      |
|  |                                     |  |             |                           |           |                  |                    | Syndicated               |
|  |                                     |  |             |                           |           |                  |                    | Exclusivity<br>Surcharge |
|  |                                     |  |             |                           |           |                  |                    | for                      |
|  |                                     |  |             |                           |           |                  |                    | Partially                |
|  |                                     |  |             |                           |           |                  |                    | Distant                  |
|  |                                     |  |             |                           |           |                  |                    | Stations                 |
|  |                                     |  |             |                           |           |                  |                    |                          |
|  |                                     |  |             |                           |           |                  |                    |                          |
|  |                                     |  |             |                           |           |                  |                    |                          |
|  |                                     |  |             |                           |           |                  |                    |                          |
|  |                                     |  |             |                           |           |                  |                    |                          |
| Total DSEs                                       |                                     |  | 0.00        | Total DSEs                |           |                  | 0.00               |                          |
| Gross Receipts First Gro                         | oup                                 | \$   | 0.00        | Gross Receipts Second     | l Group   | \$               | 0.00               |                          |
| Base Rate Fee First Gro                          | oup                                 | \$   | 0.00        | Base Rate Fee Second      | l Group   | \$               | 0.00               |                          |
| ONE HUNDRED FOR                                  | RTY-THIRD                           | SUBSCRIBER GROUP                                   |             | 11                        | TY-FOURTH | SUBSCRIBER GROUP |                    |                          |
| 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 Gr                          | oup                                 | \$   | 0.00        | Gross Receipts Fourth     | Group     | \$               | 0.00               |                          |
| Base Rate Fee Third Gr                           | oup                                 | \$   | 0.00        | Base Rate Fee Fourth      | Group     | \$               | 0.00               |                          |
| Base Rate Fee: Add the Enter here and in block 3 | e <b>base rate</b><br>3, line 1, sp | e <b>fees</b> for each subscril<br>bace L (page 7) | per group a | as shown in the boxes abo | ove.      | \$               |                    |                          |

| FORM SA3E | . PAGE | 19. |
|-----------|--------|-----|
|-----------|--------|-----|

| LEGAL NAME OF OWNER                              |  |                  |             |                          |            | S                | YSTEM ID#<br>62443 | Name                     |
|--|--|------------------|-------------|--------------------------|------------|------------------|--------------------|--------------------------|
| В  | LOCK A:  | COMPUTATION OF   | BASE RA     | ATE FEES FOR EACH        | I SUBSCRI  | BER GROUP        |                    |                          |
|  | ORTY-FIFTH SUBSCRIBER GROUP ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP |                  |             |                          |            |                  | 9                  |                          |
| COMMUNITY/ AREA                                  |  |                  | 0           | COMMUNITY/ AREA          |            |                  | 0                  | Computation              |
| CALL SIGN  | DSE  | CALL SIGN        | DSE         | CALL SIGN                | DSE        | CALL SIGN        | DSE                | of                       |
|  |  |                  |             |                          |            |                  |                    | Base Rate Fee            |
|  |  |                  |             |                          |            |                  |                    | and                      |
|  |  |                  |             |                          |            |                  |                    | Syndicated               |
|  |  |                  |             |                          |            |                  |                    | Exclusivity<br>Surcharge |
|  |  |                  |             |                          |            |                  | •••••              | for                      |
|  |  |                  |             |                          |            |                  |                    | Partially                |
|  |  |                  |             |                          |            |                  |                    | Distant                  |
|  |  |                  |             |                          |            |                  |                    | Stations                 |
|  |  |                  |             |                          |            |                  |                    |                          |
|  |  |                  |             |                          |            |                  |                    |                          |
|  |  |                  |             |                          |            |                  |                    |                          |
|  |  |                  |             |                          |            |                  |                    |                          |
|  |  |                  |             |                          |            |                  |                    |                          |
| Total DSEs                                       |  |                  | 0.00        | Total DSEs               |            |                  | 0.00               |                          |
| Gross Receipts First Gro                         | oup  | \$               | 0.00        | Gross Receipts Secor     | nd Group   | \$               | 0.00               |                          |
| Base Rate Fee First Gro                          | oup  | \$               | 0.00        | Base Rate Fee Secor      | nd Group   | \$               | 0.00               |                          |
| ONE HUNDRED FORTY-                               | SEVENTH  | SUBSCRIBER GROUP |             | ONE HUNDRED FO           | RTY-EIGHTH | SUBSCRIBER GROUP |                    |                          |
| 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 Gr                          | roup   | \$               | 0.00        | Gross Receipts Fourth    | h Group    | \$               | 0.00               |                          |
| Base Rate Fee Third Gr                           | roup   | \$               | 0.00        | Base Rate Fee Fourth     | n Group    | \$               | 0.00               |                          |
| Base Rate Fee: Add the Enter here and in block 3 |  |                  | per group a | as shown in the boxes ab | oove.      | \$               |                    |                          |
|  | o, inio 1, 5   | Lase - (page /)  |             |                          |            | <b>•</b>         |                    |                          |

| FORM SA | 3E. PA | GE 19. |
|---------|--------|--------|
|---------|--------|--------|

| LEGAL NAME OF OWNEF                            |          |                 |             |                           |                             | S               | YSTEM ID#<br>62443 | Name                      |
|--|----------|-----------------|-------------|---------------------------|-----------------------------|-----------------|--------------------|---------------------------|
|  |          |                 |             | TE FEES FOR EACH          | SUBSCR                      | IBER GROUP      |                    |                           |
| ONE HUNDRED FORT                               | TY-NINTH | SUBSCRIBER GROU |             |                           | ) FIFTIETH                  | SUBSCRIBER GROU |                    | 9                         |
| COMMUNITY/ AREA                                |          |                 | 0           | COMMUNITY/ AREA           |                             |                 | 0                  | Computation               |
| CALL SIGN                                      | DSE      | CALL SIGN       | DSE         | CALL SIGN                 | CALL SIGN DSE CALL SIGN DSE |                 |                    |                           |
|  |          |                 |             |                           |                             |                 |                    | Base Rate Fee             |
|  |          |                 |             |                           |                             |                 |                    | and                       |
|  |          |                 |             |                           |                             |                 |                    | Syndicated<br>Exclusivity |
|  |          |                 |             |                           |                             |                 |                    | Surcharge                 |
|  |          |                 |             |                           |                             |                 |                    | for                       |
|  |          |                 |             |                           |                             |                 |                    | Partially                 |
|  |          |                 |             |                           |                             |                 |                    | Distant                   |
|  |          |                 |             |                           |                             |                 |                    | Stations                  |
|  |          |                 |             |                           |                             |                 |                    |                           |
|  |          |                 |             |                           |                             |                 |                    |                           |
|  |          |                 |             |                           |                             |                 |                    |                           |
|  |          |                 |             |                           |                             |                 |                    |                           |
| T (   DOC                                      |          |                 | 0.00        |                           |                             |                 | 0.00               |                           |
| Total DSEs                                     |          |                 | 0.00        | Total DSEs                |                             |                 | 0.00               |                           |
| Gross Receipts First Gro                       | oup      | \$              | 0.00        | Gross Receipts Second     | I Group                     | \$              | 0.00               |                           |
| Base Rate Fee First Gro                        | oup      | \$              | 0.00        | Base Rate Fee Second      | l Group                     | \$              | 0.00               |                           |
| ONE HUNDRED FIF                                | TY-FIRST | SUBSCRIBER GROU | Р           | ONE HUNDRED FIFT          | -SECOND                     | 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 G                         | roup     | \$              | 0.00        | Gross Receipts Fourth     | Group                       | \$              | 0.00               |                           |
| Base Rate Fee Third G                          | roup     | \$              | 0.00        | Base Rate Fee Fourth      | Group                       | \$              | 0.00               |                           |
| Base Rate Fee: Add the Enter here and in block |          |                 | ber group a | is shown in the boxes abo | )ve.                        | \$              |                    |                           |

| FORM SA | 3E. PA | GE 19. |
|---------|--------|--------|
|---------|--------|--------|

| LEGAL NAME OF OWN<br>Atlantic Broadba               |             |                |                |                    |             | :                | 62443 | Name             |
|---|-------------|----------------|----------------|--------------------|-------------|------------------|-------|------------------|
|   |             |                |                | TE FEES FOR EAG    | CH SUBSCR   | IBER GROUP       |       |                  |
|   |             | SUBSCRIBER GRO |                |                    |             | SUBSCRIBER GRO   |       | 9                |
| COMMUNITY/ AREA                                     |             |                | 0              | COMMUNITY/ ARE     | Α           |                  | 0     | Computation      |
| CALL SIGN   | DSE         | CALL SIGN      | DSE            | CALL SIGN          | DSE         | CALL SIGN        | DSE   | of               |
|   |             |                |                |                    |             |                  |       | Base Rate Fee    |
|   |             |                |                |                    |             |                  |       | and              |
|   |             |                |                |                    |             |                  |       | Syndicated       |
|   |             |                |                |                    |             |                  |       | Exclusivity      |
|   |             | -              |                |                    |             |                  |       | Surcharge<br>for |
|   |             |                |                |                    |             |                  |       | Partially        |
|   |             |                |                |                    |             |                  |       | Distant          |
|   |             |                |                |                    |             |                  |       | Stations         |
|   |             |                |                |                    |             |                  |       |                  |
|   |             |                |                |                    |             |                  |       |                  |
|   |             |                |                |                    |             |                  |       |                  |
|   |             |                |                |                    |             |                  |       |                  |
|   |             |                |                |                    |             |                  |       |                  |
| Total DSEs  |             |                | 0.00           | Total DSEs         |             |                  | 0.00  |                  |
| Gross Receipts First                                | Group       | \$             | 0.00           | Gross Receipts Sec | ond Group   | \$               | 0.00  |                  |
| Base Rate Fee First                                 | Group       | \$             | 0.00           | Base Rate Fee Sec  | ond Group   | \$               | 0.00  |                  |
| ONE HUNDRED F                                       | FIFTY-FIFTH | SUBSCRIBER GRO | OUP            | ONE HUNDRED        | FIFTY-SIXTH | I SUBSCRIBER GRO | UP    |                  |
| COMMUNITY/ AREA                                     |             |                | 0              | COMMUNITY/ ARE     | Α           |                  | 0     |                  |
| CALL SIGN   | DSE         | CALL SIGN      | DSE            | CALL SIGN          | DSE         | CALL SIGN        | DSE   |                  |
|   |             |                |                |                    |             |                  |       |                  |
|   |             |                |                |                    |             |                  |       |                  |
|   |             |                |                |                    |             |                  |       |                  |
|   |             |                |                |                    |             |                  |       |                  |
|   |             |                |                |                    |             |                  |       |                  |
|   |             |                |                |                    |             |                  |       |                  |
|   |             |                |                |                    |             |                  |       |                  |
|   |             |                |                |                    |             |                  |       |                  |
|   |             |                |                |                    |             |                  |       |                  |
|   |             |                |                |                    |             |                  |       |                  |
|   |             |                |                |                    |             |                  |       |                  |
|   |             |                |                |                    |             |                  |       |                  |
| Total DSEs  |             |                | 0.00           | Total DSEs         |             |                  | 0.00  |                  |
| Gross Receipts Third                                | l Group     | \$             | 0.00           | Gross Receipts Fou | rth Group   | \$               | 0.00  |                  |
| Base Rate Fee Third                                 | l Group     | \$             | 0.00           | Base Rate Fee Fou  | rth Group   | \$               | 0.00  |                  |
| <b>Base Rate Fee</b> : Add<br>Enter here and in blo |             |                | criber group a | II                 | above.      | \$               |       |                  |

| FORM SA3E. PAG | iΕ | 19. |
|----------------|----|-----|
|----------------|----|-----|

| LEGAL NAME OF OWNER                              |          |                  |             |                          |             | S                | YSTEM ID#<br>62443 | Name                      |
|--|----------|------------------|-------------|--------------------------|-------------|------------------|--------------------|---------------------------|
|  |          |                  | BASE RA     | ATE FEES FOR EACH        | I SUBSCRI   | BER GROUP        |                    |                           |
| ONE HUNDRED FIFTY-                               | SEVENTH  | SUBSCRIBER GROUP |             | 11                       | FTY-EIGHTH  | SUBSCRIBER GROUP |                    | 9                         |
| COMMUNITY/ AREA                                  |          |                  | 0           | COMMUNITY/ AREA          |             |                  | 0                  | Computation               |
| CALL SIGN  | DSE      | CALL SIGN        | DSE         | CALL SIGN                | DSE         | CALL SIGN        | DSE                | of                        |
|  |          |                  |             |                          |             |                  |                    | Base Rate Fee             |
|  |          |                  |             |                          |             |                  |                    | and                       |
|  |          |                  |             |                          |             |                  |                    | Syndicated<br>Exclusivity |
|  |          |                  |             |                          |             |                  |                    | Surcharge                 |
|  |          |                  |             |                          |             |                  |                    | for                       |
|  |          |                  |             |                          |             |                  |                    | Partially                 |
|  |          |                  |             |                          |             |                  |                    | Distant<br>Stations       |
|  |          |                  |             |                          | •••         |                  |                    | olutions                  |
|  |          |                  |             |                          |             |                  |                    |                           |
|  |          |                  |             |                          |             |                  |                    |                           |
|  |          |                  |             |                          |             |                  |                    |                           |
|  |          |                  |             |                          |             |                  |                    |                           |
| Total DSEs                                       |          |                  | 0.00        | Total DSEs               | ŀ           |                  | 0.00               |                           |
| Gross Receipts First Gro                         | oup      | \$               | 0.00        | Gross Receipts Secon     | d Group     | \$               | 0.00               |                           |
| Base Rate Fee First Gro                          | oup      | \$               | 0.00        | Base Rate Fee Secon      | d Group     | \$               | 0.00               |                           |
| ONE HUNDRED FIF                                  | TY-NINTH | SUBSCRIBER GROUP |             | ONE HUNDR                | ED SIXTIETH | SUBSCRIBER GROUP |                    |                           |
| 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 Gr                          | oup      | \$               | 0.00        | Gross Receipts Fourth    | n Group     | \$               | 0.00               |                           |
| Base Rate Fee Third Gr                           | oup      | \$               | 0.00        | Base Rate Fee Fourth     | n Group     | \$               | 0.00               |                           |
| Base Rate Fee: Add the Enter here and in block 3 |          |                  | per group a | as shown in the boxes ab | ove.        | \$               |                    |                           |
|  |          |                  |             |                          |             |                  |                    |                           |

# Nonpermitted 3.75 Stations

| LEGAL NAME OF OWNE<br>Atlantic Broadban                 |          |                |               |                         |            | 5                 | 62443 | Name                      |
|---|----------|----------------|---------------|-------------------------|------------|-------------------|-------|---------------------------|
|   | BLOCK A: | COMPUTATION C  | F BASE RA     | TE FEES FOR EA          | CH SUBSCR  | IBER GROUP        |       |                           |
|   | FIRST    | SUBSCRIBER GRC | UP            | SECOND SUBSCRIBER GROUP |            |                   |       | 0                         |
| COMMUNITY/ AREA   | Groton   |                |               | COMMUNITY/ AREA 0       |            |                   |       | 9<br>Computation          |
| CALL SIGN   | DSE      | CALL SIGN      | DSE           | CALL SIGN               | DSE        | CALL SIGN         | DSE   | of                        |
|   |          |                |               |                         |            |                   |       | Base Rate Fe              |
|   |          |                |               |                         |            |                   |       | and<br>Sundiacted         |
|   |          |                |               |                         |            |                   |       | Syndicated<br>Exclusivity |
|   |          | •              |               |                         |            |                   |       | Surcharge                 |
|   |          |                |               |                         |            |                   |       | for                       |
|   |          |                |               |                         |            |                   |       | Partially                 |
|   |          |                |               |                         |            |                   |       | Distant                   |
|   |          |                |               |                         |            |                   | ····· | Stations                  |
|   |          |                |               |                         |            |                   |       |                           |
|   |          |                |               |                         |            |                   |       |                           |
|   |          |                |               |                         |            |                   |       |                           |
|   |          |                |               |                         |            |                   |       |                           |
|   |          |                |               |                         |            |                   |       |                           |
| Total DSEs  |          |                | 0.00          | Total DSEs              |            |                   | 0.00  |                           |
| Gross Receipts First G                                  | roup     | \$ 60          | 3,948.05      | Gross Receipts Sec      | ond Group  | \$                | 0.00  |                           |
| Base Rate Fee First G                                   | roup     | \$             | 0.00          | Base Rate Fee Sec       | cond Group | \$                | 0.00  |                           |
|   | THIRD    | SUBSCRIBER GRO | UP            |                         | FOURTH     | H 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 G                                  | Froup    | \$             | 0.00          | Gross Receipts Fou      | irth Group | \$                | 0.00  |                           |
|   |          | ·              |               |                         |            | ·                 |       |                           |
| Base Rate Fee Third G                                   | Group    | \$             | 0.00          | Base Rate Fee Fou       | irth Group | \$                | 0.00  |                           |
| <b>Base Rate Fee:</b> Add th<br>Enter here and in block |          |                | riber group a | ns shown in the boxes   | above.     | \$                | 0.00  |                           |

| Computation       Computation       Computation         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call       Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call       Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call       Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call       Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call       Call SIGN       Call SIGN       Call SIGN       Call SIGN       Call SIGN       Call SIGN         Call DSEs  | Atlantic Broadba       | nd (CT) L  | E SYSTEM:<br>L <b>C</b> |            |                                     |            |                  | 62443 | Name        |
|---|------------------------|------------|-------------------------|------------|-------------------------------------|------------|------------------|-------|-------------|
| MMUNITY/AREA  |                        | BLOCK A:   | COMPUTATION (           | OF BASE RA | TE FEES FOR EAG                     | CH SUBSCR  | IBER GROUP       |       |             |
| Conjusta  |                        | FIFTH      | SUBSCRIBER GRO          | UP         | SIXTH SUBSCRIBER GROUP              |            |                  | UP    | •           |
| CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE         Base Rate           I <td< th=""><th>COMMUNITY/ AREA</th><th></th><th></th><th>0</th><th>COMMUNITY/ ARE</th><th>Α</th><th></th><th>0</th><th></th></td<>  | COMMUNITY/ AREA        |            |                         | 0          | COMMUNITY/ ARE                      | Α          |                  | 0     |             |
| Image: Second Group  |                        |            |                         |            |                                     |            |                  |       |             |
| and         Syndica         and         <   | CALL SIGN              | DSE        |                         | DSE        |                                     | DSE        |                  | DSE   | Base Rate F |
| syndical Exclusion         i  |                        |            |                         |            |                                     |            |                  |       |             |
| Image: Second Group       Image: Second Group<  |                        |            |                         |            |                                     |            |                  |       | Syndicate   |
| indicator   |                        |            |                         |            |                                     |            |                  |       | Exclusivit  |
| Image: Second Score Second |                        |            |                         |            |                                     |            |                  |       | Surcharge   |
| Image: Second |                        |            |                         |            |                                     |            |                  |       | for         |
| Station         Image: State Field Second Group         Image: Second Gro   |                        |            |                         |            |                                     |            |                  |       | Partially   |
| tal DSEs       0.00       Total DSEs       0.00         tal DSEs       0.00       Total DSEs       0.00         sse Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       0.00         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       0.00       0.00         SEVENTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       0.00       0.00       0.00         SEVENTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       0.00       0.00       0.00         SEVENTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       0.00       0.00       0.00         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 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Distant</td>   |                        |            |                         |            |                                     |            |                  |       | Distant     |
| oss Receipts First Group       \$       0.00         see Rate Fee First Group       \$       0.00         Base Rate Fee Second Group       \$       0.00         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         DMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CAL  |                        |            |                         |            |                                     |            |                  |       | Stations    |
| oss Receipts First Group       \$       0.00         see Rate Fee First Group       \$       0.00         Base Rate Fee Second Group       \$       0.00         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         DMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CAL  |                        |            |                         |            |                                     |            |                  |       |             |
| oss Receipts First Group       \$       0.00         see Rate Fee First Group       \$       0.00         Base Rate Fee Second Group       \$       0.00         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         DMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CAL  |                        |            |                         |            |                                     |            |                  |       |             |
| oss Receipts First Group       \$       0.00         see Rate Fee First Group       \$       0.00         Base Rate Fee Second Group       \$       0.00         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         DMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CAL  |                        |            |                         |            |                                     |            |                  |       |             |
| oss Receipts First Group       \$       0.00         see Rate Fee First Group       \$       0.00         Base Rate Fee Second Group       \$       0.00         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         DMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CAL  |                        |            |                         |            |                                     |            |                  |       |             |
| oss Receipts First Group       \$       0.00         see Rate Fee First Group       \$       0.00         Base Rate Fee Second Group       \$       0.00         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         DMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CAL  |                        |            |                         |            |                                     |            |                  |       |             |
| Isse Rate Fee First Group       Image: Seventh SUBSCRIBER GROUP       Eighth SUBSCRIBER GROUP         SEVENTH SUBSCRIBER GROUP       Eighth SUBSCRIBER GROUP         DMMUNITY/ AREA       0         CALL SIGN       DSE         COM       COM         COM       COM         CALL SIGN       COM   | Fotal DSEs             |            |                         | 0.00       | Total DSEs                          |            |                  | 0.00  |             |
| SEVENTH SUBSCRIBER GROUP         EIGHTH SUBSCRIBER GROUP           DMMUNITY/ AREA         0           CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         CALL SIGN           CALL SIGN         CALL SIGN         CALL SIGN         CALL SIGN   | Gross Receipts First ( | Group      | \$                      | 0.00       | Gross Receipts Second Group \$ 0.00 |            |                  | 0.00  |             |
| SEVENTH SUBSCRIBER GROUP         EIGHTH SUBSCRIBER GROUP           DMMUNITY/ AREA         0           CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         CALL SIGN           CALL SIGN         CALL SIGN         CALL SIGN         CALL SIGN   |                        |            |                         |            |                                     |            | [                |       |             |
| DMMUNITY/ AREA       O       COMMUNITY/ AREA       O         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       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN  | Base Rate Fee First (  | Group      | \$                      | 0.00       | Base Rate Fee Sec                   | ond Group  | \$               | 0.00  |             |
| DALL 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       Lange       Lange       Lange       Lange       Lange       Lange         CALL SIGN       Lange       Lange       Lange       Lange       Lange       Lange       Lange       Lange         CALL SIGN       Lange   |                        | SEVENTH    | SUBSCRIBER GRO          | )UP        |                                     | EIGHTH     | H SUBSCRIBER GRO | UP    |             |
| tal DSEs 0.00 Total DSEs 0.00   | COMMUNITY/ AREA        |            |                         | 0          | COMMUNITY/ ARE                      |            |                  |       |             |
|   | CALL SIGN              | DSE        | CALL SIGN               | DSE        | CALL SIGN                           | DSE        | CALL SIGN        | DSE   |             |
|   |                        |            |                         |            |                                     |            |                  |       |             |
|   |                        |            |                         |            |                                     |            |                  |       |             |
|   |                        |            |                         |            |                                     |            |                  |       |             |
|   |                        |            |                         |            |                                     |            |                  |       |             |
|   |                        |            |                         |            |                                     |            |                  |       |             |
|   |                        |            |                         |            |                                     |            |                  |       |             |
|   |                        |            |                         |            |                                     |            |                  |       |             |
|   |                        |            |                         |            |                                     |            |                  |       |             |
|   |                        |            |                         |            |                                     |            |                  |       |             |
|   |                        |            |                         |            |                                     |            |                  |       |             |
|   |                        |            |                         |            |                                     |            |                  |       |             |
|   |                        |            |                         |            |                                     |            |                  |       |             |
|   |                        |            |                         |            |                                     |            |                  |       |             |
| oss Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00  | Total DSEs             |            |                         | 0.00       | Total DSEs                          |            |                  | 0.00  |             |
|   | Gross Receipts Third   | Group      | \$                      | 0.00       | Gross Receipts Fou                  | irth Group | \$               | 0.00  |             |
|   |                        | ч <b>г</b> | ·                       |            |                                     | - · Pr     | ·                |       |             |
| Ise Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00   | Base Rate Fee Third    | Group      | \$                      | 0.00       | Base Rate Fee Fou                   | irth Group | \$               | 0.00  |             |

| LEGAL NAME OF OWN                                  |  |  |                    |                        |            | :                | SYSTEM ID#<br>62443 | Name              |
|--|--|--|--------------------|------------------------|------------|------------------|---------------------|-------------------|
|  | BLOCK A:                               | COMPUTATION (                                  | DF BASE RA         | TE FEES FOR EA         | CH SUBSCR  | IBER GROUP       |                     |                   |
|  | NINTH                                  | SUBSCRIBER GRO                                 | DUP                | TENTH SUBSCRIBER GROUP |            |                  |                     | 0                 |
| COMMUNITY/ AREA                                    |  |  | 0                  | COMMUNITY/ ARE         | 9          |                  |                     |                   |
| CALL SIGN  | DSE                                    | CALL SIGN                                      | DSE                | CALL SIGN              | DSE        | CALL SIGN        | DSE                 | Computation<br>of |
|  |  |  |                    |                        |            |                  |                     | Base Rate Fe      |
|  |  |  |                    |                        |            |                  |                     | and               |
|  |  |  |                    |                        |            |                  |                     | Syndicated        |
|  |  |  |                    |                        |            |                  |                     | Exclusivity       |
|  |  |  |                    |                        |            |                  |                     | Surcharge<br>for  |
|  |  |  |                    |                        |            |                  |                     | Partially         |
|  |  |  |                    |                        |            |                  |                     | Distant           |
|  |  |  |                    |                        |            |                  |                     | Stations          |
|  |  |  |                    |                        |            |                  |                     |                   |
|  |  |  |                    |                        |            |                  |                     |                   |
|  |  |  |                    |                        |            |                  |                     |                   |
|  |  |  |                    |                        |            |                  |                     |                   |
|  |  |  |                    |                        |            |                  |                     |                   |
| Total DSEs   |  |  | 0.00               | Total DSEs             |            |                  | 0.00                |                   |
| Gross Receipts First                               | Group                                  | \$   | 0.00               | Gross Receipts Sec     | cond Group | \$               | 0.00                |                   |
| Base Rate Fee First                                | Group                                  | \$   | 0.00               | Base Rate Fee Sec      | cond Group | \$               | 0.00                |                   |
|  | ELEVENTH                               | SUBSCRIBER GRO                                 | DUP                |                        | TWELVTH    | I SUBSCRIBER GRO | UP                  |                   |
| COMMUNITY/ AREA                                    |  |  | 0                  | COMMUNITY/ ARE         |            |                  |                     |                   |
| CALL SIGN  | DSE                                    | CALL SIGN                                      | DSE                | CALL SIGN              | DSE        | CALL SIGN        | DSE                 |                   |
|  |  |  |                    |                        |            |                  |                     |                   |
|  |  |  |                    |                        |            |                  |                     |                   |
|  |  |  |                    |                        |            |                  |                     |                   |
|  |  |  |                    |                        |            |                  |                     |                   |
|  |  |  |                    |                        |            |                  |                     |                   |
|  |  |  |                    |                        |            |                  |                     |                   |
|  |  | -  |                    |                        |            |                  |                     |                   |
|  |  |  |                    |                        |            |                  |                     |                   |
|  |  |  |                    |                        |            |                  |                     |                   |
|  |  |  |                    |                        |            |                  |                     |                   |
|  |  |  |                    |                        |            |                  |                     |                   |
|  |  |  |                    |                        |            |                  |                     |                   |
| Total DSEs   |  |  | 0.00               | Total DSEs             |            |                  | 0.00                |                   |
| Gross Receipts Third Group \$ 0.00                 |  | 0.00   | Gross Receipts Fou | irth Group             | \$         | 0.00             |                     |                   |
| Base Rate Fee Third Group \$ 0.00                  |  | 0.00   | Base Rate Fee Fou  | irth Group             | \$         | 0.00             |                     |                   |
| <b>Base Rate Fee:</b> Add<br>Enter here and in blo | the <b>base rat</b><br>ck 3, line 1, s | <b>e fees</b> for each subs<br>pace L (page 7) | criber group a     | II                     | above.     | \$               |                     |                   |

| LEGAL NAME OF OWI                                  |           |                |                |                    |                                     | s                 | 62443 | Name                 |  |
|--|-----------|----------------|----------------|--------------------|-------------------------------------|-------------------|-------|----------------------|--|
|  | BLOCK A   | COMPUTATION (  | OF BASE RA     | ATE FEES FOR EA    | CH SUBSCR                           | IBER GROUP        |       |                      |  |
| Т  | HIRTEENTH | SUBSCRIBER GRO | DUP            |                    | OURTEENTH                           | I SUBSCRIBER GROU | JP    | 0                    |  |
| COMMUNITY/ AREA                                    | •         |                | 0              | COMMUNITY/ AREA 0  |                                     |                   |       | 9                    |  |
| CALL SIGN  | DSE       | CALL SIGN      | DSE            | CALL SIGN          | DSE                                 | CALL SIGN         | DSE   | Computat<br>of       |  |
|  |           |                |                |                    |                                     |                   |       | Base Rate            |  |
|  |           |                |                |                    |                                     |                   |       | and                  |  |
|  |           |                |                |                    |                                     |                   |       | Syndicate            |  |
|  |           |                |                |                    |                                     |                   |       | Exclusivi            |  |
|  |           |                |                |                    |                                     |                   |       | Surcharg             |  |
|  |           |                |                |                    |                                     |                   |       | for                  |  |
|  |           |                |                |                    |                                     |                   |       | Partially<br>Distant |  |
|  |           |                |                |                    |                                     |                   |       | Stations             |  |
|  |           |                |                |                    |                                     |                   |       | olution              |  |
|  |           |                |                |                    |                                     |                   |       |                      |  |
|  |           |                |                |                    |                                     |                   |       |                      |  |
|  |           |                |                |                    |                                     |                   |       |                      |  |
|  |           |                |                |                    |                                     |                   |       |                      |  |
|  |           |                |                |                    |                                     |                   |       |                      |  |
| Fotal DSEs   |           |                | 0.00           | Total DSEs         |                                     |                   | 0.00  |                      |  |
| Gross Receipts First                               | Group     | \$             | 0.00           | Gross Receipts See | Gross Receipts Second Group \$ 0.00 |                   |       |                      |  |
| Base Rate Fee First                                | Group     | \$             | 0.00           | Base Rate Fee Sec  | cond Group                          | \$                | 0.00  |                      |  |
|  |           | SUBSCRIBER GRO |                |                    | SIVTEENITL                          | I SUBSCRIBER GROU |       |                      |  |
| COMMUNITY/ AREA                                    |           | SUBSCRIBER GRO | 0              | COMMUNITY/ ARE     |                                     | 1 SUBSCRIBER GROU | 0     |                      |  |
|  | `<br>     |                |                |                    |                                     |                   |       |                      |  |
| CALL SIGN  | DSE       | CALL SIGN      | N DSE          | CALL SIGN          | DSE                                 | CALL SIGN         | DSE   |                      |  |
|  |           |                |                |                    |                                     |                   |       |                      |  |
|  |           |                |                |                    |                                     |                   |       |                      |  |
|  |           |                |                |                    |                                     |                   |       |                      |  |
|  |           |                |                |                    |                                     |                   |       |                      |  |
|  |           |                |                |                    |                                     |                   |       |                      |  |
|  |           |                |                |                    |                                     |                   |       |                      |  |
|  |           |                |                |                    |                                     |                   |       |                      |  |
|  |           |                |                |                    |                                     |                   |       |                      |  |
|  |           |                |                |                    |                                     |                   |       |                      |  |
|  |           |                |                |                    |                                     |                   |       |                      |  |
|  |           |                | •••••          |                    |                                     |                   | ••••• |                      |  |
|  |           |                |                |                    |                                     |                   |       |                      |  |
|  |           |                |                |                    |                                     |                   |       |                      |  |
| Fotal DSEs   |           |                | 0.00           | Total DSEs         | -                                   |                   | 0.00  |                      |  |
|  | Croup     | <u></u>        | 0.00           |                    | urth Croup                          | •                 | 0.00  |                      |  |
| Gross Receipts Third                               | воор      | <u>ې</u>       | 0.00           | Gross Receipts For | aran Group                          | <u>ә</u>          | 0.00  |                      |  |
| Base Rate Fee Thirc                                | l Group   | \$             | 0.00           | Base Rate Fee For  | urth Group                          | \$                | 0.00  |                      |  |
| <b>Base Rate Fee:</b> Add<br>Enter here and in blo |           |                | criber group a | II                 | above.                              | \$                |       |                      |  |

| LEGAL NAME OF OWN                           |           |                | •<br>•         |                       |            | 5                | 62443  | Name              |
|---|-----------|----------------|----------------|-----------------------|------------|------------------|--------|-------------------|
|   | BLOCK A:  | COMPUTATION (  | OF BASE RA     | ATE FEES FOR EA       | CH SUBSCR  | IBER GROUP       |        |                   |
| SEV   | VENTEENTH | SUBSCRIBER GRO | DUP            |                       | EIGHTEENTH | SUBSCRIBER GRO   | JP     | 0                 |
| COMMUNITY/ AREA                             | A         |                | 0              | COMMUNITY/ AREA 0     |            |                  |        | 9                 |
| CALL SIGN                                   | DSE       | CALL SIGN      | DSE            | CALL SIGN             | DSE        | CALL SIGN        | DSE    | Computation<br>of |
| ONLE OIGH                                   | DOL       |                | DOL            |                       | DOL        |                  | DOL    | Base Rate Fee     |
|   |           |                |                |                       |            |                  |        | and               |
|   |           |                |                |                       |            |                  |        | Syndicated        |
|   |           |                |                |                       |            |                  |        | Exclusivity       |
|   |           |                |                |                       |            |                  |        | Surcharge<br>for  |
|   |           |                |                |                       |            |                  |        | Partially         |
|   |           |                |                |                       |            |                  |        | Distant           |
|   |           |                |                |                       |            |                  |        | Stations          |
|   |           |                |                |                       |            |                  |        |                   |
|   |           |                |                |                       |            |                  | •••••• |                   |
|   |           |                |                |                       |            |                  |        |                   |
|   |           |                |                |                       |            |                  |        |                   |
|   |           |                |                |                       |            |                  |        |                   |
| Total DSEs                                  |           |                | 0.00           | Total DSEs            |            |                  | 0.00   |                   |
| Gross Receipts First                        | Group     | \$             | 0.00           | Gross Receipts Sec    | cond Group | \$               | 0.00   |                   |
| Base Rate Fee First                         | Group     | \$             | 0.00           | Base Rate Fee Sec     | cond Group | \$               | 0.00   |                   |
|   | NINTEENTH | SUBSCRIBER GRO | DUP            |                       | TWENTIETH  | I SUBSCRIBER GRO | JP     |                   |
| COMMUNITY/ AREA                             | A         |                | 0              | COMMUNITY/ ARE        | A          |                  | 0      |                   |
| CALL SIGN                                   | DSE       | CALL SIGN      | DSE            | CALL SIGN             | DSE        | CALL SIGN        | DSE    |                   |
|   |           |                |                |                       |            |                  |        |                   |
|   |           |                |                |                       |            |                  |        |                   |
|   |           |                |                |                       |            |                  |        |                   |
|   |           |                |                |                       |            |                  |        |                   |
|   |           |                |                |                       |            |                  |        |                   |
|   |           |                |                |                       |            |                  |        |                   |
|   |           |                |                |                       |            |                  |        |                   |
|   |           |                |                |                       |            |                  |        |                   |
|   |           |                |                |                       |            |                  |        |                   |
|   |           |                |                |                       |            |                  |        |                   |
|   |           |                |                |                       |            |                  |        |                   |
|   |           |                |                |                       |            |                  |        |                   |
| Total DSEs                                  |           |                | 0.00           | Total DSEs            |            |                  | 0.00   |                   |
| Gross Receipts Third                        | d Group   | \$             | 0.00           | Gross Receipts Fou    | urth Group | \$               | 0.00   |                   |
| Base Rate Fee Third                         | d Group   | \$             | 0.00           | Base Rate Fee Fou     | urth Group | \$               | 0.00   |                   |
| Base Rate Fee: Add<br>Enter here and in blo |           |                | criber group a | as shown in the boxes | above.     | \$               |        |                   |

# Nonpermitted 3.75 Stations

| LEGAL NAME OF OW<br>Atlantic Broadb |              |                      |                    |                             |            | 5               | 62443       |  |
|-------------------------------------|--------------|----------------------|--------------------|-----------------------------|------------|-----------------|-------------|--|
|                                     |              |                      |                    | ATE FEES FOR EA             |            |                 |             |  |
| TW<br>COMMUNITY/ ARE/               |              | SUBSCRIBER GRO       | )UP<br>0           | TWE                         |            | SUBSCRIBER GROU | JP <b>0</b> |  |
|                                     | ¬<br>        |                      | Ŭ                  |                             |            |                 |             |  |
| CALL SIGN                           | DSE          | CALL SIGN            | DSE                | CALL SIGN                   | DSE        | CALL SIGN       | DSE         |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
| otal DSEs                           | I            | 11                   | 0.00               | Total DSEs                  |            | 11              | 0.00        |  |
| ross Receipts First                 | Group        | \$                   | 0.00               | Gross Receipts Sec          | ond Group  | \$              | 0.00        |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
| se Rate Fee First                   |              | \$                   | 0.00               | Base Rate Fee Sec           |            | \$              | 0.00        |  |
|                                     |              | SUBSCRIBER GRC       | 0UP<br>0           | TWE                         |            | SUBSCRIBER GROU | JP<br>0     |  |
|                                     |              |                      | U                  |                             |            |                 |             |  |
| CALL SIGN                           | DSE          | CALL SIGN            | DSE                | CALL SIGN                   | DSE        | CALL SIGN       | DSE         |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 | •••••       |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
|                                     |              |                      |                    |                             |            |                 |             |  |
| otal DSEs                           |              | 11                   | 0.00               | Total DSEs                  |            |                 | 0.00        |  |
| Gross Receipts Third Group \$ 0.00  |              |                      | Gross Receipts Fou | irth Group                  | \$         | 0.00            |             |  |
|                                     |              |                      |                    | ·                           |            |                 |             |  |
| ase Rate Fee Third                  | d Group      | \$                   | 0.00               | Base Rate Fee Fou           | irth Group | \$              | 0.00        |  |
| Basa Rata East Ada                  | the base ret | a face for each subs | oriber group a     | II<br>as shown in the boxes | above      |                 |             |  |
| iter here and in blo                |              |                      | Super Group s      |                             | abuve.     | \$              |             |  |

| LEGAL NAME OF OW<br>Atlantic Broadb |                     |                  | •    |                                     |             | 5                | 62443 | Name                 |
|-------------------------------------|---------------------|------------------|------|-------------------------------------|-------------|------------------|-------|----------------------|
|                                     |                     |                  |      | TE FEES FOR EA                      | CH SUBSCR   | IBER GROUP       |       |                      |
| TW                                  | 'ENTY-FIFTH         | SUBSCRIBER GRO   | OUP  | TWENTY-SIXTH SUBSCRIBER GROUP       |             |                  |       | 0                    |
| COMMUNITY/ ARE                      | ۹                   |                  | 0    | COMMUNITY/ ARE                      | 9           |                  |       |                      |
| CALL SIGN                           | DSE                 | CALL SIGN        | DSE  | CALL SIGN                           | DSE         | CALL SIGN        | DSE   | Computat<br>of       |
|                                     |                     |                  |      |                                     |             |                  |       | Base Rate            |
|                                     |                     |                  |      |                                     |             |                  |       | and                  |
|                                     |                     |                  |      |                                     |             |                  |       | Syndicate            |
|                                     |                     |                  |      |                                     |             |                  |       | Exclusivi            |
|                                     |                     |                  |      |                                     |             |                  |       | Surcharg             |
|                                     |                     |                  |      |                                     |             |                  |       | for<br>Doution       |
|                                     |                     |                  |      |                                     |             |                  |       | Partially<br>Distant |
|                                     |                     |                  |      |                                     |             |                  |       | Stations             |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
| lotal DSEs                          |                     |                  | 0.00 | Total DSEs                          |             |                  | 0.00  |                      |
| Gross Receipts First                | Group               | \$               | 0.00 | Gross Receipts Second Group \$ 0.00 |             |                  |       |                      |
| Base Rate Fee First                 | Group               | \$               | 0.00 | Base Rate Fee Sec                   | cond Group  | \$               | 0.00  |                      |
| TWENT                               | Y-SEVENTH           | I SUBSCRIBER GRO | DUP  | TW                                  | ENTY-EIGHTH | I SUBSCRIBER GRO | JP    |                      |
| COMMUNITY/ ARE                      | ۹                   |                  | 0    | COMMUNITY/ ARE                      |             |                  |       |                      |
| CALL SIGN                           | DSE                 | CALL SIGN        | DSE  | CALL SIGN                           | DSE         | CALL SIGN        | DSE   |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
|                                     |                     |                  |      |                                     |             |                  |       |                      |
| lotal DSEs                          |                     |                  | 0.00 | Total DSEs                          |             |                  | 0.00  |                      |
| Gross Receipts Thire                | d Group             | \$               | 0.00 | Gross Receipts Fou                  | irth Group  | \$               | 0.00  |                      |
| Base Rate Fee Third                 | d Group             | \$               | 0.00 | Base Rate Fee Fou                   | urth Group  | \$               | 0.00  |                      |
|                                     | the <b>base rat</b> |                  |      | as shown in the boxes               |             | \$               |       |                      |

| LEGAL NAME OF OW<br>Atlantic Broadb         |          |                   | •              |                       |            | \$               | 62443  | Name              |
|---|----------|-------------------|----------------|-----------------------|------------|------------------|--------|-------------------|
|   | BLOCK A: | COMPUTATION (     | OF BASE RA     | ATE FEES FOR EA       | CH SUBSCR  | IBER GROUP       |        |                   |
|   |          | SUBSCRIBER GRO    |                |                       | THIRTIETH  | SUBSCRIBER GRO   | UP     | 9                 |
| COMMUNITY/ AREA                             | ۹        |                   | 0              | COMMUNITY/ AREA 0     |            |                  |        |                   |
| CALL SIGN                                   | DSE      | CALL SIGN         | DSE            | CALL SIGN             | DSE        | CALL SIGN        | DSE    | Computation<br>of |
|   |          |                   |                |                       |            |                  |        | Base Rate Fee     |
|   |          |                   |                |                       |            |                  |        | and               |
|   |          |                   |                |                       |            |                  |        | Syndicated        |
|   |          |                   |                |                       |            |                  |        | Exclusivity       |
|   |          |                   |                |                       |            |                  |        | Surcharge<br>for  |
|   |          |                   |                |                       |            |                  |        | Partially         |
|   |          |                   |                |                       |            |                  |        | Distant           |
|   |          |                   |                |                       |            |                  |        | Stations          |
|   |          |                   |                |                       |            |                  |        |                   |
|   |          |                   |                |                       |            |                  |        |                   |
|   |          |                   |                |                       |            |                  |        |                   |
|   |          |                   |                |                       |            |                  |        |                   |
|   |          |                   |                |                       |            |                  |        |                   |
| Total DSEs                                  |          |                   | 0.00           | Total DSEs            |            |                  | 0.00   |                   |
| Gross Receipts First                        | Group    | \$                | 0.00           | Gross Receipts Sec    | cond Group | \$               | 0.00   |                   |
| Base Rate Fee First                         | Group    | \$                | 0.00           | Base Rate Fee Sec     | cond Group | \$               | 0.00   |                   |
| т   |          | SUBSCRIBER GRO    |                | Т                     |            | ) SUBSCRIBER GRO |        |                   |
| COMMUNITY/ ARE/                             |          |                   | 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                        | d Group  | \$                | 0.00           | Gross Receipts Fou    | urth Group | \$               | 0.00   |                   |
|   |          |                   |                |                       |            |                  |        |                   |
| Base Rate Fee Third                         | d Group  | \$                | 0.00           | Base Rate Fee Fou     | urth Group | \$               | 0.00   |                   |
| Base Rate Fee: Add<br>Enter here and in blo |          |                   | criber group a | as shown in the boxes | above.     | \$               |        |                   |
|   |          | ,page = (page / ) |                |                       |            | Ψ                |        |                   |

| LEGAL NAME OF OW<br>Atlantic Broadb |              |                |      |                                     |              | 5               | 62443 | Name            |
|-------------------------------------|--------------|----------------|------|-------------------------------------|--------------|-----------------|-------|-----------------|
|                                     |              |                |      | TE FEES FOR EA                      | CH SUBSCR    | IBER GROUP      |       |                 |
|                                     |              | SUBSCRIBER GRO |      | THIRTY-FOURTH SUBSCRIBER GROUP      |              |                 |       | 9               |
| COMMUNITY/ ARE/                     |              |                | 0    | COMMUNITY/ ARE                      | Computat     |                 |       |                 |
| CALL SIGN                           | DSE          | CALL SIGN      | DSE  | CALL SIGN                           | DSE          | CALL SIGN       | DSE   | of              |
|                                     |              |                |      |                                     |              |                 |       | Base Rate       |
|                                     |              |                |      |                                     |              |                 |       | and             |
|                                     |              |                |      |                                     |              |                 |       | Syndicate       |
|                                     |              |                |      |                                     |              |                 |       | Exclusivi       |
|                                     |              |                |      |                                     |              |                 |       | Surcharg<br>for |
|                                     |              |                |      |                                     |              |                 |       | Partially       |
|                                     |              |                |      |                                     |              |                 |       | Distant         |
|                                     |              |                |      |                                     |              |                 |       | Stations        |
|                                     |              |                |      |                                     |              |                 |       |                 |
|                                     |              |                |      |                                     |              |                 |       |                 |
|                                     |              |                |      |                                     |              |                 |       |                 |
|                                     |              |                |      |                                     |              |                 |       |                 |
|                                     |              |                |      |                                     |              |                 |       |                 |
| Total DSEs                          |              |                | 0.00 | Total DSEs                          |              |                 | 0.00  |                 |
| Gross Receipts First                | Group        | \$             | 0.00 | Gross Receipts Second Group \$ 0.00 |              |                 |       |                 |
| Base Rate Fee First                 | Group        | \$             | 0.00 | Base Rate Fee Sec                   | cond Group   | \$              | 0.00  |                 |
| TI                                  | HIRTY-FIFTH  | SUBSCRIBER GRO | OUP  | -                                   | THIRTY-SIXTH | SUBSCRIBER GROU | UP    |                 |
| COMMUNITY/ ARE                      | A            |                | 0    | COMMUNITY/ ARE                      |              |                 |       |                 |
| CALL SIGN                           | DSE          | CALL SIGN      | DSE  | CALL SIGN                           | DSE          | CALL SIGN       | DSE   |                 |
|                                     |              |                |      |                                     |              |                 |       |                 |
|                                     |              |                |      |                                     |              |                 |       |                 |
|                                     |              |                |      |                                     |              |                 |       |                 |
|                                     |              |                |      |                                     |              |                 |       |                 |
|                                     |              |                |      |                                     |              |                 |       |                 |
|                                     |              |                |      |                                     |              |                 |       |                 |
|                                     |              |                |      |                                     |              |                 |       |                 |
|                                     |              |                |      |                                     |              |                 |       |                 |
|                                     |              |                |      |                                     |              |                 |       |                 |
|                                     |              |                |      |                                     |              |                 |       |                 |
|                                     |              |                |      |                                     |              |                 |       |                 |
|                                     |              |                |      |                                     |              |                 |       |                 |
| otal DSEs                           |              |                | 0.00 | Total DSEs                          |              |                 | 0.00  |                 |
| Gross Receipts Thire                | d Group      | \$             | 0.00 | Gross Receipts Fou                  | irth Group   | \$              | 0.00  |                 |
| Base Rate Fee Third                 | d Group      | \$             | 0.00 | Base Rate Fee Fou                   | irth Group   | \$              | 0.00  |                 |
|                                     | the base rat |                |      | as shown in the boxes               |              | \$              |       |                 |

| LEGAL NAME OF OWI                                  |         |                |                |                                     |            | 5                | 62443 | Name                      |
|--|---------|----------------|----------------|-------------------------------------|------------|------------------|-------|---------------------------|
|  |         |                |                | ATE FEES FOR EA                     |            |                  |       |                           |
|  |         | SUBSCRIBER GRO |                |                                     |            | I SUBSCRIBER GRO |       | 9                         |
| COMMUNITY/ AREA                                    |         |                | 0              | COMMUNITY/ ARE                      | A          |                  | 0     | Computation               |
| CALL SIGN  | DSE     | CALL SIGN      | DSE            | CALL SIGN                           | DSE        | CALL SIGN        | DSE   | of                        |
|  |         |                |                |                                     |            |                  |       | Base Rate Fee             |
|  |         |                |                |                                     |            |                  |       | and                       |
|  |         |                |                |                                     |            |                  |       | Syndicated<br>Exclusivity |
|  |         |                |                |                                     |            |                  |       | Exclusivity<br>Surcharge  |
|  |         |                |                |                                     |            |                  |       | for                       |
|  |         |                |                |                                     |            |                  |       | Partially                 |
|  |         |                |                |                                     |            |                  |       | Distant<br>Stations       |
|  |         |                |                |                                     |            |                  |       | Stations                  |
|  |         |                |                |                                     |            |                  |       |                           |
|  |         |                |                |                                     |            |                  |       |                           |
|  |         |                |                |                                     |            |                  | ····· |                           |
|  |         |                |                |                                     |            |                  |       |                           |
| Total DSEs   |         |                | 0.00           | Total DSEs                          |            | 11               | 0.00  |                           |
|  |         |                | 0.00           | Gross Receipts Second Group \$ 0.00 |            |                  |       |                           |
|  | ·       | ·              |                |                                     | ·          | <u>·</u>         |       |                           |
| Base Rate Fee First                                | Group   | \$             | 0.00           | Base Rate Fee Sec                   | cond Group | \$               | 0.00  |                           |
|  |         | SUBSCRIBER GRO |                |                                     |            | SUBSCRIBER GRO   | UP    |                           |
| COMMUNITY/ AREA                                    | A       |                | 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 For                  | urth Group | ¢                | 0.00  |                           |
|  | 2 Group | <u>\$</u>      | 0.00           |                                     | an Gioup   | \$               | 0.00  |                           |
| Base Rate Fee Third                                | d Group | \$             | 0.00           | Base Rate Fee Fou                   | urth Group | \$               | 0.00  |                           |
| <b>Base Rate Fee:</b> Add<br>Enter here and in blo |         |                | criber group a | as shown in the boxes               | above.     | \$               |       |                           |

# Nonpermitted 3.75 Stations

| EGAL NAME OF OWNE<br>Atlantic Broadbar |                    |                       |                    |                               |                                     | 5               | 62443   |  |
|--|--------------------|-----------------------|--------------------|-------------------------------|-------------------------------------|-----------------|---------|--|
|  |                    |                       |                    | ATE FEES FOR EAG              |                                     |                 |         |  |
| FOI<br>COMMUNITY/ AREA                 | RTY-FIRST          | SUBSCRIBER GRO        | UP<br>0            | FORTY-SECOND SUBSCRIBER GROUP |                                     |                 |         |  |
| OMMONIT I/ AREA                        |                    |                       | U                  |                               | A                                   |                 | V       |  |
| CALL SIGN                              | DSE                | CALL SIGN             | DSE                | CALL SIGN                     | DSE                                 | CALL SIGN       | DSE     |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
| otal DSEs                              |                    | 11                    | 0.00               | Total DSEs                    |                                     | 11              | 0.00    |  |
|  |                    |                       | 0.00               | Gross Receipts Sec            | Gross Receipts Second Group \$ 0.00 |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
| se Rate Fee First G                    |                    | \$                    | 0.00               | Base Rate Fee Sec             |                                     | \$              | 0.00    |  |
| FOF<br>DMMUNITY/ AREA                  | RTY-THIRD          | SUBSCRIBER GRO        | UP<br>0            | FO<br>COMMUNITY/ ARE          |                                     | SUBSCRIBER GROU | JP<br>0 |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
| CALL SIGN                              | DSE                | CALL SIGN DSE         |                    | CALL SIGN                     | DSE                                 | CALL SIGN       | DSE     |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     | -               |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
| otal DSEs                              |                    |                       | 0.00               | Total DSEs                    |                                     |                 | 0.00    |  |
| ross Receipts Third Group \$ 0.00      |                    | 0.00                  | Gross Receipts Fou | irth Group                    | \$                                  | 0.00            |         |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
| ase Rate Fee Third (                   | Group              | \$                    | 0.00               | Base Rate Fee Fou             | irth Group                          | \$              | 0.00    |  |
|  |                    |                       |                    |                               |                                     |                 |         |  |
| ase Rate Fee: Add th                   | ne <b>base rat</b> | e fees for each subsc | riber group a      | as shown in the boxes         | above.                              |                 |         |  |
| ter here and in block                  |                    |                       | - ·                |                               |                                     | \$              |         |  |

| Atlantic Broadba                   |                                    | E SYSTEM:<br><b>LC</b> |                                    |                       |                                     |                | 62443 | Name                 |
|------------------------------------|------------------------------------|------------------------|------------------------------------|-----------------------|-------------------------------------|----------------|-------|----------------------|
|                                    |                                    |                        |                                    | ATE FEES FOR EA       |                                     |                |       |                      |
|                                    |                                    | SUBSCRIBER GRO         |                                    |                       |                                     | SUBSCRIBER GRO |       | 9                    |
| COMMUNITY/ AREA                    |                                    |                        | 0                                  | COMMUNITY/ ARE        | A                                   |                | 0     | Computa              |
| CALL SIGN                          | DSE                                | CALL SIGN              | DSE                                | CALL SIGN             | DSE                                 | CALL SIGN      | DSE   | of                   |
|                                    |                                    |                        |                                    |                       |                                     |                |       | Base Rate            |
|                                    |                                    |                        |                                    |                       |                                     |                |       | and                  |
|                                    |                                    |                        |                                    |                       |                                     |                |       | Syndicat<br>Exclusiv |
|                                    |                                    |                        |                                    |                       |                                     |                |       | Surcharg             |
|                                    |                                    |                        |                                    |                       |                                     |                |       | for                  |
|                                    |                                    |                        |                                    |                       |                                     |                |       | Partiall             |
|                                    |                                    |                        |                                    |                       |                                     |                |       | Distan<br>Station    |
|                                    |                                    |                        |                                    |                       |                                     |                |       | otation              |
|                                    |                                    |                        |                                    |                       |                                     |                |       |                      |
|                                    |                                    |                        |                                    |                       |                                     |                |       |                      |
|                                    |                                    |                        |                                    |                       |                                     |                |       |                      |
|                                    |                                    |                        |                                    |                       |                                     |                |       |                      |
| Total DSEs                         |                                    | 11                     | 0.00                               | Total DSEs            | I                                   | 11             | 0.00  |                      |
| Gross Receipts First               | Gross Receipts First Group \$ 0.00 |                        |                                    | Gross Receipts Sec    | Gross Receipts Second Group \$ 0.00 |                |       |                      |
|                                    |                                    |                        |                                    |                       |                                     |                |       |                      |
| Base Rate Fee First Group \$ 0.00  |                                    |                        | 0.00                               | Base Rate Fee Sec     |                                     | \$             | 0.00  |                      |
|                                    |                                    | SUBSCRIBER GRO         |                                    |                       |                                     | SUBSCRIBER GRO |       |                      |
| COMMUNITY/ ARE                     |                                    |                        | 0                                  | COMMUNITY/ ARE        | 0                                   |                |       |                      |
| CALL SIGN                          | DSE                                | CALL SIGN              | DSE                                | CALL SIGN             | DSE                                 | CALL SIGN      | DSE   |                      |
|                                    |                                    |                        |                                    |                       |                                     |                |       |                      |
|                                    |                                    |                        |                                    |                       |                                     |                |       |                      |
|                                    |                                    |                        |                                    |                       |                                     |                |       |                      |
|                                    |                                    |                        |                                    |                       |                                     |                |       |                      |
|                                    |                                    |                        |                                    |                       |                                     |                |       |                      |
|                                    |                                    |                        |                                    |                       |                                     |                |       |                      |
|                                    |                                    |                        |                                    |                       |                                     |                |       |                      |
|                                    |                                    |                        |                                    |                       |                                     |                |       |                      |
|                                    |                                    |                        |                                    |                       |                                     |                |       |                      |
|                                    |                                    |                        |                                    |                       |                                     |                |       |                      |
|                                    |                                    |                        |                                    |                       |                                     |                |       |                      |
|                                    |                                    |                        | -                                  |                       |                                     |                |       |                      |
| otal DSEs 0.00                     |                                    | 0.00                   | Total DSEs                         |                       |                                     | 0.00           |       |                      |
| Gross Receipts Third Group \$ 0.00 |                                    | 0.00                   | Gross Receipts Fou                 | urth Group            | \$                                  | 0.00           |       |                      |
| Base Rate Fee Third Group \$ 0.00  |                                    | 0.00                   | Base Rate Fee Fourth Group \$ 0.00 |                       |                                     | 0.00           |       |                      |
|                                    | r                                  |                        | 0.00                               |                       | - · •P                              | L <u>*</u>     |       |                      |
| Base Rate Fee: Add                 | l the <b>base rat</b>              | e fees for each subs   | criber group a                     | as shown in the boxes | above.                              |                |       |                      |
| Enter here and in blo              |                                    |                        | 5                                  |                       |                                     | \$             |       |                      |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:     SYSTEM ID#       Atlantic Broadband (CT) LLC     62443 |                                    |                |                    |                       |            |                 |      |                   |  |
|---|------------------------------------|----------------|--------------------|-----------------------|------------|-----------------|------|-------------------|--|
|   | BLOCK A:                           | COMPUTATION (  | DF BASE RA         | ATE FEES FOR EAG      | CH SUBSCR  | IBER GROUP      |      |                   |  |
| FC  | ORTY-NINTH                         | SUBSCRIBER GRO | UP                 |                       | FIFTIETH   | SUBSCRIBER GROU | JP   | 9                 |  |
| COMMUNITY/ AREA   | ۰۰۰۰۰ ۱                            |                | 0                  | COMMUNITY/ ARE        | A          |                 | 0    |                   |  |
| CALL SIGN   | DSE                                | CALL SIGN      | DSE                | CALL SIGN             | DSE        | CALL SIGN       | DSE  | Computation<br>of |  |
|   |                                    |                |                    |                       |            |                 |      | Base Rate Fee     |  |
|   |                                    |                |                    |                       |            |                 |      | and               |  |
|   |                                    |                |                    |                       |            |                 |      | Syndicated        |  |
|   |                                    |                |                    |                       |            |                 |      | Exclusivity       |  |
|   |                                    |                |                    |                       |            |                 |      | Surcharge<br>for  |  |
|   |                                    |                |                    |                       |            |                 |      | Partially         |  |
|   |                                    |                |                    |                       |            |                 |      | Distant           |  |
|   |                                    |                |                    |                       |            |                 |      | Stations          |  |
|   |                                    |                |                    |                       |            |                 |      |                   |  |
|   |                                    |                |                    |                       |            |                 |      |                   |  |
|   |                                    |                |                    |                       |            |                 |      |                   |  |
|   |                                    |                |                    |                       |            |                 |      |                   |  |
|   |                                    |                |                    |                       |            |                 |      |                   |  |
| Total DSEs  |                                    |                | 0.00               | Total DSEs            |            |                 | 0.00 |                   |  |
| Gross Receipts First  | Gross Receipts First Group \$ 0.00 |                |                    | Gross Receipts Sec    | 0.00       |                 |      |                   |  |
| Base Rate Fee First   | Group                              | \$             | 0.00               | Base Rate Fee Sec     | cond Group | \$              | 0.00 |                   |  |
|   | FIFTY-FIRST                        | SUBSCRIBER GRO | )UP                | FI                    | FTY-SECOND | SUBSCRIBER GRO  | JP   |                   |  |
| 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  |                                    | 0.00           | Gross Receipts Fou | irth Group            | \$         | 0.00            |      |                   |  |
| Base Rate Fee Third   |                                    |                | 0.00               | Base Rate Fee Fou     | ırth Group | \$              | 0.00 |                   |  |
|   |                                    |                |                    |                       |            |                 |      |                   |  |
| Base Rate Fee: Add<br>Enter here and in blo   |                                    |                | criber group a     | as shown in the boxes | above.     | \$              |      |                   |  |

| LEGAL NAME OF OW                                   |            |                |                    |                       |                                     | 5               | 62443  | Name             |
|--|------------|----------------|--------------------|-----------------------|-------------------------------------|-----------------|--------|------------------|
|  |            |                |                    | ATE FEES FOR EA       | CH SUBSCR                           | IBER GROUP      |        |                  |
| F  | IFTY-THIRD | SUBSCRIBER GRO |                    | F                     | IFTY-FOURTH                         | SUBSCRIBER GROU | JP     | ٥                |
| COMMUNITY/ AREA                                    | A          |                | 0                  |                       | EA                                  |                 | 0      | 9                |
| CALL SIGN  | DSE        | CALL SIGN      | DSE                | CALL SIGN             | DSE                                 | CALL SIGN       | DSE    | Computat<br>of   |
| 0,122,01011  |            |                |                    |                       |                                     |                 |        | Base Rate        |
|  |            |                |                    |                       |                                     |                 |        | and              |
|  |            |                |                    |                       |                                     |                 |        | Syndicate        |
|  |            |                |                    |                       |                                     |                 |        | Exclusivit       |
|  |            |                |                    |                       |                                     |                 |        | Surcharg         |
|  |            |                |                    |                       |                                     |                 |        | for<br>Partially |
|  |            |                |                    |                       |                                     |                 |        | Distant          |
|  |            |                |                    |                       |                                     |                 |        | Stations         |
|  |            |                |                    |                       |                                     |                 |        |                  |
|  |            |                |                    |                       |                                     |                 |        |                  |
|  |            |                |                    |                       |                                     |                 | •••••• |                  |
|  |            |                |                    |                       |                                     |                 |        |                  |
|  |            |                |                    |                       |                                     |                 |        |                  |
| Fotal DSEs   |            |                | 0.00               | Total DSEs            |                                     |                 | 0.00   |                  |
| Gross Receipts First                               | Group      | \$             | 0.00               | Gross Receipts Sec    | Gross Receipts Second Group \$ 0.00 |                 |        |                  |
|  |            |                |                    |                       |                                     |                 |        |                  |
| Base Rate Fee First Group \$ 0.00                  |            |                | 0.00               | Base Rate Fee Sec     |                                     | \$              | 0.00   |                  |
|  |            | SUBSCRIBER GRO |                    |                       |                                     | SUBSCRIBER GRO  |        |                  |
| COMMUNITY/ ARE                                     |            |                | 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 | irth Group            | \$                                  | 0.00            |        |                  |
|  | p          | ·              |                    |                       |                                     | <u>·</u>        |        |                  |
| Base Rate Fee Third                                | d Group    | \$             | 0.00               | Base Rate Fee For     | urth Group                          | \$              | 0.00   |                  |
| <b>Base Rate Fee:</b> Add<br>Enter here and in blo |            |                | criber group a     | as shown in the boxes | above.                              | \$              |        |                  |

| LEGAL NAME OF OW                                   |             |                | •              |                             |              | 5               | 62443 | Name             |
|--|-------------|----------------|----------------|-----------------------------|--------------|-----------------|-------|------------------|
|  | BLOCK A     | COMPUTATION    | OF BASE RA     | TE FEES FOR EA              | CH SUBSCR    | IBER GROUP      |       |                  |
|  |             | SUBSCRIBER GRO | DUP            | F                           | FIFTY-EIGHTH | SUBSCRIBER GROU | JP    | 0                |
| COMMUNITY/ AREA                                    | A           |                | 0              | COMMUNITY/ ARE              | A            |                 | 0     | 9                |
| CALL SIGN  | DSE         | CALL SIGN      | DSE            | CALL SIGN                   | DSE          | CALL SIGN       | DSE   | Computati<br>of  |
| 0.1201011  |             |                |                |                             |              |                 |       | Base Rate F      |
|  |             |                |                |                             |              |                 |       | and              |
|  |             |                |                |                             |              |                 |       | Syndicate        |
|  |             |                |                |                             |              |                 |       | Exclusivit       |
|  |             |                |                |                             |              |                 |       | Surcharg         |
|  |             |                |                |                             |              |                 |       | for<br>Partially |
|  |             |                |                |                             |              |                 |       | Distant          |
|  |             |                |                |                             |              |                 |       | Stations         |
|  |             |                |                |                             |              |                 |       |                  |
|  |             |                |                |                             |              |                 |       |                  |
|  |             |                |                |                             |              |                 |       |                  |
|  |             |                |                |                             |              |                 |       |                  |
|  |             |                |                |                             |              |                 |       |                  |
|  |             |                |                |                             |              |                 | 0.00  |                  |
| Total DSEs   |             |                | 0.00           | Total DSEs 0.00             |              |                 |       |                  |
| Gross Receipts First                               | Group       | \$             | 0.00           | Gross Receipts Sec          | cond Group   | \$              | 0.00  |                  |
| Base Rate Fee First                                | Group       | \$             | 0.00           | Base Rate Fee Sec           | cond Group   | \$              | 0.00  |                  |
| F  | FIFTY-NINTH | SUBSCRIBER GRO | DUP            |                             | SIXTIETH     | SUBSCRIBER GROU | JP    |                  |
| COMMUNITY/ AREA                                    | A           |                | 0              | COMMUNITY/ ARE              |              |                 |       |                  |
| CALL SIGN  | DSE         | CALL SIGN      | DSE            | CALL SIGN                   | DSE          | CALL SIGN       | DSE   |                  |
|  |             |                |                |                             |              |                 |       |                  |
|  |             |                |                |                             |              |                 |       |                  |
|  |             |                |                |                             |              |                 |       |                  |
|  |             |                |                |                             |              |                 |       |                  |
|  |             |                |                |                             |              |                 |       |                  |
|  |             |                |                |                             |              |                 |       |                  |
|  |             |                |                |                             |              |                 |       |                  |
|  |             |                |                |                             |              |                 |       |                  |
|  |             |                |                |                             |              |                 |       |                  |
|  |             |                |                |                             |              |                 |       |                  |
|  |             |                |                |                             |              |                 |       |                  |
|  |             |                |                |                             |              |                 |       |                  |
| Total DSEs   |             |                | 0.00           | Total DSEs                  |              |                 | 0.00  |                  |
|  |             |                |                |                             |              |                 |       |                  |
| Gross Receipts Third                               | Group       | \$             | 0.00           | Gross Receipts Fou          | arth Group   | \$              | 0.00  |                  |
| Base Rate Fee Third                                | d Group     | \$             | 0.00           | Base Rate Fee Fou           | urth Group   | \$              | 0.00  |                  |
| <b>Base Rate Fee:</b> Add<br>Enter here and in blo |             |                | criber group a | II<br>as shown in the boxes | above.       | \$              |       |                  |

| LEGAL NAME OF OW<br>Atlantic Broadba        |             |                | •<br>•         |                                     |            | 5              | 62443 | Name                     |
|---|-------------|----------------|----------------|-------------------------------------|------------|----------------|-------|--------------------------|
|   |             |                |                | ATE FEES FOR EA                     |            |                |       |                          |
|   |             | SUBSCRIBER GRO |                |                                     |            | SUBSCRIBER GRO |       | 9                        |
| COMMUNITY/ AREA                             | A           |                | 0              | COMMUNITY/ ARE                      | A          |                | 0     | Computation              |
| CALL SIGN                                   | DSE         | CALL SIGN      | DSE            | CALL SIGN                           | DSE        | CALL SIGN      | DSE   | of                       |
|   |             |                |                |                                     |            |                |       | Base Rate Fee            |
|   |             |                |                |                                     |            |                |       | and                      |
|   |             |                |                |                                     |            |                |       | Syndicated               |
|   |             |                |                |                                     |            |                |       | Exclusivity<br>Surcharge |
|   |             |                |                |                                     |            |                |       | for                      |
|   |             |                |                |                                     |            |                |       | Partially                |
|   |             |                |                |                                     |            |                |       | Distant                  |
|   |             |                |                |                                     |            |                |       | Stations                 |
|   |             |                |                |                                     |            |                |       |                          |
|   |             |                |                |                                     |            |                |       |                          |
|   |             |                |                |                                     |            |                |       |                          |
|   |             |                |                |                                     |            |                |       |                          |
|   |             |                |                |                                     |            |                |       |                          |
| Total DSEs 0.00                             |             |                |                | Total DSEs                          | 0.00       |                |       |                          |
| Gross Receipts First                        | Group       | \$             | 0.00           | Gross Receipts Second Group \$ 0.00 |            |                |       |                          |
| Base Rate Fee First Group \$ 0.00           |             |                | 0.00           | Base Rate Fee Sec                   | cond Group | \$             | 0.00  |                          |
|   | SIXTY-THIRD | SUBSCRIBER GRO | )UP            | S                                   | XTY-FOURTH | SUBSCRIBER GRO | UP    |                          |
| COMMUNITY/ AREA                             | A           |                | 0              | COMMUNITY/ ARE                      |            |                |       |                          |
| CALL SIGN                                   | DSE         | CALL SIGN      | DSE            | CALL SIGN                           | DSE        | CALL SIGN      | DSE   |                          |
|   |             |                |                |                                     |            |                |       |                          |
|   |             |                |                |                                     |            |                |       |                          |
|   |             |                |                |                                     |            |                |       |                          |
|   |             |                |                |                                     |            |                |       |                          |
|   |             |                |                |                                     |            |                |       |                          |
|   |             |                |                |                                     |            |                |       |                          |
|   |             |                |                |                                     |            |                |       |                          |
|   |             |                |                |                                     |            |                |       |                          |
|   |             |                |                |                                     |            |                |       |                          |
|   |             |                |                | ]                                   |            |                |       |                          |
|   |             |                |                |                                     |            |                |       |                          |
| Total DSEs                                  |             |                | 0.00           | Total DSEs                          |            |                | 0.00  |                          |
|   | d Group     | ¢              | 0.00           |                                     | irth Group | ¢.             | 0.00  |                          |
| Gross Receipts Third                        | Gloup       | <u>\$</u>      | 0.00           | Gross Receipts Fou                  | ann Group  | <u>Ψ</u>       | 0.00  |                          |
| Base Rate Fee Third                         | d Group     | \$             | 0.00           | Base Rate Fee Fou                   | irth Group | \$             | 0.00  |                          |
| Base Rate Fee: Add<br>Enter here and in blo |             |                | criber group a | as shown in the boxes               | above.     | \$             |       |                          |

| Atlantic Broadba                             |             | E SYSTEM:<br><b>LC</b> |                    |                       |              | 5                 | 62443 | Name             |
|--|-------------|------------------------|--------------------|-----------------------|--------------|-------------------|-------|------------------|
|  |             |                        |                    | TE FEES FOR EA        | CH SUBSCR    | IBER GROUP        |       |                  |
| S  | SIXTY-FIFTH | SUBSCRIBER GRO         | )UP                |                       | SIXTY-SIXTH  | I SUBSCRIBER GROU | JP    | ٥                |
| COMMUNITY/ AREA                              |             |                        | 0                  | COMMUNITY/ ARE        | A            |                   | 0     | 9                |
| CALL SIGN                                    | DSE         | CALL SIGN              | DSE                | CALL SIGN             | DSE          | CALL SIGN         | DSE   | Computatio<br>of |
|  |             |                        |                    |                       |              |                   |       | Base Rate Fe     |
|  |             |                        |                    |                       |              |                   |       | and              |
|  |             |                        |                    |                       |              |                   |       | Syndicated       |
|  |             |                        |                    |                       |              |                   |       | Exclusivity      |
|  |             |                        |                    |                       |              |                   |       | Surcharge<br>for |
|  |             |                        |                    |                       |              |                   |       | Partially        |
|  |             |                        |                    |                       |              |                   |       | Distant          |
|  |             |                        |                    |                       |              |                   |       | Stations         |
|  |             |                        |                    |                       |              |                   |       |                  |
|  |             |                        |                    |                       |              |                   | ••••• |                  |
|  |             |                        |                    |                       |              |                   |       |                  |
|  |             |                        |                    |                       |              |                   |       |                  |
|  |             |                        |                    |                       |              |                   |       |                  |
| Total DSEs                                   |             |                        | 0.00               | Total DSEs            |              |                   | 0.00  |                  |
| Gross Receipts First                         | Group       | \$                     | 0.00               | Gross Receipts Sec    | \$           | 0.00              |       |                  |
| Base Rate Fee First                          | Group       | \$                     | 0.00               | Base Rate Fee Sec     | cond Group   | \$                | 0.00  |                  |
| SIXT   | Y-SEVENTH   | SUBSCRIBER GRO         | )UP                | S                     | SIXTY-EIGHTH | I SUBSCRIBER GROU | JP    |                  |
| COMMUNITY/ AREA                              |             |                        | 0                  | COMMUNITY/ ARE        |              |                   |       |                  |
| CALL SIGN                                    | DSE         | CALL SIGN              | DSE                | CALL SIGN             | DSE          | CALL SIGN         | DSE   |                  |
|  |             |                        |                    |                       |              |                   |       |                  |
|  |             |                        |                    |                       |              |                   |       |                  |
|  |             |                        |                    |                       |              |                   |       |                  |
|  |             |                        |                    |                       |              |                   |       |                  |
|  |             |                        |                    |                       |              |                   |       |                  |
|  |             |                        |                    |                       |              |                   |       |                  |
|  |             |                        |                    |                       |              |                   |       |                  |
|  |             |                        |                    |                       |              |                   |       |                  |
|  |             |                        |                    |                       |              |                   |       |                  |
|  |             |                        |                    |                       |              |                   |       |                  |
|  |             |                        |                    |                       |              |                   |       |                  |
|  |             |                        |                    |                       |              |                   |       |                  |
| Total DSEs                                   |             |                        | 0.00               | Total DSEs            |              |                   | 0.00  |                  |
| Gross Receipts Third Group \$ 0.00           |             | 0.00                   | Gross Receipts Fou | irth Group            | \$           | 0.00              |       |                  |
|  |             |                        |                    |                       |              |                   |       |                  |
| Base Rate Fee Third                          | Group       | \$                     | 0.00               | Base Rate Fee Fou     | irth Group   | \$                | 0.00  |                  |
| Base Rate Fee: Add<br>Enter here and in bloo |             |                        | criber group a     | as shown in the boxes | above.       | \$                |       |                  |

| ACCOUNTING PERIOD: 2020/2 |
|---------------------------|
|---------------------------|

# Nonpermitted 3.75 Stations

| LEGAL NAME OF OW                   |               |                  | -                  |                       |                                     | ŝ                 | 62443   | Name                 |
|------------------------------------|---------------|------------------|--------------------|-----------------------|-------------------------------------|-------------------|---------|----------------------|
|                                    |               |                  |                    | ATE FEES FOR EA       |                                     |                   |         |                      |
|                                    |               | I SUBSCRIBER GRO |                    |                       |                                     | H SUBSCRIBER GROU |         | 9                    |
| COMMUNITY/ AREA                    | A             |                  | 0                  | COMMUNITY/ ARE        | A                                   |                   | 0       | Computation          |
| CALL SIGN                          | DSE           | CALL SIGN        | DSE                | CALL SIGN             | DSE                                 | CALL SIGN         | DSE     | of                   |
|                                    |               |                  |                    |                       |                                     |                   |         | Base Rate Fe         |
|                                    |               |                  |                    |                       |                                     |                   |         | and<br>Syndicated    |
|                                    |               |                  |                    |                       |                                     |                   |         | Exclusivity          |
|                                    |               |                  |                    |                       |                                     |                   |         | Surcharge            |
|                                    |               |                  |                    |                       |                                     |                   |         | for                  |
|                                    |               |                  |                    |                       |                                     |                   |         | Partially<br>Distant |
|                                    |               |                  |                    |                       |                                     |                   |         | Stations             |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
| Total DSEs                         | •             |                  | 0.00               | Total DSEs            |                                     |                   | 0.00    |                      |
| Gross Receipts First               |               |                  | 0.00               | Gross Receipts Sec    | Gross Receipts Second Group \$ 0.00 |                   |         |                      |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
| Base Rate Fee First Group \$ 0.00  |               |                  |                    | Base Rate Fee Sec     |                                     | \$                | 0.00    |                      |
|                                    |               | SUBSCRIBER GRO   |                    | 11                    |                                     | D SUBSCRIBER GROU | JP<br>0 |                      |
| COMMUNITY/ AREA                    | •             |                  | 0                  | COMMUNITY/ ARE        |                                     |                   |         |                      |
| CALL SIGN                          | DSE           | CALL SIGN        | DSE                | CALL SIGN             | DSE                                 | CALL SIGN         | DSE     |                      |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
|                                    |               |                  |                    |                       |                                     |                   |         |                      |
| Total DSEs                         |               |                  | 0.00               | Total DSEs            |                                     |                   | 0.00    |                      |
| Gross Receipts Third Group \$ 0.00 |               | 0.00             | Gross Receipts Fou | irth Group            | \$                                  | 0.00              |         |                      |
|                                    |               |                  |                    |                       |                                     |                   | ]       |                      |
| Base Rate Fee Third                | d Group       | \$               | 0.00               | Base Rate Fee Fou     | irth Group                          | \$                | 0.00    |                      |
|                                    | 4h - <b>h</b> |                  |                    | ···                   |                                     |                   |         |                      |
| Enter here and in blo              |               |                  | chber group a      | as shown in the boxes | above.                              | \$                |         |                      |

| LEGAL NAME OF OW<br>Atlantic Broadb         |             |                | •                  |                       |             | 5              | SYSTEM ID#<br>62443 | Name                     |
|---|-------------|----------------|--------------------|-----------------------|-------------|----------------|---------------------|--------------------------|
|   | BLOCK A:    | COMPUTATION C  | OF BASE RA         | ATE FEES FOR EA       | CH SUBSCR   | IBER GROUP     |                     |                          |
| SEV   | ENTY-THIRD  | SUBSCRIBER GRC | UP                 | SEVE                  | NTY-FOURTH  | SUBSCRIBER GRO | UP                  | 9                        |
| COMMUNITY/ ARE                              | A           |                | 0                  |                       | A           |                | 0                   |                          |
| CALL SIGN                                   | DSE         | CALL SIGN      | DSE                | CALL SIGN             | DSE         | CALL SIGN      | DSE                 | Computation<br>of        |
|   |             |                |                    |                       |             |                |                     | Base Rate Fee            |
|   |             |                |                    |                       |             |                |                     | and                      |
|   |             |                |                    |                       |             |                |                     | Syndicated               |
|   |             |                |                    |                       |             |                |                     | Exclusivity<br>Surcharge |
|   |             |                |                    |                       |             |                |                     | for                      |
|   |             |                |                    |                       |             |                |                     | Partially                |
|   |             |                |                    |                       |             |                |                     | Distant                  |
|   |             |                |                    |                       |             |                |                     | Stations                 |
|   |             |                |                    |                       |             |                |                     |                          |
|   |             |                |                    |                       |             |                |                     |                          |
|   |             |                |                    |                       |             |                |                     |                          |
|   |             |                |                    |                       |             |                |                     |                          |
|   |             |                |                    |                       |             |                |                     |                          |
| Total DSEs                                  |             |                | 0.00               | Total DSEs            |             |                | 0.00                |                          |
| Gross Receipts First Group \$ 0.00          |             | 0.00           | Gross Receipts Sec | cond Group            | \$          | 0.00           |                     |                          |
| Base Rate Fee First                         | t Group     | \$             | 0.00               | Base Rate Fee Sec     | cond Group  | \$             | 0.00                |                          |
| SEV   | /ENTY-FIFTH | SUBSCRIBER GRO | UP                 | SE                    | VENTY-SIXTH | SUBSCRIBER GRO | UP                  |                          |
| COMMUNITY/ ARE                              | A           |                | 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          |             | 0.00           | Gross Receipts Fou | irth Group            | \$          | 0.00           |                     |                          |
| Base Rate Fee Thin                          | d Group     | \$             | 0.00               | Base Rate Fee Fou     | irth Group  | \$             | 0.00                |                          |
| Base Rate Fee: Add<br>Enter here and in blo |             |                | criber group a     | as shown in the boxes | above.      | \$             |                     |                          |

# Nonpermitted 3.75 Stations

| LEGAL NAME OF OW<br>Atlantic Broadb |              |                     |                |                       |             | S                | 62443  | Name             |
|-------------------------------------|--------------|---------------------|----------------|-----------------------|-------------|------------------|--------|------------------|
|                                     |              |                     |                | TE FEES FOR EA        |             |                  |        |                  |
|                                     |              | SUBSCRIBER GRO      | )UP            | SEVI                  | ENTY-EIGHTH | SUBSCRIBER GRO   | JP     | 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<br>Partially |
|                                     |              |                     |                |                       |             |                  |        | Distant          |
|                                     |              |                     |                |                       |             |                  |        | Stations         |
|                                     |              |                     |                |                       |             |                  |        |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
| Total DSEs                          |              |                     | 0.00           | Total DSEs            |             |                  | 0.00   |                  |
|                                     | t Creating   |                     |                |                       |             |                  |        |                  |
| Gross Receipts First                | t Group      | \$                  | 0.00           | Gross Receipts Sec    | cona Group  | \$               | 0.00   |                  |
| Base Rate Fee First Group \$ 0.00   |              |                     |                | Base Rate Fee Sec     | 0.00        |                  |        |                  |
| SEV                                 | ENTY-NINTH   | I SUBSCRIBER GRO    | UP             |                       | EIGHTIETH   | I SUBSCRIBER GRO | JP     |                  |
| COMMUNITY/ ARE                      | A            |                     | 0              | COMMUNITY/ ARE        | 0           |                  |        |                  |
| CALL SIGN                           | DSE          | CALL SIGN           | DSE            | CALL SIGN             | DSE         | CALL SIGN        | DSE    |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
|                                     |              |                     |                |                       |             |                  | •••••• |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
|                                     |              |                     | 0.00           | Total DSEs            |             |                  | 0.00   |                  |
| Gross Receipts Thir                 | d Group      | \$                  | 0.00           | Gross Receipts Fou    | irth Group  | \$               | 0.00   |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
| Base Rate Fee Thir                  | d Group      | \$                  | 0.00           | Base Rate Fee Fou     | irth Group  | \$               | 0.00   |                  |
|                                     |              |                     |                |                       |             |                  |        |                  |
| Base Rate Foot Add                  | the hace ref | a face for each out | oriber group a | e shown in the horse  | above       |                  |        |                  |
| Enter here and in blo               |              |                     | sinner Aronh s | as shown in the boxes | auuve.      | \$               |        |                  |
| L                                   |              |                     |                |                       |             |                  |        |                  |

# Nonpermitted 3.75 Stations

| LEGAL NAME OF OW<br>Atlantic Broadba |                  |                 | •                  |  |                   | S                 | 62443 |  |
|--------------------------------------|------------------|-----------------|--------------------|--|-------------------|-------------------|-------|--|
|                                      |                  |                 |                    | TE FEES FOR EA                         |                   |                   |       |  |
| EIGHTY-FIRST SUBSCRIBER GROUP        |                  |                 |                    | EIGHTY-SECOND SUBSCRIBER GROUP         |                   |                   |       |  |
| COMMUNITY/ AREA 0                    |                  |                 |                    | COMMUNITY/ ARE                         | A                 |                   | 0     |  |
| CALL SIGN                            | DSE              | CALL SIGN       | DSE                | CALL SIGN                              | DSE               | DSE CALL SIGN     |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
| 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                   |                  | \$              | 0.00               | Base Rate Fee Second Group   \$   0.00 |                   |                   |       |  |
| EIC                                  | GHTY-THIRD       | SUBSCRIBER GRO  | DUP                | EIG                                    | HTY-FOURTH        | I SUBSCRIBER GROU | JP    |  |
| OMMUNITY/ AREA                       | A                |                 | 0                  | COMMUNITY/ ARE                         | COMMUNITY/ AREA 0 |                   |       |  |
| CALL SIGN                            | DSE              | CALL SIGN       | DSE                | CALL SIGN                              | DSE               | CALL SIGN         | DSE   |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
| otal DSEs                            |                  |                 | 0.00               | Total DSEs                             |                   |                   | 0.00  |  |
| Gross Receipts Third Group \$ 0.00   |                  |                 | Gross Receipts Fou | irth Group                             | \$                | 0.00              |       |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
| ase Rate Fee Third                   | Group            | e               | 0.00               | Base Rate Fee Fou                      | irth Group        | ¢                 | 0.00  |  |
| AGE NALE I EE TIMO                   | a Orouh          | 4               | 0.00               |  |                   | \$                | 0.00  |  |
|                                      |                  |                 |                    |  |                   |                   |       |  |
|                                      |                  |                 | criber group a     | as shown in the boxes                  | above.            |                   |       |  |
| ter here and in blo                  | ock 3, line 1, s | pace L (page 7) |                    |  |                   | \$                |       |  |
|                                      |                  |                 |                    |  |                   |                   | -     |  |

| LEGAL NAME OF OWN<br>Atlantic Broadba                       |           |                | •<br>•         |                    |                                     | S                 | 62443 | Name                 |  |
|---|-----------|----------------|----------------|--------------------|-------------------------------------|-------------------|-------|----------------------|--|
|   | BLOCK A   | COMPUTATION (  | OF BASE RA     | ATE FEES FOR EA    | CH SUBSCR                           | IBER GROUP        |       |                      |  |
| EIGHTY-FIFTH SUBSCRIBER GROUP EIGHTY-SIXTH SUBSCRIBER GROUP |           |                |                |                    |                                     |                   | JP    | 0                    |  |
| COMMUNITY/ AREA 0   |           |                |                | 0                  | 9                                   |                   |       |                      |  |
| CALL SIGN   | DSE       | CALL SIGN DS   |                | CALL SIGN          | DSE                                 | CALL SIGN         | DSE   | Computat<br>of       |  |
|   |           |                |                |                    |                                     |                   |       | Base Rate            |  |
|   |           |                |                |                    |                                     |                   |       | and                  |  |
|   |           |                |                |                    |                                     |                   |       | Syndicate            |  |
|   |           |                |                |                    |                                     |                   |       | Exclusivi            |  |
|   |           |                |                |                    |                                     |                   |       | Surcharg             |  |
|   |           |                |                |                    |                                     |                   |       | for                  |  |
|   |           |                |                |                    |                                     |                   | ····· | Partially<br>Distant |  |
|   |           |                |                |                    |                                     |                   | ••••• | Stations             |  |
|   |           |                |                |                    |                                     |                   |       | otatione             |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
| Total DSEs  |           |                | 0.00           | Total DSEs         |                                     |                   | 0.00  |                      |  |
| Gross Receipts First  | Group     | \$             | 0.00           | Gross Receipts Sec | Gross Receipts Second Group \$ 0.00 |                   |       |                      |  |
| Base Rate Fee First (                                       | Group     | \$             | 0.00           | Base Rate Fee Sec  | cond Group                          | \$                | 0.00  |                      |  |
| EIGHT   | Y-SEVENTH | SUBSCRIBER GRO | DUP            | EI                 | GHTY-EIGHTH                         | I SUBSCRIBER GROU | JP    |                      |  |
| COMMUNITY/ AREA   |           |                | 0              | COMMUNITY/ ARE     |                                     |                   |       |                      |  |
| CALL SIGN   | DSE       | CALL SIGN      | DSE            | CALL SIGN          | DSE                                 | CALL SIGN         | DSE   |                      |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
|   |           |                |                |                    |                                     |                   |       |                      |  |
| Total DSEs 0.00   |           |                | Total DSEs     |                    |                                     | 0.00              |       |                      |  |
| Gross Receipts Third  | Group     | \$             | 0.00           | Gross Receipts Fou | irth Group                          | \$                | 0.00  |                      |  |
| Base Rate Fee Third   | Group     | \$             | 0.00           | Base Rate Fee Fou  | urth Group                          | \$                | 0.00  |                      |  |
| Base Rate Fee: Add<br>Enter here and in bloc                |           |                | criber group a | II                 | above.                              | \$                |       |                      |  |

| LEGAL NAME OF OWN<br>Atlantic Broadba                   |                 |                  | •                  |                       |                             | \$               | 62443  | Name                    |  |
|---|-----------------|------------------|--------------------|-----------------------|-----------------------------|------------------|--------|-------------------------|--|
|   | BLOCK A:        | COMPUTATION (    | OF BASE RA         | ATE FEES FOR EA       | CH SUBSCR                   | IBER GROUP       |        |                         |  |
| EIGHTY-NINTH SUBSCRIBER GROUP NINTIETH SUBSCRIBER GROUP |                 |                  |                    |                       |                             |                  | UP     | 9                       |  |
| COMMUNITY/ AREA 0                                       |                 |                  |                    |                       | A                           |                  | 0      | <b>J</b><br>Computation |  |
| CALL SIGN   | DSE             | CALL SIGN        | DSE                | CALL SIGN             | CALL SIGN DSE CALL SIGN DSE |                  |        |                         |  |
|   |                 |                  |                    |                       |                             |                  |        | of<br>Base Rate Fee     |  |
|   |                 |                  |                    |                       |                             |                  |        | and                     |  |
|   |                 |                  |                    |                       |                             |                  |        | Syndicated              |  |
|   |                 |                  |                    |                       |                             |                  |        | Exclusivity             |  |
|   |                 |                  |                    |                       |                             |                  |        | Surcharge<br>for        |  |
|   |                 |                  |                    |                       |                             |                  |        | Partially               |  |
|   |                 |                  |                    |                       |                             |                  |        | Distant                 |  |
|   |                 |                  |                    |                       |                             |                  |        | Stations                |  |
|   |                 |                  |                    |                       |                             |                  |        |                         |  |
|   |                 |                  |                    |                       |                             |                  |        |                         |  |
|   |                 |                  |                    |                       |                             |                  |        |                         |  |
|   |                 |                  |                    |                       |                             |                  |        |                         |  |
|   |                 |                  |                    |                       |                             |                  |        |                         |  |
| Total DSEs  |                 |                  | 0.00               | Total DSEs            |                             |                  | 0.00   |                         |  |
| Gross Receipts First                                    | Group           | \$               | 0.00               | Gross Receipts Sec    | 0.00                        |                  |        |                         |  |
| Base Rate Fee First                                     | Group           | \$               | 0.00               | Base Rate Fee Sec     | cond Group                  | \$               | 0.00   |                         |  |
| NIN   | NETY-FIRST      | SUBSCRIBER GRO   | )UP                | NIN                   | ETY-SECON                   | D SUBSCRIBER GRO | UP     |                         |  |
| COMMUNITY/ AREA   |                 |                  | 0                  | COMMUNITY/ ARE        |                             |                  |        |                         |  |
| CALL SIGN   | DSE             | CALL SIGN        | DSE                | CALL SIGN             | DSE                         | CALL SIGN        | DSE    |                         |  |
|   |                 |                  |                    |                       |                             |                  |        |                         |  |
|   |                 |                  |                    |                       |                             |                  |        |                         |  |
|   |                 |                  |                    |                       |                             |                  |        |                         |  |
|   |                 |                  |                    |                       |                             |                  |        |                         |  |
|   |                 |                  |                    |                       |                             |                  |        |                         |  |
|   |                 |                  |                    |                       |                             |                  |        |                         |  |
|   |                 |                  |                    |                       |                             |                  |        |                         |  |
|   |                 |                  |                    |                       |                             |                  |        |                         |  |
|   |                 |                  |                    |                       |                             |                  |        |                         |  |
|   |                 |                  |                    |                       |                             |                  | •••••• |                         |  |
|   |                 |                  |                    |                       |                             |                  |        |                         |  |
|   |                 |                  |                    |                       |                             |                  |        |                         |  |
| Total DSEs  |                 |                  | 0.00               | Total DSEs            |                             |                  | 0.00   |                         |  |
| Gross Receipts Third Group \$ 0.00                      |                 | 0.00             | Gross Receipts Fou | urth Group            | \$                          | 0.00             |        |                         |  |
|   |                 |                  |                    |                       |                             |                  |        |                         |  |
| Base Rate Fee Third                                     | Group           | \$               | 0.00               | Base Rate Fee Fou     | urth Group                  | \$               | 0.00   |                         |  |
| Base Rate Fee: Add                                      |                 |                  | criber group a     | as shown in the boxes | above.                      |                  |        |                         |  |
| Enter here and in blo                                   | ск 3, line 1, s | space L (page 7) |                    |                       |                             | \$               |        |                         |  |

| LEGAL NAME OF OW<br>Atlantic Broadb                          |                  |                  |                |                    |            | S           | 62443  | Name                      |
|--|------------------|------------------|----------------|--------------------|------------|-------------|--------|---------------------------|
|  |                  |                  |                | ATE FEES FOR EA    |            |             |        |                           |
| NINETY-THIRD SUBSCRIBER GROUP NINETY-FOURTH SUBSCRIBER GROUP |                  |                  |                |                    |            |             |        | 9                         |
| COMMUNITY/ AREA 0  |                  |                  | 0              | COMMUNITY/ ARE     | 0          | Computation |        |                           |
| CALL SIGN  | DSE              | CALL SIGN        | DSE            | CALL SIGN          | DSE        | CALL SIGN   | DSE    | of                        |
|  |                  |                  |                |                    |            |             |        | Base Rate Fee             |
|  |                  |                  |                |                    |            |             |        | and<br>Our alian to al    |
|  |                  |                  |                |                    |            |             |        | Syndicated<br>Exclusivity |
|  |                  |                  |                |                    |            |             |        | Surcharge                 |
|  |                  |                  |                |                    |            |             |        | for                       |
|  |                  |                  |                |                    |            |             |        | Partially<br>Distant      |
|  |                  |                  |                |                    |            |             |        | Stations                  |
|  |                  |                  |                |                    |            |             |        |                           |
|  |                  |                  |                |                    |            |             |        |                           |
|  |                  |                  |                |                    |            |             | ······ |                           |
|  |                  |                  |                |                    |            |             |        |                           |
|  |                  |                  |                |                    |            |             |        |                           |
| Total DSEs   |                  |                  | 0.00           | Total DSEs         |            |             | 0.00   |                           |
| Gross Receipts First   | t Group          | \$               | 0.00           | Gross Receipts Sec | 0.00       |             |        |                           |
| Base Rate Fee First  | t Group          | \$               | 0.00           | Base Rate Fee Sec  | cond Group | \$          | 0.00   |                           |
|  |                  | L                |                |                    |            |             |        |                           |
| COMMUNITY/ ARE   |                  | SUBSCRIBER GRO   | 0<br>0         | COMMUNITY/ ARE     | 0P<br>0    |             |        |                           |
|  |                  |                  | Ŭ              |                    |            |             |        |                           |
| CALL SIGN  | DSE              | CALL SIGN        | DSE            | CALL SIGN          | DSE        | CALL SIGN   | DSE    |                           |
|  |                  |                  |                |                    |            |             |        |                           |
|  |                  |                  |                |                    |            |             |        |                           |
|  |                  |                  |                |                    |            |             |        |                           |
|  |                  |                  |                |                    |            |             |        |                           |
|  |                  |                  |                |                    |            |             |        |                           |
|  |                  |                  |                |                    |            |             |        |                           |
|  |                  |                  |                |                    |            |             |        |                           |
|  |                  |                  |                |                    |            |             | ·····  |                           |
|  |                  |                  |                |                    |            |             |        |                           |
|  |                  |                  |                |                    |            |             |        |                           |
|  |                  |                  |                |                    |            |             |        |                           |
|  |                  |                  |                |                    |            |             |        |                           |
|  |                  | 0.00             | Total DSEs     |                    |            | 0.00        |        |                           |
| Gross Receipts Thire   | d Group          | \$               | 0.00           | Gross Receipts Fou | urth Group | \$          | 0.00   |                           |
| Base Rate Fee Third  | d Group          | \$               | 0.00           | Base Rate Fee Fou  | urth Group | \$          | 0.00   |                           |
|  |                  |                  | criber group a | II                 | above.     |             |        |                           |
| Enter here and in blo  | ock 3, line 1, s | space L (page 7) |                |                    |            | \$          |        |                           |

| LEGAL NAME OF OWN<br>Atlantic Broadba                 |           |                |                |                    |            | \$              | 62443  | Name                     |
|---|-----------|----------------|----------------|--------------------|------------|-----------------|--------|--------------------------|
|   | BLOCK A:  | COMPUTATION (  | DF BASE RA     | TE FEES FOR EA     | CH SUBSCR  | IBER GROUP      |        |                          |
|   | -SEVENTH  | SUBSCRIBER GRO |                | 11                 |            | SUBSCRIBER GROU |        | 9                        |
| COMMUNITY/ AREA                                       |           |                | 0              | COMMUNITY/ ARE     | A          |                 | 0      | Computatio               |
| CALL SIGN   | DSE       | CALL SIGN      | DSE            | CALL SIGN          | DSE        | CALL SIGN       | DSE    | of                       |
|   |           |                |                |                    |            |                 |        | Base Rate F              |
|   |           |                |                |                    |            |                 |        | and                      |
|   |           |                |                |                    |            |                 |        | Syndicate                |
|   |           |                |                |                    |            |                 |        | Exclusivity<br>Surcharge |
|   |           |                |                |                    |            |                 |        | for                      |
|   |           |                |                |                    |            |                 |        | Partially                |
|   |           |                |                |                    |            |                 |        | Distant                  |
|   |           |                |                |                    |            |                 |        | Stations                 |
|   |           |                |                |                    |            |                 |        |                          |
|   |           |                |                |                    |            |                 |        |                          |
|   |           |                |                |                    |            |                 |        |                          |
|   |           |                |                |                    |            |                 |        |                          |
|   |           |                |                |                    |            |                 |        |                          |
| Total DSEs  |           |                | 0.00           | Total DSEs         |            |                 | 0.00   |                          |
| Gross Receipts First Group \$ 0.00                    |           |                | 0.00           | Gross Receipts Sec | cond Group | \$              | 0.00   |                          |
| Base Rate Fee First Group \$ 0.00                     |           |                | 0.00           | Base Rate Fee Sec  | cond Group | \$              | 0.00   |                          |
| NIN   | ETY-NINTH | SUBSCRIBER GRO | )UP            | ONE                | HUNDREDTH  | SUBSCRIBER GRO  | UP     |                          |
| COMMUNITY/ AREA                                       |           |                | 0              | COMMUNITY/ ARE     | A          |                 | 0      |                          |
| CALL SIGN   | DSE       | CALL SIGN      | DSE            | CALL SIGN          | DSE        | CALL SIGN       | DSE    |                          |
|   |           |                |                |                    |            |                 |        |                          |
|   |           |                |                |                    |            |                 |        |                          |
|   |           |                |                |                    |            |                 |        |                          |
|   |           |                |                |                    |            |                 |        |                          |
|   |           |                |                |                    |            |                 |        |                          |
|   |           |                |                |                    |            |                 |        |                          |
|   |           |                |                |                    |            |                 |        |                          |
|   |           |                |                |                    |            |                 |        |                          |
|   |           |                |                |                    |            |                 | •••••• |                          |
|   |           |                |                |                    |            |                 |        |                          |
|   |           |                |                |                    |            |                 |        |                          |
|   |           |                |                |                    |            |                 |        |                          |
| Total DSEs  |           |                | 0.00           | Total DSEs         |            |                 | 0.00   |                          |
| Gross Receipts Third                                  | Group     | \$             | 0.00           | Gross Receipts Fou | irth Group | \$              | 0.00   |                          |
| Base Rate Fee Third                                   | Group     | \$             | 0.00           | Base Rate Fee Fou  | urth Group | \$              | 0.00   |                          |
| <b>Base Rate Fee:</b> Add t<br>Enter here and in bloc |           |                | criber group a | II                 | above.     | \$              |        |                          |

| LEGAL NAME OF OWN<br>Atlantic Broadba       |            |                |                |                             |            | :                | 62443 | Name                     |
|---|------------|----------------|----------------|-----------------------------|------------|------------------|-------|--------------------------|
|   | BLOCK A:   | COMPUTATION (  | DF BASE RA     | TE FEES FOR EA              | CH SUBSCRI | BER GROUP        |       |                          |
| ONE HUND                                    | DRED FIRST | SUBSCRIBER GRO |                | ONE HUND                    | RED SECOND | SUBSCRIBER GRO   | UP    | 9                        |
| COMMUNITY/ AREA                             |            |                | 0              | COMMUNITY/ ARE              | A          |                  | 0     | Computation              |
| CALL SIGN                                   | DSE        | CALL SIGN      | DSE            | CALL SIGN                   | DSE        | CALL SIGN        | DSE   | of                       |
|   |            |                |                |                             |            |                  |       | Base Rate Fe             |
|   |            |                |                |                             |            |                  |       | and                      |
|   |            |                |                |                             |            |                  |       | Syndicated               |
|   |            |                |                |                             |            |                  |       | Exclusivity<br>Surcharge |
|   |            |                |                |                             |            |                  |       | for                      |
|   |            |                |                |                             |            |                  |       | Partially                |
|   |            |                |                |                             |            |                  |       | Distant                  |
|   |            |                |                |                             |            |                  |       | Stations                 |
|   |            |                |                |                             |            |                  |       |                          |
|   |            |                |                |                             |            |                  |       |                          |
|   |            |                |                |                             |            |                  |       |                          |
|   |            |                |                |                             |            |                  |       |                          |
| T ( ) DOF                                   |            | 11             | 0.00           | TILDOF                      |            |                  | 0.00  |                          |
| Total DSEs                                  | _          |                | 0.00           | Total DSEs                  |            |                  | 0.00  |                          |
| Gross Receipts First                        | Group      | \$             | 0.00           | Gross Receipts Sec          | cond Group | \$               | 0.00  |                          |
| Base Rate Fee First                         | Group      | \$             | 0.00           | Base Rate Fee Sec           | cond Group | \$               | 0.00  |                          |
| ONE HUND                                    | RED THIRD  | SUBSCRIBER GRO | UP             | ONE HUND                    | RED FOURTH | I SUBSCRIBER GRO | UP    |                          |
| COMMUNITY/ AREA                             |            |                | 0              | COMMUNITY/ ARE              | A          |                  | 0     |                          |
| CALL SIGN                                   | DSE        | CALL SIGN      | DSE            | CALL SIGN                   | DSE        | CALL SIGN        | DSE   |                          |
|   |            |                |                |                             |            |                  |       |                          |
|   |            |                |                |                             |            |                  |       |                          |
|   |            |                |                |                             |            |                  |       |                          |
|   |            |                |                |                             |            |                  |       |                          |
|   |            |                |                |                             |            |                  |       |                          |
|   |            |                |                |                             |            |                  |       |                          |
|   |            |                |                |                             |            |                  |       |                          |
|   |            |                |                |                             |            |                  |       |                          |
|   |            |                |                |                             |            |                  |       |                          |
|   |            |                |                |                             |            |                  |       |                          |
|   |            |                |                |                             |            |                  |       |                          |
| Total DSEs                                  |            | 11             | 0.00           | Total DSEs                  |            | 11               | 0.00  |                          |
|   | Group      | ¢              | 0.00           |                             | urth Group | ¢                | 0.00  |                          |
| Gross Receipts Third                        | Gloup      | <u>\$</u>      | 0.00           | Gross Receipts Fou          | nui Gioup  | \$               | 0.00  |                          |
| Base Rate Fee Third                         | l Group    | \$             | 0.00           | Base Rate Fee Fou           | irth Group | \$               | 0.00  |                          |
| Base Rate Fee: Add<br>Enter here and in blo |            |                | criber group a | II<br>as shown in the boxes | above.     | \$               |       |                          |

| LEGAL NAME OF OW<br>Atlantic Broadb         |             |                |                |                       |             | :              | SYSTEM ID#<br>62443 | Name                    |
|---|-------------|----------------|----------------|-----------------------|-------------|----------------|---------------------|-------------------------|
|   | BLOCK A:    | COMPUTATION    | OF BASE RA     | ATE FEES FOR EA       |             |                |                     |                         |
| ONE HUN                                     | IDRED FIFTH | SUBSCRIBER GRO |                | ONE HUI               | NDRED SIXTH | SUBSCRIBER GRO | UP                  | 9                       |
| COMMUNITY/ ARE/                             | Α           |                | 0              | COMMUNITY/ ARE        | A           |                | 0                   | Computatio              |
| CALL SIGN                                   | DSE         | CALL SIGN      | DSE            | CALL SIGN             | DSE         | CALL SIGN      | DSE                 | of                      |
|   |             |                |                |                       |             |                |                     | Base Rate F             |
|   |             |                |                |                       |             |                |                     | and                     |
|   |             |                |                |                       |             |                |                     | Syndicate               |
|   |             |                |                |                       |             |                |                     | Exclusivit<br>Surcharge |
|   |             |                |                |                       |             |                |                     | for                     |
|   |             |                |                |                       |             |                |                     | Partially               |
|   |             |                |                |                       |             |                |                     | Distant                 |
|   |             |                |                |                       |             |                |                     | Stations                |
|   |             |                |                |                       |             |                |                     |                         |
|   |             |                |                |                       |             |                |                     |                         |
|   |             |                |                |                       |             |                |                     |                         |
|   |             |                |                |                       |             |                |                     |                         |
|   |             |                |                |                       |             |                |                     |                         |
| Total DSEs                                  |             |                | 0.00           | Total DSEs            |             |                | 0.00                |                         |
| Gross Receipts First Group \$ 0.00          |             |                | 0.00           | Gross Receipts Sec    | cond Group  | \$             | 0.00                |                         |
| Base Rate Fee First                         | t Group     | \$             | 0.00           | Base Rate Fee Sec     | cond Group  | \$             | 0.00                |                         |
| ONE HUNDRE                                  | ED SEVENTH  | SUBSCRIBER GRO | DUP            | ONE HUNE              | DRED EIGHTH | SUBSCRIBER GRO | UP                  |                         |
| COMMUNITY/ ARE/                             | Α           |                | 0              | COMMUNITY/ ARE        | Α           |                | 0                   |                         |
| CALL SIGN                                   | DSE         | CALL SIGN      | DSE            | CALL SIGN             | DSE         | CALL SIGN      | DSE                 |                         |
|   |             |                |                |                       |             |                |                     |                         |
|   |             |                |                |                       |             |                |                     |                         |
|   |             |                |                |                       |             |                |                     |                         |
|   |             |                |                |                       |             |                |                     |                         |
|   |             |                |                |                       |             |                |                     |                         |
|   |             |                |                |                       |             |                |                     |                         |
|   |             |                |                |                       |             |                |                     |                         |
|   |             |                |                |                       |             |                |                     |                         |
|   |             |                |                |                       |             |                |                     |                         |
|   |             |                |                |                       |             |                |                     |                         |
|   |             |                |                |                       |             |                |                     |                         |
|   |             |                |                |                       |             |                |                     |                         |
| Total DSEs                                  |             |                | 0.00           | Total DSEs            |             |                | 0.00                |                         |
| Gross Receipts Thire                        | d Group     | \$             | 0.00           | Gross Receipts Fou    | irth Group  | \$             | 0.00                |                         |
|   |             |                |                |                       |             |                |                     |                         |
| Base Rate Fee Thire                         | d Group     | \$             | 0.00           | Base Rate Fee Fou     | irth Group  | \$             | 0.00                |                         |
|   |             |                | .,             |                       |             |                |                     |                         |
| Base Rate Fee: Add<br>Enter here and in blo |             |                | criber group a | as shown in the boxes | adove.      | \$             |                     |                         |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:     SYSTEM ID#       Atlantic Broadband (CT) LLC     62443 |         |                |                |                       |            |                |      |                           |  |  |
|---|---------|----------------|----------------|-----------------------|------------|----------------|------|---------------------------|--|--|
|   |         |                |                | ATE FEES FOR EA       |            |                |      |                           |  |  |
|   |         | SUBSCRIBER GRC |                |                       |            | SUBSCRIBER GRO |      | 9                         |  |  |
| COMMUNITY/ AREA   |         |                | 0              | COMMUNITY/ ARE        | A          |                | 0    | Computation               |  |  |
| CALL SIGN   | DSE     | CALL SIGN      | DSE            | CALL SIGN             | DSE        | CALL SIGN      | DSE  | of                        |  |  |
|   |         |                |                |                       |            |                |      | Base Rate Fee             |  |  |
|   |         |                |                |                       |            |                |      | and                       |  |  |
|   |         |                |                |                       |            |                |      | Syndicated<br>Exclusivity |  |  |
|   |         |                |                |                       |            |                |      | Surcharge                 |  |  |
|   |         |                |                |                       |            |                |      | for                       |  |  |
|   |         |                |                |                       |            |                |      | Partially                 |  |  |
|   |         |                |                |                       |            |                |      | Distant<br>Stations       |  |  |
|   |         |                |                |                       |            |                |      | Stations                  |  |  |
|   |         |                |                |                       |            |                |      |                           |  |  |
|   |         |                |                |                       |            |                |      |                           |  |  |
|   |         |                |                |                       |            |                |      |                           |  |  |
|   |         |                |                |                       |            |                |      |                           |  |  |
| Total DSEs  |         |                | 0.00           | Total DSEs            |            |                | 0.00 |                           |  |  |
| Gross Receipts First Group \$ 0.00  |         |                |                | Gross Receipts Sec    | ond Group  | \$             | 0.00 |                           |  |  |
|   |         |                |                |                       |            |                |      |                           |  |  |
| Base Rate Fee First   |         | \$             | 0.00           | Base Rate Fee Sec     |            | \$             | 0.00 |                           |  |  |
|   |         | SUBSCRIBER GRC |                | 11                    |            | SUBSCRIBER GRO |      |                           |  |  |
| COMMUNITY/ AREA   |         |                | 0              | COMMUNITY/ ARE        | A          |                | 0    |                           |  |  |
| CALL SIGN   | DSE     | CALL SIGN      | DSE            | CALL SIGN             | DSE        | CALL SIGN      | DSE  |                           |  |  |
|   |         |                |                |                       |            |                |      |                           |  |  |
|   |         |                |                |                       |            |                |      |                           |  |  |
|   |         |                |                |                       |            |                |      |                           |  |  |
|   |         |                |                |                       |            |                |      |                           |  |  |
|   |         |                |                |                       |            |                |      |                           |  |  |
|   |         |                |                |                       |            |                |      |                           |  |  |
|   |         |                |                |                       |            |                |      |                           |  |  |
|   |         |                |                |                       |            |                |      |                           |  |  |
|   |         |                |                |                       |            |                |      |                           |  |  |
|   |         |                |                |                       |            |                |      |                           |  |  |
|   |         |                |                |                       |            |                |      |                           |  |  |
| T (   DOF   |         |                | 0.00           | T                     |            |                |      |                           |  |  |
| Total DSEs  |         |                | 0.00           | Total DSEs            |            |                | 0.00 |                           |  |  |
| Gross Receipts Third  | l Group | \$             | 0.00           | Gross Receipts Fou    | irth Group | \$             | 0.00 |                           |  |  |
| Base Rate Fee Third   | l Group | \$             | 0.00           | Base Rate Fee Fou     | irth Group | \$             | 0.00 |                           |  |  |
|   |         |                |                | 11                    |            |                |      |                           |  |  |
| Base Rate Fee: Add<br>Enter here and in blo   |         |                | criber group a | as shown in the boxes | above.     | \$             |      |                           |  |  |

| LEGAL NAME OF OW<br>Atlantic Broadb |                  |                 | •              |                       |            | 5                 | 62443  | Nam                |
|-------------------------------------|------------------|-----------------|----------------|-----------------------|------------|-------------------|--------|--------------------|
|                                     | BLOCK A:         | COMPUTATION (   | OF BASE RA     | TE FEES FOR EA        | CH SUBSCR  | IBER GROUP        |        |                    |
| ONE HUNDRED T                       | THIRTEENTH       | SUBSCRIBER GRO  | UP             | ONE HUNDRED F         | OURTEENTH  | I SUBSCRIBER GROU | JP     | 9                  |
| COMMUNITY/ ARE/                     | Α                |                 | 0              | COMMUNITY/ ARE        | Α          |                   | 0      | Comput             |
| CALL SIGN                           | DSE              | CALL SIGN       | DSE            | CALL SIGN             | DSE        | CALL SIGN         | DSE    | of                 |
|                                     |                  |                 |                |                       |            |                   |        | Base Rat           |
|                                     |                  |                 |                |                       |            |                   |        | and                |
|                                     |                  |                 |                |                       |            |                   |        | Syndica            |
|                                     |                  |                 |                |                       |            |                   |        | Exclusiv<br>Surcha |
|                                     |                  |                 |                |                       |            |                   |        | for                |
|                                     |                  |                 |                |                       |            |                   |        | Partial            |
|                                     |                  |                 |                |                       |            |                   |        | Distar             |
|                                     |                  |                 |                |                       |            |                   |        | Statior            |
|                                     |                  |                 |                |                       |            |                   |        |                    |
|                                     |                  |                 |                |                       |            |                   |        |                    |
|                                     |                  |                 |                |                       |            |                   |        |                    |
|                                     |                  |                 |                |                       |            |                   |        |                    |
|                                     |                  |                 |                |                       |            |                   |        |                    |
| Total DSEs                          |                  |                 | 0.00           | Total DSEs            |            |                   | 0.00   |                    |
| Gross Receipts First Group \$ 0.00  |                  |                 | 0.00           | Gross Receipts Sec    | ond Group  | \$                | 0.00   |                    |
| <b>Base Rate Fee</b> First          | t Group          | \$              | 0.00           | Base Rate Fee Sec     | ond Group  | \$                | 0.00   |                    |
|                                     |                  | SUBSCRIBER GRO  |                |                       |            | I SUBSCRIBER GROU |        |                    |
| COMMUNITY/ AREA                     |                  | SUBSCRIBER GRO  | 0              | COMMUNITY/ ARE        |            | 1 SUBSCRIBER GROU | 0      |                    |
|                                     | ¬                |                 | v              |                       | ~          |                   | •      |                    |
| CALL SIGN                           | DSE              | CALL SIGN       | DSE            | CALL SIGN             | DSE        | CALL SIGN         | DSE    |                    |
|                                     |                  |                 |                |                       |            |                   |        |                    |
|                                     |                  |                 |                |                       |            |                   |        |                    |
|                                     |                  |                 |                |                       |            |                   |        |                    |
|                                     |                  |                 |                |                       |            |                   |        |                    |
|                                     |                  |                 |                |                       |            |                   |        |                    |
|                                     |                  |                 |                |                       |            |                   |        |                    |
|                                     |                  |                 |                |                       |            |                   |        |                    |
|                                     |                  |                 |                |                       |            |                   | •••••• |                    |
|                                     |                  |                 |                |                       |            |                   |        |                    |
|                                     |                  |                 |                |                       |            |                   |        |                    |
|                                     |                  |                 |                |                       |            |                   |        |                    |
|                                     |                  |                 |                |                       |            |                   |        |                    |
|                                     |                  |                 |                |                       |            |                   |        |                    |
| Total DSEs                          |                  |                 | 0.00           | Total DSEs            |            |                   | 0.00   |                    |
| Gross Receipts Thire                | d Group          | \$              | 0.00           | Gross Receipts Fou    | irth Group | \$                | 0.00   |                    |
|                                     |                  |                 |                |                       |            |                   | ]      |                    |
| Base Rate Fee Third                 | d Group          | \$              | 0.00           | Base Rate Fee Fou     | irth Group | \$                | 0.00   |                    |
|                                     | ·                | L*              |                |                       | r          | L <u>t</u>        |        |                    |
|                                     |                  |                 |                |                       |            |                   |        |                    |
|                                     |                  |                 | criber group a | as shown in the boxes | above.     |                   |        |                    |
| Enter here and in blo               | ock 3, line 1, s | pace L (page 7) |                |                       |            | \$                |        |                    |

| LEGAL NAME OF OWNE                                      |           |                  |              |                         |            | S                | 62443 | Name                     |
|---|-----------|------------------|--------------|-------------------------|------------|------------------|-------|--------------------------|
|   | BLOCK A:  | COMPUTATION OF   | BASE RA      | TE FEES FOR EACH        |            |                  |       |                          |
|   | /ENTEENTH | SUBSCRIBER GROUP |              |                         | EIGHTEENTH | SUBSCRIBER GROUP |       | 9                        |
| COMMUNITY/ AREA   |           |                  | 0            | COMMUNITY/ AREA         |            |                  | 0     | Computation              |
| CALL SIGN   | DSE       | CALL SIGN        | DSE          | CALL SIGN               | DSE        | CALL SIGN        | DSE   | of                       |
|   |           |                  |              |                         |            |                  |       | Base Rate Fee            |
|   |           |                  |              |                         |            |                  |       | and                      |
|   |           |                  |              |                         |            |                  | ····· | Syndicated               |
|   |           |                  |              |                         |            |                  |       | Exclusivity<br>Surcharge |
|   |           |                  |              |                         |            |                  |       | for                      |
|   |           |                  |              |                         |            |                  |       | Partially                |
|   |           |                  |              |                         |            |                  |       | Distant                  |
|   |           |                  |              |                         |            |                  |       | Stations                 |
|   |           |                  |              |                         |            |                  |       |                          |
|   |           |                  |              |                         |            |                  |       |                          |
|   |           |                  |              |                         |            |                  |       |                          |
|   |           |                  |              |                         |            |                  |       |                          |
|   |           |                  |              |                         |            |                  |       |                          |
| Total DSEs  |           |                  | 0.00         | Total DSEs              |            |                  | 0.00  |                          |
| Gross Receipts First Group \$ 0.00                      |           |                  | 0.00         | Gross Receipts Secor    | nd Group   | \$               | 0.00  |                          |
| Base Rate Fee First Group \$ 0.00                       |           |                  | 0.00         | Base Rate Fee Secon     | nd Group   | \$               | 0.00  |                          |
| ONE HUNDRED N   | INTEENTH  | SUBSCRIBER GROU  | JP           | ONE HUNDRED T           | WENTIETH   | 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 0                                  | Group     | \$               | 0.00         | Gross Receipts Fourth   | n Group    | \$               | 0.00  |                          |
|   |           |                  |              |                         |            |                  | ]     |                          |
| Base Rate Fee Third (                                   | Group     | \$               | 0.00         | Base Rate Fee Fourth    | n Group    | \$               | 0.00  |                          |
| <b>Base Rate Fee:</b> Add th<br>Enter here and in bloch |           |                  | iber group a | s shown in the boxes ab | oove.      | \$               |       |                          |

| LEGAL NAME OF OWNE                               |           |                     |               |                         |           | S                  | 62443 | Name                     |
|--|-----------|---------------------|---------------|-------------------------|-----------|--------------------|-------|--------------------------|
| E  | BLOCK A:  | COMPUTATION O       | F BASE RA     | TE FEES FOR EAC         | CH SUBSCR | IBER GROUP         |       |                          |
|  | NTY-FIRST | SUBSCRIBER GROUP    |               | 11                      |           | SUBSCRIBER GROUP   |       | 9                        |
| COMMUNITY/ AREA                                  |           |                     | 0             | COMMUNITY/ AREA         | 4         |                    | 0     | Computation              |
| CALL SIGN  | DSE       | CALL SIGN           | DSE           | CALL SIGN               | DSE       | CALL SIGN          | DSE   | of                       |
|  |           |                     |               |                         |           |                    |       | Base Rate Fe             |
|  |           |                     |               |                         |           |                    |       | and                      |
|  |           |                     |               |                         |           |                    |       | Syndicated               |
|  |           |                     |               |                         |           |                    | ····· | Exclusivity<br>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 Group \$ 0.00                |           |                     | 0.00          | Base Rate Fee Seco      | ond Group | \$                 | 0.00  |                          |
|  | NTY-THIRD | SUBSCRIBER GROUP    |               | 1                       |           | H SUBSCRIBER GROUP |       |                          |
| COMMUNITY/ AREA                                  |           |                     | 0             | COMMUNITY/ AREA         | ۹         |                    | 0     |                          |
| CALL SIGN  | DSE       | CALL SIGN           | DSE           | CALL SIGN               | DSE       | CALL SIGN          | DSE   |                          |
| ON ALL OTOTA                                     |           |                     |               | OF ILLE OF OF           | DOL       |                    |       |                          |
|  |           |                     |               |                         |           |                    |       |                          |
|  |           |                     |               |                         |           |                    |       |                          |
|  |           |                     |               |                         |           |                    | ····· |                          |
|  |           |                     |               |                         |           |                    |       |                          |
|  |           |                     |               |                         |           |                    |       |                          |
|  |           |                     |               |                         |           |                    |       |                          |
|  |           |                     |               |                         |           |                    | ····· |                          |
|  |           |                     |               |                         |           |                    |       |                          |
|  |           |                     |               |                         |           |                    |       |                          |
|  |           |                     |               |                         |           |                    |       |                          |
|  |           |                     |               |                         |           |                    |       |                          |
| Total DSEs                                       | 1         |                     | 0.00          | Total DSEs              |           | _                  | 0.00  |                          |
| Gross Receipts Third Group \$ 0.00               |           | Gross Receipts Four | rth Group     | \$                      | 0.00      |                    |       |                          |
| Base Rate Fee Third G                            | Group     | \$                  | 0.00          | Base Rate Fee Four      | rth Group | \$                 | 0.00  |                          |
|  |           |                     |               | 11                      |           |                    |       |                          |
| Base Rate Fee: Add th<br>Enter here and in block |           |                     | riber group a | is shown in the boxes a | above.    | \$                 |       |                          |

| LEGAL NAME OF OWNER                            |           |                  |              |                         |            | S                  | 62443 | Name                      |
|--|-----------|------------------|--------------|-------------------------|------------|--------------------|-------|---------------------------|
| В  | LOCK A:   | COMPUTATION OF   | BASE RA      | TE FEES FOR EACH        | SUBSCR     | IBER GROUP         |       |                           |
|  | NTY-FIFTH | SUBSCRIBER GROUP |              | 11                      | ENTY-SIXTH | SUBSCRIBER GROUP   |       | 9                         |
| COMMUNITY/ AREA                                |           |                  | 0            | COMMUNITY/ AREA         |            |                    | 0     | <b>3</b><br>Computation   |
| CALL SIGN                                      | DSE       | CALL SIGN        | DSE          | CALL SIGN               | DSE        | CALL SIGN          | DSE   | of                        |
|  |           |                  |              |                         |            |                    |       | Base Rate Fee             |
|  |           |                  |              |                         |            |                    |       | and<br>Ourselise stand    |
|  |           |                  |              |                         |            |                    |       | Syndicated<br>Exclusivity |
|  |           |                  |              |                         |            |                    |       | Surcharge                 |
|  |           |                  |              |                         |            |                    |       | for                       |
|  |           |                  |              |                         |            |                    |       | Partially                 |
|  |           |                  |              |                         |            |                    |       | Distant                   |
|  |           |                  |              |                         |            |                    |       | Stations                  |
|  |           |                  |              |                         |            |                    | ····· |                           |
|  |           |                  |              |                         |            |                    | ••••• |                           |
|  |           |                  |              |                         |            |                    |       |                           |
|  |           |                  |              |                         |            |                    |       |                           |
|  |           |                  |              |                         |            |                    |       |                           |
| Total DSEs                                     |           |                  | 0.00         | Total DSEs              |            |                    | 0.00  |                           |
| Gross Receipts First Group \$ 0.00             |           |                  |              | Gross Receipts Secon    | nd Group   | \$                 | 0.00  |                           |
| Base Rate Fee First Group \$ 0.00              |           |                  | 0.00         | Base Rate Fee Secon     | nd Group   | \$                 | 0.00  |                           |
| ONE HUNDRED TWENTY-                            | SEVENTH   | SUBSCRIBER GROUP |              | ONE HUNDRED TWE         | NTY-EIGHTH | I SUBSCRIBER GROUP |       |                           |
| 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 G                         | oup       | \$               | 0.00         | Gross Receipts Fourth   | n Group    | \$                 | 0.00  |                           |
|  |           |                  |              |                         | •          |                    |       |                           |
| Base Rate Fee Third G                          | oup       | \$               | 0.00         | Base Rate Fee Fourth    | n Group    | \$                 | 0.00  |                           |
| Base Rate Fee: Add the Enter here and in block |           |                  | iber group a | s shown in the boxes ab | ove.       | \$                 |       |                           |

| LEGAL NAME OF OWN<br>Atlantic Broadba          |             |                 |                |                        |             | S                  | 62443 | Name                      |
|--|-------------|-----------------|----------------|------------------------|-------------|--------------------|-------|---------------------------|
|  | BLOCK A     | COMPUTATION     | OF BASE RA     | TE FEES FOR EAC        | CH SUBSCR   | IBER GROUP         |       |                           |
| ONE HUNDRED TW                                 | ENTY-NINTH  | SUBSCRIBER GROU |                | 11                     |             | H SUBSCRIBER GROUP |       | 9                         |
| COMMUNITY/ AREA                                |             |                 | 0              | COMMUNITY/ AREA        | Α           |                    | 0     | <b>3</b><br>Computation   |
| CALL SIGN                                      | DSE         | CALL SIGN       | DSE            | CALL SIGN              | DSE         | CALL SIGN          | DSE   | of                        |
|  |             |                 |                |                        |             |                    |       | Base Rate Fee             |
|  |             |                 |                |                        |             |                    |       | and                       |
|  |             |                 |                |                        |             |                    |       | Syndicated<br>Exclusivity |
|  |             | •               |                |                        |             |                    |       | Surcharge                 |
|  |             |                 |                |                        |             |                    |       | for                       |
|  |             |                 |                |                        |             |                    |       | Partially                 |
|  |             |                 |                |                        |             |                    |       | Distant                   |
|  |             |                 |                |                        |             |                    |       | Stations                  |
|  |             |                 |                |                        |             |                    |       |                           |
|  |             |                 |                |                        |             |                    |       |                           |
|  |             |                 |                |                        |             |                    |       |                           |
|  |             |                 |                |                        |             |                    |       |                           |
|  |             |                 |                |                        |             |                    |       |                           |
| Total DSEs                                     |             |                 | 0.00           | Total DSEs             |             |                    | 0.00  |                           |
| Gross Receipts First Group \$ 0.00             |             |                 | 0.00           | Gross Receipts Seco    | ond Group   | \$                 | 0.00  |                           |
| Base Rate Fee First Group \$ 0.00              |             |                 | 0.00           | Base Rate Fee Seco     | ond Group   | \$                 | 0.00  |                           |
| ONE HUNDRED TH                                 | HIRTY-FIRST | SUBSCRIBER GROU | Р              | ONE HUNDRED TH         | IRTY-SECONE | SUBSCRIBER GROUP   |       |                           |
| COMMUNITY/ AREA                                |             |                 | 0              | COMMUNITY/ AREA        | ۹           |                    | 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    | rth Group   | \$                 | 0.00  |                           |
|  | -           |                 |                |                        |             |                    |       |                           |
| Base Rate Fee Third                            | Group       | \$              | 0.00           | Base Rate Fee Four     | rth Group   | \$                 | 0.00  |                           |
| Base Rate Fee: Add t<br>Enter here and in bloc |             |                 | criber group a | s shown in the boxes a | above.      | \$                 |       |                           |

| LEGAL NAME OF OWNER<br>Atlantic Broadbanc                  |                                     |   | F 7         |                                 |           | SI               | STEM ID#<br>62443 | Name                      |
|--|-------------------------------------|---|-------------|---------------------------------|-----------|------------------|-------------------|---------------------------|
| В  | LOCK A:                             | COMPUTATION OF                                    | BASE RA     | TE FEES FOR EACH                |           |                  |                   |                           |
|  | TY-THIRD                            | SUBSCRIBER GROUP                                  |             |                                 | TY-FOURTH | SUBSCRIBER GROUP |                   | 9                         |
| COMMUNITY/ AREA  |                                     |   | 0           | COMMUNITY/ AREA                 |           |                  | 0                 | Computation               |
| CALL SIGN  | DSE                                 | CALL SIGN   | DSE         | CALL SIGN                       | DSE       | CALL SIGN        | DSE               | of                        |
|  |                                     |   |             |                                 |           |                  |                   | Base Rate Fe              |
|  |                                     |   |             |                                 |           |                  |                   | and                       |
|  |                                     |   |             |                                 |           |                  |                   | Syndicated<br>Exclusivity |
|  |                                     |   |             |                                 |           |                  |                   | Surcharge                 |
|  |                                     |   |             |                                 |           |                  |                   | for                       |
|  |                                     |   |             |                                 |           |                  |                   | Partially                 |
|  |                                     |   |             |                                 |           |                  |                   | Distant<br>Stations       |
|  |                                     |   |             |                                 |           |                  |                   | Stations                  |
|  |                                     |   |             |                                 |           |                  |                   |                           |
|  |                                     |   |             |                                 |           |                  |                   |                           |
|  |                                     |   |             |                                 |           |                  |                   |                           |
|  |                                     |   |             |                                 |           |                  |                   |                           |
|  |                                     |   | 0.00        |                                 |           |                  | 0.00              |                           |
| Total DSEs   |                                     |   | 0.00        | Total DSEs                      |           |                  | 0.00              |                           |
| Gross Receipts First Gro                                   | oup                                 | \$  | 0.00        | Gross Receipts Second           | d Group   | \$               | 0.00              |                           |
| Base Rate Fee First Gro                                    | oup                                 | \$  | 0.00        | Base Rate Fee Second            | d Group   | \$               | 0.00              |                           |
| ONE HUNDRED THIR   | TY-FIFTH                            | SUBSCRIBER GROU                                   | Р           | ONE HUNDRED THI                 | RTY-SIXTH | SUBSCRIBER GROUP | 2                 |                           |
| 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 Gr                                    | oup                                 | \$  | 0.00        | Gross Receipts Fourth           | Group     | \$               | 0.00              |                           |
| Base Rate Fee Third Gr                                     | oup                                 | \$  | 0.00        | Base Rate Fee Fourth            | Group     | \$               | 0.00              |                           |
| <b>Base Rate Fee:</b> Add the<br>Enter here and in block 3 | e <b>base rate</b><br>3, line 1, sp | e <b>fees</b> for each subscri<br>bace L (page 7) | ber group a | II<br>is shown in the boxes abo | ove.      | \$               |                   |                           |

I

| LEGAL NAME OF OWNE      |              |                  |              |                        |              | S                 | 62443 | Name                     |
|-------------------------|--------------|------------------|--------------|------------------------|--------------|-------------------|-------|--------------------------|
| E                       | BLOCK A:     | COMPUTATION OF   | BASE RA      | TE FEES FOR EAC        | CH SUBSCR    | IBER GROUP        |       |                          |
| ONE HUNDRED THIRTY      | -SEVENTH     | SUBSCRIBER GROUP |              | ONE HUNDRED TI         | HIRTY-EIGHTH | SUBSCRIBER GROUP  |       | 0                        |
| COMMUNITY/ AREA         |              |                  | 0            | COMMUNITY/ AREA        | ۹            |                   | 0     | 9<br>Computation         |
| CALL SIGN               | DSE          | CALL SIGN        | DSE          | CALL SIGN              | DSE          | CALL SIGN         | DSE   | of                       |
|                         |              |                  |              |                        |              |                   |       | Base Rate Fee            |
|                         |              |                  |              |                        |              |                   |       | and                      |
|                         |              |                  |              |                        |              |                   |       | Syndicated               |
|                         |              |                  |              |                        |              |                   |       | Exclusivity<br>Surcharge |
|                         |              |                  |              |                        |              |                   |       | for                      |
|                         |              |                  |              |                        |              |                   |       | Partially                |
|                         |              |                  |              |                        |              |                   |       | Distant                  |
|                         |              |                  |              |                        |              |                   |       | Stations                 |
|                         |              |                  |              |                        |              |                   |       |                          |
|                         |              |                  |              |                        |              |                   |       |                          |
|                         |              |                  |              |                        |              |                   |       |                          |
|                         | •••          |                  |              |                        |              |                   |       |                          |
|                         |              |                  |              |                        |              |                   |       |                          |
| Total DSEs              |              | 11               | 0.00         | Total DSEs             | I            | 11                | 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 THIR        | TY-NINTH     | SUBSCRIBER GROU  | IP           | ONE HUNDRE             | D FORTIETH   | I SUBSCRIBER GROU | JP    |                          |
| COMMUNITY/ AREA         |              |                  | 0            | COMMUNITY/ AREA        | ۹            |                   | 0     |                          |
| CALL SIGN               | DSE          | CALL SIGN        | DSE          | CALL SIGN              | DSE          | CALL SIGN         | DSE   |                          |
|                         |              |                  |              |                        |              |                   |       |                          |
|                         |              |                  |              |                        |              |                   |       |                          |
|                         |              |                  |              |                        |              |                   |       |                          |
|                         |              |                  |              |                        |              |                   |       |                          |
|                         |              |                  |              |                        |              |                   |       |                          |
|                         |              |                  |              |                        |              |                   |       |                          |
|                         |              |                  |              |                        |              |                   |       |                          |
|                         |              |                  |              |                        |              |                   |       |                          |
|                         |              |                  |              |                        |              |                   |       |                          |
|                         |              |                  |              |                        |              |                   |       |                          |
|                         |              |                  |              |                        |              |                   |       |                          |
|                         |              |                  |              |                        |              |                   |       |                          |
|                         |              |                  | 0.00         |                        |              |                   | 0.00  |                          |
| Total DSEs              |              |                  |              | Total DSEs             |              |                   |       |                          |
| Gross Receipts Third G  | Group        | \$               | 0.00         | Gross Receipts Four    | rth Group    | \$                | 0.00  |                          |
| Base Rate Fee Third G   | Group        | \$               | 0.00         | Base Rate Fee Four     | rth Group    | \$                | 0.00  |                          |
| Base Rate Fee: Add th   |              |                  | iber group a | s shown in the boxes a | above.       |                   |       |                          |
| Enter here and in block | 3, line 1, s | pace L (page 7)  |              |                        |              | \$                |       |                          |

| LEGAL NAME OF OWNER                            |           |                  | •            |                         |            | S                | 62443 | Name                     |
|--|-----------|------------------|--------------|-------------------------|------------|------------------|-------|--------------------------|
| В  | BLOCK A:  | COMPUTATION OF   | BASE RA      | TE FEES FOR EACH        | SUBSCR     | IBER GROUP       |       |                          |
|  | RTY-FIRST | SUBSCRIBER GROUP |              |                         | TY-SECONE  | SUBSCRIBER GROUP |       | 9                        |
| COMMUNITY/ AREA                                |           |                  | 0            | COMMUNITY/ AREA         |            |                  | 0     | Computation              |
| CALL SIGN                                      | DSE       | CALL SIGN        | DSE          | CALL SIGN               | DSE        | CALL SIGN        | DSE   | of                       |
|  |           |                  |              |                         |            |                  |       | Base Rate Fee            |
|  |           |                  |              |                         |            |                  |       | and                      |
|  |           |                  |              |                         |            |                  |       | Syndicated               |
|  |           |                  |              |                         |            |                  |       | Exclusivity<br>Surcharge |
|  |           |                  |              |                         |            |                  |       | for                      |
|  |           |                  |              |                         |            |                  |       | Partially                |
|  |           |                  |              |                         |            |                  |       | Distant                  |
|  |           |                  |              |                         |            |                  |       | Stations                 |
|  |           |                  |              |                         |            |                  |       |                          |
|  |           |                  |              |                         |            |                  | ····· |                          |
|  |           |                  |              |                         | •••        |                  | ••••• |                          |
|  |           |                  |              |                         |            |                  |       |                          |
|  |           |                  |              |                         |            |                  |       |                          |
| Total DSEs                                     |           |                  | 0.00         | Total DSEs              |            |                  | 0.00  |                          |
| Gross Receipts First Group \$ 0.00             |           |                  | 0.00         | Gross Receipts Secon    | d Group    | \$               | 0.00  |                          |
| Base Rate Fee First Group \$ 0.00              |           |                  | 0.00         | Base Rate Fee Secon     | d Group    | \$               | 0.00  |                          |
| ONE HUNDRED FOR                                | RTY-THIRD | SUBSCRIBER GROUP |              | ONE HUNDRED FOR         | RTY-FOURTH | SUBSCRIBER GROUP |       |                          |
| 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 G                         | roup      | \$               | 0.00         | Gross Receipts Fourth   | Group      | \$               | 0.00  |                          |
|  | -         |                  |              |                         |            |                  |       |                          |
| Base Rate Fee Third G                          | roup      | \$               | 0.00         | Base Rate Fee Fourth    | n Group    | \$               | 0.00  |                          |
| Base Rate Fee: Add the Enter here and in block |           |                  | iber group a | s shown in the boxes ab | ove.       | \$               |       |                          |

| LEGAL NAME OF OWNE                             |            |                  |               |                         |             | 5                  | 62443 | Name                      |
|--|------------|------------------|---------------|-------------------------|-------------|--------------------|-------|---------------------------|
|  | BLOCK A:   | COMPUTATION C    | F BASE RA     | TE FEES FOR EAC         | H SUBSCR    | IBER GROUP         |       |                           |
| ONE HUNDRED F                                  | ORTY-FIFTH | SUBSCRIBER GROUP |               | 11                      |             | SUBSCRIBER GROUP   |       | 9                         |
| COMMUNITY/ AREA                                |            |                  | 0             | COMMUNITY/ AREA         |             |                    | 0     | <b>J</b><br>Computation   |
| CALL SIGN                                      | DSE        | CALL SIGN        | DSE           | CALL SIGN               | DSE         | CALL SIGN          | DSE   | of                        |
|  |            |                  |               |                         |             |                    |       | Base Rate Fee             |
|  |            |                  |               |                         |             |                    |       | and                       |
|  |            |                  |               |                         |             |                    |       | Syndicated<br>Exclusivity |
|  |            |                  |               |                         |             |                    |       | Surcharge                 |
|  |            |                  |               |                         |             |                    |       | for                       |
|  |            |                  |               |                         |             |                    |       | Partially                 |
|  |            |                  |               |                         |             |                    |       | Distant                   |
|  |            |                  |               |                         |             |                    |       | Stations                  |
|  |            |                  |               |                         |             |                    |       |                           |
|  |            |                  |               |                         |             |                    |       |                           |
|  |            |                  |               |                         |             |                    |       |                           |
|  |            |                  |               |                         |             |                    |       |                           |
|  |            |                  |               |                         |             |                    |       |                           |
| Total DSEs                                     |            |                  | 0.00          | Total DSEs              |             |                    | 0.00  |                           |
| Gross Receipts First G                         | Group      | \$               | 0.00          | Gross Receipts Seco     | ond Group   | \$                 | 0.00  |                           |
| Base Rate Fee First G                          | Group      | \$               | 0.00          | Base Rate Fee Seco      | ond Group   | \$                 | 0.00  |                           |
| ONE HUNDRED FORT                               | Y-SEVENTH  | SUBSCRIBER GROUP | D             | ONE HUNDRED F           | ORTY-EIGHTH | I SUBSCRIBER GROUP |       |                           |
| COMMUNITY/ AREA                                |            |                  | 0             | COMMUNITY/ AREA         | A           |                    | 0     |                           |
| CALL SIGN                                      | DSE        | CALL SIGN        | DSE           | CALL SIGN               | DSE         | CALL SIGN          | DSE   |                           |
|  |            |                  |               |                         |             |                    |       |                           |
|  |            |                  |               |                         |             |                    |       |                           |
|  |            |                  |               |                         |             |                    |       |                           |
|  |            |                  |               |                         |             |                    |       |                           |
|  |            |                  |               |                         |             |                    |       |                           |
|  |            |                  |               |                         |             |                    |       |                           |
|  |            |                  |               |                         |             |                    |       |                           |
|  |            |                  |               |                         |             |                    |       |                           |
|  |            |                  |               |                         |             |                    |       |                           |
|  |            |                  |               |                         |             |                    |       |                           |
|  |            |                  |               |                         |             |                    |       |                           |
|  |            |                  |               |                         |             |                    |       |                           |
| Total DSEs                                     |            |                  | 0.00          | Total DSEs              |             |                    | 0.00  |                           |
| Gross Receipts Third (                         | 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 the Enter here and in block |            |                  | riber group a | is shown in the boxes a | above.      | \$                 |       |                           |

| LEGAL NAME OF OWNER OF CABLE S<br>Atlantic Broadband (CT) LLC                    |   | •        |                                       | -        | SYS              | TEM ID#<br>62443 | Name                     |
|--|---|----------|---------------------------------------|----------|------------------|------------------|--------------------------|
|  |   | SE RA    | TE FEES FOR EACH S                    |          |                  |                  |                          |
| ONE HUNDRED FORTY-NINTH SU   | UBSCRIBER GROUP                                 |          | ONE HUNDRED FIFTIETH SUBSCRIBER GROUP |          |                  |                  | 9                        |
| COMMUNITY/ AREA  |   | 0        | COMMUNITY/ AREA                       |          |                  | 0                | Computation              |
| CALL SIGN DSE  | CALL SIGN                                       | DSE      | CALL SIGN                             | DSE      | CALL SIGN        | DSE              | of                       |
|  |   |          |                                       |          |                  |                  | Base Rate Fee            |
|  |   |          |                                       |          |                  |                  | and                      |
|  |   |          |                                       |          |                  |                  | Syndicated               |
|  |   |          |                                       |          |                  |                  | Exclusivity<br>Surcharge |
|  |   |          |                                       |          |                  |                  | for                      |
|  |   |          |                                       |          |                  |                  | Partially                |
|  |   |          |                                       |          |                  |                  | Distant                  |
|  |   |          |                                       |          |                  |                  | Stations                 |
|  |   |          |                                       |          |                  |                  |                          |
|  |   |          |                                       |          |                  |                  |                          |
|  |   |          |                                       |          |                  |                  |                          |
|  |   |          |                                       |          |                  |                  |                          |
|  |   |          |                                       |          |                  |                  |                          |
| Total DSEs   |   | 0.00     | Total DSEs                            |          |                  | 0.00             |                          |
| Gross Receipts First Group   |   | 0.00     | Gross Receipts Second                 | Group    | \$               | 0.00             |                          |
| Base Rate Fee First Group  |   | 0.00     | Base Rate Fee Second                  | Group    | \$               | 0.00             |                          |
| ONE HUNDRED FIFTY-FIRST SU   | UBSCRIBER GROUP                                 |          | ONE HUNDRED FIFTY-                    | SECOND S | SUBSCRIBER GROUP |                  |                          |
| COMMUNITY/ AREA  |   | 0        | COMMUNITY/ AREA                       |          |                  | 0                |                          |
| CALL SIGN DSE  | CALL SIGN                                       | DSE      | CALL SIGN                             | DSE      | CALL SIGN        | DSE              |                          |
|  |   |          |                                       |          |                  |                  |                          |
|  |   |          |                                       |          |                  |                  |                          |
|  |   |          |                                       |          |                  |                  |                          |
|  |   |          |                                       |          |                  |                  |                          |
|  |   |          |                                       |          |                  |                  |                          |
| ······   |   |          |                                       |          |                  |                  |                          |
|  |   |          |                                       |          |                  |                  |                          |
|  |   |          |                                       |          |                  |                  |                          |
|  |   |          |                                       |          |                  |                  |                          |
|  |   |          |                                       |          |                  |                  |                          |
|  |   |          |                                       |          |                  |                  |                          |
|  |   |          |                                       |          |                  |                  |                          |
| Total DSEs   |   | 0.00     | Total DSEs                            | I        |                  | 0.00             |                          |
|  |   | 0.00     |                                       | roup     | ¢                | 0.00             |                          |
| Gross Receipts Third Group   |   | 0.00     | Gross Receipts Fourth G               | Bloup    | <b>&gt;</b>      | 0.00             |                          |
| Base Rate Fee Third Group  | (   | 0.00     | Base Rate Fee Fourth G                | Group    | \$               | 0.00             |                          |
| Base Rate Fee: Add the base rate for<br>Enter here and in block 3, line 1, space | <b>ees</b> for each subscriber<br>ce L (page 7) | group as | shown in the boxes abov               | /e.      | \$               |                  |                          |

I

| LEGAL NAME OF OW<br>Atlantic Broadb         |             |                  |                |                             |               | S                 | 62443 | Name              |
|---|-------------|------------------|----------------|-----------------------------|---------------|-------------------|-------|-------------------|
|   |             |                  |                | ATE FEES FOR EA             |               |                   |       |                   |
|   |             | SUBSCRIBER GRO   |                |                             |               | H SUBSCRIBER GROU |       | 9                 |
| COMMUNITY/ ARE                              | A           |                  | 0              | COMMUNITY/ ARE              | A             |                   | 0     | Computation       |
| CALL SIGN                                   | DSE         | CALL SIGN        | DSE            | CALL SIGN                   | DSE           | CALL SIGN         | DSE   | of                |
|   |             |                  |                |                             |               |                   |       | Base Rate Fee     |
|   |             |                  |                |                             |               |                   |       | and<br>Syndicated |
|   |             |                  |                |                             |               |                   |       | Exclusivity       |
|   |             |                  |                |                             |               |                   |       | Surcharge         |
|   |             |                  |                |                             |               |                   |       | for<br>Partially  |
|   |             |                  |                |                             |               |                   |       | Distant           |
|   |             |                  |                |                             |               |                   |       | Stations          |
|   |             |                  |                |                             |               |                   |       |                   |
|   |             |                  |                |                             |               |                   |       |                   |
|   |             |                  |                |                             |               |                   |       |                   |
|   |             |                  |                |                             |               |                   |       |                   |
|   |             |                  | 0.00           |                             |               |                   | 0.00  |                   |
| Total DSEs                                  |             |                  | 0.00           | Total DSEs                  |               |                   | 0.00  |                   |
| Gross Receipts Firs                         | t Group     | \$               | 0.00           | Gross Receipts Sec          | cond Group    | \$                | 0.00  |                   |
| Base Rate Fee Firs                          | t Group     | \$               | 0.00           | Base Rate Fee Sec           | cond Group    | \$                | 0.00  |                   |
| ONE HUNDRED                                 | FIFTY-FIFTH | I SUBSCRIBER GRO | DUP            | ONE HUNDRED                 | ) FIFTY-SIXTI | H SUBSCRIBER GROU | JP    |                   |
| COMMUNITY/ ARE                              | A           |                  | 0              | COMMUNITY/ ARE              | A             |                   | 0     |                   |
| CALL SIGN                                   | DSE         | CALL SIGN        | DSE            | CALL SIGN                   | DSE           | CALL SIGN         | DSE   |                   |
|   |             |                  |                |                             |               |                   |       |                   |
|   |             |                  |                |                             |               |                   |       |                   |
|   |             |                  |                |                             |               |                   |       |                   |
|   |             |                  |                |                             |               |                   |       |                   |
|   |             |                  |                |                             |               |                   |       |                   |
|   |             |                  |                |                             |               |                   |       |                   |
|   |             |                  |                |                             |               |                   |       |                   |
|   |             |                  |                |                             |               |                   |       |                   |
|   |             |                  |                |                             |               |                   |       |                   |
|   |             |                  |                |                             |               |                   |       |                   |
|   |             |                  | • • • •        |                             |               |                   |       |                   |
| Total DSEs                                  |             |                  | 0.00           | Total DSEs                  |               |                   | 0.00  |                   |
| Gross Receipts Thir                         | d Group     | \$               | 0.00           | Gross Receipts Fou          | urth Group    | \$                | 0.00  |                   |
| Base Rate Fee Thir                          | d Group     | \$               | 0.00           | Base Rate Fee Fou           | urth Group    | \$                | 0.00  |                   |
| Base Rate Fee: Add<br>Enter here and in blo |             |                  | criber group a | II<br>as shown in the boxes | above.        | ¢                 |       |                   |
|   |             | space L (paye 1) |                |                             |               | \$                |       |                   |

| LEGAL NAME OF OWN<br>Atlantic Broadba        |            |                 | •              |                      |              | 5                  | 62443 | Name                     |
|--|------------|-----------------|----------------|----------------------|--------------|--------------------|-------|--------------------------|
|  | BLOCK A    | COMPUTATION     | OF BASE RA     | TE FEES FOR EA       | CH SUBSCR    | IBER GROUP         |       |                          |
| ONE HUNDRED FIF                              | TY-SEVENTH | SUBSCRIBER GROU |                | 11                   |              | H SUBSCRIBER GROUP |       | 9                        |
| COMMUNITY/ AREA                              |            |                 | 0              | COMMUNITY/ ARE       | A            |                    | 0     | <b>9</b><br>Computatio   |
| CALL SIGN                                    | DSE        | CALL SIGN       | DSE            | CALL SIGN            | DSE          | CALL SIGN          | DSE   | of                       |
|  |            |                 |                |                      |              |                    |       | Base Rate Fe             |
|  |            |                 |                |                      |              |                    |       | and                      |
|  |            |                 |                |                      |              |                    |       | Syndicated               |
|  |            |                 |                |                      |              |                    |       | Exclusivity<br>Surcharge |
|  |            |                 |                |                      |              |                    |       | for                      |
|  |            |                 |                |                      |              |                    |       | Partially                |
|  |            |                 |                |                      |              |                    |       | Distant                  |
|  |            |                 |                |                      |              |                    |       | Stations                 |
|  |            |                 |                |                      |              |                    |       |                          |
|  |            |                 |                |                      |              |                    |       |                          |
|  |            |                 |                |                      |              |                    |       |                          |
|  |            |                 |                |                      |              |                    |       |                          |
|  |            |                 |                |                      |              |                    |       |                          |
| Total DSEs                                   |            |                 | 0.00           | Total DSEs           |              |                    | 0.00  |                          |
| Gross Receipts First (                       | Group      | \$              | 0.00           | Gross Receipts Sec   | cond Group   | \$                 | 0.00  |                          |
| Base Rate Fee First (                        | Group      | \$              | 0.00           | Base Rate Fee Sec    | cond Group   | \$                 | 0.00  |                          |
| ONE HUNDRED FI                               | FTY-NINTH  | SUBSCRIBER GRO  | DUP            | ONE HUNDF            | RED SIXTIETH | SUBSCRIBER GRO     | UP    |                          |
| COMMUNITY/ AREA                              |            |                 | 0              | COMMUNITY/ ARE       | A            |                    | 0     |                          |
| CALL SIGN                                    | DSE        | CALL SIGN       | DSE            | CALL SIGN            | DSE          | CALL SIGN          | DSE   |                          |
|  |            |                 |                |                      |              |                    |       |                          |
|  |            |                 |                |                      |              |                    |       |                          |
|  |            |                 |                |                      |              |                    |       |                          |
|  |            |                 |                |                      |              |                    |       |                          |
|  |            |                 |                |                      |              |                    |       |                          |
|  |            |                 |                |                      |              |                    |       |                          |
|  |            |                 |                |                      |              |                    |       |                          |
|  |            |                 |                |                      |              |                    |       |                          |
|  |            |                 |                |                      |              |                    |       |                          |
|  |            |                 |                |                      |              |                    |       |                          |
|  |            |                 |                |                      |              |                    |       |                          |
|  |            |                 |                |                      |              |                    |       |                          |
| Total DSEs                                   |            |                 | 0.00           | Total DSEs           |              |                    | 0.00  |                          |
| Gross Receipts Third                         | Group      | \$              | 0.00           | Gross Receipts Fou   | irth Group   | \$                 | 0.00  |                          |
|  |            |                 |                |                      |              |                    |       |                          |
| Base Rate Fee Third                          | Group      | \$              | 0.00           | Base Rate Fee Fou    | irth Group   | \$                 | 0.00  |                          |
| Base Rate Fee: Add<br>Enter here and in bloc |            |                 | criber group a | s shown in the boxes | above.       | \$                 |       |                          |

|  |   | FORM SA3E. PAGE 20.  |
|--|---|--|
| Namo   | LEGAL NAME OF OWNER OF CABLE SYSTEM:  | SYSTEM ID#   |
| Name   | Atlantic Broadband (CT) LLC   | 62443  |
|  | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS   | SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP   |
| 9  | If your cable system is located within a top 100 television market and t<br>Syndicated Exclusivity Surcharge. Indicate which major television mark<br>by section 76.5 of FCC rules in effect on June 24, 1981:  | · · ·  |
| Computation  |   | Second 50 major television market  |
| of<br>Base Rate Fee  | INSTRUCTIONS:   |  |
| and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>Step 1: In line 1, give the total DSEs by subscriber group for commenthis schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group f Exempt DSEs in block C, part 7 of this schedule. If none entestep 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the f schedule. In making this computation, use gross receipts figure your actual calculations on this form.</li> </ul> | for the VHF Grade B contour stations that were classified as<br>er zero.<br>of DSEs used to compute the surcharge.   |
|  | 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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |
|  | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>First Group  | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Second Group  |
|  | THIRD SUBSCRIBER GROUP  | FOURTH SUBSCRIBER GROUP  |
|  | Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs   |
|  | Line 2: Enter the Exempt DSEs.  | Line 2: Enter the Exempt DSEs  |
|  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |
|  | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Third Group  | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group  |
|  | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e<br>in the boxes above. Enter here and in block 4, line 2 of space L (page   | ach subscriber group as shown ()   |
|  |   |  |

|   |  | FORM SA3E. PAGE 20.  |  |  |  |
|---|--|--|--|--|--|
| Name  | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>Atlantic Broadband (CT) LLC  | SYSTEM ID#<br>62443  |  |  |  |
|   |  | SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP   |  |  |  |
| 9   | If your cable system is located within a top 100 television market and t<br>Syndicated Exclusivity Surcharge. Indicate which major television mar<br>by section 76.5 of FCC rules in effect on June 24, 1981:  | he station is not exempt in Part 7, you must also compute a  |  |  |  |
| Computation   | First 50 major television market   | Second 50 major television market  |  |  |  |
| of<br>Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>☐ First 50 major television market</li> <li>☐ Second 50 major television market</li> <li>INSTRUCTIONS:</li> <li>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 this schedule.</li> <li>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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> <li>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 schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</li> </ul> |  |  |  |  |
|   | 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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |  |  |  |
|   | SURCHARGE<br>First Group   | SURCHARGE<br>Second Group  |  |  |  |
|   | SEVENTH SUBSCRIBER GROUP   | EIGHTH SUBSCRIBER GROUP  |  |  |  |
|   | Line 1: Enter the VHF DSEs   | Line 1: Enter the VHF DSEs   |  |  |  |
|   | Line 2: Enter the Exempt DSEs  | Line 2: Enter the Exempt DSEs  |  |  |  |
|   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e<br>in the boxes above. Enter here and in block 4, line 2 of space L (page  | each subscriber droup as shown   |  |  |  |

|   | LEGAL NAME OF OWNER OF CABLE SYSTEM:   | FORM SA3E. PAGE 20<br>SYSTEM ID#  |  |  |  |  |  |
|---|--|---|--|--|--|--|--|
| Name  | Atlantic Broadband (CT) LLC  | 62443   |  |  |  |  |  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EX  | CLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP   |  |  |  |  |  |
| 9   | If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:  |   |  |  |  |  |  |
| Computation   | First 50 major television market   | Second 50 major television market   |  |  |  |  |  |
| of<br>Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group for conthis schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group to DSEs in block C, part 7 of this schedule. If non-Step 3: In line 3, subtract line 2 from line 1. This is the total num</li> <li>Step 4: Compute the surcharge for each subscriber group using</li> </ul> | ommercial VHF Grade B contour stations listed in block A, part 9 of<br>group for the VHF Grade B contour stations that were classified as<br>e enter zero.<br>nber of DSEs used to compute the surcharge. |  |  |  |  |  |
|   | 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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  |  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE First Group   | SYNDICATED EXCLUSIVITY SURCHARGE Second Group   |  |  |  |  |  |
|   | ELEVENTH SUBSCRIBER GROUP  | TWELVTH SUBSCRIBER GROUP  |  |  |  |  |  |
|   | Line 1: Enter the VHF DSEs   | Line 1: Enter the VHF DSEs  |  |  |  |  |  |
|   | Line 2: Enter the Exempt DSEs  | Line 2: Enter the Exempt DSEs   |  |  |  |  |  |
|   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  |  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Third Group   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Fourth Group   |  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge<br>in the boxes above. Enter here and in block 4, line 2 of space L (  | e for each subscriber group as shown<br>(page 7)  |  |  |  |  |  |
|   |  |   |  |  |  |  |  |

|   |   | FORM SA3E. PAGE 20.  |  |  |  |
|---|---|--|--|--|--|
| Name  |   | SYSTEM ID#   |  |  |  |
|   | Atlantic Broadband (CT) LLC   | 62443  |  |  |  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCL   | USIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP  |  |  |  |
| 9   | If your cable system is located within a top 100 television market an<br>Syndicated Exclusivity Surcharge. Indicate which major television m<br>by section 76.5 of FCC rules in effect on June 24, 1981:  |  |  |  |  |
| Computation   | L Eirst 50 major television market  | Second 50 major television market  |  |  |  |
| of<br>Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>☐ First 50 major television market</li> <li>☐ Second 50 major television market</li> <li>INSTRUCTIONS:</li> <li>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 this schedule.</li> <li>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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> <li>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 schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to sho your actual calculations on this form.</li> </ul> |  |  |  |  |
|   | 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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |  |  |  |
|   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>First Group  | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Second Group  |  |  |  |
|   | FIFTEENTH SUBSCRIBER GROUP  | SIXTEENTH SUBSCRIBER GROUP   |  |  |  |
|   | Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs   |  |  |  |
|   | Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs  |  |  |  |
|   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |  |  |  |
|   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Third Group  | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Fourth Group  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for<br>in the boxes above. Enter here and in block 4, line 2 of space L (page   | I         or each subscriber group as shown         ge ()         \$   |  |  |  |
|   |   |  |  |  |  |

| Name  | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>Atlantic Broadband (CT) LLC   | SYSTEM ID#<br>62443  |  |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|--|--|
|   |   |  |  |  |  |  |  |  |  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP  |  |  |  |  |  |  |  |  |
| 9   |   |  |  |  |  |  |  |  |  |
| Computation<br>of   | ☐ First 50 major television market  | Second 50 major television market  |  |  |  |  |  |  |  |
| Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>INSTRUCTIONS:</li> <li>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 this schedule.</li> <li>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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> <li>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 schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</li> </ul> |  |  |  |  |  |  |  |  |
|   | 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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |  |  |  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>First Group  | SYNDICATED EXCLUSIVITY SURCHARGE Second Group  |  |  |  |  |  |  |  |
|   | NINEENTH SUBSCRIBER GROUP   | TWENTYTH SUBSCRIBER GROUP  |  |  |  |  |  |  |  |
|   | Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs   |  |  |  |  |  |  |  |
|   | Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs  |  |  |  |  |  |  |  |
|   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |  |  |  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Third Group  | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Fourth Group  |  |  |  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for<br>in the boxes above. Enter here and in block 4, line 2 of space L (pa   |  |  |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |  |  |

|   |   | FORM SA3E. PAGE 20.  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|
| Name  | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>Atlantic Broadband (CT) LLC   | SYSTEM ID#   |  |  |  |  |  |
|   |   | 62443  |  |  |  |  |  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP  |  |  |  |  |  |  |
| 9   | If your cable system is located within a top 100 television market and<br>Syndicated Exclusivity Surcharge. Indicate which major television ma<br>by section 76.5 of FCC rules in effect on June 24, 1981:  |  |  |  |  |  |  |
| Computation<br>of   | ☐ First 50 major television market  | Second 50 major television market  |  |  |  |  |  |
| Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>First 50 major television market</li> <li>INSTRUCTIONS:</li> <li>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 this schedule.</li> <li>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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> <li>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 schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</li> </ul> |  |  |  |  |  |  |
|   | 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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>First Group  | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Second Group  |  |  |  |  |  |
|   | 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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE Third Group  | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group  |  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for<br>in the boxes above. Enter here and in block 4, line 2 of space L (page   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |

|   | LEGAL NAME OF OWNER OF CABLE SYSTEM:   | FORM SA3E. PAGE 20.  |  |  |  |  |
|---|--|--|--|--|--|--|
| Name  | Atlantic Broadband (CT) LLC  | SYSTEM ID#<br>62443  |  |  |  |  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLU   | SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP                         |  |  |  |  |
| 9   | If your cable system is located within a top 100 television market and f<br>Syndicated Exclusivity Surcharge. Indicate which major television mar<br>by section 76.5 of FCC rules in effect on June 24, 1981:  |  |  |  |  |  |
| Computation   | │ First 50 major television market   | Second 50 major television market                                  |  |  |  |  |
| of<br>Base Rate Fee<br>and<br>Syndicated                            | INSTRUCTIONS:<br>Step 1: In line 1, give the total DSEs by subscriber group for comme<br>this schedule.  | ercial VHF Grade B contour stations listed in block A, part 9 of   |  |  |  |  |
| Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> <li>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 schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</li> </ul> |  |  |  |  |  |
|   | TWENTY-FIFTH SUBSCRIBER GROUP  | TWENTY-SIXTH SUBSCRIBER GROUP                                      |  |  |  |  |
|   | Line 1: Enter the VHF DSEs   | Line 1: Enter the VHF DSEs   |  |  |  |  |
|   | Line 2: Enter the Exempt DSEs  | Line 2: Enter the Exempt DSEs                                      |  |  |  |  |
|   | Line 3: Subtract line 2 from line 1  | Line 3: Subtract line 2 from line 1                                |  |  |  |  |
|   | and enter here. This is the  | and enter here. This is the  |  |  |  |  |
|   | total number of DSEs for   | total number of DSEs for   |  |  |  |  |
|   | this subscriber group  | this subscriber group  |  |  |  |  |
|   | subject to the surcharge   | subject to the surcharge   |  |  |  |  |
|   |  |  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY   | SYNDICATED EXCLUSIVITY   |  |  |  |  |
|   | SURCHARGE<br>First Group   | Surcharge<br>Second Group  |  |  |  |  |
|   | TWENTY-SEVENTH SUBSCRIBER GROUP  | TWENTY-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<br>and enter here. This is the   | Line 3: Subtract line 2 from line 1<br>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   |  |  |  |  |
|   | SURCHARGE<br>Third Group   | SURCHARGE<br>Fourth Group  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e<br>in the boxes above. Enter here and in block 4, line 2 of space L (page  | each subscriber group as shown                                     |  |  |  |  |
|   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |

| FORM | SA3E. | PAGE | Ξ2 |
|------|-------|------|----|
|      |       |      |    |

|   | LEGAL NAME OF OWNER OF CABLE SYSTEM:   | FORM SA3E. PAGE 20.  |  |  |  |
|---|--|--|--|--|--|
| Name  | Atlantic Broadband (CT) LLC  | 62443  |  |  |  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS  | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP   |  |  |  |
| 9   | If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:  |  |  |  |  |
| Computation<br>of   |  |  |  |  |  |
| Base Rate Fee<br>and  | □       First 50 major television market       □       Second 50 major television market         INSTRUCTIONS:       Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of   |  |  |  |  |
| Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | dicated       this schedule.         usivity       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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero.         for       Step 3:       In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.         stant       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 schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show |  |  |  |  |
|   | TWENTY-NINTH SUBSCRIBER GROUP  | THIRTIETH 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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |  |  |  |
|   | THIRTY-FIRST SUBSCRIBER GROUP       THIRTY-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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |  |  |  |
|   | SYNDICATED EXCLUSIVITY         SURCHARGE         Third Group         \$  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown<br>In the boxes above. Enter here and in block 4, line 2 of space L (page /)  |  |  |  |  |
|   |  |  |  |  |  |

|   |  | FORM SA3E. PAGE 20.   |  |  |  |
|---|--|---|--|--|--|
| Name  |  | SYSTEM ID#  |  |  |  |
|   | Atlantic Broadband (CT) LLC  | 62443   |  |  |  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS  | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP  |  |  |  |
| 9   | If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:  |   |  |  |  |
| Computation                                   |  |   |  |  |  |
| of<br>Base Rate Fee<br>and                    | te Fee INSTRUCTIONS:   |   |  |  |  |
| Syndicated<br>Exclusivity<br>Surcharge<br>for | ated       this schedule.         ivity       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 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. |   |  |  |  |
| Partially<br>Distant<br>Stations              | Step 4: Compute the surcharge for each subscriber group using the f<br>schedule. In making this computation, use gross receipts figu<br>your actual calculations on this form.   | ormula outlined in block D, section 3 or 4 of part 7 of this res applicable to the particular group. You do not need to show                        |  |  |  |
|   | THIRTY-THIRD SUBSCRIBER GROUP  | THIRTY-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<br>and enter here. This is the<br>total number of DSEs for   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for  |  |  |  |
|   | this subscriber group<br>subject to the surcharge<br>computation   | this subscriber group<br>subject to the surcharge<br>computation  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE First Group   | SYNDICATED EXCLUSIVITY SURCHARGE Second Group   |  |  |  |
|   | THIRTY-FIFTH SUBSCRIBER GROUP  | THIRTY-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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge |  |  |  |
|   | computation  | computation   |  |  |  |
|   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Third Group   | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group   |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e<br>In the boxes above. Enter here and In block 4, line 2 of space L (page  | ach subscriber group as shown ()  |  |  |  |
|   |  |   |  |  |  |

| Name  | LEGAL NAME OF OWNER OF CABLE SYSTEM:   | SYSTEM ID#   |  |  |
|---|--|--|--|--|
|   | Atlantic Broadband (CT) LLC  | 62443  |  |  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROU  |  |  |  |
| 9   | If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:  |  |  |  |
| Computation   |  | L Constant COmparison to low initial manufact                      |  |  |
| of<br>Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>First 50 major television market</li> <li>Second 50 major television market</li> <li>INSTRUCTIONS:</li> <li>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 this schedule.</li> <li>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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> <li>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 schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to shor your actual calculations on this form.</li> </ul> |  |  |  |
|   | THIRTY-SEVENTH SUBSCRIBER GROUP  | THIRTY-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<br>this subscriber group  | total number of DSEs for<br>this subscriber group                  |  |  |
|   | subject to the surcharge   | subject to the surcharge   |  |  |
|   | computation  | computation  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE   | SYNDICATED EXCLUSIVITY<br>SURCHARGE                                |  |  |
|   | First Group  | Second Group   |  |  |
|   | THIRTY-NINTH SUBSCRIBER GROUP  | FORTIETH 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<br>and enter here. This is the   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the |  |  |
|   | total number of DSEs for   | total number of DSEs for   |  |  |
|   | this subscriber group  | this subscriber group  |  |  |
|   | subject to the surcharge   | subject to the surcharge   |  |  |
|   |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE   | SYNDICATED EXCLUSIVITY SURCHARGE                                   |  |  |
|   | Third Group  | Fourth Group   |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge f<br>in the boxes above. Enter here and in block 4, line 2 of space L (pa  | ior each subscriber group as shown<br>age /)                       |  |  |

|   |  | FORM SA3E. PAGE 20.  |  |  |  |  |
|---|--|--|--|--|--|--|
| Name  | LEGAL NAME OF OWNER OF CABLE SYSTEM:   | SYSTEM ID#   |  |  |  |  |
| Name  | Atlantic Broadband (CT) LLC  | 62443  |  |  |  |  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP           If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a           Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined           by section 76.5 of FCC rules in effect on June 24, 1981: |  |  |  |  |  |
| 9   |  |  |  |  |  |  |
| Computation<br>of   | n     First 50 major television market     Second 50 major television market   |  |  |  |  |  |
| Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | ee       INSTRUCTIONS:         Step 1:       In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.         y       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  |  |  |  |  |  |
|   | FORTY-FIRST SUBSCRIBER GROUP   | FORTY-SECOND SUBSCRIBER GROUP  |  |  |  |  |
|   |  |  |  |  |  |  |
|   | Line 1: Enter the VHF DSEs         Line 2: Enter the Exempt DSEs   | Line 1: Enter the VHF 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       subject to the surcharge         computation   |  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY       SYNDICATED EXCLUSIVITY         SURCHARGE       SURCHARGE         First Group       Second Group         FORTY-THIRD SUBSCRIBER GROUP       FORTY-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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Fourth Group  |  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown<br>in the boxes above. Enter here and in block 4, line 2 of space L (page 7)  |  |  |  |  |  |
|   |  |  |  |  |  |  |

| Name   | LEGAL NAME OF OWNER OF CABLE SYSTEM:   | SYSTEM ID   |  |  |
|--|--|---|--|--|
|  | Atlantic Broadband (CT) LLC  | 62443   |  |  |
|  | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP   |   |  |  |
| 9  | If your cable system is located within a top 100 television market and the Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981: |   |  |  |
| Computation  |  |   |  |  |
| of<br>Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge | INSTRUCTIONS:<br>Step 1: In line 1, give the total DSEs by subscriber group for commer<br>this schedule.   | <ul> <li>tep 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 this schedule.</li> <li>tep 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as</li> </ul> |  |  |
| for<br>Partially<br>Distant<br>Stations                              | Step 3:In line 3, subtract line 2 from line 1. This is the total number ofStep 4:Compute the surcharge for each subscriber group using the f   | f DSEs used to compute the surcharge.   |  |  |
|  | FORTY-FIFTH SUBSCRIBER GROUP   | FORTY-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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  |  |  |
|  | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>First Group   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Second Group   |  |  |
|  | FORTY-SEVENTH SUBSCRIBER GROUP   | FORTY-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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  |  |  |
|  | SYNDICATED EXCLUSIVITY   | SYNDICATED EXCLUSIVITY  |  |  |
|  | SURCHARGE<br>Third Group   | SURCHARGE<br>Fourth Group   |  |  |
|  | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e<br>in the boxes above. Enter here and in block 4, line 2 of space L (page  |   |  |  |
|  |  |   |  |  |

|   | LEGAL NAME OF OWNER OF CABLE SYSTEM:  | FORM SA3E. PAGE 20                                   |  |  |
|---|---|--|--|--|
| Name  | Atlantic Broadband (CT) LLC   | SYSTEM ID#<br>62443                                  |  |  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLU  | SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP           |  |  |
| 9   | If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined  |  |  |  |
| Computation   | by section 76.5 of FCC rules in effect on June 24, 1981:  |  |  |  |
| of<br>Base Rate Fee   | ☐ First 50 major television market ☐ Second 50 major television market  |  |  |  |
| Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | Syndicated       this schedule.         Exclusivity       Step 2:         Surcharge       In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were cl         Surcharge       Exempt DSEs in block C, part 7 of this schedule. If none enter zero.         for       Step 3:         Partially       Step 4:         Distant       Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not |  |  |  |
|   | FORTY-NINTH SUBSCRIBER GROUP  | FIFTIETH SUBSCRIBER GROUP                            |  |  |
|   | Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs                           |  |  |
|   | Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs                        |  |  |
|   | Line 3: Subtract line 2 from line 1   | Line 3: Subtract line 2 from line 1                  |  |  |
|   | and enter here. This is the   | and enter here. This is the                          |  |  |
|   | total number of DSEs for<br>this subscriber group   | total number of DSEs for<br>this subscriber group    |  |  |
|   | subject to the surcharge  | subject to the surcharge                             |  |  |
|   | computation   | computation  |  |  |
|   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>First Group  | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Second Group  |  |  |
|   | FIFTY-FIRST SUBSCRIBER GROUP  | FIFTY-SECOND SUBSCRIBER GROUP                        |  |  |
|   | Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs                           |  |  |
|   | Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs                        |  |  |
|   | Line 3: Subtract line 2 from line 1   | Line 3: Subtract line 2 from line 1                  |  |  |
|   | and enter here. This is the<br>total number of DSEs for   | and enter here. This is the total number of DSEs for |  |  |
|   | this subscriber group   | this subscriber group                                |  |  |
|   | subject to the surcharge  | subject to the surcharge                             |  |  |
|   | computation   |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE Third Group  | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group        |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for<br>In the boxes above. Enter here and in block 4, line 2 of space L (page   | each subscriber group as shown                       |  |  |
|   |   |  |  |  |

|   |   | FORM SA3E. PAGE 20.   |  |  |  |  |
|---|---|---|--|--|--|--|
| Name  | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>Atlantic Broadband (CT) LLC   | SYSTEM ID#  |  |  |  |  |
|   |   | 62443   |  |  |  |  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP<br>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<br>Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined<br>by section 76.5 of FCC rules in effect on June 24, 1981: |   |  |  |  |  |
| 9   |   |   |  |  |  |  |
| Computation<br>of   | tion     First 50 major television market   Second 50 major television market   |   |  |  |  |  |
| Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group for conthis schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group to the subscriber in block C, part 7 of this schedule. If none</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of step 4: Compute the surcharge for each subscriber group using</li> </ul> | nmercial VHF Grade B contour stations listed in block A, part 9 of<br>oup for the VHF Grade B contour stations that were classified as<br>enter zero.<br>ber of DSEs used to compute the surcharge. |  |  |  |  |
|   | FIFTY-THIRD SUBSCRIBER GROUP  | FIFTY-FOURTH SUBSCRIBER GROUP   |  |  |  |  |
|   | Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs  |  |  |  |  |
|   | Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs   |  |  |  |  |
|   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation                                  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE First Group  | SYNDICATED EXCLUSIVITY SURCHARGE Second Group   |  |  |  |  |
|   | FIFTY-FIFTH SUBSCRIBER GROUP FIFTY-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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation                                  |  |  |  |  |
|   | SURCHARGE<br>Third Group  | SURCHARGE<br>Fourth Group   |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge<br>in the boxes above. Enter here and in block 4, line 2 of space L (p  |   |  |  |  |  |
|   |   |   |  |  |  |  |

| Name                                    | LEGAL NAME OF OWNER OF CABLE SYSTEM:  | SYSTEM ID#  |  |  |  |
|---|---|---|--|--|--|
|   | Atlantic Broadband (CT) LLC   | 62443   |  |  |  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLU  | SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP        |  |  |  |
| 9                                       | If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: |   |  |  |  |
| Computation                             |   | Second 50 major talavision market                 |  |  |  |
| of<br>Base Rate Fee                     | ☐ First 50 major television market ☐ Second 50 major television market  |   |  |  |  |
| and<br>Syndicated<br>Exclusivity        | <ul> <li>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 this schedule.</li> <li>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</li> </ul>               |   |  |  |  |
| Surcharge                               | Exempt DSEs in block C, part 7 of this schedule. If none ent  |   |  |  |  |
| for<br>Partially<br>Distant<br>Stations | <ul> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number</li> <li>Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts figure your actual calculations on this form.</li> </ul>  | · · · ·   |  |  |  |
|   | FIFTY-SEVENTH SUBSCRIBER GROUP  | FIFTY-EIGHTH SUBSCRIBER GROUP                     |  |  |  |
|   |   |   |  |  |  |
|   | Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs                        |  |  |  |
|   | Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs                     |  |  |  |
|   | Line 3: Subtract line 2 from line 1   | Line 3: Subtract line 2 from line 1               |  |  |  |
|   | and enter here. This is the   | and enter here. This is the                       |  |  |  |
|   | total number of DSEs for<br>this subscriber group   | total number of DSEs for<br>this subscriber group |  |  |  |
|   | subject to the surcharge  | subject to the surcharge                          |  |  |  |
|   | computation   | computation                                       |  |  |  |
|   |   |   |  |  |  |
|   | SYNDICATED EXCLUSIVITY  | SYNDICATED EXCLUSIVITY                            |  |  |  |
|   | SURCHARGE   | SURCHARGE   |  |  |  |
|   | First Group   | Second Group                                      |  |  |  |
|   | FIFTY-NINTH SUBSCRIBER GROUP         SIXTIETH 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<br>subject to the surcharge   | this subscriber group                             |  |  |  |
|   | computation   | subject to the surcharge                          |  |  |  |
|   |   |   |  |  |  |
|   |   |   |  |  |  |
|   | SURCHARGE<br>Third Group  | SURCHARGE           Fourth Group                  |  |  |  |
|   |   |   |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for<br>in the boxes above. Enter here and in block 4, line 2 of space L (page   | each subscriber group as shown                    |  |  |  |
|   |   |   |  |  |  |
|   |   |   |  |  |  |
|   |   |   |  |  |  |
|   |   |   |  |  |  |
|   |   |   |  |  |  |

Base

|   |  | FORM SA3E. PAGE 20.  |  |  |  |
|---|--|--|--|--|--|
| Name  | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>Atlantic Broadband (CT) LLC  | SYSTEM ID#<br>62443  |  |  |  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS  | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP  |  |  |  |
| 9<br>Computation<br>of  | 9 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 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as define by section 76.5 of FCC rules in effect on June 24, 1981:   |  |  |  |  |
| Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for | <ul> <li>INSTRUCTIONS:</li> <li>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 this schedule.</li> <li>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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> </ul> |  |  |  |  |
| Partially<br>Distant<br>Stations                                      | <ul> <li>Step 4: Compute the surcharge for each subscriber group using the for schedule. In making this computation, use gross receipts figure your actual calculations on this form.</li> </ul>   | ormula outlined in block D, section 3 or 4 of part 7 of this   |  |  |  |
|   | SIXTY-FIRST SUBSCRIBER GROUP   | SIXTY-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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |  |  |  |
|   | SYNDICATED EXCLUSIVITY       SYNDICATED EXCLUSIVITY         SURCHARGE       SURCHARGE         First Group  |  |  |  |  |
|   | SIXTY-THIRD SUBSCRIBER GROUP   | SIXTY-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  |  |  |  |
|   | and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  |  |  |  |
|   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Third Group   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Fourth Group  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ea<br>in the boxes above. Enter here and in block 4, line 2 of space L (page 7   |  |  |  |  |
|   |  |  |  |  |  |

|   | LEGAL NAME OF OWNER OF CABLE SYSTEM:  | FORM SA3E. PAGE 20<br>SYSTEM ID#  |  |  |
|---|---|---|--|--|
| Name  | Atlantic Broadband (CT) LLC   | 62443   |  |  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP  |   |  |  |
| 9   | If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:   |   |  |  |
| Computation   |   | Second 50 major television market   |  |  |
| of<br>Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>L First 50 major television market</li> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group in Exempt DSEs in block C, part 7 of this schedule. If none enters the subtract line 2 from line 1. This is the total number of Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts figure your actual calculations on this form.</li> </ul> | for the VHF Grade B contour stations that were classified as<br>er zero.<br>of DSEs used to compute the surcharge.                                  |  |  |
|   | SIXTY-FIFTH SUBSCRIBER GROUP  | SIXTY-SIXTH SUBSCRIBER GROUP  |  |  |
|   | Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs  |  |  |
|   | Line 1. 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<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation                         |  |  |
|   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>First Group  | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Second Group   |  |  |
|   | SIXTY-SEVENTH SUBSCRIBER GROUP  | SIXTY-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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge |  |  |
|   | computation   | computation   |  |  |
|   | Third Group   | Fourth Group  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e<br>in the boxes above. Enter here and in block 4, line 2 of space L (page   | each subscriber group as shown 7) \$  |  |  |
|   |   |   |  |  |

U.S. Copyright Office

| Name   | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>Atlantic Broadband (CT) LLC   | SYSTEM ID#  |  |  |  |
|--|---|---|--|--|--|
|  |   | 62443   |  |  |  |
|  | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP  |   |  |  |  |
| 9  | If your cable system is located within a top 100 television market and<br>Syndicated Exclusivity Surcharge. Indicate which major television ma<br>by section 76.5 of FCC rules in effect on June 24, 1981:  |   |  |  |  |
| Computation  |   | Second 50 major tolovicion market   |  |  |  |
| Base Rate Fee<br>and<br>Syndicated<br>Exclusivity    | and Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part this schedule.   |   |  |  |  |
| Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>Exempt DSEs in block C, part 7 of this schedule. If none er</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number</li> <li>Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts figure your actual calculations on this form.</li> </ul> | r of DSEs used to compute the surcharge.  |  |  |  |
|  | SIXTY-NINTH SUBSCRIBER GROUP  | SEVENTIETH 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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge |  |  |  |
|  | Computation   | Computation   |  |  |  |
|  | SEVENTY-FIRST SUBSCRIBER GROUP  | SEVENTY-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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge |  |  |  |
|  | computation   | computation   |  |  |  |
|  | SYNDICATED EXCLUSIVITY SURCHARGE Third Group  | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group   |  |  |  |
|  | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for<br>in the boxes above. Enter here and in block 4, line 2 of space L (page   | r each subscriber group as shown  |  |  |  |
|  |   |   |  |  |  |

| FORM | SA3E. | PAG | Ξ2 |
|------|-------|-----|----|
|      |       |     |    |

| Name                                    | LEGAL NAME OF OWNER OF CABLE SYSTEM:   | FORM SA3E. PAGE 20.<br>SYSTEM ID#   |  |
|---|--|---|--|
|   | Atlantic Broadband (CT) LLC  | 62443   |  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP   |   |  |
| 9                                       | If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:  |   |  |
| Computation<br>of                       | First 50 major television market   | Second 50 major television market   |  |
| Base Rate Fee                           | INSTRUCTIONS:  |   |  |
| and<br>Syndicated                       | Step 1: In line 1, give the total DSEs by subscriber group for commerce<br>this schedule.  | cial VHF Grade B contour stations listed in block A, part 9 of  |  |
| Exclusivity<br>Surcharge                | 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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero.   |   |  |
| for<br>Partially<br>Distant<br>Stations | <ul> <li>ep 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> <li>ep 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</li> </ul> |   |  |
|   | SEVENTY-THIRD SUBSCRIBER GROUP   | SEVENTY-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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group |  |
|   | subject to the surcharge computation   | subject to the surcharge computation  |  |
|   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>First Group   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Second Group   |  |
|   | SEVENTY-FIFTH SUBSCRIBER GROUP   | SEVENTY-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<br>and enter here. This is the<br>total number of DSEs for   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for                          |  |
|   | this subscriber group<br>subject to the surcharge<br>computation   | this subscriber group<br>subject to the surcharge<br>computation  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE Third Group   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Fourth Group   |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ea<br>in the boxes above. Enter here and in block 4, line 2 of space L (page a   | ach subscriber group as shown   |  |
|   |  |   |  |
|   |  |   |  |
|   |  |   |  |

| Nama  | LEGAL NAME OF OWNER OF CABLE SYSTEM:  | FORM SA3E. PAGE 20<br>SYSTEM ID#  |  |
|---|---|---|--|
| Name  | Atlantic Broadband (CT) LLC   | 62443   |  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER G  |   |  |
| 9   | If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:   |   |  |
| Computation   | <br>□ First 50 major television market  | Second 50 major television market   |  |
| of<br>Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>INSTRUCTIONS:</li> <li>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 this schedule.</li> <li>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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> <li>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 schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</li> </ul> |   |  |
|   | SEVENTY-SEVENTH SUBSCRIBER GROUP  | SEVENTY-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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation                                  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE First Group  | SYNDICATED EXCLUSIVITY SURCHARGE Second Group   |  |
|   | SEVENTY-NINTH SUBSCRIBER GROUP  | EIGHTIETH SUBSCRIBER GROUP  |  |
|   | Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs  |  |
|   | Line 2. Effer the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation   | Line 2: Enter the Exempt DSES<br>Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |  |
|   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Third Group  | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Fourth Group   |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge f<br>in the boxes above. Enter here and in block 4, line 2 of space L (pa   | for each subscriber group as shown<br>age /)  |  |
|   |   |   |  |

U.S. Copyright Office

|   | ,_   | FORM SA3E. PAGE 20.  |
|---|--|--|
| Name  | LEGAL NAME OF OWNER OF CABLE SYSTEM:   | SYSTEM ID#   |
| Name  | Atlantic Broadband (CT) LLC  | 62443  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLU   | JSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP  |
| 9   | If your cable system is located within a top 100 television market and<br>Syndicated Exclusivity Surcharge. Indicate which major television ma<br>by section 76.5 of FCC rules in effect on June 24, 1981:   |  |
| Computation   | L First 50 major tolevicion market   | Second 50 major tolovicion market  |
| of<br>Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>First 50 major television market</li> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group for comm this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number</li> <li>Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form.</li> </ul> | ercial VHF Grade B contour stations listed in block A, part 9 of<br>o for the VHF Grade B contour stations that were classified as<br>iter zero.<br>r of DSEs used to compute the surcharge. |
|   | EIGHTY-FIRST SUBSCRIBER GROUP  | EIGHTY-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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation                           |
|   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>First Group   | SYNDICATED EXCLUSIVITY SURCHARGE Second Group  |
|   | EIGHTY-THIRD SUBSCRIBER GROUP  | EIGHTY-FOURTH SUBSCRIBER GROUP   |
|   | Line 1: Enter the VHF DSEs   | Line 1: Enter the VHF DSEs   |
|   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation                           |
|   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Third Group   | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for<br>in the boxes above. Enter here and in block 4, line 2 of space L (pag   | r each subscriber group as shown<br>le 7)  |
|   |  |  |

|   |  | FORM SA3E. PAGE 20.  |
|---|--|--|
| Name  |  | SYSTEM ID#   |
|   | Atlantic Broadband (CT) LLC  | 62443  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLU   | JSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP  |
| 9   | If your cable system is located within a top 100 television market and<br>Syndicated Exclusivity Surcharge. Indicate which major television ma<br>by section 76.5 of FCC rules in effect on June 24, 1981:   |  |
| Computation   |  |  |
| of  | ☐ First 50 major television market   | Second 50 major television market  |
| Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group for comm<br/>this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group<br/>Exempt DSEs in block C, part 7 of this schedule. If none er</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number</li> <li>Step 4: Compute the surcharge for each subscriber group using the<br/>schedule. In making this computation, use gross receipts for<br/>your actual calculations on this form.</li> </ul> | p for the VHF Grade B contour stations that were classified as<br>nter zero.<br>r of DSEs used to compute the surcharge. |
|   | EIGHTY-FIFTH SUBSCRIBER GROUP  | EIGHTY-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  | computation  |
|   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>First Group   | SYNDICATED EXCLUSIVITY SURCHARGE Second Group  |
|   | EIGHTY-SEVENTH SUBSCRIBER GROUP  | EIGHTY-EIGHTH SUBSCRIBER GROUP   |
|   | Line 1: Enter the VHF DSEs   | Line 1: Enter the VHF DSEs   |
|   | Line 2: Enter the Exempt DSEs  | Line 2: Enter the Exempt DSEs  |
|   | Line 3: Subtract line 2 from line 1  | Line 3: Subtract line 2 from line 1  |
|   | and enter here. This is the  | and enter here. This is the  |
|   | total number of DSEs for   | total number of DSEs for   |
|   | this subscriber group  | this subscriber group  |
|   | subject to the surcharge   | subject to the surcharge   |
|   | computation  | computation  |
|   | SYNDICATED EXCLUSIVITY   | SYNDICATED EXCLUSIVITY   |
|   | SURCHARGE  | SURCHARGE  |
|   | Third Group  | Fourth Group   |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for<br>in the boxes above. Enter here and in block 4, line 2 of space L (pag   | r each subscriber group as shown   |
|   |  |  |
|   |  |  |

|   |  | FORM SA3E. PAGE 20  |
|---|--|---|
| Name  | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>Atlantic Broadband (CT) LLC  | SYSTEM ID:<br>62443   |
|   |  | USIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP   |
| 9   | If your cable system is located within a top 100 television market an<br>Syndicated Exclusivity Surcharge. Indicate which major television m   | d the station is not exempt in Part 7, you must also compute a  |
| Computation   | by section 76.5 of FCC rules in effect on June 24, 1981:   |   |
| of<br>Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>L First 50 major television market</li> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group for comm<br/>this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber grou<br/>Exempt DSEs in block C, part 7 of this schedule. If none ei<br/>Step 3: In line 3, subtract line 2 from line 1. This is the total number<br/>Step 4: Compute the surcharge for each subscriber group using th<br/>schedule. In making this computation, use gross receipts fin<br/>your actual calculations on this form.</li> </ul> | p for the VHF Grade B contour stations that were classified as nter zero.<br>er of DSEs used to compute the surcharge.                              |
|   |  |   |
|   | EIGHTY-NINTH SUBSCRIBER GROUP  | NINETIETH 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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge |
|   | computation  | computation   |
|   | SYNDICATED EXCLUSIVITY SURCHARGE First Group   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Second Group   |
|   | NINETY-FIRST SUBSCRIBER GROUP  | NINETY-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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge |
|   | computation  | computation   |
|   | SYNDICATED EXCLUSIVITY SURCHARGE Third Group   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Fourth Group   |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for<br>in the boxes above. Enter here and in block 4, line 2 of space L (page  |   |
|   | Third Group  | Fourth Group  |

|   |   | FORM SA3E. PAGE 20.   |
|---|---|---|
| Name  | LEGAL NAME OF OWNER OF CABLE SYSTEM:  | SYSTEM ID#  |
| Name  | Atlantic Broadband (CT) LLC   | 62443   |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLL  | JSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP   |
| 9   | If your cable system is located within a top 100 television market and<br>Syndicated Exclusivity Surcharge. Indicate which major television ma<br>by section 76.5 of FCC rules in effect on June 24, 1981:  | t the station is not exempt in Part 7, you must also compute a  |
| Computation   | First 50 major television market  | Second 50 major television market   |
| of<br>Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group for commutis schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number</li> <li>Step 4: Compute the surcharge for each subscriber group using the</li> </ul> | nercial VHF Grade B contour stations listed in block A, part 9 of<br>p for the VHF Grade B contour stations that were classified as<br>nter zero.<br>r of DSEs used to compute the surcharge. |
|   | NINETY-THIRD SUBSCRIBER GROUP   | NINETY-FOURTH SUBSCRIBER GROUP  |
|   | Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs  |
|   | Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs   |
|   | Line 3: Subtract line 2 from line 1   | Line 3: Subtract line 2 from line 1   |
|   | and enter here. This is the   | and enter here. This is the   |
|   | total number of DSEs for  | total number of DSEs for  |
|   | this subscriber group   | this subscriber group   |
|   | subject to the surcharge  | subject to the surcharge  |
|   | computation   | computation   |
|   |   |   |
|   | SYNDICATED EXCLUSIVITY  | SYNDICATED EXCLUSIVITY  |
|   | SURCHARGE   | SURCHARGE   |
|   |   | Second Group  |
|   | First Group   |   |
|   |   |   |
|   | NINETY-FIFTH SUBSCRIBER GROUP   | NINETY-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   | computation   |
|   |   |   |
|   | SYNDICATED EXCLUSIVITY  | SYNDICATED EXCLUSIVITY  |
|   | SURCHARGE   | SURCHARGE   |
|   | Third Group   | Fourth Group  |
|   |   |   |
|   |   |   |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for<br>in the boxes above. Enter here and in block 4, line 2 of space L (page   | e c)  |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |

|   | LEGAL NAME OF OWNER OF CABLE SYSTEM:  | FORM SA3E. PAGE 20<br>SYSTEM ID#  |
|---|---|---|
| Name  | Atlantic Broadband (CT) LLC   | 62443   |
|   | BLOCK B: COMPUTATION OF SYNDICATED E  | XCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP  |
| 9   |   | et and the station is not exempt in Part 7, you must also compute a<br>ion market any portion of your cable system is located in as defined                     |
| Computation   |   | Second 50 major television market   |
| of<br>Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber Exempt DSEs in block C, part 7 of this schedule. If not Step 3: In line 3, subtract line 2 from line 1. This is the total n Step 4: Compute the surcharge for each subscriber group us</li> </ul> | commercial VHF Grade B contour stations listed in block A, part 9 of<br>r group for the VHF Grade B contour stations that were classified as<br>one enter zero. |
|   | NINETY-SEVENTH SUBSCRIBER GROUP   | NINETY-EIGHTH SUBSCRIBER GROUP  |
|   |   | Line 1: Enter the VHF DSEs  |
|   | Line 1: Enter the VHF DSEs  |   |
|   | Line 3: Subtract line 2 from line 1   | Line 2: Enter the Exempt DSEs   |
|   | 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<br>subject to the surcharge   | this subscriber group<br>subject to the surcharge   |
|   | computation   | computation   |
|   | SYNDICATED EXCLUSIVITY  | SYNDICATED EXCLUSIVITY  |
|   | SURCHARGE   | SURCHARGE   |
|   | First Group   | Second Group  |
|   | NINETY-NINTH SUBSCRIBER GROUP   | ONE HUNDREDTH 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<br>and enter here. This is the  | Line 3: Subtract line 2 from line 1<br>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<br>computation   | subject to the surcharge  |
|   |   |   |
|   | SYNDICATED EXCLUSIVITY SURCHARGE  | SYNDICATED EXCLUSIVITY SURCHARGE  |
|   | Third Group   | Fourth Group  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surchar<br>in the boxes above. Enter here and in block 4, line 2 of space i   | rge for each subscriber group as shown<br>L (page /)  |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:   | FORM SA3E. PAGE 20<br>SYSTEM ID#  |
|--|---|
| Atlantic Broadband (CT) LLC  | 62443   |
| BLOCK B: COMPUTATION OF SYNDICATED   | EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP   |
| Syndicated Exclusivity Surcharge. Indicate which major televi  | rket and the station is not exempt in Part 7, you must also compute a ision market any portion of your cable system is located in as defined  |
|  | Second 50 major tolevision market   |
| <ul> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group fo this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscribe Exempt DSEs in block C, part 7 of this schedule. If r</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total</li> <li>Step 4: Compute the surcharge for each subscriber group u</li> </ul> | r commercial VHF Grade B contour stations listed in block A, part 9 of<br>er group for the VHF Grade B contour stations that were classified as<br>none enter zero.   |
| ONE HUNDERED FIRST SUBSCRIBER GROUP  | ONE HUNDERED SECOND SUBSCRIBER GROUP  |
|  | Line 1: Enter the VHF DSEs  |
|  |   |
|  | Line 3: Subtract line 2 from line 1   |
| and enter here. This is the  | and enter here. This is the   |
| this subscriber group<br>subject to the surcharge  | total number of DSEs for<br>this subscriber group<br>subject to the surcharge   |
| computation  | computation   |
| SYNDICATED EXCLUSIVITY SURCHARGE First Group   | SYNDICATED EXCLUSIVITY SURCHARGE Second Group   |
| ONE HUNDERED THIRD SUBSCRIBER GROUP  | ONE HUNDERED 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<br>and enter here. This is the   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the  |
| total number of DSEs for   | total number of DSEs for<br>this subscriber group   |
| subject to the surcharge   | subject to the surcharge  |
|  | computation   |
| SYNDICATED EXCLUSIVITY SURCHARGE   | SYNDICATED EXCLUSIVITY<br>SURCHARGE   |
| Third Group \$   | Fourth Group \$   |
|  | If your cable system is located within a top 100 television ma<br>Syndicated Exclusivity Surcharge. Indicate which major televisios<br>by section 76.5 of FCC rules in effect on June 24, 1981:<br>Li First 50 major television market<br>INSTRUCTIONS:<br>Step 1: In line 1, give the total DSEs by subscriber group for<br>this schedule.<br>Step 2: In line 2, give the total number of DSEs by subscriber<br>Exempt DSEs in block C, part 7 of this schedule. If it<br>Step 3: In line 3, subtract line 2 from line 1. This is the total<br>Step 4: Compute the surcharge for each subscriber group us<br>schedule. In making this computation, use gross record<br>your actual calculations on this form.<br>ONE HUNDERED FIRST SUBSCRIBER GROUP<br>Line 1: Enter the VHF DSEs<br>Line 2: Enter the Exempt DSEs<br>Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation<br>SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>First Group<br>Line 1: Enter the VHF DSEs<br>Line 2: Enter the Exempt DSEs<br>Line 1: Enter the VHF DSEs<br>Line 2: Enter the Surcharge<br>computation<br>SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>First Group<br>Line 2: Enter the Exempt DSEs<br>Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation<br>Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs<br>Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  | FORM SA3E. PAGE 20<br>SYSTEM ID#  |
|---|---|
| Atlantic Broadband (CT) LLC   | 62443   |
| BLOCK B: COMPUTATION OF SYNDICATED EXC  | CLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP   |
| If your cable system is located within a top 100 television market a<br>Syndicated Exclusivity Surcharge. Indicate which major television<br>by section 76.5 of FCC rules in effect on June 24, 1981:   | · · · ·   |
|   | L I Second 50 major tolovision market   |
| <ul> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group for conthis schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber greenet DSEs in block C, part 7 of this schedule. If none</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total num</li> <li>Step 4: Compute the surcharge for each subscriber group using</li> </ul> | ber of DSEs used to compute the surcharge.  |
| ONE HUNDRED FIFTH SUBSCRIBER GROUP  | ONE HUNDRED SIXTH SUBSCRIBER GROUP  |
|   |   |
|   | Line 1: Enter the VHF DSEs  |
|   | Line 2: Enter the Exempt DSES   |
| and enter here. This is the   | and enter here. This is the   |
| total number of DSEs for  | total number of DSEs for<br>this subscriber group   |
| subject to the surcharge  | subject to the surcharge  |
|   | computation   |
|   |   |
| SURCHARGE<br>First Group  | SURCHARGE<br>Second Group   |
| ONE HUNDRED SEVENTH SUBSCRIBER GROUP  | ONE HUNDRED 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   |
| total number of DSEs for  | and enter here. This is the<br>total number of DSEs for   |
| this subscriber group   | this subscriber group   |
|   | _ subject to the surcharge  |
|   |   |
|   | SYNDICATED EXCLUSIVITY SURCHARGE  |
| Third Group   | Fourth Group  |
| SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge<br>in the boxes above. Enter here and in block 4, line 2 of space L (p  | for each subscriber group as shown<br>bage /)   |
|   | Atlantic Broadband (CT) LLC         BLOCK B: COMPUTATION OF SYNDICATED EXC         If your cable system is located within a top 100 television market         Syndicated Exclusivity Surcharge. Indicate which major television<br>by section 76.5 of FCC rules in effect on June 24, 1981:         □ First 50 major television market         INSTRUCTIONS:         Step 1: In line 1, give the total DSEs by subscriber group for conthis schedule.         Step 2: In line 3, give the total number of DSEs by subscriber group using<br>schedule. In making this computation, use gross receipt<br>your actual calculations on this form.         ONE HUNDRED FIFTH SUBSCRIBER GROUP         Line 1: Enter the VHF DSEs         Line 2: Enter the Exempt DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |

| 9       BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP         1       fyour cable system is located within a top 100 television market any portion of your cable system is located in as defined by sector 76 5 of FCC rules in effect on June 24, 1981:         1       Granditation of 16 5 of FCC rules in effect on June 24, 1981:         1       First 50 major television market         1       Step 31: Inite 2; give the total DSEs by subscriber group for the VHF Grade B contour stations listed in those X.         1       First 50 major television market         1       Step 31: Inite 3; subtractine 2 from line 1         1       First 50 major television market         1       S  |       |
|---|-------|
| 9         Computation of loss and file 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:   | 62443 |
| Syndicated       Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by sector 76.5 of FCC rules in effect on June 24, 1981:         Computation of Base Rato Fee and Syndicated Exclusivity Syndicated Exclusivity Surcharge for Partially Distant Stations       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 this schedule.         Stor Charge for Partially Distant Stations       Step 2: In line 3, give the total number of DSEs by subscriber group for the VHF Grade B contour stations listed in block A, part 9 of this schedule. In marking this computation, use gross receipts figures applicable to the surcharge.         Step 3: Compute the surcharge for each subscriber group gine the formula outlined in block D, section 3 of 4 of part 7 of this schedule. In marking this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.         ONE HUNDRED NINTH SUBSCRIBER GROUP       ONE HUNDRED TENTH SUBSCRIBER GROUP         Line 1: Enter the VHF DSEs       Line 2: Enter the Exempt DSEs in foot this subscriber group give to the surcharge computation         Strict The Subtract line 2 from line 1       and enter here. This is the total and enter here. This subscriber group subject to the surcharge computation         Strict Figure 2: First Fis the total and enter here. This is the total and ene |       |
| Computation<br>of   |       |
| Base Rate Fee<br>and<br>Syndicated<br>Exclusivity       INSTRUCTIONS:         Sup 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<br>this schedule.         Suprolarge<br>for<br>Partially<br>Distant<br>Stations       Sup 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations listed in block A, part 9 of<br>this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show<br>your actual calculations on this form.         ONE HUNDRED NINTH SUBSCRIBER GROUP       ONE HUNDRED TENTH SUBSCRIBER GROUP         Line 1: Enter the VHF DSEs       Line 2: Enter the Exempt DSEs is buschere group and give for mal outline 1 block D, section 3 or 4 of part 7 of this<br>schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show<br>your actual calculations on this form.         ONE HUNDRED NINTH SUBSCRIBER GROUP       Une 1: Enter the VHF DSEs         Line 2: Enter the Exempt DSEs is of<br>this subscriber group<br>subject to the surcharge<br>computation       Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation       SYNDICATED EXCLUSIVITY<br>SURCHARGE         ONE HUNDRED ELEVENTH SUBSCRIBER GROUP       ONE HUNDRED TWELVTH SUBSCRIBER GROUP         Line 1: Enter the VHF DSEs       Line 2: Enter the Exempt DSEs. I         Line 2: Enter the Exempt DSEs. I       Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>th  |       |
| Line 1: Enter the VHF DSEs       Line 1: Enter the VHF DSEs         Line 2: Enter the Exempt DSEs       Line 1: Enter the VHF DSEs         Line 3: Subtract line 2 from line 1       and enter here. This is the         total number of DSEs for       this subscriber group         subject to the surcharge       computation         computation  |       |
| Line 2: Enter the Exempt DSEs   |       |
| Line 2: Enter the Exempt DSEs   |       |
| Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | _     |
| total number of DSEs for       total number of DSEs for         this subscriber group       subject to the surcharge         computation       -         SYNDICATED EXCLUSIVITY       surcharge         SURCHARGE       surcharge         First Group       succent the surcharge         ONE HUNDRED ELEVENTH SUBSCRIBER GROUP       ONE HUNDRED TWELVTH SUBSCRIBER GROUP         Line 1:       Enter the VHF DSEs         Line 2:       Enter the Exempt DSEs.         Line 3:       Subtract line 2 from line 1         and enter here. This is the       total number of DSEs for         this subscriber group       subject to the surcharge         computation       -         SYNDICATED EXCLUSIVITY       Subtract line 2 from line 1         and enter here. This is the       total number of DSEs for         this subscriber group       subject to the surcharge         computation       -         SYNDICATED EXCLUSIVITY       SYNDICATED EXCLUSIVITY         SURCHARGE       SURCHARGE   |       |
| this subscriber group       subject to the surcharge         computation  |       |
| computation   |       |
| SYNDICATED EXCLUSIVITY       SYNDICATED EXCLUSIVITY         SURCHARGE       First Group   |       |
| SURCHARGE       First Group       SURCHARGE         First Group       Suncharge       Second Group         ONE HUNDRED ELEVENTH SUBSCRIBER GROUP       ONE HUNDRED TWELVTH SUBSCRIBER GROUP         Line 1: Enter the VHF DSEs       Line 1: Enter the VHF DSEs         Line 2: Enter the Exempt DSEs.       Line 1: Enter the VHF DSEs         Line 3: Subtract line 2 from line 1       Line 3: Subtract line 2 from line 1         and enter here. This is the       Line 3: Subtract line 2 from line 1         and enter here. This is the       Line 3: Subtract line 2 from line 1         subject to the surcharge       Subject to the surcharge         computation       -         SYNDICATED EXCLUSIVITY       SYNDICATED EXCLUSIVITY   |       |
| ONE HUNDRED ELEVENTH SUBSCRIBER GROUP       ONE HUNDRED 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       and enter here. This is the         total number of DSEs for       this subscriber group         subject to the surcharge       computation  |       |
| 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       and enter here. This is the         and enter here. This is the       total number of DSEs for         this subscriber group       subject to the surcharge         computation   |       |
| Line 3: Subtract line 2 from line 1         and enter here. This is the         total number of DSEs for         this subscriber group         subject to the surcharge         computation   |       |
| 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   |       |
| 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   |       |
| subject to the surcharge     subject to the surcharge       computation     -       SYNDICATED EXCLUSIVITY     SYNDICATED EXCLUSIVITY       SURCHARGE     SURCHARGE   |       |
| computation     -     computation     -       SYNDICATED EXCLUSIVITY     SYNDICATED EXCLUSIVITY       SURCHARGE     SURCHARGE   |       |
| SURCHARGE SURCHARGE   |       |
|   |       |
| Third Group   |       |
|   |       |
| SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)  |       |

| rour cable system is located within a top 100 television market a<br>ndicated Exclusivity Surcharge. Indicate which major television<br>section 76.5 of FCC rules in effect on June 24, 1981:  | 62443  |
|--|--|
| rour cable system is located within a top 100 television market a<br>ndicated Exclusivity Surcharge. Indicate which major television<br>section 76.5 of FCC rules in effect on June 24, 1981:<br>First 50 major television market<br>STRUCTIONS:<br>ap 1: In line 1, give the total DSEs by subscriber group for con | and the station is not exempt in Part 7, you must also compute a market any portion of your cable system is located in as defined  |
| ndicated Exclusivity Surcharge. Indicate which major television<br>section 76.5 of FCC rules in effect on June 24, 1981:   | market any portion of your cable system is located in as defined   |
| First 50 major television market<br>STRUCTIONS:<br>ep 1: In line 1, give the total DSEs by subscriber group for con  | Second 50 major television market  |
| STRUCTIONS:<br>ep 1: In line 1, give the total DSEs by subscriber group for con  |  |
| ep 2: In line 2, give the total number of DSEs by subscriber graves.<br>Exempt DSEs in block C, part 7 of this schedule. If none   | nmercial VHF Grade B contour stations listed in block A, part 9 of<br>oup for the VHF Grade B contour stations that were classified as   |
| <ul><li><b>ap 3:</b> In line 3, subtract line 2 from line 1. This is the total numl</li><li><b>ap 4:</b> Compute the surcharge for each subscriber group using</li></ul>   | ber of DSEs used to compute the surcharge.   |
| ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP  | ONE HUNDRED FOURTEENTH SUBSCRIBER GROUP  |
| e 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs   |
| e 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs  |
| e 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge  |
| computation  |  |
| ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP   | ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP   |
| e 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs   |
| e 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge   | Line 2: Enter the Exempt DSEs<br>Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  |
| INDICATED EXCLUSIVITY  | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group  |
| NDICATED EXCLUSIVITY SURCHARGE: Add the surcharge the boxes above. Enter here and in block 4, line 2 of space L (p   | for each subscriber group as shown bage ()   |
|  | your actual calculations on this form.   ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP   e 1: Enter the VHF DSEs   e 2: Enter the Exempt DSEs   e 3: Subtract line 2 from line 1   and enter here. This is the   total number of DSEs for   this subscriber group   subject to the surcharge   computation |

|   | LEGAL NAME OF OWNER OF CABLE SYSTEM:  | FORM SA3E. PAGE 20<br>SYSTEM ID#   |
|---|---|--|
| Name  | Atlantic Broadband (CT) LLC   | 62443  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCL   | USIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP  |
| 9   | If your cable system is located within a top 100 television market an<br>Syndicated Exclusivity Surcharge. Indicate which major television m<br>by section 76.5 of FCC rules in effect on June 24, 1981:  | · · ·  |
| Computation   |   | Second 50 major tolovicion market  |
| of<br>Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>First 50 major television market</li> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group for comm<br/>this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group<br/>Exempt DSEs in block C, part 7 of this schedule. If none ei<br/>Step 3: In line 3, subtract line 2 from line 1. This is the total number<br/>Step 4: Compute the surcharge for each subscriber group using th<br/>schedule. In making this computation, use gross receipts fin<br/>your actual calculations on this form.</li> </ul> | p for the VHF Grade B contour stations that were classified as nter zero.<br>er of DSEs used to compute the surcharge. |
|   | ONE HUNDRED SEVENTEENTH SUBSCRIBER GROUP  | ONE HUNDRED 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<br>and enter here. This is the  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the   |
|   | total number of DSEs for  | total number of DSEs for   |
|   | this subscriber group   | this subscriber group  |
|   | subject to the surcharge  | subject to the surcharge   |
|   |   |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE  | SYNDICATED EXCLUSIVITY SURCHARGE   |
|   | First Group   | Second Group   |
|   | ONE HUNDRED NINTEENTH SUBSCRIBER GROUP  | ONE HUNDRED TWENTIETH 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 total number of DSEs for  | and enter here. This is the total number of DSEs for   |
|   | this subscriber group   | this subscriber group  |
|   | subject to the surcharge  | subject to the surcharge   |
|   | computation   | computation  |
|   | SYNDICATED EXCLUSIVITY  | SYNDICATED EXCLUSIVITY   |
|   | SURCHARGE   | SURCHARGE  |
|   | Third Group   | Fourth Group   |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for<br>in the boxes above. Enter here and in block 4, line 2 of space L (page   | standard subscriber group as shown ge /)   |
|   |   |  |
|   |   |  |
|   |   |  |

| le system is located within a top 100 television market a<br>d Exclusivity Surcharge. Indicate which major television<br>76.5 of FCC rules in effect on June 24, 1981:<br>First 50 major television market<br><b>TIONS:</b><br>In line 1, give the total DSEs by subscriber group for cor<br>his schedule.<br>In line 2, give the total number of DSEs by subscriber gr<br>exempt DSEs in block C, part 7 of this schedule. If none<br>In line 3, subtract line 2 from line 1. This is the total num<br>Compute the surcharge for each subscriber group using     | mmercial VHF Grade B contour stations listed in block A, part 9 of<br>roup for the VHF Grade B contour stations that were classified as<br>e enter zero.  |
|---|---|
| le system is located within a top 100 television market a<br>d Exclusivity Surcharge. Indicate which major television<br>76.5 of FCC rules in effect on June 24, 1981:  | and the station is not exempt in Part 7, you must also compute a<br>market any portion of your cable system is located in as defined<br>Second 50 major television market<br>mmercial VHF Grade B contour stations listed in block A, part 9 of<br>roup for the VHF Grade B contour stations that were classified as<br>e enter zero.<br>aber of DSEs used to compute the surcharge.<br>the formula outlined in block D, section 3 or 4 of part 7 of this |
| Exclusivity Surcharge. Indicate which major television<br>76.5 of FCC rules in effect on June 24, 1981:<br>First 50 major television market<br><b>TIONS:</b><br>In line 1, give the total DSEs by subscriber group for cor-<br>nis schedule.<br>In line 2, give the total number of DSEs by subscriber group<br>for exempt DSEs in block C, part 7 of this schedule. If none<br>In line 3, subtract line 2 from line 1. This is the total num<br>compute the surcharge for each subscriber group using<br>chedule. In making this computation, use gross receipts | market any portion of your cable system is located in as defined<br>└ Second 50 major television market<br>mmercial VHF Grade B contour stations listed in block A, part 9 of<br>roup for the VHF Grade B contour stations that were classified as<br>e enter zero.<br>liber of DSEs used to compute the surcharge.<br>the formula outlined in block D, section 3 or 4 of part 7 of this  |
| ☐ First 50 major television market<br><b>TIONS:</b><br>In line 1, give the total DSEs by subscriber group for corn<br>his schedule.<br>In line 2, give the total number of DSEs by subscriber group<br>exempt DSEs in block C, part 7 of this schedule. If none<br>in line 3, subtract line 2 from line 1. This is the total num<br>compute the surcharge for each subscriber group using<br>chedule. In making this computation, use gross receipts  | mmercial VHF Grade B contour stations listed in block A, part 9 of<br>roup for the VHF Grade B contour stations that were classified as<br>e enter zero.<br>aber of DSEs used to compute the surcharge.<br>the formula outlined in block D, section 3 or 4 of part 7 of this  |
| TIONS:<br>In line 1, give the total DSEs by subscriber group for cornis schedule.<br>In line 2, give the total number of DSEs by subscriber grows and the total number of DSEs by subscriber grows and the subscriber of the schedule. If none in line 3, subtract line 2 from line 1. This is the total num compute the surcharge for each subscriber group using chedule. In making this computation, use gross receipted   | mmercial VHF Grade B contour stations listed in block A, part 9 of<br>roup for the VHF Grade B contour stations that were classified as<br>e enter zero.<br>aber of DSEs used to compute the surcharge.<br>the formula outlined in block D, section 3 or 4 of part 7 of this  |
|   |   |
| JNDRED TWENTY-FIRST SUBSCRIBER GROUP  | ONE HUNDRED TWENTY-SECOND SUBSCRIBER GROUP  |
|   |   |
|   | Line 1: Enter the VHF DSEs  |
|   | Line 2: Enter the Exempt DSEs   |
| Ibtract line 2 from line 1<br>d enter here. This is the<br>al number of DSEs for<br>s subscriber group<br>bject to the surcharge<br>mputation   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  |
| st Group  | Second Group  |
| INDRED TWENTY-THIRD SUBSCRIBER GROUP  | ONE HUNDRED TWENTY-FOURTH SUBSCRIBER GROUP  |
| ter the VHF DSEs  | Line 1: Enter the VHF DSEs  |
| Ibtract line 2 from line 1<br>d enter here. This is the<br>al number of DSEs for<br>s subscriber group<br>bject to the surcharge  | Line 2: Enter the Exempt DSEs<br>Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   |
| rd Group  | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group   |
| TED EXCLUSIVITY SURCHARGE: Add the surcharge<br>es above. Enter here and in block 4, line 2 of space L (p   | for each subscriber group as shown page /)  |
|   | ter the VHF DSEs  |

| Name   | LEGAL NAME OF OWNER OF CABLE SYSTEM:   | SYSTEM ID#  |
|--|--|---|
| Name   | Atlantic Broadband (CT) LLC  | 62443   |
|  | BLOCK B: COMPUTATION OF SYNDICATED EXCLU   | SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP  |
| 9  | If your cable system is located within a top 100 television market and<br>Syndicated Exclusivity Surcharge. Indicate which major television ma<br>by section 76.5 of FCC rules in effect on June 24, 1981:   |   |
| omputation   |  | Cocord 50 major tolovision market   |
| of<br>se Rate Fee<br>and<br>yndicated<br>ixclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>First 50 major television market</li> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none emistep 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form.</li> </ul> | for the VHF Grade B contour stations that were classified as<br>ter zero.<br>of DSEs used to compute the surcharge. |
|  | ONE HUNDRED TWENTY-FIFTH SUBSCRIBER GROUP  | ONE HUNDRED TWENTY-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<br>this subscriber group  | total number of DSEs for<br>this subscriber group   |
|  | subject to the surcharge   | subject to the surcharge  |
|  |  |   |
|  |  | SYNDICATED EXCLUSIVITY  |
|  | SURCHARGE<br>First Group   | Surcharge<br>Second Group   |
|  | ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP  | ONE HUNDRED TWENTY-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 total number of DSEs for   | and enter here. This is the total number of DSEs for  |
|  | this subscriber group  | this subscriber group   |
|  | subject to the surcharge   | subject to the surcharge  |
|  | computation  |   |
|  | SYNDICATED EXCLUSIVITY SURCHARGE   | SYNDICATED EXCLUSIVITY SURCHARGE  |
|  | Third Group \$   | Fourth Group  |

|   | LEGAL NAME OF OWNER OF CABLE SYSTEM:  | FORM SA3E. PAGE 20.   |
|---|---|---|
| Name  | Atlantic Broadband (CT) LLC   | SYSTEM ID#<br>62443   |
|   |   |   |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLU  | JSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP   |
| 9   | If your cable system is located within a top 100 television market and<br>Syndicated Exclusivity Surcharge. Indicate which major television ma<br>by section 76.5 of FCC rules in effect on June 24, 1981:  |   |
| Computation   | First 50 major television market  | Second 50 major television market   |
| of<br>Base Rate Fee<br>and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | <ul> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group for commthis schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the</li> </ul> | ercial VHF Grade B contour stations listed in block A, part 9 of<br>o for the VHF Grade B contour stations that were classified as<br>ter zero.<br>of DSEs used to compute the surcharge. |
|   |   |   |
|   | ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP   | ONE HUNDRED THIRTIETH 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<br>this subscriber group   | total number of DSEs for<br>this subscriber group   |
|   | subject to the surcharge  | subject to the surcharge  |
|   | computation   | computation   |
|   |   |   |
|   | SYNDICATED EXCLUSIVITY SURCHARGE  | SYNDICATED EXCLUSIVITY SURCHARGE  |
|   | First Group \$  | Second Group \$   |
|   |   |   |
|   | ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP   | ONE HUNDRED THIRTY-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<br>subject to the surcharge   | this subscriber group<br>subject to the surcharge   |
|   | computation   | computation   |
|   |   |   |
|   | SYNDICATED EXCLUSIVITY SURCHARGE  | SYNDICATED EXCLUSIVITY SURCHARGE  |
|   | Third Group \$  | Fourth Group \$   |
|   |   |   |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for<br>in the boxes above. Enter here and in block 4, line 2 of space L (page   | each subscriber group as shown<br>e /)  |
|   |   |   |

| Name  | LEGAL NAME OF OWNER OF CABLE SYSTEM:  | SYSTEM ID#  |
|---|---|---|
| Naille  | Atlantic Broadband (CT) LLC   | 62443   |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLU  | JSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP   |
| 9   | If your cable system is located within a top 100 television market and<br>Syndicated Exclusivity Surcharge. Indicate which major television ma<br>by section 76.5 of FCC rules in effect on June 24, 1981:  |   |
| omputation  |   | Second 50 major television market   |
| of<br>se Rate Fee<br>and<br>yndicated<br>xclusivity | <ul> <li>First 50 major television market</li> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group for comm<br/>this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group</li> </ul> | ercial VHF Grade B contour stations listed in block A, part 9 of  |
| Surcharge<br>for<br>Partially                       | Exempt DSEs in block C, part 7 of this schedule. If none er<br>Step 3: In line 3, subtract line 2 from line 1. This is the total number<br>Step 4: Compute the surcharge for each subscriber group using the  | r of DSEs used to compute the surcharge.<br>e formula outlined in block D, section 3 or 4 of part 7 of this |
| Distant<br>Stations                                 | your actual calculations on this form.  | gures applicable to the particular group. You do not need to show   |
|   | ONE HUNDRED THIRTY-THIRD SUBSCRIBER GROUP   | ONE HUNDRED THIRTY-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 total number of DSEs for  | and enter here. This is the total number of DSEs for  |
|   | this subscriber group   | this subscriber group   |
|   | subject to the surcharge  | subject to the surcharge  |
|   |   |   |
|   | SYNDICATED EXCLUSIVITY SURCHARGE  | SYNDICATED EXCLUSIVITY SURCHARGE  |
|   | First Group   | Second Group  |
|   | ONE HUNDRED THIRTY-FIFTH SUBSCRIBER GROUP   | ONE HUNDRED THIRTY-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<br>and enter here. This is the  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the  |
|   | total number of DSEs for  | total number of DSEs for  |
|   | this subscriber group<br>subject to the surcharge   | this subscriber group<br>subject to the surcharge   |
|   | computation   |   |
|   |   | SYNDICATED EXCLUSIVITY  |
|   | SURCHARGE<br>Third Group \$   | SURCHARGE           Fourth Group           \$   |
|   |   |   |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for   | each subscriber group as shown  |
|   | in the boxes above. Enter here and in block 4, line 2 of space L (pag   | s   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |

| f your cable system is located within a top 100 television market and f<br>Syndicated Exclusivity Surcharge. Indicate which major television mar<br>by section 76.5 of FCC rules in effect on June 24, 1981:<br>First 50 major television market<br>NSTRUCTIONS:  |  |
|---|--|
| f your cable system is located within a top 100 television market and f<br>Syndicated Exclusivity Surcharge. Indicate which major television mar<br>by section 76.5 of FCC rules in effect on June 24, 1981:<br>First 50 major television market<br>NSTRUCTIONS:  | the station is not exempt in Part 7, you must also compute a rket any portion of your cable system is located in as defined  |
| Syndicated Exclusivity Surcharge. Indicate which major television mar<br>by section 76.5 of FCC rules in effect on June 24, 1981:<br>First 50 major television market<br>NSTRUCTIONS:   | rket any portion of your cable system is located in as defined   |
| ☐ First 50 major television market  | ☐ Second 50 major television market  |
| NSTRUCTIONS:  |  |
| <ul> <li>this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none enterstep 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts figures the surgest of the surgest step 4: Compute the surgest schedule. In making this computation, use gross receipts figures the surgest schedule.</li> </ul> | er zero.<br>of DSEs used to compute the surcharge.   |
|   |  |
|   | ONE HUNDRED THIRTY-EIGHTH SUBSCRIBER GROUP   |
| ine 1: Enter the VHF DSEs   | Line 1: Enter the VHF DSEs   |
| ine 2: Enter the Exempt DSEs  | Line 2: Enter the Exempt DSEs  |
| Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   |
| ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP   | ONE HUNDRED FORTIETH SUBSCRIBER GROUP  |
| ine 1: Enter the VHF DSEs   | Line 1: Enter the VHF DSEs   |
| Line 2: Enter the Exempt DSEs<br>Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge  | Line 2: Enter the Exempt DSEs<br>Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  |
| SYNDICATED EXCLUSIVITY SURCHARGE Third Group  | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group  |
| SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e<br>n the boxes above. Enter here and in block 4, line 2 of space L (page  | each subscriber group as shown   |
|   | Step 3: In line 3, subtract line 2 from line 1. This is the total number of the schedule. In making this computation, use gross receipts figure your actual calculations on this form.   ONE HUNDRED THIRTY-SEVENTH SUBSCRIBER GROUP ine 1: Enter the VHF DSEs ine 2: Enter the Exempt DSEs ine 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |

| If your cable system is located within a top 100 television market and<br>Syndicated Exclusivity Surcharge. Indicate which major television m   |  |
|---|--|
| If your cable system is located within a top 100 television market and<br>Syndicated Exclusivity Surcharge. Indicate which major television m   | d the station is not exempt in Part 7, you must also compute a   |
| Syndicated Exclusivity Surcharge. Indicate which major television m   |  |
| by section 76.5 of FCC rules in effect on June 24, 1981:  | iarkel any portion of your cable system is located in as defined   |
| •   |  |
| <ul> <li>First 50 major television market</li> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group for comm<br/>this schedule.</li> </ul>   |  |
| <ul> <li>Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none erestep 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts for your actual calculations on this form.</li> </ul> | nter zero.<br>er of DSEs used to compute the surcharge.  |
| ONE HUNDRED FORTY-FIRST SUBSCRIBER GROUP  | ONE HUNDRED FORTY-SECOND SUBSCRIBER GROUP  |
|   |  |
|   | Line 1: Enter the VHF DSEs   |
|   | Line 2: Enter the Exempt DSEs  |
| and enter here. This is the   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the   |
| total number of DSEs for  | total number of DSEs for<br>this subscriber group  |
| subject to the surcharge  | subject to the surcharge   |
| computation   |  |
| SYNDICATED EXCLUSIVITY  | SYNDICATED EXCLUSIVITY SURCHARGE   |
| First Group   | Second Group   |
| ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP  | ONE HUNDRED FORTY-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<br>and enter here. This is the  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the   |
| total number of DSEs for  | total number of DSEs for   |
| subject to the surcharge  | this subscriber group<br>subject to the surcharge  |
| computation   | computation  |
| SYNDICATED EXCLUSIVITY  | SYNDICATED EXCLUSIVITY SURCHARGE   |
| Third Group   | Fourth Group   |
| SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge fo<br>in the boxes above. Enter here and in block 4, line 2 of space L (pag   | ge /)  |
|   | Step 1:       In line 1, give the total DSEs by subscriber group for commutis schedule.         Step 2:       In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none e         Step 3:       In line 3, subtract line 2 from line 1. This is the total number         Step 4:       Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts f your actual calculations on this form.         ONE HUNDRED FORTY-FIRST SUBSCRIBER GROUP         Line 1:       Enter the VHF DSEs |

| EGAL NAME OF OWNER OF CABLE SYSTEM:  | SYSTEM ID#  |
|--|---|
| Atlantic Broadband (CT) LLC  | 62443   |
| BLOCK B: COMPUTATION OF SYNDICATED EXCLUS  | SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP  |
| If your cable system is located within a top 100 television market and t<br>Syndicated Exclusivity Surcharge. Indicate which major television mar<br>by section 76.5 of FCC rules in effect on June 24, 1981:  |   |
|  | Second 50 major television market   |
| <ul> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none enter Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the surcharge for each subscriber group u</li></ul> | rcial VHF Grade B contour stations listed in block A, part 9 of<br>for the VHF Grade B contour stations that were classified as<br>er zero.<br>of DSEs used to compute the surcharge.<br>formula outlined in block D, section 3 or 4 of part 7 of this  |
| schedule. In making this computation, use gross receipts figu<br>your actual calculations on this form.  | ures applicable to the particular group. You do not need to show  |
| ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP   | ONE HUNDRED FORTY-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<br>total number of DSEs for  | and enter here. This is the<br>total number of DSEs for   |
| this subscriber group<br>subject to the surcharge  | this subscriber group<br>subject to the surcharge   |
| SYNDICATED EXCLUSIVITY SURCHARGE   | SYNDICATED EXCLUSIVITY SURCHARGE  |
| First Group  | Second Group  |
| ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP   | ONE HUNDRED FORTY-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<br>and enter here. This is the   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the  |
| total number of DSEs for   | total number of DSEs for<br>this subscriber group   |
| subject to the surcharge   | subject to the surcharge  |
|  |   |
| SYNDICATED EXCLUSIVITY SURCHARGE   | SYNDICATED EXCLUSIVITY SURCHARGE  |
| Third Group  | Fourth Group  |
| SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e<br>in the boxes above. Enter here and in block 4, line 2 of space L (page  | each subscriber group as shown 7)   |
|  | BLOCK B: COMPUTATION OF SYNDICATED EXCLUE         If your cable system is located within a top 100 television market and 1         Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981:         □ First 50 major television market         INSTRUCTIONS:         Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule.         Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none enth         Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts figure your actual calculations on this form.         ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP         Line 1: Enter the VHF DSEs         Line 3: Subtract line 2 from line 1         and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |

| able system is located within a top 100 television market an<br>ted Exclusivity Surcharge. Indicate which major television m<br>on 76.5 of FCC rules in effect on June 24, 1981:  | r of DSEs used to compute the surcharge.  |
|---|---|
| able system is located within a top 100 television market an ted Exclusivity Surcharge. Indicate which major television m on 76.5 of FCC rules in effect on June 24, 1981:  | d the station is not exempt in Part 7, you must also compute a arket any portion of your cable system is located in as defined  |
| ted Exclusivity Surcharge. Indicate which major television m<br>on 76.5 of FCC rules in effect on June 24, 1981:<br>First 50 major television market<br>ICTIONS:<br>In line 1, give the total DSEs by subscriber group for comm<br>this schedule.<br>In line 2, give the total number of DSEs by subscriber group<br>Exempt DSEs in block C, part 7 of this schedule. If none e<br>In line 3, subtract line 2 from line 1. This is the total number<br>Compute the surcharge for each subscriber group using the<br>schedule. In making this computation, use gross receipts f<br>your actual calculations on this form.<br>NE HUNDRED FORTY-NINTH SUBSCRIBER GROUP<br>Enter the VHF DSEs<br>Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation | arket any portion of your cable system is located in as defined         Second 50 major television market         hercial VHF Grade B contour stations listed in block A, part 9 of         p for the VHF Grade B contour stations that were classified as ner zero.         r of DSEs used to compute the surcharge.         e formula outlined in block D, section 3 or 4 of part 7 of this         gures applicable to the particular group. You do not need to show         ONE HUNDRED FIFTIETH SUBSCRIBER GROUP         Line 1: Enter the VHF DSEs         Line 2: Enter the Exempt DSEs         Line 3: Subtract line 2 from line 1         and enter here. This is the         total number of DSEs for         this subscriber group         subject to the surcharge         computation  |
| First 50 major television market  ICTIONS: In line 1, give the total DSEs by subscriber group for commithis schedule. In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none e In line 3, subtract line 2 from line 1. This is the total number Compute the surcharge for each subscriber group using th schedule. In making this computation, use gross receipts f your actual calculations on this form.  INE HUNDRED FORTY-NINTH SUBSCRIBER GROUP Enter the VHF DSEs Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation  | Import and the end of th |
| In line 1, give the total DSEs by subscriber group for commutis schedule.<br>In line 2, give the total number of DSEs by subscriber group.<br>Exempt DSEs in block C, part 7 of this schedule. If none e<br>In line 3, subtract line 2 from line 1. This is the total number<br>Compute the surcharge for each subscriber group using the<br>schedule. In making this computation, use gross receipts for<br>your actual calculations on this form.<br>NE HUNDRED FORTY-NINTH SUBSCRIBER GROUP<br>Enter the VHF DSEs<br>Enter the Exempt DSEs<br>Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | Import and the end of th |
| schedule. In making this computation, use gross receipts f<br>your actual calculations on this form.  | ONE HUNDRED FIFTIETH SUBSCRIBER GROUP         Line 1: Enter the VHF DSEs         Line 2: Enter the Exempt DSEs         Line 3: Subtract line 2 from line 1         and enter here. This is the         total number of DSEs for         this subscriber group         subject to the surcharge         computation  |
| Enter the VHF DSEs<br>Enter the Exempt DSEs<br>Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | Line 1: Enter the VHF DSEs         Line 2: Enter the Exempt DSEs         Line 3: Subtract line 2 from line 1         and enter here. This is the         total number of DSEs for         this subscriber group         subject to the surcharge         computation  |
| Enter the Exempt DSEs Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | Line 2: Enter the Exempt DSEs<br>Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   |
| Enter the Exempt DSEs Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  |
| Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   |
| total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  |
| this subscriber group subject to the surcharge computation  | this subscriber group<br>subject to the surcharge<br>computation  |
| computation   |   |
| CATED EXCLUSIVITY   |   |
|   | SYNDICATED EXCLUSIVITY  |
|   | SURCHARGE   |
| First Group   | Second Group  |
| E HUNDRED FIFTY-FIRST SUBSCRIBER GROUP  | ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP   |
| Enter the VHF DSEs  | Line 1: Enter the VHF DSEs  |
| Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs   |
| Subtract line 2 from line 1<br>and enter here. This is the  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the  |
| total number of DSEs for  | total number of DSEs for  |
|   | this subscriber group<br>subject to the surcharge   |
| computation   | computation   |
|   | SYNDICATED EXCLUSIVITY  |
| ARGE  | SURCHARGE   |
| hird Group  | Fourth Group  |
| CATED EXCLUSIVITY SURCHARGE: Add the surcharge for<br>oxes above. Enter here and in block 4, line 2 of space L (page  | r each subscriber group as shown<br>ge 7)   |
|   | Subtract line 2 from line 1<br>and enter here. This is the<br>otal number of DSEs for<br>his subscriber group<br>subject to the surcharge<br>computation  |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:   | SYSTEM ID#   |
|--|--|
| Atlantic Broadband (CT) LLC  | 62443  |
| BLOCK B: COMPUTATION OF SYNDICATED EXCL  | USIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP  |
| If your cable system is located within a top 100 television market an<br>Syndicated Exclusivity Surcharge. Indicate which major television m<br>by section 76.5 of ECC rules in effect on June 24, 1981.   |  |
|  |  |
| INSTRUCTIONS:<br>Step 1: In line 1, give the total DSEs by subscriber group for comm<br>this schedule.   |  |
| Exempt DSEs in block C, part 7 of this schedule. If none e<br>Step 3: In line 3, subtract line 2 from line 1. This is the total numbe<br>Step 4: Compute the surcharge for each subscriber group using the | nter zero.<br>er of DSEs used to compute the surcharge.  |
| ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP   | ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP  |
|  |  |
|  | Line 1: Enter the VHF DSEs   |
|  | Line 2: Enter the Exempt DSEs  |
| Line 3: Subtract line 2 from line 1<br>and enter here. This is the   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the   |
| total number of DSEs for   | total number of DSEs for   |
|  | this subscriber group<br>subject to the surcharge  |
|  |  |
| SYNDICATED EXCLUSIVITY   | SYNDICATED EXCLUSIVITY   |
| SURCHARGE<br>First Group   | Second Group   |
| ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP   | ONE HUNDRED FIFTY-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<br>and enter here. This is the   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the   |
| total number of DSEs for   | total number of DSEs for   |
| subject to the surcharge   | this subscriber group<br>subject to the surcharge  |
|  | computation  |
| SYNDICATED EXCLUSIVITY   |  |
| SURCHARGE<br>Third Group \$  | SURCHARGE<br>Fourth Group \$   |
|  | If your cable system is located within a top 100 television market an<br>Syndicated Exclusivity Surcharge. Indicate which major television m<br>by section 76.5 of FCC rules in effect on June 24, 1981:<br>□ First 50 major television market<br>INSTRUCTIONS:<br>Step 1: In line 1, give the total DSEs by subscriber group for comm<br>this schedule.<br>Step 2: In line 2, give the total number of DSEs by subscriber group<br>Exempt DSEs in block C, part 7 of this schedule. If none e<br>Step 3: In line 3, subtract line 2 from line 1. This is the total numbe<br>Step 4: Compute the surcharge for each subscriber group using th<br>schedule. In making this computation, use gross receipts f<br>your actual calculations on this form.<br>ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP<br>Line 1: Enter the VHF DSEs<br>Line 2: Enter the Exempt DSEs<br>Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |

| <b>.</b> .                 | LEGAL NAME OF OWNER OF CABLE SYSTEM:  | FORM SA3E. PAGE 20<br>SYSTEM ID#                                   |
|----------------------------|---|--|
| Name                       | Atlantic Broadband (CT) LLC   | 62443  |
|                            | BLOCK B: COMPUTATION OF SYNDICATED EXC  | LUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP                       |
| 9                          | If your cable system is located within a top 100 television market a Syndicated Exclusivity Surcharge. Indicate which major television by section 76.5 of FCC rules in effect on June 24, 1981: |  |
| Computation                |   | L Construct COmparison for the second state                        |
| of<br>Base Rate Fee<br>and | INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for con  | Second 50 major television market                                  |
| Syndicated<br>Exclusivity  | this schedule.<br><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber gro   | oup for the VHF Grade B contour stations that were classified as   |
| Surcharge<br>for           | Exempt DSEs in block C, part 7 of this schedule. If none enter zero.<br><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.  |  |
| Partially                  | Ily Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of  |  |
| Distant<br>Stations        | your actual calculations on this form.  | ngures applicable to the particular group. You do not need to show |
|                            |   | 11   |
|                            | ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP  | ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP                          |
|                            | Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs   |
|                            | Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs                                      |
|                            | Line 3: Subtract line 2 from line 1   | Line 3: Subtract line 2 from line 1                                |
|                            | and enter here. This is the<br>total number of DSEs for   | and enter here. This is the<br>total number of DSEs for            |
|                            | this subscriber group   | this subscriber group  |
|                            | subject to the surcharge  | subject to the surcharge   |
|                            |   | computation  |
|                            |   |  |
|                            | SURCHARGE<br>First Group  | SURCHARGE<br>Second Group  |
|                            |   |  |
|                            | ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP  | ONE HUNDRED SIXTIETH 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 total number of DSEs for  | and enter here. This is the<br>total number of DSEs for            |
|                            | this subscriber group   | this subscriber group  |
|                            | subject to the surcharge  | subject to the surcharge   |
|                            |   | computation  |
|                            | SYNDICATED EXCLUSIVITY SURCHARGE  | SYNDICATED EXCLUSIVITY SURCHARGE                                   |
|                            | Third Group   | Fourth Group   |
|                            |   | for each subscriber group as shown                                 |
|                            | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge<br>in the boxes above. Enter here and in block 4, line 2 of space L (p  | sage ()  |
|                            |   |  |
|                            |   |  |
|                            |   |  |
|                            |   |  |
|                            |   |  |
|                            |   |  |
|                            |   |  |
|                            |   |  |
|                            |   |  |