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

## SA3E Long Form

### STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY						
DATE RECEIVED AMOUNT						
	\$					
8/30/2021	ALLOCATION NUMBER					

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:								
Accounting Period	2021/1								
B Owner	Instructions:  Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.  List any other name or names under which the owner conducts the business of the cable system.  If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.  Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.								
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM								
	RCN TELECOM SERVICES OF PHILADELPHIA INC								
				06149720211					
				061497 2021/1					
	650 COLLEGE RD E STE 3100 PRINCETON NJ 08540-6659								
С	INSTRUCTIONS: In line 1, give any business or trade names used to ic names already appear in space B. In line 2, give the mailing address of								
System	1 IDENTIFICATION OF CABLE SYSTEM:	ino system, ii dine	STORE HOLL BIG GOOD STORE	Till Space B.					
	MAILING ADDRESS OF CABLE SYSTEM:								
	2 (Number, street, rural route, apartment, or suite number)								
	(City, town, state, zip code)								
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and reli	st on page 1b					
Area Served	with all communities.  CITY OR TOWN	STATE							
First	Clifton Heights	PA							
Community	Below is a sample for reporting communities if you report multiple cha								
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#					
Sample	Alda Alliance	MD MD	A B	1 2					
	Gering	MD	В	3					
	- Conning	IVID	-						

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.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 061497 RCN TELECOM SERVICES OF PHILADELPHIA INC Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# **Clifton Heights** PA First Crum Lynne PA Community Darby PΑ **Drexel Hill** PA PΑ **Essington Folcroft** PA See instructions for **Folsom** PA additional information on alphabetization. PA Glenolden Havertown PA **Holmes** PA Lansdowne PA Add rows as necessary. PA Morton Norwood PA **Prospect Park** РΔ Ridley Park PA **Sharon Hill** PΑ **Springfield** PA **Swarthmore** PA **Upper Darby** PA Woodlyn PA

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

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 061497

### RCN TELECOM SERVICES OF PHILADELPHIA INC

Ε

Secondary Transmission Service: Subscribers and Rates

### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1			BLOCK 2			
	NO. OF					NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS		RATE		CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:							
<ul> <li>Service to first set</li> </ul>	6,679	\$	21.66				
<ul> <li>Service to additional set(s)</li> </ul>	44	\$	8.20				
<ul> <li>FM radio (if separate rate)</li> </ul>							
Motel, hotel		\$	13.01				
Commercial	68	\$	10.00				
Converter							
Residential							
Non-residential							
		l		1   '			

F

Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

BLOCK 1						BLOCK 2		
CATEGORY OF SERVICE	R	ATE	CATEGORY OF SERVICE	F	ATE		CATEGORY OF SERVICE	RATE
Continuing Services:			Installation: Non-residential					
• Pay cable			Motel, hotel					
<ul> <li>Pay cable—add'l channel</li> </ul>			Commercial			İ		
Fire protection			Pay cable			Ī		
•Burglar protection			Pay cable-add'l channel			İ	Refer to next tab	
Installation: Residential			Fire protection			İ		
• First set			Burglar protection			Ī		
<ul> <li>Additional set(s)</li> </ul>	\$	35.00	Other services:			Ī		
• FM radio (if separate rate)			Reconnect			İ		
Converter			Disconnect			İ		
			Outlet relocation	\$	35.00	İ		
			Move to new address			İ		
						Ì		

## RCN Telecom Services of Philadelphia Inc Page 2 - Section F- Block 2

# Additional Services Other Than Secondary Transmissions:Rate

Penthouse TV	Service	Туре	Retail Rate
Aapka Colors         International Premium         \$         14.95           ART-Arabic         International Premium         \$         1.2.95           CTZ Anong Tian         International Premium         \$         1.1.95           CTZ Along Tian         International Premium         \$         1.1.95           The Filipino Channel (TFC)         International Premium         \$         1.1.95           GMA Pinoy TV         International Premium         \$         1.2.95           GMA Pinoy/TFC         International Premium         \$         2.9.95           GMA Pinoy/TFC (Pilipino On Demand         International Premium         \$         2.9.95           GMA Life/GMA Pinoy/TFC/Filipino On Demand         International Premium         \$         2.9.95           GMA Life/GMA Pinoy/TFC/Filipino On Demand         International Premium         \$         2.9.95           GMA Life/GMA Pinoy/TFC/Filipino On Demand         International Premium         \$         3.9.95           Antenna Satellite         International Premium         \$         3.9.95           Antenna Satellite/Mega Cosmos         International Premium         \$         2.9.95           Alterna Satellite/Mega Cosmos         International Premium         \$         1.9.95           TV Japan	TEN	Adult Premium	\$ 24.95
ART-Arabic         International Premium         \$         12.95           CCTVA         International Premium         \$         9.95           CCTI Zhong Tian         International Premium         \$         11.95           CCTV4/CTI Zhong Tian         International Premium         \$         11.95           The Filipino Channel (TFC)         International Premium         \$         11.95           GMA Life TV         International Premium         \$         9.95           GMA Life TV         International Premium         \$         9.95           GMA Pinoy/TFC         International Premium         \$         29.95           GMA Pinoy/TFC/Filipino On Demand         International Premium         \$         29.95           GMA Life/GMA Pinoy/TFC/Filipino On Demand         International Premium         \$         29.95           GMA Life/GMA Pinoy/TFC/Filipino On Demand         International Premium         \$         29.95           ARTALIA         International Premium         \$         19.95           Antenna Satellite         International Premium         \$         11.95           Mega Cosmos         International Premium         \$         12.95           RAITALIA         International Premium         \$         12.95	Penthouse TV	Adult Premium	\$ 24.95
CCTV4         International Premium         \$         9.95           CTI Zhong Tian         International Premium         \$         11.95           CCTV4/CTI Zhong Tian         International Premium         \$         11.95           GMA Pinoy TV         International Premium         \$         12.95           GMA Pinoy TV         International Premium         \$         9.95           GMA Pinoy/TFC         International Premium         \$         19.95           GMA Life/GMA Pinoy/TFC/Filipino On Demand         International Premium         \$         29.95           GMA Life/GMA Pinoy/TFC/Filipino On Demand         International Premium         \$         29.95           GMA Life/GMA Pinoy/TFC/Filipino On Demand         International Premium         \$         29.95           GMA Life/GMA Pinoy/TFC/Filipino On Demand         International Premium         \$         3.95           Morega Cosmos         International Premium         \$         9.95           Antenna Satellite         International Premium         \$         25.95           RAITALIA         International Premium         \$         25.95           RAITALIA         International Premium         \$         24.95           MBC (Muhwa Broadcasting Corporation)         International Premium	Aapka Colors	International Premium	\$ 14.95
CTI Zhong Tian CTI Zhong Tian International Premium \$ 1.1.95 CCTV4/CTI Zhong Tian International Premium \$ 1.1.95 CCTV4/CTI Zhong Tian International Premium \$ 1.1.95 GMA Pinoy TV International Premium \$ 1.2.95 GMA Pinoy TV International Premium \$ 1.2.95 GMA Life TV International Premium \$ 1.9.95 GMA Life/GMA Pinoy/TFC International Premium \$ 1.9.95 GMA Life/GMA Pinoy/TFC International Premium \$ 1.9.95 GMA Life/GMA Pinoy/TFC International Premium \$ 2.9.95 GMA Pinoy/TFC/Filipino On Demand International Premium \$ 2.9.95 GMA Life/GMA Pinoy/TFC/Filipino On Demand International Premium \$ 3.9.95 TV-5 Monde International Premium \$ 1.4.95 Mega Cosmos International Premium \$ 1.1.95 Antenna Satellite International Premium \$ 1.1.95 Antenna Satellite/Mega Cosmos International Premium \$ 1.9.95 Antenna Satellite/Mega Cosmos International Premium \$ 2.9.95 TV Japan International Premium \$ 2.9.95 TV Japan International Premium \$ 2.4.95 MBC (Muhwa Broadcasting Corporation) International Premium \$ 1.2.95 TVK24/MBC International Premium \$ 1.2.95 TVK24/MBC International Premium \$ 1.9.95 TVK24/MBC International Premium \$ 1.9.95 TVX24/TTVN International Premium \$ 1.9.95 TVN24/TTVN International Premium \$ 1.9.95 TVN24/TVN International Premium \$ 1.9.95 TVN Globo PrC International Premium \$ 1.9.95 TV Globo/PFC International Premium \$ 1.9.95 TV Globo/PFC International Premium \$ 9.95 TV Globo/PFC International Premium \$ 9.95 TV Globo/PFC International Premium \$ 9.95 TV J Globo/PFC International Premium \$ 9.95 TV J Appa International Premium \$ 9.95 TV J Globo/PFC International Premium \$ 9.95 TV J Globo/PFC International Premium \$ 9.95 TV J Globo/PFC International Premium \$ 9.95 TV J Globo/PFC International Premium \$ 9.95 TV J Globo/PFC International Premium \$ 9.95 TV J Globo/PFC International Premium \$ 9.95 TV J Globo/PFC International Premium \$ 9.95 TV J Globo/PFC International Premium \$ 9.95 TV J Globo/PFC International Premium \$ 9.95 TV J Globo/PFC International Premium \$ 9.95 TV J Globo/PFC International Premium \$ 9.95 TV Globo/PFC Inte	ART-Arabic	International Premium	\$ 12.95
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The Filipino Channel (TFC)         International Premium         \$         11.95           GMA Pinoy TV         International Premium         \$         12.95           GMA Pinoy/TFC         International Premium         \$         9.95           GMA Pinoy/TFC         International Premium         \$         29.95           GMA Life/GMA Pinoy/TFC/Filipino On Demand         International Premium         \$         29.95           GMA Life/GMA Pinoy/TFC/Filipino On Demand         International Premium         \$         35.95           TV-5 Monde         International Premium         \$         9.95           Antenna Satellite         International Premium         \$         1.95           Antenna Satellite/Mega Cosmos         International Premium         \$         9.95           RAITALIA         International Premium         \$         9.95           TV Japan         International Premium         \$         1.295           MBC (Mulwa Broadcasting Corporation)         International Premium         \$         1.295           TVK24         International Premium         \$         1.95           TVK24/MBC         International Premium         \$         1.95           TVX         International Premium         \$         1.95	CTI Zhong Tian	International Premium	\$ 11.95
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Star India GoldInternational Premium\$9.95Star One (name change to LifeOK in 2012)International Premium\$9.95Star India PlusInternational Premium\$11.95TV AsiaInternational Premium\$14.95	C1R/RTN/NTV America/RTVI/RTVI Plus	International Premium	\$ 28.95
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Star India Plus International Premium \$ 11.95 TV Asia International Premium \$ 14.95	Star India Gold	International Premium	9.95
TV Asia International Premium \$ 14.95	Star One (name change to LifeOK in 2012)	International Premium	9.95
	Star India Plus	International Premium	\$ 11.95
Zee TV International Premium \$ 14.95	TV Asia	International Premium	\$ 14.95
	Zee TV	International Premium	\$ 14.95

Service	Туре	Retail Rate
ITV/TV Asia	International Premium	\$ 17.95
ITV/Zee TV/Aapka Colors	International Premium	\$ 19.95
Star Gold/Life OK/Star Plus/Aapka Colors	International Premium	\$ 21.95
TV Asia/Zee TV	International Premium	\$ 24.95
Star Gold/Life OK/Star Plus/ITV	International Premium	\$ 26.95
Star Gold/Life OK/Star Plus/TV Asia	International Premium	\$ 27.95
Star Gold/Life OK/Star Plus/Zee TV/Aapla Colors	International Premium	\$ 34.95
Star Gold/Life OK/Star Plus/ITV/Tv Asia/Zee TV/Aapka Colors	International Premium	\$ 39.95
MiVision Lite	International Premium	\$ 12.00
MiVision Plus	International Premium	\$ 22.95
El Paqueton	International Premium	\$ 37.00
Premiere Sports	Premiere Packages	\$ 6.99
Premiere News & Information	Premiere Packages	\$ 4.99
Premiere Children & Family	Premiere Packages	\$ 4.99
Premiere Movies & Entertainment	Premiere Packages	\$ 9.99
Premiere Total (includes all 4)	Premiere Packages	\$ 16.95
НВО	Premium	\$ 19.95
Showtime/The Movie Channel (TMC)	Premium	\$ 16.95
Cinemax	Premium	\$ 9.95
Starz	Premium	\$ 11.95
Showtime/TMC/Starz	Premium	\$ 21.95
HD Tier	High Definition Package	\$ -
HD Expanded Tier	High Definition Package	\$ 8.99
The Jewish Channel	Subscription VOD	\$ 6.50
Bollywood Hits On Demand	Subscription VOD	\$ 9.95
Filipino On Demand	Subscription VOD	\$ 7.95
here! On Demand	Subscription VOD	\$ 8.95
Anime Network On Demand	Subscription VOD	\$ 6.99
Too Much for TV On Demand	Subscription VOD	\$ 17.99
Disney Channel Video On Demand	Subscription VOD	\$ 4.99
Fox Soccer Plus	Sports Premium	\$ 14.95
MLB Extra Innings (Regular Season)	Sports Package	\$ 164.99
MLB Extra Innings (Half Season)	Sports Package	\$ 119.99
MLB Extra Innings (Pennant Race)	Sports Package	\$ 37.49
MLS Direct Kick (Full Season)	Sports Package	\$ 89.00
MLS Direct Kick (Half Season)	Sports Package	\$ 59.00
NFL Redzone (Full Season)	Sports Package	\$ 54.95
NHL Center Ice (Regular Season)	Sports Package	\$ 139.56
NBA League Pass (Early Bird Season)	Sports Package	\$ 189.00
NBA League Pass (Full Season)	Sports Package	\$ 199.00
NBA League Pass (Holiday Offer)	Sports Package	\$ 169.00
NBA League Pass (Half Season)	Sports Package	\$ 99.00
NBA League Pass (Race to Playoffs)	Sports Package	\$ 49.00

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 061497 RCN TELECOM SERVICES OF PHILADELPHIA INC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION 1. CALL SIGN **CHANNEL** OF (Yes or No) **CARRIAGE** NUMBER **STATION** (If Distant) **KJWP** 2 ı No Roxborough, PA **KYW** 3 Ν No Roxborough, PA See instructions for **WACP** 4 ı No Atlantic City, NJ additional information n alphabetization. **WCAU** 10 Ν No Roxborough, PA WFMZ 69 No Allentown, PA ı **WFPA** 28 ı No Roxborough, PA **WGTW** 14 ı Roxborough, PA **WHYY** 12 Ε No Roxborough, PA **WLVT** 39 Ε No Allentown, PA **WNJN** Ε 23 Yes 0 Montclair, NJ **WPHL** 17 I No Roxborough, PA **WPPX** I 61 No Roxborough, PA **WPSG** 57 Ī No Roxborough, PA WPVI 6 Ν No Roxborough, PA WTVE 51 No Roxborough, PA ı **WTXF** 29 I No Roxborough, PA **WUVP** I 24 No Roxborough, PA

FORM SA3E. PAGE 3.						T.		
LEGAL NAME OF OWN					SYSTEM ID:	Name		
RCN TELECOM	SERVICES	OF PHILA	DELPHIA INC		061497	7		
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs (sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for inde								
carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th	ion on a part-tin ion of a distant entered into or a primary transr simulcasts, also ree categories,	ne basis beca multicast stre n or before Jumitter or an as o enter "E". If y see page (v)	nuse of lack of action that is not some 30, 2009, better sociation repressor the conference of the general in	ctivated channel of ubject to a royalty tween a cable sys senting the primar channel on any oth instructions locate	apacity. payment because it is the subject			
					which the station is identified.			
Note: If you are utilizin								
		CHANN	EL LINE-UP	AB		7		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
wwsi	20	l	No		Philadelphia, PA			
WYBE	35	Е	No		Roxborough, PA			
						···		

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	6. Location of Station	DSE	Carriage
KJWP	2	1	Roxborough, PA	1.000	
KYW	3	N	Roxborough, PA	0.250	
WACP	4	1	Atlantic City, NJ	1.000	
WCAU	10	N	Roxborough, PA	0.250	
WFMZ	69	1	Allentown, PA	1.000	
WFPA	28	1	Roxborough, PA	1.000	
WGTW	14	l	Roxborough, PA	1.000	
WHYY	12	E	Roxborough, PA	0.250	
WLVT	39	Е	Allentown, PA	0.250	
WNJN	23	E	Montclair, NJ	0.250	0
WPHL	17	I	Roxborough, PA	1.000	
WPPX	61	l	Roxborough, PA	1.000	
WPSG	57	1	Roxborough, PA	1.000	
WPVI	6	N	Roxborough, PA	0.250	
WTVE	51	1	Roxborough, PA	1.000	
WTXF	29	1	Roxborough, PA	1.000	
WUVP	24	1	Roxborough, PA	1.000	
WWSI	20	1	Philadelphia, PA	1.000	
WYBE	35	E	Roxborough, PA	0.250	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
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				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
			, #N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
			, #N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
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			#N/A	
			#N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
			, #N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
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			#N/A	
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			#N/A	
			#N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
			, #N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
			#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
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				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
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				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
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				#N/A #N/A	
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				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
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				#N/A #N/A	
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				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
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				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
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				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	ion	DSE	Carriage
				#N/A	
				#N/A #N/A	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
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				#N/A #N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

	2. B'cast				Space G
	Channel	3. Type of			Basis of
1. Call Sign	Number	Station	6. Location of Station	DSE	Carriage
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID			
RCN TELECOM	I SERVICES	OF PHILA	DELPHIA INC	C	06149	7 Name		
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
carried by your cable s	system during the ions in effect or 6.61(e)(2) and (4	ne accounting n June 24, 198 4), or 76.63 (r	period, except 31, permitting th eferring to 76.61	(1) stations carried e carriage of certa	and low power television stations) d only on a part-time basis under hin network programs [sections and (2) certain stations carried on a	Primary Transmitters:		
. •			• .	carried by your ca	able system on a substitute program	Television		
basis under specifc FCC rules, regulations, or authorizations:  • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the								
<ul> <li>station was carried only on a substitute basis.</li> <li>List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.</li> </ul>								
each multicast stream	associated with	n a station acc	cording to its over	er-the-air designat	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example			
WETA-simulcast).  Column 2: Give the	e channel numb	er the FCC h	as assigned to t	the television stati	on for broadcasting over-the-air in			
on which your cable sy	stem carried th	e station.		_	may be different from the channel pendent station, or a noncommercial			
(for independent multion For the meaning of the	cast), "E" (for no	oncommercial page (v) of the	educational), o	r "E-M" (for nonco ctions located in th	• •			
planation of local servi	ice area, see pa	age (v) of the	general instructi	ions located in the	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your			
cable system carried the carried the distant state		-			ering "LAC" if your cable system capacity.			
For the retransmiss	ion of a distant	multicast stre	am that is not s	ubject to a royalty	payment because it is the subject			
				•	tem or an association representing y transmitter, enter the designa-			
explanation of these th	ree categories,	see page (v)	of the general i	nstructions locate	ner basis, enter "O." For a further d in the paper SA3 form.			
				-	to which the station is licensed by the which the station is identifed.			
Note: If you are utilizing	ng multiple char	nel line-ups,	use a separate	space G for each	channel line-up.			
		CHANN	EL LINE-UP	AC				
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE (If Distant)				
	NUMBER	STATION		(If Distant)		+		

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	
RCN TELECOM			DELPHIA INC		061497	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect or 6.61(e)(2) and (4.61) as explaine	ne accounting n June 24, 198 4), or 76.63 (re d in the next p	period, except ( 31, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa (e)(2) and (4))]; and	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary Transmitters:
basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you ha cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For se explanation of these th Column 6: Give the	CC rules, regular here in space only on a substant also in spatformation concern. In station's call associated with associated with a channel numbers of the concern carried the in each case we entered "Ye ne distant staticion on a part-tirion of a distant entered into or a primary transis in ulcasts, also a canadian statio or each categories a location of each canadian statio or carried into or a primary transis in ulcasts, also a canadian statio or carried into or a primary transis and canadian statio or carried into or a primary transis and canadian statio or carried into or a primary transis and canadian statio or carried into or a primary transis and canadian statio	ations, or auth G—but do list itute basis. Ince I, if the state rining substitute basis. Ince I, if the state rining substitute basis between the FCC has, WRC is Challe station. In whether the state of the local server age (v) of the station of the local server in columning the state of the basis become basis between or before Jumitter or an associated by the local server in the local server in columning the state of the local server in columning the state of the local server in columning the state of the local server in columnities and the local server in columnities are basis become basis become the state of the local server in the local server in columnities are basis become the local server in	orizations:  at it in space I (the tion was carried ute basis station eport origination cording to its ove be reported in c as assigned to t annel 4 in Wash ation is a networ etwork), "N-M" (fr educational), or e general instruc- rice area, (i.e. "d general instruction accounting perior accounting p	e Special Statemer both on a substitus, see page (v) of a program services er-the-air designat column 1 (list each the television station ington, D.C. This of the station, an inde or network multicar "E-M" (for nonco- tions located in the instant"), enter "Ye ons located in the inplete column 5, s od. Indicate by enter ctivated channel of ubject to a royalty tween a cable sys senting the primar channel on any oth instructions located ist the community e community with	s". If not, enter "No". For an expaper SA3 form.  Itating the basis on which your ering "LAC" if your cable system capacity.  Itating the basis on which your ering "LAC" if your cable system capacity.  Italian is the subject tem or an association representing y transmitter, enter the designation basis, enter "O." For a further d in the paper SA3 form.  It o which the station is licensed by the which the station is identifed.	Television
Note: If you are utilized	- Inditiple onai	• •	EL LINE-UP		onamie ine up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FURIVI SASE, PAGE 3.							
RCN TELECON			DELPHIA INC	C	:	061497	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo	cystem during the consine effect or a fall (e)(2) and (e) as a sexplaine stations: With recording to the consistency of the con	ne accounting in June 24, 194 4), or 76.63 (r d in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the sta erning substit	period, except of the period, except of the period period of the period	(1) stations carried to carriage of certal (e)(2) and (4))]; and carried by your carried by your carried by statement both on a substitute, see page (v) of	and low power television stated only on a part-time basis und in network programs [section and (2) certain stations carried able system on a substitute part and Program Log)—if the cute basis and also on some of the general instructions locates such as HBO, ESPN, etc. Id	der s on a rogram ther	Primary Transmitters: Television
cast stream as "WETA-WETA-simulcast).  Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multir For the meaning of the Column 4: If the st planation of local servi Column 5: If you had cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the Column 6: Give the	a-2". Simulcast e channel numble. For example setem carried the in each case were the cast, "E" (for no ese terms, see per ation is outside ce area, see per ave entered "Ye me distant static ion on a part-tir ion of a distant entered into or a primary transi simulcasts, also aree categories e location of ea Canadian statio	streams must ber the FCC h e, WRC is Cha le station. whether the st tter "N" (for ne concommercial coage (v) of the des" in column on during the as multicast stre n or before Ju mitter or an as of enter "E". If y, see page (v) ch station. Fo ns, if any, give	as assigned to the annel 4 in Wash action is a network actionally, or a general instructive area, (i.e. "digeneral instructional accounting periodates of lack of a same that is not some 30, 2009, be a sociation repression carried the confidence of the general in true. S. stations, lie the name of the	the television staticington, D.C. This into the television staticington, D.C. This into the television, an indefor network multicar "E-M" (for noncoctions located in the distant"), enter "Ye in the column 5, so the inplete column 5, so the television of the televi	s". If not, enter "No". For an expaper SA3 form. tating the basis on which you ering "LAC" if your cable system apacity. payment because it is the sultem or an association represe y transmitter, enter the designer basis, enter "O." For a furted in the paper SA3 form. to which the station is identifed.	ple air in nnel mercial " st).  x- r em bject enting na- ther	
Note: If you are utilization	- Inditiple onai		EL LINE-UP	•	Sharmer line up.		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.							•
LEGAL NAME OF OWN				_	S	YSTEM ID#	Name
RCN TELECOM			DELPHIA INC	<u> </u>		061497	
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here,	G, identify every ystem during the ons in effect or .61(e)(2) and (4 sis, as explaine stations: With r CC rules, regular here in space only on a substand also in spaformation conc	television stare accounting June 24, 198 J, or 76.63 (red in the next pespect to any tions, or authors—but do list itute basis.	period, except (81, permitting the eferring to 76.61 paragraph. distant stations orizations: it in space I (the tion was carried	(1) stations carried a carriage of certa (e)(2) and (4))]; are carried by your case Special Stateme both on a substitu	and low power television station only on a part-time basis unde in network programs [sections id (2) certain stations carried or ble system on a substitute program and Program Log)—if the ute basis and also on some oth the general instructions locate	n a gram er	G Primary Transmitters: Television
each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servi Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	associated with -2". Simulcast see channel number. For example stem carried the in each case we entering the le cast), "E" (for no see terms, see pe ation is outside ce area, see pe ave entered "Ye ne distant static ion on a part-tir ion of a distant entered into or a primary transr simulcasts, also iree categories, e location of ear	a a station acceptance may be a station acceptance must be a station.  The station acceptance acceptance with a station acceptance acceptance with a station acceptance acceptan	pording to its over be reported in comment of the month o	er-the-air designaticulum 1 (list each the television staticington, D.C. This research with the station, an independent of the station, an independent of the station, an independent of the stations located in the stations located in the staticulum 15, sid. Indicate by entectivated channel of the staticulum 15, sid. Indicate by entectivated channel of the staticulum 15, sid. Indicate by entectivated channel of the staticulum 15, sid. Indicate by entectivated channel of the staticulum 15, sid. Indicate by entectivated channel on any other structions located ist the community	". If not, enter "No". For an ex- paper SA3 form. lating the basis on which your sring "LAC" if your cable system	in in iel ercial  .  cet ting er	
Note: If you are utilizin	g multiple chan		·		channel line-up.		
	<u> </u>	CHANN	EL LINE-UP	AF			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

LEGAL NAME OF OWN	IER OF CABLE SY	'STEM:			SYSTEM ID#	
RCN TELECOM	I SERVICES	OF PHILA	DELPHIA INC	3	061497	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during the country of the cou	he accounting n June 24, 198 4), or 76.63 (re d in the next p	period, except ( 31, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa I(e)(2) and (4))]; an	and low power television stations) d only on a part-time basis under in network programs [sections nd (2) certain stations carried on a	G Primary Transmitters: Television
basis under specifc FC	CC rules, regula here in space	ations, or autho G—but do list	orizations:		ent and Program Log)—if the	
List the station here, basis. For further in in the paper SA3 for	and also in spa formation conc rm.	ace I, if the sta erning substite	ute basis statior	ns, see page (v) of	ute basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify	
each multicast stream cast stream as "WETA WETA-simulcast).	associated with a-2". Simulcast	h a station acc streams must	cording to its over be reported in c	er-the-air designat column 1 (list each	ion. For example, report multi- stream separately; for example	
	se. For example	e, WRC is Cha	-		on for broadcasting over-the-air in may be different from the channel	
educational station, by (for independent multion For the meaning of the Column 4: If the state planation of local servi	entering the le cast), "E" (for no ese terms, see p ation is outside ice area, see pa	etter "N" (for ne oncommercial page (v) of the the local serv age (v) of the g	etwork), "N-M" (for educational), or general instruc vice area, (i.e. "d general instructi	or network multicar "E-M" (for noncontions located in the listant"), enter "Yesons located in the	s". If not, enter "No". For an ex-	
carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	ion on a part-tir sion of a distant entered into or a primary transi simulcasts, also aree categories, e location of ea Canadian statio	me basis beca multicast stre n or before Jun mitter or an as o enter "E". If y , see page (v) ch station. For ons, if any, give	ause of lack of a earn that is not s ne 30, 2009, bet sociation repres you carried the c of the general ii r U.S. stations, I e the name of th	ctivated channel of ubject to a royalty tween a cable sys- senting the primar channel on any oth nstructions located list the community e community with	payment because it is the subject tem or an association representing y transmitter, enter the designater basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
, , , , , , , , , , , , , , , , , , , ,		•	EL LINE-UP			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
		<del> </del>				
		<u> </u>				

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name		
RCN TELECOM	SERVICES	OF PHILA	DELPHIA INC	3	061497	- Hamo		
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
In General: In space G	6, identify every	television sta	ation (including t	ranslator stations	and low power television stations)			
carried by your cable s	ystem during th	ne accounting	period, except (	(1) stations carried	d only on a part-time basis under	G		
_				•	nin network programs [sections			
76.59(d)(2) and (4), 76 substitute program bas		,	-	(e)(2) and (4))]; a	nd (2) certain stations carried on a	Primary Transmitters:		
. •			• .	carried by your ca	able system on a substitute program	Television		
basis under specifc FC					, pg	10101101011		
	•		it in space I (the	e Special Stateme	ent and Program Log)—if the			
station was carried only on a substitute basis.								
• List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located								
in the paper SA3 fo		citiing substit	ate basis station	is, see page (v) oi	The general mondonons recated			
Column 1: List eac	h station's call	sign. Do not r	eport origination	n program services	s such as HBO, ESPN, etc. Identify			
			•	•	ion. For example, report multi-			
WETA-simulcast).	2". Simulcast	streams must	be reported in o	column 1 (list each	n stream separately; for example			
,	e channel numb	er the FCC h	as assigned to t	he television station	on for broadcasting over-the-air in			
			•		may be different from the channel			
on which your cable sy								
					pendent station, or a noncommercial			
					ast), "I" (for independent), "I-M" mmercial educational multicast).			
For the meaning of the								
Column 4: If the sta	ation is outside	the local serv	rice area, (i.e. "d	listant"), enter "Ye	s". If not, enter "No". For an ex-			
planation of local servi		• , ,	•		·			
1			•		tating the basis on which your ering "LAC" if your cable system			
carried the distant stati		-		•				
	•				payment because it is the subject			
				•	tem or an association representing			
•			•	• .	y transmitter, enter the designa-			
` '			•	•	ner basis, enter "O." For a further d in the paper SA3 form.			
					to which the station is licensed by the			
FCC. For Mexican or C	Canadian statio	ns, if any, give	e the name of th	e community with	which the station is identifed.			
Note: If you are utilizin	g multiple char	nel line-ups,	use a separate s	space G for each	channel line-up.			
		CHANN	EL LINE-UP	AH				
1. CALL	2 P'CACT	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
SIGN	2. B'CAST CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION			
SIGN	NUMBER	STATION	(Tes of No)	(If Distant)				
	NONBER	OTATION		(II Distant)				
		l						
	I	Γ		T	T			

LEGAL NAME OF OWNE	ER OF CABLE SY	SYSTEM ID#	Name				
RCN TELECOM	SERVICES	OF PHILA	DELPHIA INC	3	061497	Name	
PRIMARY TRANSMITTER	RS: TELEVISIO	N					
•			, ,		and low power television stations)	•	
	•	•		` '	d only on a part-time basis under	G	
•				•	ain network programs [sections nd (2) certain stations carried on a	Primary	
substitute program basi	. , . ,	,.	•	(C)(Z) and (+))], a	nd (2) certain stations carried on a	Transmitters:	
			• .	carried by your ca	able system on a substitute program	Television	
basis under specifc FC	, 0	,					
<ul> <li>Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.</li> </ul>							
	•		tion was carried	l both on a substit	ute basis and also on some other		
·					f the general instructions located		
in the paper SA3 for		oian Do not r	anart arigination	nrogram contino	a qualification of the second		
		-			s such as HBO, ESPN, etc. Identify tion. For example, report multi-		
			•	•	n stream separately; for example		
WETA-simulcast).		=00.					
			•		on for broadcasting over-the-air in may be different from the channel		
on which your cable sys	•	•	aillici 4 ili vvasii	ington, D.C. This	may be different from the charmer		
Column 3: Indicate	in each case v	whether the st			pendent station, or a noncommercial		
					ast), "I" (for independent), "I-M"		
for independent multication for the meaning of these	,,		,,	`	mmercial educational multicast).		
•		• ,	•		s". If not, enter "No". For an ex-		
planation of local service							
-			-	=	stating the basis on which your		
carried the distant station		-		-	ering "LAC" if your cable system		
	•				payment because it is the subject		
-				•	tem or an association representing		
•			•	• .	y transmitter, enter the designa- ner basis, enter "O." For a further		
explanation of these thr	ee categories,	see page (v)	of the general i	nstructions locate	d in the paper SA3 form.		
Column 6: Give the	location of ea	ch station. Fo	r U.S. stations, l	list the community	to which the station is licensed by the		
FCC. For Mexican or Cannote: If you are utilizing				•	which the station is identifed.		
Note. II you are utilizing	j munipie chai	• •	•		crianner inte-up.	•	
		CHANN	EL LINE-UP	Al			
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)			
					<u> </u>		
					<u> </u>		
				·	<u> </u>		

FURINI SAJE. PAGE 3.							
LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF PHILADELPHIA INC  061497							
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect or 6.61(e)(2) and (6.61) as explaine	ne accounting n June 24, 198 4), or 76.63 (n d in the next p	period, except ( 31, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa (e)(2) and (4))]; ar	and low power television stations) I only on a part-time basis under in network programs [sections nd (2) certain stations carried on a	G Primary Transmitters: Television	
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).  For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.  Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.  Column 6: Give the localism of each station. For U.S. station representing the primary transmitter, enter the designation "E" (exem							
Note: If you are utilizin	g multiple char		·	•	channel line-up.	<u> </u>	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
	1	i .			ĺ	Ť.	

FORM SA3E. PAG		·OTEL1			SYSTEM ID#	
	OWNER OF CABLE SY		DELPHIA INC	C	SYSTEM ID# 061497	Name
	MITTERS: TELEVISIO					
In General: In sp. carried by your ca FCC rules and ref 76.59(d)(2) and (4 substitute Babasis under specie Do not list the st station was ca List the station was ca List the station rule basis. For furth in the paper S. Column 1: List each multicast streast stream as "WETA-simulcast) Column 2: Gits community of I on which your cat Column 3: Indeducational statio (for independent in For the meaning of Column 4: If the planation of local Column 5: If yocable system carried the distan For the retrans of a written agree the cable system tion "E" (exempt). explanation of the Column 6: Gits FCC. For Mexical	ace G, identify every able system during the gulations in effect or 4), 76.61(e)(2) and (4) and basis, as explaine is stations: With raife FCC rules, regulated in the system of the system of the system of the system of the system carried only on a substance, and also in spaner information conce as form. It each station's call ream associated with VeTA-2". Simulcast system carried the dicate in each case where the channel number of the system carried the dicate in each case where the system carried the system carried the system carried the system carried the system carried the system of these terms, see particular the station is outside service area, see particular the system of a distant the system of a distant ment entered into or and a primary transition of a distant for simulcasts, also see three categories, we the location of each	r television started accounting in June 24, 1984, or 76.63 (rd din the next prespect to any ations, or auth G—but do list titute basis. In the started in the started in the started in constreams must be the first of the station. In the started in constreams must be the station. In the started in constreams in columnity of the station. In the local server in columnity or din during the started in the started in constreams in columnity or din the started in construction or during the started in construction or during the started in construction or during the started in construction or during the started in construction or during the started in construction. In the started in construction in the started in construction in the started	period, except (81, permitting the eferring to 76.61 paragraph. (16.61 paragraph.) (16.61	(1) stations carried to carriage of certal (e)(2) and (4))]; as carried by your context of the carried by your context of the carried by your context of the carried by your context of the carried by your context of the carried by your context of the carried by your context of the carried by	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your etering "LAC" if your cable system capacity. expaper says the subject etem or an association representing etem or an associ	G Primary Transmitters: Television
<u> </u>		CHANN	EL LINE-UP	۸K		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
		•				
		<u> </u>				

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	
RCN TELECON	SERVICES	OF PHILA	DELPHIA INC	2	061497	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect or 6.61(e)(2) and (4.61) as explaine	ne accounting n June 24, 199 4), or 76.63 (r d in the next p	period, except ( 81, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa l(e)(2) and (4))]; au	and low power television stations) d only on a part-time basis under in network programs [sections nd (2) certain stations carried on a	<b>G</b> Primary Transmitters:
basis under specifc FC  Do not list the station station was carried  List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you ha cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	CC rules, regular here in space only on a substant also in spatformation concern. In station's call associated with associated with a channel numbers of the concern carried the in each case we entered "Ye ne distant staticion on a part-tirion of a distant entered into or a primary transis in ulcasts, also a canadian statio or each categories a location of each canadian statio or carried into or a primary transis in ulcasts, also a canadian statio or carried into or a primary transis and canadian statio or carried into or a primary transis and canadian statio or carried into or a primary transis and canadian statio or carried into or a primary transis and canadian statio	ations, or auth G—but do listitute basis. Ince I, if the state erning substitute basis. Ince I, if the state erning substitute basis because the FCC has, WRC is Challe station. In the station whether the state "N" (for nearly commercial basis because (v) of the est in column on during the state on the basis because multicast stream or before Jumitter or an assistance of the station. For the station, if any, given is the station.	orizations: t it in space I (the ation was carried tute basis station report origination cording to its ove be reported in c as assigned to t annel 4 in Wash ration is a networ etwork), "N-M" (f I educational), or e general instruct vice area, (i.e. "d general instruct 4, you must com accounting peric ause of lack of a em that is not s one 30, 2009, be ssociation repres you carried the c of the general in tr U.S. stations, I e the name of th	e Special Statemer  I both on a substitute, see page (v) of a program services er-the-air designat column 1 (list each the television static ington, D.C. This is rk station, an inde- for network multical r "E-M" (for noncolutions located in the instant"), enter "Ye- ons located in the inplete column 5, s od. Indicate by ente ctivated channel of ubject to a royalty tween a cable sys- senting the primar channel on any oth instructions located list the community with	s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject tem or an association representing y transmitter, enter the designater basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	Television
Note: If you are utilize		•	•		спаппе ше-ир.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	EL LINE-UP  4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OWNER OF CABLE SYSTEM:					SYSTEM ID#	Name	
RCN TELECOM	SERVICES	OF PHILA	DELPHIA INC	<u> </u>	061497	Nante	
PRIMARY TRANSMITTER	RS: TELEVISIO	N					
· ·			, ,		and low power television stations)	G	
	•	•		` '	d only on a part-time basis under	G	
•				•	ain network programs [sections nd (2) certain stations carried on a	Primary	
substitute program basis	. , , , , ,	,.	•	.(0)(2) and (1))], a	na (2) sortain stations samea on a	Transmitters:	
				carried by your ca	able system on a substitute program	Television	
basis under specifc FCC	, 0	,		o Special Stateme	ont and Brogram Log) if the		
<ul> <li>Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.</li> </ul>							
	,		tion was carried	l both on a substit	ute basis and also on some other		
		erning substit	ute basis statior	ns, see page (v) o	f the general instructions located		
in the paper SA3 form		sian Do not r	eport origination	n program services	s such as HBO, ESPN, etc. Identify		
		-			tion. For example, report multi-		
	2". Simulcast :	streams must	be reported in o	column 1 (list each	n stream separately; for example		
WETA-simulcast).	channel numb	or the ECC h	as assigned to t	he television stati	on for broadcasting over-the-air in		
			•		may be different from the channel		
on which your cable sys				9	•		
					pendent station, or a noncommercial		
					ast), "I" (for independent), "I-M" mmercial educational multicast).		
For the meaning of thes	,, ,		,,	`	,		
				,.	s". If not, enter "No". For an ex-		
planation of local service  Column 5: If you have					e paper SA3 form. Stating the basis on which your		
-			•	=	ering "LAC" if your cable system		
carried the distant statio	•				•		
					payment because it is the subject tem or an association representing		
				•	y transmitter, enter the designa-		
					her basis, enter "O." For a further		
explanation of these thre	ee categories, location of ea	, see page (v) ch station. Fo	ा the general । r U.S. stations, l	nstructions locate	o in the paper SA3 form.  to which the station is licensed by the		
					which the station is identifed.		
Note: If you are utilizing	multiple chan	nel line-ups,	use a separate s	space G for each	channel line-up.		
		CHANN	EL LINE-UP	AM			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			
				<u> </u>			
		<u> </u>					
		<u> </u>					

LEGAL NAME OF OWNER OF CABLE SYSTEM:					SYSTEM ID#	Name
RCN TELECOM	SERVICES	OF PHILA	DELPHIA INC	<u> </u>	061497	Naiile
PRIMARY TRANSMITTER	RS: TELEVISIO	N				
· ·			, ,		and low power television stations)	G
	•	•		` '	d only on a part-time basis under	G
•				•	ain network programs [sections nd (2) certain stations carried on a	Primary
substitute program basis	. , . ,	,.	•	.(0)(2) and (1))], a	na (2) sortain stations samed on a	Transmitters:
				carried by your ca	able system on a substitute program	Television
basis under specifc FCC	, 0	,		o Special Stateme	ont and Brogram Log) if the	
station was carried o	•		. it in space i (th	e Speciai Stateme	ent and Program Log)—if the	
	•		tion was carried	l both on a substit	ute basis and also on some other	
		erning substit	ute basis statior	ns, see page (v) o	f the general instructions located	
in the paper SA3 forr		sian Do not r	enort origination	n nrogram service	s such as HBO, ESPN, etc. Identify	
		-			tion. For example, report multi-	
cast stream as "WETA-2			•	•	n stream separately; for example	
WETA-simulcast).	-1	4h - FOO h			an fan braadaastina arran tha air in	
			•		on for broadcasting over-the-air in may be different from the channel	
on which your cable sys		•		ington, B.G. Tillo	may be amerent wern the charmer	
					pendent station, or a noncommercial	
					ast), "I" (for independent), "I-M" mmercial educational multicast).	
For the meaning of thes	,,		,,	`	,	
•		• ,	•		s". If not, enter "No". For an ex-	
planation of local service						
-			-	=	stating the basis on which your ering "LAC" if your cable system	
carried the distant statio		-		-		
For the retransmission	on of a distant	multicast stre	am that is not s	ubject to a royalty	payment because it is the subject	
				•	tem or an association representing	
•			•	• .	y transmitter, enter the designa- her basis, enter "O." For a further	
explanation of these thre	ee categories,	see page (v)	of the general i	nstructions locate	d in the paper SA3 form.	
					to which the station is licensed by the	
Note: If you are utilizing				•	which the station is identifed.	
rioto. Il you are utilizing	manipic onai	• •	•		onamer line up.	
		CHANN	EL LINE-UP	AN		
	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)		
					-	

LEGAL NAME OF OWN	ER OF CARLE SV	'STEM:				SYSTEM ID#	
RCN TELECON			DELPHIA INC	C	•	061497	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s FCC rules and regulati	ystem during the ons in effect or	ne accounting n June 24, 19	period, except 81, permitting th	(1) stations carried e carriage of certa	and low power television station donly on a part-time basis und nin network programs [sections and (2) certain stations carried of	der s	<b>G</b> Primary
	stations: With	respect to any	distant stations	carried by your ca	able system on a substitute pro	ogram	Transmitters: Television
<ul> <li>basis under specifc FC</li> <li>Do not list the station station was carried</li> </ul>	here in space	G—but do lis		e Special Stateme	ent and Program Log)—if the		
List the station here, basis. For further in in the paper SA3 for	and also in spa formation cond rm.	ace I, if the sta erning substit	tute basis station	ns, see page (v) o	ute basis and also on some ot f the general instructions locat	ed	
each multicast stream	associated with	h a station ac	cording to its over	er-the-air designat	s such as HBO, ESPN, etc. Ide ion. For example, report multi- n stream separately; for examp	-	
Column 2: Give the			-		on for broadcasting over-the-a		
its community of licens on which your cable sy	•		annel 4 in Wash	ington, D.C. This	may be different from the char	inel	
Column 3: Indicate	in each case v	whether the st			pendent station, or a noncomr		
	•	•	,. ,		ast), "I" (for independent), "I-M" mmercial educational multicas		
For the meaning of the			-		e paper SA3 form. s". If not, enter "No". For an ex	,_	
planation of local servi	ce area, see pa	age (v) of the	general instructi	ions located in the	paper SA3 form.		
_			-	· ·	tating the basis on which your ering "LAC" if your cable syste		
carried the distant stat	ion on a part-tir	ne basis beca	ause of lack of a	ctivated channel o	capacity.		
					payment because it is the sub tem or an association represe	•	
the cable system and a	a primary trans	mitter or an as	ssociation repre	senting the primar	y transmitter, enter the design	a-	
` ' '			•	•	ner basis, enter "O." For a furth d in the paper SA3 form.	ier	
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	to which the station is license	d by the	
<b>Note:</b> If you are utilizing					which the station is identifed. channel line-up.		
,		CHANN	EL LINE-UP	AO	· · · · · · · · · · · · · · · · · · ·		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	0. LOCATION OF STATION		
	NUMBER	STATION		(If Distant)			
		<b>†</b>					
		<u> </u>					

LEGAL NAME OF OWN	ER OF CARLE SV	'STEM:				SYSTEM ID#	
RCN TELECOM			DELPHIA INC	C	•	061497	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s FCC rules and regulati	ystem during the ons in effect or	ne accounting n June 24, 19	period, except 81, permitting th	(1) stations carried e carriage of certa	and low power television station d only on a part-time basis und ain network programs [sections and (2) certain stations carried of	der s	<b>G</b> Primary
substitute program bas Substitute Basis S	•			carried by your ca	able system on a substitute pro	ogram	Transmitters: Television
<ul><li>basis under specifc FC</li><li>Do not list the station station was carried</li></ul>	here in space	G—but do lis		e Special Stateme	ent and Program Log)—if the		
<ul> <li>List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.</li> <li>Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify</li> </ul>							
each multicast stream	associated with	h a station ac	cording to its over	er-the-air designat	ion. For example, report multi- n stream separately; for examp	-	
Column 2: Give the			-		on for broadcasting over-the-a		
its community of licens on which your cable sy	•		annel 4 in Wash	ington, D.C. This	may be different from the chan	inel	
Column 3: Indicate	in each case v	whether the st			pendent station, or a noncomr		
	•	•	,. ,		ast), "I" (for independent), "I-M" mmercial educational multicas		
For the meaning of the			-		e paper SA3 form. s". If not, enter "No". For an ex	,_	
planation of local servi	ce area, see pa	age (v) of the	general instructi	ions located in the	paper SA3 form.		
· ·			-	· ·	tating the basis on which your ering "LAC" if your cable syste		
carried the distant stati	ion on a part-tir	ne basis beca	ause of lack of a	ctivated channel o	capacity.		
					payment because it is the sub tem or an association represe	•	
the cable system and a	a primary trans	mitter or an as	ssociation repre	senting the primar	y transmitter, enter the design	a-	
` '			•	•	ner basis, enter "O." For a furth d in the paper SA3 form.	ier	
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	to which the station is license	d by the	
FCC. For Mexican or C Note: If you are utilizin					which the station is identifed.		
	3		EL LINE-UP	•			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	0. LOCATION OF STATION		
	NUMBER	STATION		(If Distant)			
		<u> </u>					
		<u></u>					
		<del> </del>					

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	
RCN TELECON	SERVICES	OF PHILA	DELPHIA INC		061497	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect or 6.61(e)(2) and (4.61) as explaine	ne accounting n June 24, 199 4), or 76.63 (r d in the next p	period, except ( 81, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa (e)(2) and (4))]; and	and low power television stations) d only on a part-time basis under nin network programs [sections nd (2) certain stations carried on a	<b>G</b> Primary Transmitters:
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational station, and independent multicast).  For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.  Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.  Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system c						Television
Note: If you are utilizin	g multiple char	•	•		channel line-up.	
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
	NUMBER	STATION		(If Distant)		

FORM SA3E. PAGE 3.						D#
RCN TELECOM			DELPHIA INC	2	SYSTEM I 0614	Name
PRIMARY TRANSMITTE						
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect on .61(e)(2) and (4 sis, as explained	ne accounting June 24, 198 I), or 76.63 (red in the next p	period, except ( 31, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa (e)(2) and (4))]; and	and low power television stations) I only on a part-time basis under in network programs [sections nd (2) certain stations carried on a	Primary Transmitters:
basis under specifc FC  • Do not list the station station was carried  • List the station here,	CC rules, regula here in space only on a subst and also in spa	tions, or autho G—but do list itute basis. ce I, if the sta	orizations: it in space I (the tion was carried	e Special Stateme	able system on a substitute program ont and Program Log)—if the ute basis and also on some other	Television
in the paper SA3 for Column 1: List eac each multicast stream cast stream as "WETA-Simulcast).	rm. h station's call : associated with 2". Simulcast :	sign. Do not r a station acc streams must	eport origination cording to its ove be reported in c	program services er-the-air designat column 1 (list each	s such as HBO, ESPN, etc. Identify ion. For example, report multi-ustream separately; for example on for broadcasting over-the-air in	
its community of licens on which your cable sy <b>Column 3:</b> Indicate	e. For example stem carried th in each case w	, WRC is Cha e station. hether the sta	annel 4 in Washi ation is a networ	ington, D.C. This in	may be different from the channel pendent station, or a noncommercial st), "I" (for independent), "I-M"	
(for independent multic For the meaning of the <b>Column 4:</b> If the sta planation of local servi	cast), "E" (for no se terms, see p ation is outside ce area, see pa	oncommercial page (v) of the the local serv age (v) of the (	educational), or e general instruc rice area, (i.e. "d general instructi	r "E-M" (for nonco tions located in th istant"), enter "Ye ons located in the	mmercial educational multicast). e paper SA3 form. s". If not, enter "No". For an ex- paper SA3 form.	
Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.  For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject						
the cable system and a tion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the	a primary transr simulcasts, also ree categories, e location of eac	mitter or an as enter "E". If y see page (v) ch station. Fo	ssociation repres you carried the c of the general in r U.S. stations, I	senting the primar channel on any oth nstructions located ist the community	tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the	
FCC. For Mexican or C Note: If you are utilizin				-	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AR		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OWNER OF CABLE S	/STEM:			SYSTEM ID#			
RCN TELECOM SERVICES	OF PHILA	DELPHIA INC		061497	Name		
PRIMARY TRANSMITTERS: TELEVISION	)N						
In General: In space G, identify ever carried by your cable system during t FCC rules and regulations in effect o	he accounting	period, except	(1) stations carried	l only on a part-time basis under	G		
76.59(d)(2) and (4), 76.61(e)(2) and (substitute program basis, as explained	4), or 76.63 (red in the next p	eferring to 76.61 paragraph.	(e)(2) and (4))]; a		Primary Transmitters: Television		
basis under specifc FCC rules, regulations, or authorizations:  • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.							
List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.							
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example							
WETA-simulcast). <b>Column 2:</b> Give the channel num its community of license. For example		-		on for broadcasting over-the-air in may be different from the channel			
on which your cable system carried the Column 3: Indicate in each case educational station, by entering the le	whether the st			pendent station, or a noncommercial st), "I" (for independent), "I-M"			
(for independent multicast), "E" (for n For the meaning of these terms, see Column 4: If the station is outside	page (v) of the the local serv	e general instruc vice area, (i.e. "d	ctions located in th listant"), enter "Ye	e paper SA3 form. s". If not, enter "No". For an ex-			
planation of local service area, see p <b>Column 5:</b> If you have entered "Y cable system carried the distant stati	es" in column on during the	4, you must con accounting perio	nplete column 5, s od. Indicate by ent	tating the basis on which your ering "LAC" if your cable system			
of a written agreement entered into o	multicast stre n or before Ju	eam that is not s ne 30, 2009, be	ubject to a royalty tween a cable sys	payment because it is the subject tem or an association representing			
the cable system and a primary trans tion "E" (exempt). For simulcasts, als explanation of these three categories	o enter "E". If , see page (v)	you carried the o	channel on any oth nstructions located	ner basis, enter "O." For a further d in the paper SA3 form.			
Column 6: Give the location of ear FCC. For Mexican or Canadian static Note: If you are utilizing multiple cha	ns, if any, give	e the name of th	e community with				
	CHANN	EL LINE-UP	AS		1		
1. CALL 2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	1		
SIGN CHANNEL	OF	(Yes or No)	CARRIAGE				
NUMBER	STATION		(If Distant)				

FURIN SASE, PAGE 3.							
RCN TELECON			DELPHIA INC		SYSTEM ID# 061497	Name	
PRIMARY TRANSMITTE	ERS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program							
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as associated with a station according to its over-the-air designation. For example, report multicast stream as associated with a station according to its over-the-air designation. For example, report multicast stream as associated with a station according to its over-the-air designation. For example, report multicast stream as associated with a station according to its over-the-air designation. For example, report multicast stream as associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering "La full stations," "I'm" (for network multicast), "" (for independent), ""-Im" (for independent multicast), "E" (for noncommercial educations) coated in the paper SA3 form.  Column 4: If the station is							
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate s	space G for each o	channel line-up.	- -	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN						SYSTEM ID#	Name
RCN TELECOM	SERVICES	OF PHILA	DELPHIA INC	3		061497	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect or .61(e)(2) and (4 sis, as explained	ne accounting June 24, 198 I), or 76.63 (red in the next p	period, except ( 31, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa (e)(2) and (4))]; an	and low power television st I only on a part-time basis u in network programs [sectiond (2) certain stations carrie	under ons ed on a	G Primary Transmitters:
basis under specifc FC	C rules, regula	tions, or auth	orizations:		able system on a substitute		Television
<ul> <li>Do not list the station station was carried</li> </ul>	•		it in space I (the	e Special Stateme	nt and Program Log)—if the	Э	
List the station here, a basis. For further in in the paper SA3 for	and also in spa formation conc rm.	ce I, if the sta erning substit	ute basis statior	ns, see page (v) of	the general instructions loc	cated	
					s such as HBO, ESPN, etc. ion. For example, report mu		
cast stream as "WETA WETA-simulcast).	-2". Simulcast s	streams must	be reported in o	column 1 (list each	stream separately; for exa	mple	
	e. For example	, WRC is Cha	•		on for broadcasting over-the may be different from the ch		
educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servic Column 5: If you ha cable system carried th carried the distant stati For the retransmissi of a written agreement	entering the le cast), "E" (for no se terms, see pation is outside ce area, see paave entered "Ye ne distant static on on a part-tirion of a distant entered into or	tter "N" (for ne oncommercial page (v) of the the local serv age (v) of the es" in column on during the a ne basis beca multicast strea	etwork), "N-M" (f educational), or e general instruc- rice area, (i.e. "d general instructi 4, you must con accounting perio- tuse of lack of a eam that is not s ne 30, 2009, bet	or network multicar "E-M" (for noncountions located in the istant"), enter "Yearns located in the inplete column 5, sold. Indicate by entectivated channel cubject to a royalty tween a cable sys	s". If not, enter "No". For an paper SA3 form. tating the basis on which yo ering "LAC" if your cable sy:	ex- cur stem subject senting	
tion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C	simulcasts, also ree categories, location of eac canadian station	enter "E". If y see page (v) ch station. Fo ns, if any, give	you carried the o of the general in r U.S. stations, I e the name of th	channel on any oth nstructions located ist the community e community with	ner basis, enter "O." For a full in the paper SA3 form. to which the station is licenthich the station is identife	urther	
Note: If you are utilizing	g multiple chan	nel line-ups,	use a separate s	space G for each o	channel line-up.		
	T	CHANN	EL LINE-UP	AU			
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATIC	N	
	NUMBER	STATION		(If Distant)			

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name		
RCN TELECOM	SERVICES	OF PHILA	DELPHIA INC		061497	Nume		
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for inde								
Note: If you are utilizin								
		CHANN	EL LINE-UP	AV				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN					SYSTEM ID#	Name
RCN TELECON	SERVICES	OF PHILA	DELPHIA INC	3	061497	ramo
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)/2] and (4), 76.61(e)/2) and (4), or 76.63 (referring to 76.61(e)/2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as swETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network, "N-M" (for network multicast), "" (for independent), "-M" (for independent multicast), "E" (for noncommercial educational occase in the paper SA3 form.  Column 4: If the stati						
FCC. For Mexican or C					which the station is identifed.	
Note. If you are utilized	ig munipie chan		•		лаше ше-ир.	 
	1	CHANN	EL LINE-UP	AW		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

ACCOUNTING PERIOD: 2021/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 061497 RCN TELECOM SERVICES OF PHILADELPHIA INC PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

FORM SA3E. PAGE 5. ACCOUNTING PERIOD: 2021/1

TORWIGASE. FACE 5.								
RCN TELECOM SERVI			IIA INC		S	061497	Name	
SUBSTITUTE CARRIAGI	E: SPECIA	AL STATEMEN	NT AND PROGRAM LOG	<b>)</b>				
In General: In space I, ident substitute basis during the a explanation of the programm	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regu	lations, or authorizations.	For a further	Substitute Carriage:	
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE								
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?								
broadcast by a distant station?  Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program								
log in block 2.								
2. LOG OF SUBSTITUTE In General: List each substitute of the subst			ite line. Use abbreviations	wherever no	ssible if their meaning is	:		
clear. If you need more spa				wilelevel po	ssible, if their meaning is	•		
			ision program (substitute p					
period, was broadcast by a under certain FCC rules, re						tion		
SA3 form for futher information								
titles, for example, "I Love I				"				
			r "Yes." Otherwise enter "Nasting the substitute progra					
Column 4: Give the broa	adcast statio	on's location (th	ne community to which the	station is lice				
the case of Mexican or Car			community with which the tem carried the substitute p			th		
first. Example: for May 7 give		Wileli your sys	terri carried trie substitute p	orogram. Ose	e numerais, with the mon	uı		
			gram was carried by your			y		
to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	a program carri	ed by a system from 6:01:	15 p.m. to 6:2	28:30 p.m. should be			
	er "R" if the	listed program	was substituted for progra	mming that y	your system was required	d		
to delete under FCC rules a								
gram was substituted for prefect on October 19, 1976.		that your syste	em was permitted to delete	under FCC	rules and regulations in			
Check on October 13, 1370				T				
	UDOTITUT		ī		EN SUBSTITUTE	7. REASON		
		E PROGRAM	l 		IAGE OCCURRED  6. TIMES	FOR DELETION		
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	FROM — TO	DELETION		
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					_			
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ACCOUNTING PERIOD: 2021/1 FORM SA3E. PAGE 6.

Name		LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF PHILADELPHIA INC  061497								
ı	PART-TIME CA	ARRIAGE LOG	with column 5 of sp		ed a	station's basis of	f carriage as "LA	AC" for part-		
Part-Time Carriage Log	time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages.  Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G.  Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period.  Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10."  State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.— 3:15 a.m. app."  You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.— 12:00 p.m."									
	DATES AND HOURS OF PART-TIME CARRIAGE									
	CALL CION	WHE	N CARRIAGE OCC					N CARRIAGE OCC	URRED	
	CALL SIGN	DATE	HOI FROM	JRS TO		CALL SIGN	DATE	HOU FROM	RS TO	
		BATTE	-	-			BATTE	-	10	
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LEGA	IL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name					
RC	N TELECOM SERVICES OF PHILADELPHIA INC	061497						
Inst all a (as	COSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount you mounts (gross receipts) paid to your cable system by subscribers for the system's second dentifed in space E) during the accounting period. For a further explanation of how to core (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s) during the accounting period.	dary transmission service	<b>K</b> Gross Receipts					
IMP	ORTANT: You must complete a statement in space P concerning gross receipts.	(Amount of gross receipts)						
<ul> <li>COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe:</li> <li>Complete block 1, showing your minimum fee.</li> <li>Complete block 2, showing whether your system carried any distant television stations.</li> <li>If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee.</li> <li>If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.</li> </ul>								
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be $\epsilon$ k 3 below.	entered on line 1 of						
-	art 6 of the DSE schedule was completed, the amount from line 7 of block ${\sf C}$ should be entrolow.	tered on line 2 in block						
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should block 4 below.	d be entered on line						
2 in block 4 below.    Block   MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are required to pay at least the minimum fee, regardless of whether they carried any distant stations. This fee is 1.064 percent of the system's gross receipts for the accounting period.								
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064	\$ 2,202,690.13						
	Enter the result here. This is your minimum fee.	\$ 23,436.62						
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the ir space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period X Yes—Complete the DSE schedule.  No—Leave block 3 below blank and co	4, you must check						
Block 3	Line 1. <b>BASE RATE FEE:</b> Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero							
	Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00						
	Line 3. Add lines 1 and 2 and enter here	\$ -						
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$ 23,436.62	Cable systems					
	Line 2. <b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.	0.00	submitting additional deposits under					
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9  (Interest Worksheet)	0.00	Section 111(d)(7) should contact the Licensing					
	Line 4. FILING FEE	\$ 725.00	additional fees. Division for the					
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.  Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 24,161.62	appropriate form for submitting the					
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (Se general instructions located in the paper SA3 form for more information.)	ee page (i) of the	additional fees.					

		FURM SAJE, PAGE 8.								
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF PHILADELPHIA INC	SYSTEM ID# 061497								
M Channels	1 Enter the total number of channels on which the cable									
	1. Enter the total number of channels on which the cable system carried television broadcast stations									
	Enter the total number of activated channels     on which the cable system carried television broadcast stations	289								
	and nonbroadcast services	209								
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)									
Be Contacted for Further Information	Name Chris Connolly Telephone	609-681-2178								
	Address 650 College Road East, Suite 3100 (Number, street, rural route, apartment, or suite number)									
	Princeton, NJ 08540 (City, town, state, zip)									
	Email chris.connolly@rcn.net Fax (optional)									
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regul	lations.)								
O Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)									
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B;	or								
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable sy in line 1 of space B and that the owner is not a corporation or partnership; or	stem as identified								
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owned in line 1 of space B.	er of the cable system								
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained have true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.  [18 U.S.C., Section 1001(1986)]	nerein								
	X /s/ Parisa Salehani									
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compa									
	Typed or printed name: Parisa Salehani									
	Title: Senior Vice President - Controller  (Title of official position held in corporation or partnership)									
	Date: August 31, 2021									

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF PHILADELPHIA INC	STEM ID# 061497	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include a scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."  For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.  During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmission made by satellite carriers to satellite dish owners?  X NO  YES. Enter the total here and list the satellite carrier(s) below	sub- ,	Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment for an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	ent.	Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-	
Line 3 Multiply line 2 by the number of days late and enter the sum here	days	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,  space L, (page 7)		
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance pleat contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	ase	
** 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 origin filing.	nal	
Owner Address		
First community served Accounting period ID number		

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

ACCOUNTING PERIOD: 2021/1

DSE SCHEDULE. PAGE 10.

# INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

#### FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

• Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that local stations are not counted at all in computing DSEs.	

**Step 2:** Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space G of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

**Step 3:** Multiply the result of step 1 by the result of step 2. This gives you the particular station's DSE for the accounting period. (Note that for stations other than those carried on a part-time basis due to lack of activated channel capacity, actual multiplication is not necessary since the DSE will always be the same as the type value.)

### SPECIAL FORMULA FOR STATIONS LISTED IN SPACE I OF SA3E (LONG FORM)

Step 1: For each station, calculate the number of programs that, during the accounting period, were broadcast live by the station and were substituted for programs deleted at the option of the cable system.

(These are programs for which you have entered "Yes" in column 2 and "P" in column 7 of space I.)

Step 2: Divide the result of step 1 by the total number of days in the calendar year (365—or 366 in a leap year). This gives you the particular station's DSE for the accounting period.

#### **TOTAL OF DSEs**

In part 5 of this schedule you are asked to add up the DSEs for all of the distant television stations your cable system carried during the accounting period. This is the total sum of all DSEs computed by the basic formula and by the special formula.

#### THE ROYALTY FEE

The total royalty fee is determined by calculating the minimum fee and the base rate fee. In addition, cable systems located within certain television market areas may be required to calculate the 3.75 fee and/or the Syndicated Exclusivity Surcharge. Note: Distant multicast streams are not subject to the 3.75 fee or the Syndicated Exclusivity Surcharge. Distant simulcast streams are not subject to any royalty payment.

The 3.75 Fee. If a cable system located in whole or in part within a television market added stations after June 24, 1981, that would not have been permitted under FCC rules, regulations, and authorizations (hereafter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge.

The Syndicated Exclusivity Surcharge. Cable systems located in whole or in part within a major television market, as defined by FCC rules and regulations, must calculate a Syndicated Exclusivity Surcharge for the carriage of any commercial VHF station that places a grade B contour, in whole or in part, over the cable system that would have been subject to the FCC's syndicated exclusivity rules in effect on June 24, 1981.

The Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable systems fling SA3E (Long Form) must pay at least the minimum fee, which is 1.064 percent of gross receipts. The cable system pays either the minimum fee or the sum of the base rate fee and the 3.75 percent fee, whichever is larger, and a Syndicated Exclusivity Surcharge, as applicable.

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following:

- 1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
- 2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.
- 3) A station of the same type substituted for a carried network, non-commercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24, 1981.
- 4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.
- 5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

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

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

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

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

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

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

## COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

#### **SCHEDULE**

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

### PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

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

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

### **EXAMPLE**:

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

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

service areas	or stations B, D, and E.	TC
Santa Rosa	Stations A and C 35 mile zone	Mi
		(S
	Fairvale	Gr
Rapid City		DS
		Ва
	Bodega	\$3
	Bay	\$3
	<del></del>	Ва
<b>\</b> ar	ns B, D, nd E	To
35 mi	le zone	ln
	_	

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

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

		\$6,384.00			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

**Total Base Rate Fee:** \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94

In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

**ACCOUNTING PERIOD: 2021/1** 

DSE SCHEDULE. PAGE										
1	LEGAL NAME OF OWNER OF CABLE SYSTEM:  SYSTEM ID#									
•	RCN TELECOM SERVIC	ES OF PHILA	ADELPHIA INC			061497				
	SUM OF DSEs OF CATEGOR	Y "O" STATION	IS:							
	Add the DSEs of each station.									
	Enter the sum here and in line		0.25							
				<u>l</u>						
	Instructions:	imm". list the sell	Laigna of all distant stations i	dentified by the	o letter "O" in column F					
<del></del>	In the column headed "Call S	ign": list the call	i signs of all distant stations i	denuiled by the	e letter O in column 5					
Computation	of space G (page 3).  In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-									
	mercial educational station, give the DSE as ".25."									
Category "O"			CATEGORY "O" STATION	IS: DSEs						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	WNJN	0.250								
		0:200								
Add rows as										
necessary.										
Remember to copy all formula into new										
rows.										
				<u></u>						
						<b></b>				
1		ı J				I				

ļ	<del> </del>	P	~ · · · · · · · · · · · · · · · · · · ·	<del> </del>

Name	RCN TELECOM SERVICES OF PHILADELPHIA INC  SYST  O								
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	figure should correspond with the information given in space J. Calculate only one DSE for each station.  Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period.  Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station.  Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25."  Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.								
Capacity		(	CATEGORY	LAC STATIONS:	COMPUTATI	ON OF DSEs			
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	R JRS D BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	5. TYPE	6. DS	SE	
			÷		=	x	=		
			÷		=	x x	=		
			÷		=	x	=		
			÷		=	x	=		
					=	x x	=		
			÷		=	x	=		
	Add the DSEs	oF CATEGORY LAC ST of each station. Im here and in line 2 of pa		edule,		0.00			
Computation of DSEs for Substitute-Basis Stations	Instructions:  Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station:  • Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulartions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and  • Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I).  Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I.  Column 3: Enter the number of days in the calendar year: 365, except in a leap year.  Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form).								
		SU	JBSTITUTE:	BASIS STATION	S: COMPUTA	ATION OF DSEs	1	1	
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBE OF DAY IN YEAF	'S	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	
		÷		=		÷		=	
		÷		=		÷		=	
		÷		=		÷		=	
		÷		=		÷			
	Add the DSEs	OF SUBSTITUTE-BASIS	S STATIONS:			0.00	]	-	
5		ER OF DSEs: Give the amo		poxes in parts 2, 3, and	4 of this schedule	and add them to provide the	ne total		
Total Number	1. Number	of DSEs from part 2 ●				<b>&gt;</b>	0.25		
of DSEs	2. Number	of DSEs from part 3 ●				<u> </u>	0.00		
	3. Number	of DSEs from part 4 ●				<b>&gt;</b>	0.00		
	TOTAL NUMBE	R OF DSEs						0.25	

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2021/1

	OWNER OF CABLE S		EL DULLA INIC				S	YSTEM ID#	Name
KUN TELECO	M SERVICES C	PHILADI	ELPHIA INC	,				061497	
Instructions: Blo In block A:	ck A must be comp	leted.							•
• If your answer if "Yes," leave the remainder of part 6 and part 7 of the DSE schedule blank and complete part 8, (page 16) of the schedule.									6
If your answer if	"No," complete blo	cks B and C b		TELEVISION MA	ARKETS				Computation of
		utside of all m		er markets as defin		tion 76.5 of FC	C rules and regula	tions in	3.75 Fee
effect on June 24,		schodulo D(		LETE THE REMAIN	IDED OF DA	DT 6 AND 7			
	plete blocks B and		J NOT COMP	LLIL IIIL IXLIVIAII	NDEIX OF FAI	VI O AND I.			
		BI O	CK B: CARE	RIAGE OF PERM	MITTED DS	Fs			
Column 1:	List the call signs			part 2, 3, and 4 of th			n was permitted to	carry under	
CALL SIGN	FCC rules and re	gulations prio e DSE Sched	r to June 25, 1 ule. (Note: Th	1981. For further ex e letter M below ref	planation of p	ermitted statio	ns, see the	•	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)]	les and regula ed pursuant to	ations cited be the FCC mar	sis on which you can slow pertain to those ket quota rules [76. 3.59(d)(1), 76.61(e)	e in effect on 3 57, 76.59(b),	June 24, 1981. 76.61(b)(c), 76	5.63(a) referring to		
		l station (76.6 r DSE schedu	5) (see paragı ıle).	9(c), 76.61(d), 76.63 raph regarding subs CC rules (76.7)			tions in the		
	•	HF station wi	thin grade-B c	e or substitute basis ontour, [76.59(d)(5) am.	•		ring to 76.61(e)(5)]		
Column 3:		stations ider	tified by the le	parts 2, 3, and 4 of etter "F" in column 2			ksheet on page 14	l of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
WNJN	С	0.25							
				•				0.25	
		E	BLOCK C: CO	OMPUTATION OF	3.75 FEE				
ine 1: Enter the	e total number of l	DSEs from p	art 5 of this s	schedule				0.25	
ine 2: Enter the	e sum of permitted	d DSEs from	block B abo	ve				0.25	
				of DSEs subject t 7 of this schedule)		ite.		0.00	
ine 4: Enter gross receipts from space K (page 7)							Do any of the DSEs represer		
ine 5: Multiply l	ine 4 by 0.0375 a	nd enter sun	n here						partially permited/ partially
ine 6: Enter tota	al number of DSE	s from line 3	3				х		nonpermitted carriage? If yes, see par
ine 7: Multinly I	ine 6 by line 5 and	d enter here	and on line 3	2, block 3, space L	(page 7)			0.00	9 instructions.

	OM SERVICES O		ELPHIA INC	<b>:</b>			S'	YSTEM ID# 061497	Name
BLOCK A: TELEVISION MARKETS (CONTINUED)									
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation of 3.75 Fee
									3.73 T ee
				-					
					<u> </u>				
				-					
								······	
					<u> </u>				
					<b></b>				
				I	I	IT	1		

**ACCOUNTING PERIOD: 2021/1** 

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name RCN TELECOM SERVICES OF PHILADELPHIA INC 061497 Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B-Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN DSF **PERIOD CARRIAGE** DSE DSE Instructions: Block A must be completed. 7 Computation If your answer is "Yes," complete blocks B and C, below. of the If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. **Syndicated BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? Yes—Complete blocks B and C . No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Was any station listed in block B of part 7 carried in any commu-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 nity served by the cable system prior to March 31, 1972? (refer or in part, over the cable system? to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: RCN TELECOM SERVICES OF PHILADELPHIA INC	SYSTEM ID# 061497	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	2,202,690.13	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is any	y portion of the cable system within a top 50 television market as defined by the FCC?  Yes—Complete section 3 below.		1
	SECTION 3: TOP 50 TELEVISION MARKET		1
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?      X Yes—Complete part 9 of this schedule.      No—Complete the applicable section below.  If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS	E	ı
	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)		1
	B. Enter 0.00377 of gross receipts (the amount in section 1)		ı
	C. Subtract 1.000 from total permitted DSEs (the figure on	_	ı
	line C in section 2) and enter here		1
	D. Multiply line B by line C and enter here		1
	E. Add lines A and D. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		l
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		1
	A. Enter 0.00599 of gross receipts (the amount in section 1)		1
	B. Enter 0.00377 of gross receipts (the amount in section 1)		ı
	C. Multiply line B by 3.000 and enter here		ı
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		1
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		1
	F. Multiply line D by line E and enter here		ı
	G. Add lines A, C, and F. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		l
	SECTION 4: SECOND 50 TELEVISION MARKET		ı
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		ı
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		1
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.  A. Enter 0.00300 of gross receipts (the amount in section 1)	E	1
	B. Enter 0.00189 of gross receipts (the amount in section 1)		ı
	C.Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		ı
	D. Multiply line B by line C and enter here		ı
	E. Add lines A and D. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)		ı
	Syndicated Exclusivity Surcharge		İ

Name		ME OF OWNER OF CABLE SYSTEM: RCN TELECOM SERVICES OF PHILADELPHIA INC	SYSTEM ID# 061497
Computation of the Syndicated Exclusivity Surcharge	Section 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.  D. Enter 0.00089 of gross receipts (the amount in section 1).  E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.  F. Multiply line D by line E and enter here.  G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)	001497
		Syndicated Exclusivity Surcharge. \$	<u></u>
8 Computation of Base Rate Fee	Instructions: You must complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part 6 was checked "Yes," use the total number of DSEs from part 5.  In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.  If your answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.  If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below blank.  What is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers were located within that station's local service area and others were located outside that area. For the definition of a station's "local service area," see page (v) of the general instructions.		
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?      Yes—Complete part 9 of this schedule.  No—Complete the following sections.		
	Section	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	1	Enter the amount of gross receipts from space K (page 7) ▶\$	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule.  (If block A of part 6 was checked "Yes,"  use the total number of DSEs from part 5.) ▶	
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.  A. Enter 0.01064 of gross receipts	
		(the amount in section 1)	
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here.  D. Multiply line B by line C and enter here.  \$\Bigsim = \bigsim \bigsim \Bigsim = \bigsim \Bigsi	
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)  Base Rate Fee.	0.00

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2021/1

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF PHILADELPHIA IN	SYSTEM ID# C 061497	Name
Section If the figure in section 2 is <b>more than 4.000</b> , compute your ba	se rate fee here and leave section 3 blank.	_
A. Enter 0.01064 of gross receipts (the amount in section 1)	<u>▶</u> \$	8
B. Enter 0.00701 of gross receipts (the amount in section 1)	<b>▶</b> \$	Computation of Base Rate Fee
C. Multiply line B by 3.000 and enter here	<u> </u>	Buse rate rec
D. Enter 0.00330 of gross receipts (the amount in section 1)	<u> </u>	
E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here	<b>&gt;</b>	
F. Multiply line D by line E and enter here	<u></u> <b>\$</b>	
G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee	<b>▶</b> \$ 0.00	
	als on a system-wide basis. Carriage of television broadcast signals shall criber groups) if the cable system reported multiple channel line-ups in	9
In General: If any of the stations you carried were partially dista	ant, the statute allows you, in computing your base rate fee, to exclude ce area, from your system's total gross receipts. To take advantage of this	Computation of
station or the same group of stations. Next: Treat each subscrib	h group consisting entirely of subscribers that are distant to the same per group as if it were a separate cable system. Determine the number of le to that group, and calculate a separate base rate fee for each group. It group. That total is the base rate fee for your system.	Base Rate Fee and Syndicated Exclusivity Surcharge for
	top 100 television market and the station is not exempt in part 7, you must scriber group. In this case, complete both block A and B below. However, n markets, complete block A only.	Partially Distant Stations, and
How to Identify a Subscriber Group for Partially Distant Sta		for Partially Permitted
carried to that community.	e area of each wholly distant and each partially distant station you	Stations
	n you carried, determine which of your subscribers were located tside the local service area of a station is distant to that station (and, by	
	ng to the complement of stations to which they are distant. Each istant to exactly the same complement of stations. Note that a cable ations it carried have local service areas that coincide.	
Computing the base rate fee for each subscriber group: Blo groups.	ock A contains separate sections, one for each of your system's subscriber	
In each section:		
<ul> <li>Identify the communities/areas represented by each subscribe</li> <li>Give the call sign for each of the stations in the subscriber grosubscribers in the group.</li> </ul>	er group. eup's complement—that is, each station that is distant to all of the	
If:     your system is located wholly outside all major and smaller to 4 of this schedule; or,	elevision markets, give each station's DSE as you gave it in parts 2, 3, and	
	evison market, give each station's DSE as you gave it in block B,	
Add the DSEs for each station. This gives you the total DSEs	for the particular subscriber group.	
Calculate gross receipts for the subscriber group. For further in the paper SA3 form.	explanation of gross receipts see page (vii) of the general instructions	
page. In making this computation, use the DSE and gross rece	formula outline in block B of part 8 of this schedule on the preceding eipts figure applicable to the particular subscriber group (that is, the total eccipts from the subscribers in that group). You do not need to show your	

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 061497 RCN TELECOM SERVICES OF PHILADELPHIA INC Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

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

LEGAL NAME OF OWNER RCN TELECOM SE			IA INC			S	061497	Name
- E	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC				
		SUBSCRIBER GROU	Р			SUBSCRIBER GROU	JP	9
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ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	Р		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
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sase Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
ase Rate Fee: Add the		e <b>fees</b> for each subscri pace L (page 7)	ber group a	s shown in the boxes a	above.	\$	0.00	

LEGAL NAME OF OWN RCN TELECOM S			HIA INC			\$	6497 O61497	Name
	BLOCK A:	COMPUTATION (	OF BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
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otal DSEs			0.00	Total DSEs			0.00	
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Base Rate Fee: Add	the base rat	e fees for each subs	criber group a	as shown in the boxes	above.			
Enter here and in bloo			g. oup c	5		\$		

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF PHILADELPHIA INC  061497							
	BLOCK A	COMPUTATION	OF BASF RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	_
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OMMUNITY/ AREA			0	COMMUNITY/ AREA				
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Base Rate Fee: Add t Enter here and in bloc			criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF PHILADELPHIA INC  061497								
	BLOCK A:	COMPUTATION (	OF BASE RA	TE FEES FOR EAC				
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Base Rate Fee: Add to Enter here and in bloo			criber group a	as shown in the boxes	above.	\$		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP  SEVENTEENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  0 COMMUNITY/ AREA	EVENTEENTH SUBSCRIBER GI				
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RCN TELECOM			HIA INC			•	6YSTEM ID# 061497	Name
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LEGAL NAME OF OWN RCN TELECOM S			HIA INC			\$	6497 O61497	Name
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			criber group a	as shown in the boxes	above.			
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BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ENTY-NINTH SUBSCRIBER GROUP  THIRTIETH SUBSCRIBER GROUP  O COMMUNITY/ ARFA  O 9								RCN TELECOM SE
ENTY-NINTH SUBSCRIBER GROUP THIRTIETH SUBSCRIBER GROUP		BER GROUP	SUBSCRI	TE FEES FOR FACH	F BASF RA	COMPUTATION O	BLOCK A.	F
9	GROUP			11				
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LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF PHILADELPHIA INC  061497								
	BLOCK A:	COMPUTATION (	OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloo			criber group a	as shown in the boxes	above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM:  SYSTEM ID#  CON TELECOM SERVICES OF PHILADELPHIA INC  061497								
	BLOCK A	: COMPUTATION (	OF BASF RA	ATE FEES FOR EAC	CH SUBSCRI	BER GROUP			
THIRT		SUBSCRIBER GRO		TT		SUBSCRIBER GROU	JP	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Commutatio	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of	
CALL CICIV	DOL	O/ LEE GIGIT	DOL	OTTLE GIGIT	DOL	ONEE GIGIT	DOL	Base Rate Fo	
								and	
	•••••				•••••			Syndicated	
	•••••				•••••			Exclusivity	
								Surcharge	
								for	
								Partially	
								Distant	
								Stations	
		-							
otal DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
ase Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
TH	IRTY-NINTH	SUBSCRIBER GRO	DUP		FORTIETH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						<u> </u>			
		H					·····		
		-				-			
	•••••	H			•••••		·····		
			····						
otal DSEs			0.00	Total DSEs			0.00		
	0	_				_	0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rın Group	\$	0.00		
na Bata Esta Esta Esta Esta Esta Esta Esta E	0		2.00	Dana Batta E E.	-41- O-		2.22		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	іші Стойр	\$	0.00		
				Ш					
				1 1	.1				
Base Rate Fee: Add Enter here and in bloo			criber group a	as shown in the boxes	apove.	\$			
		•							

LEGAL NAME OF OWNE RCN TELECOM SE			HIA INC			\$	61497 O61497	Name
	BLOCK A	COMPUTATION	OF BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO		П		SUBSCRIBER GROU	JP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation
CALL SIGIV	DOL	CALL SIGIN	DOL	CALL SIGIN	DOL	CALL SIGIV	DOL	Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
			<mark></mark>					Distant
			·····					Stations
		<u>                                     </u>	····			<u> </u>		
	···					H		
			····					
		<u> </u>				<del>                                     </del>		
	<u> </u>	<u> </u>	····			<u> </u>		
otal DSEs	*	<del>!!</del>	0.00	Total DSEs	•		0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
·					•			
ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FOR	TY-THIRD	SUBSCRIBER GRO	UP	FOF	RTY-FOURTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u> </u>		
		<del> </del>				<del>                                     </del>		
			····			-		
			••••					
	<u> </u>	-				-		
	<del></del>							
			····		•••••			
otal 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	
Gross Receipts Third G  Base Rate Fee Third G  Base Rate Fee: Add th Enter here and in block	Group se <b>base rat</b>	\$ e fees for each subs	0.00	Base Rate Fee Four	th Group			

KUN TELECOM SER		SYSTEM: <b>OF PHILADELPH</b>	IA INC			S	YSTEM ID# 061497	Name
BI (	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRII	BER GROUP		
		SUBSCRIBER GROU				SUBSCRIBER GROU	Р	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN [	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of
OALL GIGIT	JOL	ON ILL SIGIY	502	CALL GIGIT	DOL	O'ALL GIGIT	562	Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Stations
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First Group	)	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
ase Rate Fee First Group	)	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
FORTY-SE	/ENTH	SUBSCRIBER GROU	Р	FOR	TY-EIGHTH	SUBSCRIBER GROU	Р	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN [	OSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						_		
							····	
Total DSEs			0.00	Total DSEs			0.00	
Total DSEs	p	\$	0.00	Total DSEs Gross Receipts Fourth	n Group	\$	0.00	

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP FORTY-NINTH SUBSCRIBER GROUP  COMMUNITY/ AREA  CALL SIGN  DSE	DSE Ba	<b>9</b> Computatio    of Base Rate F
FORTY-NINTH SUBSCRIBER GROUP FIFTIETH SUBSCRIBER GI COMMUNITY/ AREA 0 COMMUNITY/ AREA	DSE Ba	Computatio of Base Rate F
	DSE Ba	Computatio of Base Rate F
CALL SIGN DSE CALL SIGN DSE CALL SIGN  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 DE CAL	DSE Ba	of Base Rate F
	B:	Base Rate F
		and
		Syndicated
		Exclusivity
		Surcharge
		for
		Partially
		Distant Stations
		Stations
otal 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	
FIFTY-FIRST SUBSCRIBER GROUP FIFTY-SECOND SUBSCRIBER GI	ROUP	
COMMUNITY/ AREA 0 COMMUNITY/ AREA	0	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE	
	······	
Total DSEs 0.00 Total DSEs	0.00	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$	0.00	
Base Rate Fee Third Group \$ 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)		

EGAL NAME OF OWNER R			IA INC			S	061497	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRII	BER GROUP		
		SUBSCRIBER GROU		П		SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٨		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL CICIA	DOL	OF ILL CICIT	502	O/ LEE GIGIT	BOL	O'ALL STOTA	562	Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Stations
otal DSEs	, <del>-</del>		0.00	Total DSEs			0.00	
Gross Receipts First Gro	up _	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
	ſ							
Base Rate Fee First Gro	nb	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FIFT	Y-FIFTH S	SUBSCRIBER GROU	IP		FIFTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs	. <u>-</u>		0.00	Total DSEs			0.00	
Gross Receipts Third Gro	oup _	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third Gro	oup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the			iber group a	as shown in the boxes a	above.			
	base rate	fees for each subscri			· · · · · · · · · · · · · · · · · · ·	\$	0.00	

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP
Y-SEVENTH SUBSCRIBER GROUP FIFTY-EIGHTH SUBSCRIBER GROUP
0 COMMUNITY/ AREA 0 Comput
DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Of
Base Ra
and
Syndic
Exclus
Surch
for
Partia
Dista
Statio
<u> </u>
<u></u>
Group \$ 0.00 Gross Receipts Second Group \$ 0.00
Group \$ 0.00 Base Rate Fee Second Group \$ 0.00
IFTY-NINTH SUBSCRIBER GROUP SIXTIETH SUBSCRIBER GROUP
0 COMMUNITY/ AREA 0
DSE CALL SIGN DSE CALL SIGN DSE
0.00 Total DSEs 0.00
Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00

LEGAL NAME OF OWNI RCN TELECOM S			HIA INC			\$	6YSTEM ID# 061497	Name
	BLOCK A:	COMPUTATION (	OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO		П		SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٨		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation
O' LEE GIGIT	BOL	ONEE GIGIT	DOL	O/ LEE GIGIT	BOL	ON LEE GIGIT	562	Base Rate F
		<u> </u>						and
	•••••	<u> </u>	••••					Syndicated
		T						Exclusivity
								Surcharge
	•••••	H	····			<del> </del>		for
	•••••	<b> </b>	····			<b>†</b>		Partially
		H	····			H		Distant
		H	••••			H		Stations
		H	····			H		Otations
		H	····			H		
		H	····		·····	H		
		H	····			H		
		<del> </del>	····			+		
		<del> </del>	····			-		
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First (	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
<b>ase Rate Fee</b> First (	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
					· .	į.		
SI	XTY-THIRD	SUBSCRIBER GRO	DUP	SIX	TY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	·		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
						<u> </u>		
						H		
					<u></u>	H		
						<u> </u>		
		-				<u> </u>		
						<u> </u>		
		H						
otal 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	
<b>Base Rate Fee:</b> Add t			criber group a	as shown in the boxes	above.	\$		

DSE of Base Rate F and Syndicated Exclusivity	0	BER GROUP SUBSCRIBER GROU		TE FEES FOR EACH				
Computation  DSE of  Base Rate F  and  Syndicated  Exclusivity  Surcharge  for  Partially  Distant	0	SUBSCRIBER GROU	ATY-SIXTH	II SI		SUBSCRIBER GRO	/T\/ = = = · ·	
Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant	DSE							SIX COMMUNITY/ AREA
Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant	DSE							
and Syndicated Exclusivity Surcharge for Partially Distant	······	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Exclusivity Surcharge for Partially Distant			<u> </u>		<u> </u>		<u></u>	
Surcharge for Partially Distant								
for Partially Distant								
Partially Distant					<u> </u>			
Distant								
Stations								
					<u> </u>		<u></u>	
					<u>.</u>			
					<u>.</u>			
0.00	0.00			Total DSEs	0.00			otal DSEs
0.00	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
0.00	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	ase Rate Fee First G
					· · · · · · · · · · · · · · · · · · ·			
0		SUBSCRIBER GROU	IT-EIGHTH	COMMUNITY/ AREA	0	SUBSCRIBER GRO	-SEVENTH	OMMUNITY/ AREA
DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
					<u> </u>			
					<mark></mark>	H	···	
						-		
					<u> </u>			
					<u>-</u>			
			-		<u>-</u>		-	
					<u>-</u>			
0.00	0.00			Total DSEs	0.00			otal DSEs
0.00	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
0.00	0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	Group	ase Rate Fee Third G

	CN TELECOM SERVICES OF PHILADELPHIA INC SYSTEM 1D# 061497								
		COMPUTATION C SUBSCRIBER GRC		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee	
								and	
								Syndicated Exclusivity	
								Surcharge	
								for Partially	
								Distant	
								Stations	
Total DSEs		Ш	0.00	Total DSEs		11	0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First		\$	0.00	Base Rate Fee Second	•	\$	0.00		
SEV COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	COMMUNITY/ AREA		SUBSCRIBER GROU	)P		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs	•	-	0.00	Total DSEs			0.00		
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group a	II	above.	\$			

	SYSTEM: <b>DF PHILADELPHIA INC</b>			SY	STEM ID# 061497	Name
BLOCK A. C	COMPUTATION OF BASE RA	TE FEES FOR FACH S	SUBSCRIF	BER GROUP		
	SUBSCRIBER GROUP			SUBSCRIBER GROUP	1	
COMMUNITY/ AREA	0	COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN DSE	CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
5/122 5/5/1	0/122 9/9/1	07.22 0.011	332	07.22 0.011	332	Base Rate F
						and
						Syndicated
						Exclusivity
						Surcharge
						for
						Partially
						Distant
						Stations
					<b> </b>	
					<u> </u>	
otal DSEs	0.00	Total DSEs			0.00	
Gross Receipts First Group	\$ 0.00	Gross Receipts Second	Group	\$	0.00	
ase Rate Fee First Group	\$ 0.00	Base Rate Fee Second	Group	\$	0.00	
SEVENTY-FIFTH S	SUBSCRIBER GROUP	SEVEN	TY-SIXTH	SUBSCRIBER GROUP	1	
OMMUNITY/ AREA	0	COMMUNITY/ AREA			0	
CALL SIGN DSE	CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<b>.</b>	
					·	
					·	
	0.00	Total DSEs			0.00	
otal DSEs						
<del>-</del>		0 0	_		0.00	
otal DSEs Gross Receipts Third Group	\$ 0.00	Gross Receipts Fourth (	Group	\$	0.00	

LEGAL NAME OF OWN RCN TELECOM S			HIA INC			\$	6YSTEM ID# 061497	Name
	BLOCK A:	COMPUTATION (	OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
SEVENT		SUBSCRIBER GRO		П		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
		<u> </u>						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVE	NTY-NINTH	SUBSCRIBER GRO	DUP		EIGHTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-					·····	
		H						
		-						
		H						
		H	····					
	••••	H	····		•••••			
			····					
		<u> </u>						
otal DSEs			0.00	Total DSEs			0.00	
	0					_	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	ııı Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
							-	
			criber group a	s shown in the boxes	above.			
Enter here and in bloo	ск 3, line 1, s	pace L (page 7)				\$		

LEGAL NAME OF OWNE			HIA INC			\$	6YSTEM ID# 061497	Name
	BLOCK A:	COMPUTATION (	OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO		П		SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	١		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation
O/ ILL GIGIT	562	CALL SIGIT	DOL	O/ LEE GIGIT	502	GALLE GIGIT	562	Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
		H						for
		-						Partially
		-						Distant Stations
		H	····					Stations
		<u> </u>	····					
		]						
otal 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	
EIGI	HTY-THIRD	SUBSCRIBER GRO	)UP	EIGH	TY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	١		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		H						
		<del>-</del>						
			<mark></mark>					
		H						
		H	····					
otal 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	
		\$	0.00		C.oup	Ψ	0.00	
Base Rate Fee: Add t	he <b>hase r</b> at	e fees for each subs	criber aroup s	s shown in the boxes	above			
Enter here and in bloc			omber group a	is snown in the boxes :	abuve.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF PHILADELPHIA INC  061497								
				TE FEES FOR EAC					
COMMUNITY/ AREA		SUBSCRIBER GRO	0	COMMUNITY/ AREA		SUBSCRIBER GROU	<b>0</b>	9	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fee and	
								Syndicated	
								Exclusivity	
						<del>                                     </del>		Surcharge for	
								Partially	
						<u> </u>		Distant Stations	
								Stations	
						<del>                                     </del>			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	d Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First	: Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
		SUBSCRIBER GRO				SUBSCRIBER GROU			
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA	······		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						<u> </u>			
						<u> </u>			
			····						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Thire	d Group	\$	0.00	Gross Receipts Foul	rth Group	\$	0.00		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group a	II	above.	\$			

LEGAL NAME OF OWNE RCN TELECOM S			HIA INC			\$	6497 O61497	Name
	BLOCK A	COMPUTATION	OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of
CALL GIGIT	DOL	CALL SIGIV	DOL	OALL SIGN	DOL	CALL SIGIV	DOL	Base Rate Fo
								and
								Syndicated
								Exclusivity
								Surcharge
						-		for
						<u> </u>		Partially
		<u>                                     </u>	<mark></mark>			<u> </u>		Distant Stations
		<u> </u>	·····					Stations
		<del> </del>			•••••	-		
						-		
otal 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	
NIN	ETY-FIRST	SUBSCRIBER GRO	)UP	NINE	TY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group a	as shown in the boxes	above.	\$		

RCN TELECOM SE			HIA INC		061497	Name		
E	BLOCK A:	COMPUTATION C	OF BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO		TT		SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	١		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DSL	Base Rate F
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otal DSEs		Ш	0.00	Total DSEs		<u> </u>	0.00	
oral DOLs Bross Receipts First Gr	oun.	•	0.00	Gross Receipts Seco	and Croup	•	0.00	
ross Receipts First Gr	oup	\$	0.00	Gross Receipts Sect	ona Group	\$	0.00	
<b>ase Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NINE	TY-FIFTH	SUBSCRIBER GRO	UP	N	INETY-SIXTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
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Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee Third G  Base Rate Fee: Add th Enter here and in block	e <b>base rat</b> e	e fees for each subs			· 	\$	0.00	

OCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP  /ENTH SUBSCRIBER GROUP  NINETY-EIGHTH SUBSCRIBER GROUP	SYSTEM ID# 061497				GAL NAME OF OWNER OF CABLE SYSTEM: CN TELECOM SERVICES OF PHILADELPHIA INC						
	BER GROUP	SUBSCRII	TE FEES FOR FACH	BASE RA	COMPUTATION O	SLOCK A.					
0 COMMUNITY/ AREA 0 Computatio		COMMUNITY/ AREA	0			COMMUNITY/ AREA					
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NINTH SUBSCRIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP	SUBSCRIBER GROUP	NDREDTH	ONE HU	JP	SUBSCRIBER GROU	TY-NINTH	NINE				
O COMMUNITY/ AREA O							COMMUNITY/ AREA				
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p \$ 0.00 Gross Receipts Fourth Group \$ 0.00											

LEGAL NAME OF OWNER RCN TELECOM SE			IA INC			S	YSTEM ID# 061497	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRIE	BER GROUP		
ONE HUNDR	ED FIRST	SUBSCRIBER GROU	IP	ONE HUNDRE	D SECOND	SUBSCRIBER GROU	Р	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
CALL GIOIV	DOL	CALL SIGIV	DOL	OALL GIGIT	DOL	CALL SIGIN	DOL	Base Rate Fee
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	ıd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRE	D THIRD	SUBSCRIBER GROU	IP	ONE HUNDRE	D FOURTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs		I	0.00	Total DSEs			0.00	
Gross Passinta Third Co	roup	¢	0.00	Gross Possints Escret	Group	¢	0.00	
Gross Receipts Third G	oup	\$	0.00	Gross Receipts Fourth	Эгоир	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	us shown in the boxes ab	oove.	\$		

LEGAL NAME OF OWNE RCN TELECOM SI			HIA INC		Name			
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO		П		SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
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Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED	SEVENTH	SUBSCRIBER GRO	UP	ONE HUNDE	RED EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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otal DSEs		11	0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
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Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Internity in the Internity in the Internity in the Internity in the Internity in the Internity in the Internity in the Internity in the Internity in the Internity in Internity i			criber group a	s shown in the boxes a	bove.	\$		

FEES FOR EACH SUBSCRIBER GROUP  ONE HUNDRED TENTH SUBSCRIBER GROUP  OMMUNITY/ AREA  O  CALL SIGN  DSE  CALL SIGN  DSE  Base Rate Fe  and  Syndicated  Exclusivity  Surcharge  for  Partially		COMPUTATION OF E		
ONE HUNDRED TENTH SUBSCRIBER GROUP  OMMUNITY/ AREA  O  COMPUTATION  CALL SIGN  DSE  CALL SIGN  DSE  GF  Base Rate Fe  and  Syndicated  Exclusivity  Surcharge  for				
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ase Rate Fee Second Group \$ 0.00	Ва	\$	oup	Base Rate Fee First Gro
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ase Rate Fee Fourth Group \$ 0.00	Ba	\$	roup	<b>3ase Rate Fee</b> Third Gr

	061497				IA INC	SYSTEM:  OF PHILADELPH		RCN TELECOM SE
		BER GROUP	SUBSCRIE	TE FEES FOR EACH	BASE RA	COMPUTATION O	BLOCK A:	B
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9 Computation	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA	
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	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	ase Rate Fee First Gro
	IP	SUBSCRIBER GROUI	IXTEENTH	ONE HUNDRED S	IP	SUBSCRIBER GROU	FTEENTH	ONE HUNDRED FIR
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				IIA INC	SYSTEM: OF PHILADELPI	ERVICES	KCN IELECOW SE
	BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION C	BLOCK A:	Е
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R GROUP	SUBSCRIBER GROUI	WENTIETH	ONE HUNDRED TV	JP	SUBSCRIBER GRO	NTEENTH	ONE HUNDRED NI
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0.00			Total DSEs	0.00			otal DSEs
0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	otal DSEs

EGAL NAME OF OWNER RCN TELECOM SE			IIA INC			S	061497	Name
B	LOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EACH	H SUBSCRI	BER GROUP		
		SUBSCRIBER GROU		H		SUBSCRIBER GROUP		_
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0	9 Computation		
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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otal DSEs			0.00	Total DSEs			0.00	
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Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourt	n Group	<u>*</u>	0.00	
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Computation		BER GROUP	SUBSCRIE	TE FEES FOR EACH	F BASE RA	COMPUTATION C	BLOCK A:	E
Computation		SUBSCRIBER GROUP	NTY-SIXTH	ONE HUNDRED TWE		SUBSCRIBER GROUP	NTY-FIFTH	ONE HUNDRED TWE
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		SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN		SUBSCRIBER GROUP	-SEVENTH	NE HUNDRED TWENTY
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ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP  COMMUNITY/ AREA  0		LOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
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Pa Di Sti  Sti  Total DSEs  O.00  Gross Receipts First Group  \$ 0.00  Gross Receipts Second Group  \$ 0.00  Base Rate Fee First Group  \$ 0.00  ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA  0  COMMUNITY/ AREA  0  OMUNITY/ AREA  0									Surcharge
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Total DSEs  O.00  Total DSEs  O.00  Gross Receipts First Group  ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O  ONE HUNDRED THIRTY-SECOND SUBSCRIBER GROUP  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O				···					Stations
Gross Receipts First Group \$ 0.00  Gross Receipts Second Group \$ 0.00  Base Rate Fee First Group \$ 0.00  ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA 0 COMMUNITY/ AREA 0			+	···					• • • • • • • • • • • • • • • • • • • •
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ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O	Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O									
OMMUNITY/ AREA 0 COMMUNITY/ AREA 0	Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	ONE HUNDRED THIS	RTY-FIRST	SUBSCRIBER GROUP	•	ONE HUNDRED TH	RTY-SECOND	SUBSCRIBER GROUP		
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				<u></u>					
				<u></u>					
Total DSEs         0.00         Total DSEs         0.00	otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	Gross Receipts Third G	oup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	<b>3ase Rate Fee</b> Third G	oup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	

LEGAL NAME OF OWI RCN TELECOM		SYSTEM: OF PHILADELPH	HIA INC			\$	061497	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GROUP		Ħ		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	COMMUNITY/ AREA 0			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
			<del></del>			<del></del>		Surcharge
								for
								Partially
								Distant Stations
			<u></u>					Stations
T-4-1 D05-		Ш	0.00	T-4-1 DOE-			0.00	
Total DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED	THIRTY-FIFTH	SUBSCRIBER GROUP	1	ONE HUNDRED	THIRTY-SIXTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u> </u>		
			<del></del>					
			<u></u>			<del> </del>		
			<u></u>			-		
			<u></u>					
						-		
			<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group a	as shown in the boxes	above.	\$		

FEES FOR EACH SUBSCRIBER GROUP  ONE HUNDRED THIRTY-EIGHTH SUBSCRIBER GROUP  OMMUNITY/ AREA  O  CALL SIGN  DSE  CALL SIGN  DSE  Base Rate Ference  and  Syndicated  Exclusivity  Surcharge  for  Partially  Distant  Stations	ONE HUNDRED THIRTY-EIGH COMMUNITY/ AREA			ONE HUNDRED THIRTY
OMMUNITY/ AREA  CALL SIGN  DSE  CALL SIGN  DSE  GALL SIGN  Base Rate Fe  and  Syndicated  Exclusivity  Surcharge  for  Partially  Distant	COMMUNITY/ AREA		-SEVENTH	ONE HUNDRED THIRTY
CALL SIGN DSE CALL SIGN DSE of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant		0		CIAL LIGIADIZED THIRTY
CALL SIGN DSE CALL SIGN DSE of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant	CALL SIGN DSE			COMMUNITY/ AREA
Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant		ALL SIGN DSE	DSE	CALL SIGN
Syndicated Exclusivity Surcharge for Partially Distant		ALE SIGN DOL	DOL	CALL SIGN
Exclusivity Surcharge for Partially Distant				
Exclusivity Surcharge for Partially Distant				
for Partially Distant				
Partially Distant				
Distant				
Stations				
			<del></del>	
			<u></u>	
			<del></del>	
otal DSEs 0.00	Total DSEs	0.00		otal DSEs
ross Receipts Second Group \$ 0.00	Gross Receipts Second Group	0.00	oup	Gross Receipts First Gr
ase Rate Fee Second Group \$ 0.00	Base Rate Fee Second Group	0.00	oup	Base Rate Fee First Gr
ONE HUNDRED FORTIETH SUBSCRIBER GROUP	ONE HUNDRED FORTIE	CRIBER GROUP	RTY-NINTH	ONE HUNDRED THIS
OMMUNITY/ AREA	COMMUNITY/ AREA	0		COMMUNITY/ AREA
CALL SIGN DSE CALL SIGN DSE	CALL SIGN DSE	ALL SIGN DSE	DSE	CALL SIGN
			<del></del>	
			<del></del>	
			<del>  </del>	
otal DSEs	Total DSEs	0.00		Total DSEs
ross Receipts Fourth Group \$ 0.00	Gross Receipts Fourth Group	0.00	iroup	Gross Receipts Third G
ase Rate Fee Fourth Group \$ 0.00	Base Rate Fee Fourth Group	0.00	roup	Base Rate Fee Third G

LEGAL NAME OF OWI RCN TELECOM		SYSTEM: OF PHILADELPH	IIA INC			\$	061497	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GROUP				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
						<u> </u>		and
								Syndicated
								Exclusivity Surcharge
			<del></del>					for
								Partially
								Distant
								Stations
						-		
			···					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GROUP		11		SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
			<del></del>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group a	II	above.	\$		

EGAL NAME OF OWNER RCN TELECOM SE			IIA INC			S	061497	Name
	LOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EACH	H SUBSCRI	BER GROUP		
ONE HUNDRED FOI	RTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED F	ORTY-SIXTH	SUBSCRIBER GROUP		_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
						_		for
		-				-		Partially
			<u>.</u>					Distant
								Stations
	<b>-</b>		<u> </u>					
			<u>.</u>					
	<b></b>		<u>.</u>					
	<u> </u>							
otal DSEs		-	0.00	Total DSEs		-	0.00	Surcharge for Partially
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
ONE HUNDRED FORTY	-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FO	RTY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0.00	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u> </u>					
		<b></b>	<mark></mark>					
			<u>-</u>					
		<u> </u>	<u>.                                    </u>		••••			
			<u> </u>					
		+						
	<b>.</b>							
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	oup.	¢	0.00	Gross Receipts Fourt	h Group	\$	0.00	
21000 Neoeipis IIIII G	oup	\$	0.00	Cioss Receipts i ouit	ii Oloup	Ψ	3.00	
Base Rate Fee Third G	oup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
	base rate	e fees for each subscr		Base Rate Fee Fourt	·	\$	0.00	

LEGAL NAME OF OWNER RCN TELECOM SE			IIA INC			S	061497	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCRI	BER GROUP		
ONE HUNDRED FORT						SUBSCRIBER GROU	JP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIFT	TY-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIFT	TY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0.00	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						H	·····	
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						H		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourt	n Group	<u>*</u>	0.00	
<b>3ase Rate Fee</b> Third Gr	oup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
nird Gr	oup	\$		Gross Receipts Fourti	h Group	\$	0.00	

LEGAL NAME OF OWNE			IIA INC			S	061497	Name
		COMPUTATION O SUBSCRIBER GROU		TE FEES FOR EACI		BER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
<b>Base Rate Fee</b> First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED FIR	FTY-FIFTH	SUBSCRIBER GROU	JP	ONE HUNDRED I	FIFTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0.00 0.00 R GROUP	
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 Fourt	h Group	\$	0.00	
<b>Base Rate Fee</b> Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group a	us shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNE			HIA INC			\$	061497	Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED FIFT	Y-SEVENTH	SUBSCRIBER GROUI	5	ONE HUNDRED F	IFTY-EIGHTH	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
			<mark></mark>					
otal DSEs			0.00	Total DSEs			0.00	Syndicate Exclusivit Surcharg for Partially Distant
Gross Receipts First G	Froup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED F	IFTY-NINTH	SUBSCRIBER GROUI	)	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0.00	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<mark>.</mark>		<mark></mark>				······	
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	•••••		•••					
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Door Data For This Id	2		0.00	Book Both Fro F. 11	th Crave			
Base Rate Fee Third (	σιουρ	\$	0.00	Base Rate Fee Four	ui Group	\$	0.00	
<b>Base Rate Fee:</b> Add tl Enter here and in blocl			criber group a	es shown in the boxes a	above.	\$		

LEGAL NAME OF OWNE			•			\$	061497	Name
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECON	SUBSCRIBER GROU	JP	^
COMMUNITY/ AREA	Philade	elphia		COMMUNITY/ ARE	Α		0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u></u>					Base Rate Fee
								and
			<u>.</u>					Syndicated
	<u></u>		<u></u>					Exclusivity
	<del>.</del>		<mark></mark>					Surcharge
	<del> </del>		<u> </u>					for
	<del></del>		<mark></mark>					Partially
	···		<u> </u>					Distant Stations
				-				Stations
	<del></del>		<u></u>					
	<del></del>	H	<u>.</u>		•••••			
	<del></del>	H	<u></u>					
		<u> </u>	<u>-</u>					
			<del>-</del>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 2,202	2,690.13	Gross Receipts Sec	ond Group	\$	0.00	
<b>Base Rate Fee</b> First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	H SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>					
	<u></u>		<u></u>					
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	<del></del>	<del> </del>						
			<u>-</u>					
		<u> </u>	<u>-</u>					
			-					
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third C	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	ne base rat	e fees for each subsc	riber group a	as shown in the boxes	above.			
Enter here and in block			J P .		•	\$	0.00	

Name	061497							
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	SIXTH			SUBSCRIBER GRO	FIFTH	
Computat	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of Base Rate I and Syndicate Exclusivit Surcharg for Partially Distant	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
-								
							····	
							•••	
Partially								
Stations								
							····	
		H					····	
Partially Distant Stations							···	
	0.00			Total DSEs	0.00			otal DSEs
		\$			0.00			
	0.00	Ψ	d Group	Gross Receipts Secon	0.00	\$	iroup	Gross Receipts First G
	0.00	\$		Base Rate Fee Secon	0.00	\$		
	0.00		d Group		0.00		Group	Base Rate Fee First G
	0.00	\$	d Group		0.00	\$	Group	Base Rate Fee First G
	0.00	\$	d Group	Base Rate Fee Second	<b>0.00</b>	\$	Group	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	SEVENTH	COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First G
	DSE	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Second COMMUNITY/ AREA  CALL SIGN	0.00  JP  O  DSE	\$ SUBSCRIBER GRO	SEVENTH	COMMUNITY/ AREA
	0.00 P O O O O O O O O O O O O O O O O O O	SUBSCRIBER GROU  CALL SIGN	DSE	Base Rate Fee Second COMMUNITY/ AREA CALL SIGN Total DSEs	0.00  DSE  0.00	SUBSCRIBER GROUND CALL SIGN	SEVENTH	COMMUNITY/ AREA  CALL SIGN  Fotal DSEs
	DSE	\$ SUBSCRIBER GROU	DSE	Base Rate Fee Second COMMUNITY/ AREA  CALL SIGN	0.00  JP  O  DSE	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First G

RCN TELECOM S			HIA INC			,	061497	Name
				TE FEES FOR EAC				
		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 Fe
								and
								Syndicated
		H	····					Exclusivity
		<u> </u>	····					for
								Partially
								Distant
								Stations
			····		•••••			
Total DSEs			0.00	Total DSEs			0.00	Partially Distant
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	
	ELEVENTH	SUBSCRIBER GRO	DUP		TWELVTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		<u> </u>						
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		<u> </u>						
		<del> </del>						
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Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
			0.00			[ <del>*</del>	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	as shown in the boxes	above.	\$		

	6YSTEM ID# 061497				HIA INC	OF PHILADELPH		RCN TELECOM SE
		BER GROUP	SUBSCRI	TE FEES FOR EACH	F BASE RA	COMPUTATION OF	BLOCK A:	E
۵		SUBSCRIBER GROU	JRTEENTH			SUBSCRIBER GROU	RTEENTH	
Gomputation of Base Rate F and Syndicated Exclusivity	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated								
Exclusivity		<u> </u>				-		
=								
		-	<u> </u>		···		···-	
Otationo		<del> </del>			···	-	···	
							••••••	
Syndicated Exclusivity Surcharge for Partially Distant								
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	roup	Gross Receipts First Gr
		·	•	,		·	•	,
	0.00	\$	d Croup	David Bata Face 0				
	0.00	<u> </u>	a Group	Base Rate Fee Seco	0.00	\$	roup	Base Rate Fee First Gr
	•	SUBSCRIBER GROU			•	SUBSCRIBER GROU		
	•				•			FI
	JP				UP			FI
	JP <b>0</b>	SUBSCRIBER GROU	SIXTEENTH	COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROU	IFTEENTH	FI COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	SIXTEENTH	COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROU	IFTEENTH	FI COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	SIXTEENTH	COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROU	IFTEENTH	FI COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	SIXTEENTH	COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROU	IFTEENTH	FI COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	SIXTEENTH	COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROU	IFTEENTH	FI COMMUNITY/ AREA
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## Nonpermitted 3.75 Stations

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LEGAL NAME OF OWNE			HIA INC				061497	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
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ONE HUNDRED TWE	NTV_THIRD	SUBSCRIBER GROUP		ONE HUNDRED TW	ENTY-FOLIRTI	H SUBSCRIBER GROUF	)	
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Base Rate Fee: Add th		e fees for each subsc pace L (page 7)	riber group a	s shown in the boxes	above.	\$		

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LEGAL NAME OF OWNE RCN TELECOM S			HIA INC				061497	Name
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ONE HUNDRED TH	IIRTY-FIRST	SUBSCRIBER GROU	Р	ONE HUNDRED TH	IRTY-SECONE	SUBSCRIBER GROUP		
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		COMMUNITY/ AREA	0			COMMUNITY/ AREA
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EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name RCN TELECOM SERVICES OF PHILADELPHIA INC 061497 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation Second 50 major television market First 50 major television market of INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Exclusivity Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE **SURCHARGE** SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

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EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name RCN TELECOM SERVICES OF PHILADELPHIA INC 061497 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation Second 50 major television market First 50 major television market of INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Exclusivity Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. 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 total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE 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 this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE **SURCHARGE** SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

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EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name RCN TELECOM SERVICES OF PHILADELPHIA INC 061497 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation Second 50 major television market First 50 major television market of INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Exclusivity Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. 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 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group . . . . . . . . . . . . . SIXTY-FOURTH SUBSCRIBER GROUP SIXTY-THIRD SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE **SURCHARGE** SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown