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						
8-30-21	\$						
	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	Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo- ate 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	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM											
	Atlantic Broadband (Delmar) LLC												
				06373520211									
				063735 2021/1									
	2 Batterymarch Park, Suite 205 Quincy, MA 02169	la máifir ába a hrrainn a n		way walloo thoo									
С	INSTRUCTIONS: In line 1, give any business or trade names used to id names already appear in space B. In line 2, give the mailing address of												
System	1 IDENTIFICATION OF CABLE SYSTEM: Atlantic Broadband												
	MAILING ADDRESS OF CABLE SYSTEM: 330 Drummer Drive (Number, street, rural route, apartment, or suite number) Grasonville, MD 21638 (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	with all communities.												
Served	CITY OR TOWN	STATE											
First Community	DELTAVILLE	VA											
Community	Below is a sample for reporting communities if you report multiple cha	nnel line-ups in S _l STATE	pace G. CH LINE UP	SUB GRP#									
	CITY OR TOWN (SAMPLE) Alda	MD	A	50B GRP#									
Sample	Alliance	MD	В	2									
	Gering	MD	В	3									

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 063735 Atlantic Broadband (Delmar) LLC 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 fillings. 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. CH LINE UP SUB GRP# CITY OR TOWN STATE **DELTAVILLE VA** 1 **First IRVINGTON VA** Α 1 Community **KILMARNOCK** VA Α 1 **LANCASTER** VA Α 1 **MATHEWS COUNTY** VA В 2 MIDDLESEX COUNTY UNINC VA Α 1 See instructions for **URBANNA** VA Α 3 additional information on alphabetization. WHITE STONE VA Add rows as necessary.

······································

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Atlantic Broadband (Delmar) LLC

SYSTEM ID# 063735

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1		BLOCK 2				
	NO. OF			NO. OF			
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS		RATE	
Residential:							
 Service to first set 	4,383	\$ 39.99	Residential Expanded Basic	3,753	\$	59.99	
 Service to additional set(s) 			Value + Entertainment	3,753	\$	89.98	
 FM radio (if separate rate) 			Family	1,252	\$	99.97	
Motel, hotel		\$ 39.99	Res Bulk EBU Expanded Basic	89	\$	59.99	
Commercial	27	\$ 39.99	Non-Res Bulk EBU Basic	9	\$	39.99	
Converter			Non-Res Bulk EBU Expanded Bas	95		\$59.99	
Residential			EBU Exp Motel, Hotel	43	\$	59.99	
Non-residential			EBU Exp Commercial	70	\$	59.99	

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

		BLO	CK 1				BLOCK 2		
CATEGORY OF SERVICE	I	RATE	CATEGORY OF SERVICE RATE CATEGORY OF SERVICE				RATE CATEGORY OF SERVICE RATE		
Continuing Services:			Installation: Non-residential						
• Pay cable	13.9	95-20.95	Motel, hotel				Expanded Basic	\$	59.99
 Pay cable—add'l channel 			Commercial				Value + Entertainment	\$	89.98
Fire protection			Pay cable			ľ	Family	\$	99.97
•Burglar protection			 Pay cable-add'l channel 			ľ			
Installation: Residential			Fire protection						
• First set	\$	49.95	Burglar protection						
 Additional set(s) 	\$	20.00	Other services:			ľ			
 FM radio (if separate rate) 			Reconnect	\$	40.00	ľ			
Converter			Disconnect			Ī			
			 Outlet relocation 	\$	20.00				
			 Move to new address 	\$	40.00				

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Atlantic Broadband (Delmar) LLC 063735 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 A 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) **WCVE** 23 Ε Yes 0 RICHMOND, VA WCVE.2 Yes 0 23.2 E-M RICHMOND, VA See instructions for WCVE.3 23.3 E-M Yes 0 RICHMOND, VA additional information n alphabetization. WHRO 15 Ε No NORFOLK, VA WHRO.3 15.3 E-M No NORFOLK, VA **WRIC** 8 Ν No RICHMOND, VA WRIC.3 8.3 I-M No RICHMOND, VA **WRLH** 35 Ν No RICHMOND, VA WRLH.2 35.2 No I-M RICHMOND, VA WRLH.3 35.3 I-M No RICHMOND, VA WRLH.4 I-M 35.4 No RICHMOND, VA **WTVR** 6 Ν No RICHMOND, VA WTVR.2 6.2 I-M No RICHMOND, VA WTVR.3 6.3 I-M No RICHMOND, VA WUPV 65 No ASHLAND, VA ı WUPV.2 I-M ASHLAND, VA 65.2 No WUPV.3 ASHLAND, VA 65.3 I-M No **WWBT** 12 Ν RICHMOND, VA No

LEGAL NAME OF OWN	ER OF CABLE SY	'STEM:			SYSTEM ID#				
Atlantic Broadb					063735	Name			
PRIMARY TRANSMITTE	RS: TELEVISIO	N							
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 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 ssociated with a station according to its over-the-air designation. For example, report multicast stream as severally. 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 (w) of the general instructions located in the paper SA3 form. Column 6: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on w									
Note: If you are utilizin		• •		•	Charmer inte-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				
WWBT.2	12.2	I-M	No		RICHMOND, VA				
WWBT.3	12.3	I-M	No		RICHMOND, VA				

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Atlantic Broadband (Delmar) LLC

SYSTEM ID#
Name

Name

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	В	
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
WAVY	10	N	No		PORTSMOUTH, VA
WAVY.2	10.2	I-M	No		PORTSMOUTH, VA
WAVY.3	10.3	I-M	No		PORTSMOUTH, VA
WCVE	23	E	Yes	0	RICHMOND, VA
WGNT	27	I	No		VIRGINIA BEACH, VA
WGNT.2	27.2	I-M	No		VIRGINIA BEACH, VA
WHRO	15	E	No		NORFOLK, VA
WHRO.2	15.2	E-M	No		NORFOLK, VA
WHRO.4	15.4	E-M	No		NORFOLK, VA
WPXV	49	I	No		NORFOLK, VA
WTKR	3	N	No		NORFOLK, VA
WTKR.2	3.2	I-M	No		NORFOLK, VA
WTVZ	33	I	No		NEWPORT NEWS, VA
WTVZ.2	33.2	I-M	No		NEWPORT NEWS, VA
WTVZ.3	33.3	I-M	No		NEWPORT NEWS, VA
WTVZ.4	33.4	I-M	No		NEWPORT NEWS, VA
WVBT	43	N	No		PORTSMOUTH, VA
WVEC	13	N	No		HAMPTON, VA

G

Primary Transmitters: Television

LEGAL NAME OF OW	NER OF CARLE SY	STEM:			SYSTEM ID#		
Atlantic Broad					063735	Name	
PRIMARY TRANSMITT	ERS: TELEVISIO	N					
carried by your cable of FCC rules and regular 76.59(d)(2) and (4), 76 substitute program ba	system during the tions in effect or 6.61(e)(2) and (4 sis, as explaine	ne accounting 1 June 24, 198 1), or 76.63 (red 1 in the next p	period, except (31, permitting the eferring to 76.61 paragraph.	(1) stations carrie e carriage of certa l(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections ind (2) certain stations carried on a able system on a substitute program	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), "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 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 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 s							
Note: If you are utilizing	ng multiple char	• •	•		channel line-up.		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
WVEC.4	13.4	I-M	No		HAMPTON, VA		

FORM SA3E. PAGE 3.						1			
LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#									
Atlantic Broadb	and (Delma	ır) LLC			063735	Name			
PRIMARY TRANSMITTERS: TELEVISION									
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for noncommercial education, "I'-M" (for independent multicast), "E" (for nonc									
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Note: If you are utilizin	g muitiple char		EL LINE-UP	•	cnannei iine-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				
WCVE	23	Е	No		RICHMOND, VA				
WCVE.2	23.2	E-M	Yes	0	RICHMOND, VA	See instructions for			
WCVE.3	23.3	E-M	Yes	0	RICHMOND, VA	additional information			
WHRO	15	E	No		NORFOLK, VA	on alphabetization.			
WHRO.3	15.3	E-M	No		NORFOLK, VA				
WRIC	8	N	No		RICHMOND, VA				
WRIC.3	8.3	I-M	No		RICHMOND, VA				
WRLH	35	N	No		RICHMOND, VA				
WRLH.2	35.2	I-M	No		RICHMOND, VA				
WRLH.3	35.3	I-M	No		RICHMOND, VA				
WRLH.4	35.4	I-M	No		RICHMOND, VA				
WTVR	6	N	No		RICHMOND, VA	•			
WTVR.2	6.2	I-M	No		RICHMOND, VA	•			
WTVR.3									
WUPV 2									
WUPV.2	65.2	I-M	No		ASHLAND, VA				
WUPV.3	65.3	I-M	No No		ASHLAND, VA				
WWBT	12	N	No		RICHMOND, VA				

FORM SA3E. PAGE 3.	MED OF CARLE O	/OTEM			SYSTEM ID#							
Atlantic Broad					063735	Name						
	-				003733							
PRIMARY TRANSMITT			- 4! /! loo -!!									
					and low power television stations) d only on a part-time basis under	G						
					ain network programs [sections							
()()	. , , ,	,.	•	1(e)(2) and (4))]; a	and (2) certain stations carried on a	Primary						
substitute program ba			• •	carried by your o	able system on a substitute program	Transmitters: Television						
basis under specifc F				carried by your c	able system on a substitute program	relevision						
	ation here in space G—but do list it in space I (the Special Statement and Program Log)—if the											
	s carried only on a substitute basis.											
	t the station here, and also in space I, if the station was carried both on a substitute basis and also on some other asis. For further information concerning substitute basis stations, see page (v) of the general instructions located											
in the paper SA3 f	form.	-		,								
		-			s such as HBO, ESPN, etc. Identify tion. For example, report multi-							
			-	_	h stream separately; for example							
WETA-simulcast).												
			•		ion for broadcasting over-the-air in may be different from the channel							
on which your cable s	•		anno 4 m wasi	illigion, D.O. This	may be different from the charmer							
					ependent station, or a noncommercial							
	,	,	,. ,		ast), "I" (for independent), "I-M" ommercial educational multicast).							
For the meaning of th	,		,.	•	,							
			•		es". If not, enter "No". For an ex-							
planation of local ser					e paper SA3 form. stating the basis on which your							
_			-	· ·	tering "LAC" if your cable system							
carried the distant sta	•											
					/ payment because it is the subject stem or an association representing							
_					ry transmitter, enter the designa-							
` ' '			•	•	ther basis, enter "O." For a further							
					ed in the paper SA3 form. y to which the station is licensed by the							
					which the station is identifed.							
Note: If you are utilize	ing multiple chai	nnel line-ups,	use a separate	space G for each	channel line-up.							
		CHANN	EL LINE-UP	С								
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)								
WWBT.2	12.2	I-M	No		RICHMOND, VA							
WWBT.3	12.3	I-M	No		RICHMOND, VA							
	····											
												
	<mark></mark>											

		_										
		<u> </u>										
		<u> </u>		 								

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 063735 Atlantic Broadband (Delmar) LLC 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

FURINI SAJE. PAGE 5.						ACCOUNTING	PEKIOD: 2021/1		
LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Delmar) LLC 063735									
SUBSTITUTE CARRIAGE			NT AND PROGRAM I O	<u> </u>					
In General: In space I, ident substitute basis during the acexplanation of the programm 1. SPECIAL STATEMENT	ify every no ecounting pe ing that must CONCER	nnetwork televiseriod, under spe st be included in	sion program broadcast by ecific present and former F0 n this log, see page (v) of the TTUTE CARRIAGE	a distant statio CC rules, regu ne general inst	lations, or authorizations. tructions located in the pa	For a further per SA3 form.	Substitute Carriage: Special		
 During the accounting per broadcast by a distant stat Note: If your answer is "No" 	ion?	•	,	•	Yes	X No	Statement and Program Log		
Log of Substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in									
9	IIRSTITLIT	E PROGRAM			EN SUBSTITUTE IAGE OCCURRED	7. REASON			
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	FOR DELETION			
					_				
	<u> </u>	 							
					_				
					_				
	 	 				 			

ACCOUNTING PERIOD: 2021/1 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Atlantic Broadband (Delmar) LLC 063735 PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-J 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 Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give • 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 WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN** HOURS **HOURS** DATE **FROM** TO DATE **FROM** TO

LEGA	IL NAME OF OWNER OF CABLE SYSTEM:		SYS	STEM ID#	Massa						
Atla	antic Broadband (Delmar) LLC			063735	Name						
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)											
during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts. \$ 1,526,206.32 (Amount of gross receipts)											
InstruConConIf you feetIf you	COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did 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. 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.										
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be ${\bf k}$ 3 below.	entered o	n line 1 of								
-	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be ellow.	ntered on l	line 2 in block								
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shou block 4 below.	ld be ente	red on line								
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.										
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064		1,526,2	206.32							
	Enter the result here. This is your minimum fee.	\$	16.2	38.84							
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colum "Yes" in this block. • Did your cable system carry any distant television stations during the accounting perio X Yes—Complete the DSE schedule. No—Leave block 3 below blank and continued to the c	n 4, you m d?	ust check								
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero		\$ 10,3	93.27							
	Line 2. 3.75 Fee: 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	\$	10,3	93.27							
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	<u>;</u>	\$ 16,2	238.84	Cable systems						
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.			0.00	submitting additional deposits under						
	Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)										
	Line 4. FILING FEE	<u> </u>	\$ 7	25.00	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	\$	16,9	63.84	appropriate form for submitting the additional fees.						
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (S general instructions located in the paper SA3 form for more information.)	See page (i) of the		additional 1865.						

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTE							
Name		3735						
	CHANNELS							
M	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations							
Channels	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.							
Gildillicis	1. Enter the total number of channels on which the cable							
	system carried television broadcast stations							
	2. Enter the total number of activated channels							
	on which the cable system carried television broadcast stations							
	and nonbroadcast services							
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual							
Individual to	we can contact about this statement of account.)							
Be Contacted								
for Further	Name Patrick Bratton Telephone 617-786-8800							
Information								
	Address 2 Batterymarch Park, Suite 205							
	(Number, street, rural route, apartment, or suite number)							
	Quincy, MA 02169							
	(City, town, state, zip)							
	Email							
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)							
0								
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)							
	(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or							
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified							
	in line 1 of space B and that the owner is not a corporation or partnership; or							
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system							
	in line 1 of space B.							
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein							
	are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]							
	/s/ Patrick Bratton							
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement.							
	(e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.							
	Typed or printed name: Patrick Bratton							
	Title: Chief Financial Officer							
	(Title of official position held in corporation or partnership)							
	Date: August 30, 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 sufficiency of the fling, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
Atlantic Broadband (Delmar) LLC	063735	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyrig lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cab service of providing secondary transmissions of primary broadcast transmitters, the sy scribers and amounts collected from subscribers receiving secondary transmissions p	ole system for the basic estem shall not include sub- ursuant to section 119."	Special Statement Concerning
For more information on when to exclude these amounts, see the note on page (vii) of the ge paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for		Gross Receipts Exclusion
made by satellite carriers to satellite dish owners?	scoolidary transmissions	
X NO		
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Name Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late page. For an explanation of interest assessment, see page (viii) of the general instructions in the page.		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	x1%	
· · · · · · · · · · · · · · · · · · ·	xdays	
Line 3 Multiply line 2 by the number of days late and enter the sum here		
	x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	\$ -	
-, (1-13-17)	(interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . Fo contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	r further assistance please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day lat	te.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the please list below the owner, address, first community served, accounting period, and ID number filing.		
Owner		
Address		
First community served		
Accounting period		
ID number		

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

ACCOUNTING PERIOD: 2021/1

DSE SCHEDULE. PAGE 11. (CONTINUED)

1 1	LEGAL NAME OF OWNER OF CABLE Atlantic Broadband (Del				S	YSTEM ID# 063735
	SUM OF DSEs OF CATEGOR • Add the DSEs of each station Enter the sum here and in line	Y "O" STATION			0.75	
Computation	Instructions: In the column headed "Call S of space G (page 3). In the column headed "DSE": mercial educational station, give	: for each indepe	endent station, give the DSE			
Category "O"	, ,		CATEGORY "O" STATION	IS: DSEs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	WCVE	0.250				
	WCVE.2	0.250				
	WCVE.3	0.250				
Add rows as						
necessary.						
Remember to copy all						
formula into new						
rows.						
						
				†		
						

	 P	p	

Name		DWNER OF CABLE SYSTEM: adband (Delmar) LLC	3					S	YSTEM ID# 063735
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	st the call sign of all distals: For each station, give to correspond with the information: For each station, give to Divide the figure in column at least to the third decire of the call in the call	the number of rmation given in the total number umn 2 by the firmal point. This station, give the DSE. (For motor CATEGOR)	hours your cable systen n space J. Calculate on er of hours that the statingure in column 3, and g is the "basis of carriage e "type-value" as "1.0."	n carried the stati ly one DSE for e- on broadcast ove ive the result in c e value" for the st For each network give the result in ding, see page (v	ion during the a ach station. In the air during decimals in columntation. It or noncomme column 6. Rouriii) of the generation.	the account mn 4. This fi rcial educati nd to no less al instruction	ing period. igure must ional station, s than the	E
		CARRIE SYSTE		STATION ON AIR	VALUE				
			÷		=	х		=	
			÷		=	x		=	
			÷		=	x		=	
			÷		=	х		=	
			÷		=	X		=	
			÷			x x			
			÷		=	x			
	Add the DSEs	of CATEGORY LAC Sof each station. Im here and in line 2 of p		hedule,			0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efference to Broadcast of space I). Column 2: at your option. Column 3: Column 4:	e the call sign of each stands of the call sign of each stands of the control of the call sign of the call s	titution for a pr (as shown by t ork programs of enumber of live spond with the s in the calend nn 2 by the figu (For more info	ogram that your system the letter "P" in column 7 luring that optional carries, nonnetwork programs information in space I. ar year: 365, except in a gre in column 3, and givermation on rounding, se	was permitted to of space I); and age (as shown by the scarried in substant a leap year. e the result in co be page (viii) of the	delete under F the word "Yes" in itution for progra lumn 4. Round ne general instra	CC rules and column 2 of arms that we to no less the cuctions in the	re deleted an the third).
		SI	UBSTITUTE	E-BASIS STATION	IS: COMPUTA	ATION OF D	SEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMB OF DA IN YEA	YS	1. CALL SIGN	2. NUMB OF PROG	ER RAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
			÷	=			÷		=
			÷ ÷	=			÷		=
			÷	=			- +		=
			<u>:</u> ÷	=		 	÷		=
			÷	=			÷		=
	Add the DSEs	oF SUBSTITUTE-BASI of each station. Im here and in line 3 of p					0.00		
5		ER OF DSEs: Give the ams applicable to your system		boxes in parts 2, 3, and	4 of this schedule	and add them to	o provide the	total	
Total Number	1. Number	of DSEs from part 2 ●				>		0.75	
of DSEs		of DSEs from part 3 ●				•		0.00	
-		of DSEs from part 4 ●						0.00	
		,							
	TOTAL NUMBE	R OF DSEs							0.75

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

	WNER OF CABLE S Iband (Delmar)						S	YSTEM ID# 063735	Name
In block A: If your answer if schedule.	,	mainder of pa	•	of the DSE schedu	ıle blank and	complete part t	3, (page 16) of the		6
If your answer if	"No," complete blo			TELEVISION MA	ARKETS				Computation of
ls the cable syster effect on June 24,	•			er markets as defin		tion 76.5 of FC	C rules and regula	tions in	3.75 Fee
		schedule—DC	NOT COMP	LETE THE REMAIN	NDER OF PA	RT 6 AND 7.			
X No—Comp	olete blocks B and	C below.							
		BLO	CK B: CARF	RIAGE OF PERM	MITTED DS	SEs			
Column 1: CALL SIGN	FCC rules and re	gulations prio e DSE Sched	to June 25, 1 ule. (Note: Th	part 2, 3, and 4 of th 1981. For further ex e letter M below ref Act of 2010.)	planation of p	ermitted station	ns, see the	•	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfathered instructions fo E Carried pursua *F A station previous carries *F A station previous carr	les and regular de pursuant to on as defined al educational station (76.63 r DSE scheduant to individuatiously carried HF station with	tions cited be the FCC mar in 76.5(kk) (76 station [76.59 5) (see paragr le). al waiver of FC on a part-tim hin grade-B c	e or substitute basis ontour, [76.59(d)(5)	e in effect on 57, 76.59(b), (1), 76.63(a) g(a) referring stitution of grass prior to June	June 24, 1981. 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] andfathered sta	.63(a) referring to 61(e)(1) tions in the		
Column 3:	*(Note: For those this schedule to c	e stations iden letermine the	tified by the le DSE.)	parts 2, 3, and 4 of tter "F" in column 2	, you must co	omplete the wor	T		
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
WCVE.2	C	0.25							
WCVE.2	C	0.25 0.25							
		0.20							
								0.75	
		В	LOCK C: CC	OMPUTATION OF	3.75 FEE				
ine 1: Enter the	total number of l	OSEs from p	art 5 of this s	schedule					
ine 2: Enter the	sum of permitted	DSEs from	block B abo	ve					
				of DSEs subject t 7 of this schedule)		ate.			
ine 4: Enter gro	ss receipts from	space K (pa	ge 7)				x 0.03	375	Do any of the DSEs represen
ine 5: Multiply li	ne 4 by 0.0375 a	nd enter sun	ı here						partially permited/ partially
ine 6: Enter tota	al number of DSE	s from line 3					x		nonpermitted carriage? If yes, see part 9 instructions.
.ine 7: Multiply li	ne 6 by line 5 and	d enter here	and on line 2	, block 3, space L	_ (page 7)			0.00	

	OWNER OF CABLES adband (Delmar)							YSTEM ID# 063735	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
									5 5
				<u> </u>		<u> </u>			

ACCOUNTING PERIOD: 2021/1

Name	LEGAL NAME OF OWN	IER OF CABLE SYSTEM Dand (Delmar) LL					SYSTEM ID# 063735	
	Atlantic Broads	Jana (Dennai) EE					063735	
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identified by the letter "F" in column 2 of part 6 of the DSE schedule. Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections							
		PERMITTED DS	E FOR STATIONS CA	RRIED	ON A PART-TIME ANI	D SUBSTITUTE BASIS		
	1. CALL	2. PRIOR	3. ACCOUNTING		4. BASIS OF	5. PRESENT	6. PERMITTED	
	SIGN	DSE	PERIOD		CARRIAGE	DSE	DSE	
7 Computation of the		"Yes," complete block		to par	t 8 of the DSE schedule			
Syndicated	ii your ariswer is	NO, leave blocks b a	· · · · · · · · · · · · · · · · · · ·		ELEVISION MARKE			
Exclusivity			BLOCK A. IVIAJ	ו אכ	ELEVISION WARKE	<u> </u>		
Surcharge	Is any portion of the c	able system within a to	p 100 major television r	narket	as defned by section 76.	5 of FCC rules in effect J	une 24, 1981?	
	Yes—Complete	blocks B and C .			No—Proceed to	part 8		
		arriage of VHF/Grade				C: Computation of Exe	•	
	Is any station listed in commercial VHF station or in part, over the cal	on that places a grade			,	in block B of part 7 carri e system prior to March 159)	,	
	Yes—List each st	ation below with its appr	opriate permitted DSE		Yes—List each sta	tion below with its appropr	iate permitted DSE	
	X No—Enter zero a	nd proceed to part 8.			X No—Enter zero an	d proceed to part 8.		
	CALL SIGN	CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE						
	STATE STORY SOL STORY SOL STORY SOL STORY SOL STORY SOL							
		ļ						
						H		
		ļ						
		I TO	TAL DSEs 0.	00		TOTAL	DSEs 0.00	
		10	V.			TOTAL	0.00	

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Delmar) LLC	SYSTEM ID# 063735	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,526,206.32	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. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? No—Complete the applicable section below. If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS	E	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge.		
	E. Add lines A and D. This is your suit large. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the 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	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge.		
	Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
1			

Name		ME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Delmar) LLC	SYSTEM ID# 063735						
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.							
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$							
of the Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)							
Surcharge		C. Multiply line B by 3.000 and enter here							
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ _\$							
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.							
		F. Multiply line D by line E and enter here							
		G. Add lines A, C, and F. This is your surcharge.							
		Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge	<u></u>						
	Instruc	ctions:							
8		ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of p checked "Yes," use the total number of DSEs from part 5.	art						
		checked Test, dise the total number of Bobs from part of							
Computation of	,	ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	OW						
Base Rate Fee	 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. 								
		is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	_1						
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "loc e area," see page (v) of the general instructions.	aı						
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS							
	• Did ye	our cable system retransmit the signals of any partially distant television stations during the accounting period?							
		Yes—Complete part 9 of this schedule. No—Complete the following sections.							
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE							
	Section 1	Enter the amount of gross receipts from space K (page 7)							
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.							
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.) ▶							
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank.							
		NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.							
		A. Enter 0.01064 of gross receipts (the amount in section 1)							
		B. Enter 0.00701 of gross receipts (the amount in section 1) ▶							
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here							
		D. Multiply line B by line C and enter here							
		E. Add lines A, and D. This is your base rate fee. Enter here							
		and in block 3, line 1, space L (page 7) Base Rate Fee	0.00						
		Dase Nate i ee	<u> </u>						

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

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Atlanti	c Broadband (Delmar) LLC	063735	Name
	f the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.		
4	A. Enter 0.01064 of gross receipts		8
	(the amount in section 1) \$		
	B. Enter 0.00701 of gross receipts		Computation
	(the amount in section 1) • \$		of Base Rate Fee
	C. Multiply line B by 3.000 and enter here		Dase Nate 1 ee
	D. Enter 0.00330 of gross receipts		
	(the amount in section 1) \$		
	E. Subtract 4.000 from total DSEs		
	(the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here \$		
	G. Add lines A, C, and F. This is your base rate fee.		
	Enter here and in block 3, line 1, space L (page 7)		
	Base Rate Fee \$	0.00	
IMPORT	FANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca	net cianale chall	
	be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel	•	9
	ral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee	·	Computation
	from subscribers located within the station's local service area, from your system's total gross receipts. To take a n, you must:	dvantage of this	of
			Base Rate Fee and
	ivide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant t or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine		Syndicated
	nd the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for	each group.	Exclusivity Surcharge
_	Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		for
also con	f any portion of your cable system is located within the top 100 television market and the station is not exempt in npute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B bo able system is wholly located outside all major television markets, complete block A only.		Partially Distant Stations, and for Partially
	Identify a Subscriber Group for Partially Distant Stations		Permitted
•	For each community served, determine the local service area of each wholly distant and each partially distant sta o that community.	tion you	Stations
outside t	For each wholly distant and each partially distant station you carried, determine which of your subscribers were lought the station's local service area. A subscriber located outside the local service area of a station is distant to that step token, the station is distant to the subscriber.)		
subscrib	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
,	ting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your sys	tem's subscriber	
groups.			
In each	section: / the communities/areas represented by each subscriber group.		
• Give th	re communities/areas represented by each subscriber group's complement—that is, each station that is distant to a pers in the group.	II of the	
• If:			
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it i schedule; or,	n parts 2, 3, and	
,	ortion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in l 6 of this schedule.	olock B,	
•	e DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	ate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general paper SA3 form.	nstructions	
page. Ir DSEs fo	the a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the naking this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the that group's complement of stations and total gross receipts from the subscribers in that group). You do not necessal	at is, the total	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 063735 Atlantic Broadband (Delmar) LLC Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNE Atlantic Broadban							063735	Name	
	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCRIB	ER GROUP			
	FIRST	SUBSCRIBER GROU	Р		SECOND	SUBSCRIBER GROU	JP	_	
COMMUNITY/ AREA	DELTA	/ILLE		COMMUNITY/ AREA MATHEN		S COUNTY	9 Computat		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	DSE CALL SIGN DSE			
WCVE	0.25			WCVE	0.25			Base Rate	
WCVE.2	0.25							and	
WCVE.3	0.25						•••••	Syndicate	
	0.20				····			Exclusivi	
						-	·····	Surcharg	
								for	
								Partially	
								Distant	
								Stations	
	T T		<u> </u>		T T				
			<u> </u>						
			<u> </u>						
			†				····-		
	-		†	-					
Total DCFa			0.75	Total DCC-			0.25		
Total DSEs			0.75	Total DSEs			•		
Gross Receipts First G	roup	\$ 1,162	,624.54	Gross Receipts Seco	nd Group	<u>\$</u>	307,792.64		
Base Rate Fee First G	roup	\$ 9	,277.74	Base Rate Fee Seco	nd Group	\$	818.73		
	THIRD	SUBSCRIBER GROU	P		FOURTH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA	URBAN	NA		COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
WCVE.2	0.25								
WCVE.3	0.25					-			
			1						
	<u> </u>		 				<u> </u>		
			†				····-		
			†		-				
				-					
	<u></u>								
	<u></u>								
Γotal DSEs			0.50	Total DSEs			0.00		
Gross Receipts Third C	Group	\$ 55	,789.14	Gross Receipts Fourt	th Group	\$	0.00		
Base Rate Fee Third C	Group	\$	296.80	Base Rate Fee Fourt	h Group	\$	0.00		
				<u> </u>					
			ber group a	s shown in the boxes al	bove.		40.000.00		
Enter here and in block	3, line 1, sp	ace L (page 7)				\$	10,393.27		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Delmar) LLC 063735								Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		<u> </u>
	FIRST	SUBSCRIBER GRO	UP		SECOND SUBSCRIBER GROUP			
COMMUNITY/ AREA	DELTA	VILLE		COMMUNITY/ AREA	MATHE	WS COUNTY		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
	···		···		···			
			····					
			····				······	
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 1,16	2,624.54	Gross Receipts Secon	d Group	\$	307,792.64	
								
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	URBAN	INA		COMMUNITY/ AREA			0	
	0112711							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>				<u> </u>			
					<u> </u>			
			···				······	
								
	 		···-				·····	
					<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
							_	
Gross Receipts Third C	Group	\$ 55	5,789.14	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
			criber group a	II as shown in the boxes ab	ove.			
Enter here and in block			٠,			\$	0.00	

	EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Itlantic Broadband (Delmar) LLC 063735							
В				TE FEES FOR EAC				
	FIFTH	SUBSCRIBER GROU				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially
		-						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
;	SEVENTH	SUBSCRIBER GROU	IP		EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		+						
		-						
		<u> </u>						
		<u> </u>						
-								
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Foun	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes	above.	\$		

BLOCK A	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Delmar) LLC 063735								
	: COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP				
NINTH	SUBSCRIBER GROUP								
NITY/ AREA		0	COMMUNITY/ AREA	0	9 Computation				
BIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
							Base Rate F		
							and		
							Syndicated		
							Exclusivity		
				<u></u>			Surcharge		
					.		for Partially		
							Distant		
							Stations		
					1				
Es		0.00	Total DSEs	1.0		0.00			
eceipts First Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00			
te Fee First Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00			
ELEVENTH	SUBSCRIBER GROUP)	TWELVTH SUBSCRIBER GROUP						
NITY/ AREA		0	COMMUNITY/ AREA			0			
BIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
					.				
				···					
	-								
Es		0.00	Total DSEs			0.00			
	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00			
eceipts Third Group									
eceipts Third Group te Fee Third Group	\$	0.00	Base Rate Fee Fourth		\$	0.00			
CALL SIGN		0.00	Total DSEs			0.00			

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Delmar) LLC 063735								
		BER GROUP	SUBSCRI	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:		
9	IP	SCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP						TH	
Computation	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate F									
and									
Syndicate									
Exclusivit									
Surcharge									
for									
Partially									
Distant									
Stations									
		<u> </u>			<mark></mark>				
	·····		<u>-</u>						
	····						 		
					<u>-</u>				
	0.00			Total DSEs	0.00			otal DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00				
	0.00					·	•	·	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$			
	0.00	\$ SUBSCRIBER GROU		Base Rate Fee Secon	-		Group	Base Rate Fee First G	
	0.00			Base Rate Fee Secon	-	\$	Group	3ase Rate Fee First G	
	0.00			Base Rate Fee Secon	JP	\$	Group	Base Rate Fee First G	
	0.00	SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GRO	Group	Base Rate Fee First G F COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GRO	Group	Base Rate Fee First G F COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GRO	Group	Base Rate Fee First G F COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GRO	Group	Base Rate Fee First G F COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GRO	Group	Base Rate Fee First G F COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GRO	Group	Base Rate Fee First G F COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GRO	Group	Base Rate Fee First G F COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GRO	Group	Base Rate Fee First G F COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GRO	Group	Base Rate Fee First G F COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GRO	Group	Base Rate Fee First G F COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GRO	Group	Base Rate Fee First G F COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GRO	Group	Base Rate Fee First G F COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GRO	Group	Base Rate Fee First G F COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GRO	Group	Base Rate Fee First G F COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon	JP 0	\$ SUBSCRIBER GRO	Group	Base Rate Fee First G F COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROU	DSE	Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN	JP O DSE	\$ SUBSCRIBER GRO	DSE	FCOMMUNITY/ AREA CALL SIGN	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Delmar) LLC 063735								
		BER GROUP	SUBSCRI	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:		
9	IBSCRIBER GROUP EIGHTEENTH SUBSCRIBER GROUP						NTEENTH		
Computation	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate F									
and									
Syndicate									
Exclusivit									
Surcharge									
for									
Partially									
Distant					<mark></mark>				
Stations									
			 		<u>-</u>		<u></u>		
			-		<u>-</u>				
					-				
			-		-				
			-		-				
	0.00		•	Total DSEs	0.00	-		Total DSEs	
		\$	d Croup	O Di-4- C	0.00				
	0.00	-	u Group	Gross Receipts Secon		·	Топр	oross Receipts First G	
	0.00	\$		Base Rate Fee Secon	0.00	\$			
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	-		roup	Base Rate Fee First G	
	0.00		d Group	Base Rate Fee Secon	-	\$	roup	3ase Rate Fee First G	
	0.00		d Group	Base Rate Fee Secon	JP	\$	roup	Base Rate Fee First G	
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	0.00	SUBSCRIBER GROU	d Group WENTIETH	Base Rate Fee Secon T COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GRO	INTEENTH	Base Rate Fee First G NI COMMUNITY/ AREA	
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	0.00	SUBSCRIBER GROU	DSE	Base Rate Fee Secon T COMMUNITY/ AREA CALL SIGN	JP 0 DSE	\$ SUBSCRIBER GRO	DSE	NICOMMUNITY/ AREA CALL SIGN Total DSEs	
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Nonpermitted 3.75 Stations

Name	YSTEM ID# 063735	S'						LEGAL NAME OF OWNER Atlantic Broadband
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Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	Р	SUBSCRIBER GROU	-FOURTH	TWENT	IP	SUBSCRIBER GROU	TY-THIRD	TWEN
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Nonpermitted 3.75 Stations

Name	EGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Delmar) LLC 063735								
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	NTY-SIXTH			SUBSCRIBER GRO	NTY-FIFTH		
Computation	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon TWEN COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	roup	TWENTY-COMMUNITY/ AREA	
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon TWEN COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	roup	TWENTY-COMMUNITY/ AREA	
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	0.00 JP O DSE	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon TWEN COMMUNITY/ AREA CALL SIGN	JP O DSE	SUBSCRIBER GRO	roup	TWENTY- COMMUNITY/ AREA CALL SIGN	
	0.00 JP O O O O O O O O O O O O O	SUBSCRIBER GROU	Y-EIGHTH DSE	Total DSEs	DSE DSE DOMESTICATION OF THE PROPERTY OF THE P	SUBSCRIBER GRO CALL SIGN	-SEVENTH DSE	TWENTY- COMMUNITY/ AREA CALL SIGN Fotal DSEs	
	0.00 JP O DSE	\$ SUBSCRIBER GROU	Y-EIGHTH DSE	Base Rate Fee Secon TWEN COMMUNITY/ AREA CALL SIGN	JP O DSE	SUBSCRIBER GRO	-SEVENTH DSE	TWENTY-	

	BLOCK A:	Atlantic Broadband (Delmar) LLC SYSTEM: SYSTEM ID# One of the control of the con								
				TE FEES FOR EACH						
	TY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				Computation		
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Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00			
THIR	TY-FIRST	SUBSCRIBER GRO	UP	THIR	TY-SECONE	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0			
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Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00			
Base Rate Fee: Add the Enter here and in block			criber group a	II as shown in the boxes a	bove.	\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Delmar) LLC 063735								
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	oup	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
dase Rate Fee First G	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
THIF	RTY-FIFTH	SUBSCRIBER GRO	UP	Tł	HIRTY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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ase Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
	e base rat e			Base Rate Fee Four		\$	0.00	

LEGAL NAME OF OWNE Atlantic Broadban								Name
				TE FEES FOR EAC				
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THIR	TY-NINTH	SUBSCRIBER GRO	UP		FORTIETI	H SUBSCRIBER GRO	JP	
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Total DSEs			0.00	Total DSEs			0.00	
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Dase Rate Fee Inird G	ιουρ	[\$	0.00	Dase Kate Fee Fou	пп Group	\$	0.00	
ase Rate Fee Third G	e base rate	e fees for each subsc	0.00	Base Rate Fee Fou		\$	0.00	

Name	063735							
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9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0.00	SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon FORT COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GRO	roup	Base Rate Fee First Gr FOR COMMUNITY/ AREA
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	0.00	SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon FORT COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GRO	roup	Base Rate Fee First Gr FOR COMMUNITY/ AREA
	0.00	SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon FORT COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GRO	roup	Base Rate Fee First Gr FOR COMMUNITY/ AREA
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Name	063735	BLE SYSTEM: SYSTEM nar) LLC 0637						Atlantic Broadban
		BER GROUP	SUBSCRII	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	E
9		SUBSCRIBER GROU	RTY-SIXTH	FC		SUBSCRIBER GRO	RTY-FIFTH	FOF
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Name	063735							LEGAL NAME OF OWNER Atlantic Broadband
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	0.00 P	SUBSCRIBER GROU	d Group NTY-SIXTH	Base Rate Fee Secon SEVE COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	NTY-FIFTH	Base Rate Fee First Gr SEVEN COMMUNITY/ AREA
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LEGAL NAME OF OWN Atlantic Broadba								Name
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Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
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Base Rate Fee: Add t			criber group a	II as shown in the boxes	above.	s		

LEGAL NAME OF OWNER Atlantic Broadband						S	063735	Name
				TE FEES FOR EACH	H SUBSCR	IBER GROUP		
EIGH [*]	TY-FIRST	SUBSCRIBER GROU	Р	EIGH [*]	TY-SECONE	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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Gloss Necelpls Filst Glo	лир	4	0.00	Gloss Neceipis Geco	na Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
EIGHT	Y-THIRD	SUBSCRIBER GROU	Р	EIGH	TY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					••••			
Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the			iber group a	s shown in the boxes a	ibove.	\$		

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9		IBER GROUP	SUBSCR	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:		
. J		I SUBSCRIBER GROU	HTY-SIXTH	ii		SUBSCRIBER GRO	HTY-FIFTH		
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	JP	EIGHTY-EIGHTH SUBSCRIBER GROUP				UP	SUBSCRIBER GRO	SEVENTH	EIGHTY-
	COMMUNITY/ AREA 0		0			COMMUNITY/ AREA			
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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LEGAL NAME OF OWNE Atlantic Broadbar						\$	063735	Name
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EACI	H SUBSCR	RIBER GROUP		
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Gross Receipts First C	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
NIN	ETY-FIRST	SUBSCRIBER GRO	UP	NINETY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
		e fees for each subsequence L (page 7)	criber group a	ns shown in the boxes a	above.	\$		

LEGAL NAME OF OWNER Atlantic Broadband						\$	063735	Name
				ATE FEES FOR EACH			ID.	
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								Base Rate Fee
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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	
NINE	TY-FIFTH	SUBSCRIBER GRO	JP	NI	NETY-SIXTH	SUBSCRIBER GROU	JP	
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			<u></u>					
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third G	oup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
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Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes a	above.	\$		

Name	063735	S						LEGAL NAME OF OWNER Atlantic Broadband
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	TY-EIGHTH		IP 0	SUBSCRIBER GROU	SEVENTH	
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Base Rate F								
and		-						
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	0.00	\$	u Group	Gross Receipts Secon				
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Name	063735	S						LEGAL NAME OF OWNER Atlantic Broadband
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Name	063735	S						LEGAL NAME OF OWNER Atlantic Broadband
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LEGAL NAME OF OWNER Atlantic Broadbane						S	063735	Name				
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	BER GROUP						
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Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes al	bove.	\$						

Name	063735					<u> </u>	d (Delma	Atlantic Broadban
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Name	063735	5				.,	d (Delma	Atlantic Broadban
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Name	063735					1) LLO	d (Delma	Atlantic Broadban
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FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Atlantic Broadband (Delmar) LLC 063735 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

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

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Atlantic Broadband (Delmar) LLC 063735 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 ☐ First 50 major television market Second 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. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE **SURCHARGE** SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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

EODM SASE BAGE 30

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	Atlantic Broadband (Delmar) LLC	063735
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9 Computation	If your cable system is located within a top 100 television market and the Syndicated Exclusivity Surcharge. Indicate which major television mark by section 76.5 of FCC rules in effect on June 24, 1981:	
of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and	Step 1: In line 1, give the total DSEs by subscriber group for commerce	cial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity Surcharge for Partially Distant Stations	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for Exempt DSEs in block C, part 7 of this schedule. If none enter Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the formula schedule. In making this computation, use gross receipts figure your actual calculations on this form.	zero. DSEs used to compute the surcharge. ormula outlined in block D, section 3 or 4 of part 7 of this
	NINTH SUBSCRIBER GROUP	TENTH SUBSCRIBER GROUP
	THINTH GODGONIDEN GROOT	TERMI COBCONIDER CINCO
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	First Group	Second Group
	ELEVENTH SUBSCRIBER GROUP	TWELVTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 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 computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE Third Cours	SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ear in the boxes above. Enter here and in block 4, line 2 of space L (page 7)	

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EODM SASE BAGE 30

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Name	Atlantic Broadband (Delmar) LLC	SYSTEM ID# 063735		
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP			
9 Computation	If your cable system is located within a top 100 television market and the Syndicated Exclusivity Surcharge. Indicate which major television mark by section 76.5 of FCC rules in effect on June 24, 1981:	set any portion of your cable system is located in as defined		
of	_ ·	Second 50 major television market		
Base Rate Fee and	INSTRUCTIONS: Step 1: In line 1 give the total DSEs by subscriber group for commer	cial VHE Grade B contour stations listed in block A part 9 of		
Syndicated Exclusivity Surcharge for Partially Distant Stations	 Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. 			
	FIFTY-THIRD SUBSCRIBER GROUP	FIFTY-FOURTH SUBSCRIBER GROUP		
	1 1 1 1			
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 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		
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	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE		
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	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
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	total number of DSEs for	total number of DSEs for		
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	subject to the surcharge computation	subject to the surcharge computation		
		· — —		
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE		
	Third Group	Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for earlin the boxes above. Enter here and in block 4, line 2 of space L (page			

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Atlantic Broadband (Delmar) LLC 063735 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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	ONE HUNDERED FIRST SUBSCRIBER GROUP	ONE HUNDERED SECOND SUBSCRIBER GROUP	
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	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY	
	SURCHARGE	SURCHARGE	
	First Group	Second Group	
	ONE HUNDERED THIRD SUBSCRIBER GROUP	ONE HUNDERED FOURTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 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 computation	subject to the surcharge computation	
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE	
	Third Group	Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page		

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Atlantic Broadband (Delmar) LLC 063735 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. ONE HUNDRED FIFTH SUBSCRIBER GROUP ONE HUNDRED SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group ONE HUNDRED SEVENTH SUBSCRIBER GROUP ONE HUNDRED EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 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

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Atlantic Broadband (Delmar) LLC 063735 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. ONE HUNDRED TENTH SUBSCRIBER GROUP ONE HUNDRED NINTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group ONE HUNDRED ELEVENTH SUBSCRIBER GROUP ONE HUNDRED TWELVTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 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

FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Atlantic Broadband (Delmar) LLC 063735 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. ONE HUNDRED SEVENTEENTH SUBSCRIBER GROUP ONE HUNDRED EIGHTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 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 ONE HUNDRED NINTEENTH SUBSCRIBER GROUP ONE HUNDRED TWENTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the 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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	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#		
Name	Atlantic Broadband (Delmar) LLC	063735		
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP			
9 Computation	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television market systems of FCC rules in effect on June 24, 1981:	· · · · · · · · · · · · · · · · · · ·		
of	☐ First 50 major television market	☐ Second 50 major television market		
Base Rate Fee	INSTRUCTIONS:			
and	Step 1: In line 1, give the total DSEs by subscriber group for comme	rcial VHF Grade B contour stations listed in block A, part 9 of		
Syndicated Exclusivity Surcharge for	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.			
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.			
	ONE HUNDRED TWENTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED TWENTY-SECOND SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1		
	and enter here. This is the	and enter here. This is the		
	total number of DSEs for	total number of DSEs for		
	this subscriber group	this subscriber group		
	subject to the surcharge	subject to the surcharge		
	computation	computation		
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY		
	SURCHARGE	SURCHARGE		
	First Group	Second Group		
	ONE HUNDRED TWENTY-THIRD SUBSCRIBER GROUP	ONE HUNDRED TWENTY-FOURTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the		
	total number of DSEs for	total number of DSEs for		
	this subscriber group	this subscriber group		
	subject to the surcharge	subject to the surcharge		
	computation	computation		
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY		
	SURCHARGE	SURCHARGE		
	Third Group	Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ein the boxes above. Enter here and in block 4, line 2 of space L (page			

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Atlantic Broadband (Delmar) LLC 063735 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. ONE HUNDRED TWENTY-FIFTH SUBSCRIBER GROUP ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for 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 ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED TWENTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the 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

FORM SA3E, PAGE 20.

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#		
Name	Atlantic Broadband (Delmar) LLC 06:			
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:			
9				
Computation of	☐ First 50 major television market ☐ Sec	ond 50 major television market		
Base Rate Fee	INSTRUCTIONS:			
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for commercial VHI this schedule.	- Grade B contour stations listed in block A, part 9 or		
Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber group for the V	HF Grade B contour stations that were classified as		
Surcharge for	Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.			
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show			
	ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP	ONE HUNDRED THIRTIETH SUBSCRIBER GROUP		
	ONE HONDINED TWENT PAINTH GODGONIDEN GROOT	CHE HONDRED HIR TIETH GODGONIBER GROOT		
		e 1: Enter the VHF DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the	e 3: Subtract line 2 from line 1 and enter here. This is the		
	total number of DSEs for	total number of DSEs for		
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge		
	computation	computation		
		NDICATED EXCLUSIVITY		
	SURCHARGE First Group	RCHARGE Second Group		
	ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED THIRTY-SECOND SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs Line	e 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	e 2: Enter the Exempt DSEs		
		e 3: Subtract line 2 from line 1		
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for		
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge		
	computation	computation		
	SYNDICATED EXCLUSIVITY SYN	NDICATED EXCLUSIVITY		
	SURCHARGE Third Group	RCHARGE Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each sub in the boxes above. Enter here and in block 4, line 2 of space L (page 7)			

FORM SA3E. PAGE 20.

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EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Atlantic Broadband (Delmar) LLC 063735 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. ONE HUNDRED FORTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FORTY-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 ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP ONE HUNDRED FORTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 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

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Atlantic Broadband (Delmar) LLC 063735 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. ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the 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 ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 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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EODM SASE BAGE 30

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#	
Name	Atlantic Broadband (Delmar) LLC	063735	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9 Computation	If your cable system is located within a top 100 television market and th Syndicated Exclusivity Surcharge. Indicate which major television mark by section 76.5 of FCC rules in effect on June 24, 1981:		
of	☐ First 50 major television market	Second 50 major television market	
Base Rate Fee	INSTRUCTIONS:		
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Syndicated Exclusivity Surcharge for Partially Distant Stations	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as 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. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.		
	ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP	ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1	
	and enter here. This is the	and enter here. This is the	
	total number of DSEs for	total number of DSEs for	
	this subscriber group	this subscriber group	
	subject to the surcharge	subject to the surcharge	
	computation	computation	
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY	
	SURCHARGE First Group	SURCHARGE Second Group	
	ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP	ONE HUNDRED SIXTIETH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 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 computation	subject to the surcharge computation	
		· —	
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE	
	Third Group	Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ear in the boxes above. Enter here and in block 4, line 2 of space L (page 7		