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 Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire accounting the conduction of the counting period of the owner as ingle statement of account and royalty fee payment covering the entire accounting the conduction of the cable system. If not, enter the system's ID in the cable system. If the owner is a rate title of the owner is a rate title of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the owner owne	es of the cable syste on the last day of the unting period.	m. e accounting period should su				
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM						
	Atlantic Broadband (Penn) LLC						
				00790220211			
				007902 2021/1			
	2 Batterymarch Park, Suite 205						
	Quincy, MA 02169						
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	the system, if diffe	erent from the address giver	ı ın space B.			
System	1 IDENTIFICATION OF CABLE SYSTEM: Atlantic Broadband						
	MAILING ADDRESS OF CABLE SYSTEM:						
	201 So. Mechanic Street 2 (Number, street, rural route, apartment, or suite number)						
	Cumberland, MD 21502						
	(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	Cumberland	MD					
Community	Below is a sample for reporting communities if you report multiple cha			T			
	CITY OR TOWN (SAMPLE) Alda	STATE MD	CH LINE UP A	SUB 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.

FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 007902 Atlantic Broadband (Penn) 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 Area areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future 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. CITY OR TOWN CH LINE UP SUB GRP# **STATE** Cumberland MD AA **First Allegany County** MD AA 1 Community Carpendale WV AA 1 **Cumberland Valley** PA AB 2 **Hampshire County** WV ΑE 5 2 Londonderry PA AB See instructions for **Mineral County** W۷ AA 1 additional information on alphabetization. WV Ridgeley AE 5 5 Romney WV AΕ PΑ AD South Hampton (Bedford Co) 4 3 South Hampton (Somerset Co) PA AC Add rows as necessary.

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

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM: **Atlantic Broadband (Penn) LLC**

SYSTEM ID# 007902

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			BLC	OCŁ	< 2	
	NO. OF					NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS		RATE	CATEGORY OF SERVICE		SUBSCRIBERS	RATE
Residential:							
 Service to first set 	10,194	\$	39.99	Res Expanded		9,052	\$ 59.99
 Service to additional set(s) 				Digital Value		1,715	\$ 69.98
 FM radio (if separate rate) 				Digital Plus		-	\$ 109.97
Motel, hotel	11	\$	39.99				
Commercial	389	\$	39.99				
Converter							
Residential		\$	14.99				
Non-residential							
		l					

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLO	CK 1			BLOCK 2		
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	F	RATE	CATEGORY OF SERVICE	Ξ	RATE
Continuing Services:		Installation: Non-residential					
• Pay cable	7.99 - 19.99	 Motel, hotel 			НВО	\$	19.99
 Pay cable—add'l channel 		Commercial			Cinemax	\$	19.99
Fire protection		• Pay cable			Showtime	\$	19.99
 Burglar protection 		Pay cable-add'l channel			MoviePlex	\$	9.00
Installation: Residential		Fire protection			2 Premium	\$	34.95
• First set	\$ 50.00	Burglar protection			3 Premiums	\$	49.95
 Additional set(s) 	\$ 40.00	Other services:			NFL RedZone	\$	49.99
 FM radio (if separate rate) 		Reconnect	\$	40.00			
Converter		Disconnect					
		 Outlet relocation 	\$	40.00			
		 Move to new address 	\$	40.00			

	NER OF CABLE SY	CTEM:			SYSTEM ID#	ŧ
	band (Penn)				007902	Name
carried by your cable FCC rules and regula 76.59(d)(2) and (4), 76 substitute Basis is pasis under specific Fix Do not list the station station was carried to List the station here, basis. For further in in the paper SA3 fix Column 1: List ear each multicast stream cast stream as "WET, WETA-simulcast). Column 2: Give the ts community of licen on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of th Column 4: If the si colanation of local serv Column 5: If you h cable system and carried the distant sta For the retransmiss of a written agreemen the cable system and cion "E" (exempt). For explanation of these t	G, identify every system during the tions in effect or 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and a subsity and also in spanformation concorm. Ch station's call in associated with A-2". Simulcast we channel numbers as the channel numbers are the distant station is outside vice area, see parave entered "Ye had on a part-tire sion of a distant at the entered into or a primary transity simulcasts, also three categories.	y television stree accounting in June 24, 19 4), or 76.63 (in din the next respect to any ations, or auth G—but do listitute basis. In the state of the station acceptable of the station acceptable of the station. In a station acceptable of the station. In the local series of the local	period, except 81, permitting the eferring to 76.6° paragraph. If distant stations orizations: to the effect of th	(1) stations carried carriage of cert (e)(2) and (4))]; as carried by your of e Special Statem of both on a substitute, see page (v) of the program service er-the-air designate column 1 (list each the television statistic of "E-M" (for noncotions located in the program of the television statistant"), enter "You in plete column 5, and Indicate by entity at the prima channel on any of instructions located in the program of the prima channel on any of instructions located in the prima	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form.	Primary Transmitters: Television
	Canadian statio	ns, if any, giv nnel line-ups,	e the name of th	ne community with space G for each	y to which the station is licensed by the n which the station is identifed. channel line-up.	_
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
14/DO 4	NUMBER	STATION		(If Distant)		
WDCA	3	<u> </u>	No			_
WDCW	10	l N	No		WASHINGTON, DC	
/VI)VIVI	12		NI -		WASHINGTON, DC	See instructions for
		N	No			See instructions for additional information
	7				WASHINGTON, DC HAGERSTOWN, MD	additional informatio
WJLA	7	N	No	0	WASHINGTON, DC HAGERSTOWN, MD WASHINGTON, DC	additional informatio
WJLA WJZ	13	N N	No Yes	0	WASHINGTON, DC HAGERSTOWN, MD WASHINGTON, DC BALTIMORE, MD	additional informatio
WJLA WJZ	···	N	No	0	WASHINGTON, DC HAGERSTOWN, MD WASHINGTON, DC	additional informatio
WJLA WJZ WNPB	13 6	N N E	No Yes Yes	······	WASHINGTON, DC HAGERSTOWN, MD WASHINGTON, DC BALTIMORE, MD MORGANTOWN, WV	additional informatio
WJLA WJZ WNPB WTTG	13 6 5	N N E	No Yes Yes	······	WASHINGTON, DC HAGERSTOWN, MD WASHINGTON, DC BALTIMORE, MD MORGANTOWN, WV WASHINGTON, DC	additional informatio
WJLA WJZ WNPB WTTG WUSA	13 6 5 9	N N E N	No Yes Yes No No	······	WASHINGTON, DC HAGERSTOWN, MD WASHINGTON, DC BALTIMORE, MD MORGANTOWN, WV WASHINGTON, DC WASHINGTON, DC	additional informatio
WJLA WJZ WNPB WTTG WUSA WWPB	13 6 5	N N E	No Yes Yes No No No No	······	WASHINGTON, DC HAGERSTOWN, MD WASHINGTON, DC BALTIMORE, MD MORGANTOWN, WV WASHINGTON, DC	additional informatio
WDVM WJLA WJZ WNPB WTTG WUSA WWPB WJAC	13 6 5 9	N N E N N	No Yes Yes No No No	······	WASHINGTON, DC HAGERSTOWN, MD WASHINGTON, DC BALTIMORE, MD MORGANTOWN, WV WASHINGTON, DC WASHINGTON, DC HAGERSTOWN, MD	additional information

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.

CHANNEL LINE-UP AB	•		CHANN	EL LINE LID	۸R	
SIGN		1	CHAININ	EL LINE-UP	AD	
WDCW 10 I No WASHINGTON, DC WDVM 12 N No HAGERSTOWN, MD WJLA 7 N Yes O WASHINGTON, DC WJZ 13 N No BALTIMORE, MD WNPB 6 E Yes O MORGANTOWN, WV WTTG 5 N Yes O WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA		CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION
WDVM 12 N No HAGERSTOWN, MD WJLA 7 N Yes O WASHINGTON, DC WJZ 13 N No BALTIMORE, MD WNPB 6 E Yes O MORGANTOWN, WV WTTG 5 N Yes O WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA	WDCA	3	I	Yes	0	WASHINGTON, DC
WJLA 7 N Yes O WASHINGTON, DC WJZ 13 N No BALTIMORE, MD WNPB 6 E Yes O MORGANTOWN, WV WTTG 5 N Yes O WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA	WDCW	10	I	No		WASHINGTON, DC
WJZ 13 N No BALTIMORE, MD WNPB 6 E Yes O MORGANTOWN, WV WTTG 5 N Yes O WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA	WDVM	12	N	No		HAGERSTOWN, MD
WNPB 6 E Yes O MORGANTOWN, WV WTTG 5 N Yes O WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA No No No No No	WJLA	7	N	Yes	0	WASHINGTON, DC
WTTG 5 N Yes O WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA No No No No No	WJZ	13	N	No		BALTIMORE, MD
WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA No	WNPB	6	E	Yes	0	MORGANTOWN, WV
WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA No No	WTTG	5	N	Yes	0	WASHINGTON, DC
WJAC 17 N No JOHNSTOWN, PA No	WUSA	9	N	No		WASHINGTON, DC
No No	WWPB	11	E	No		HAGERSTOWN, MD
	WJAC	17	N	No		JOHNSTOWN, PA
WWPX 4 I No MARTINSBURG, WV				No		
	WWPX	4	I	No		MARTINSBURG, WV

G

Primary Transmitters: Television

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:

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- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

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

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

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

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

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

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

,		• '	•	•	•
		CHANN	EL LINE-UP	AC	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WDCA	3	I	Yes	0	WASHINGTON, DC
WDCW	10	I	Yes	0	WASHINGTON, DC
WDVM	12	N	No		HAGERSTOWN, MD
WJLA	7	N	Yes	0	WASHINGTON, DC
WJZ	13	N	Yes	0	BALTIMORE, MD
WNPB	6	E	Yes	0	MORGANTOWN, WV
WTTG	5	N	Yes	О	WASHINGTON, DC
WUSA	9	N	Yes	0	WASHINGTON, DC
WWPB	11	E	No		HAGERSTOWN, MD
WJAC	17	N	No		JOHNSTOWN, PA
			No		
WWPX	4	I	No		MARTINSBURG, WV

G

Primary Transmitters: Television

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.

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

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

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

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

CHANNEL LINE-UP AD	,		• ′	•	•	•
SIGN CHANNEL NUMBER OF STATION (Yes or No) CARRIAGE (If Distant) WDCA 3 I No WASHINGTON, DC WDCW 10 I No WASHINGTON, DC WDVM 12 N No HAGERSTOWN, MD WJLA 7 N Yes O WASHINGTON, DC WJZ 13 N No BALTIMORE, MD WNPB 6 E Yes O MORGANTOWN, WV WTTG 5 N No WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA			CHANN	EL LINE-UP	AD	
WDCW 10 I No WASHINGTON, DC WDVM 12 N No HAGERSTOWN, MD WJLA 7 N Yes O WASHINGTON, DC WJZ 13 N No BALTIMORE, MD WNPB 6 E Yes O MORGANTOWN, WV WTTG 5 N No WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA		CHANNEL	OF		CARRIAGE	6. LOCATION OF STATION
WDVM 12 N No HAGERSTOWN, MD WJLA 7 N Yes O WASHINGTON, DC WJZ 13 N No BALTIMORE, MD WNPB 6 E Yes O MORGANTOWN, WV WTTG 5 N No WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA	WDCA	3	I	No		WASHINGTON, DC
WJLA 7 N Yes O WASHINGTON, DC WJZ 13 N No BALTIMORE, MD WNPB 6 E Yes O MORGANTOWN, WV WTTG 5 N No WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA	WDCW	10	I	No		WASHINGTON, DC
WJZ 13 N No BALTIMORE, MD WNPB 6 E Yes O MORGANTOWN, WV WTTG 5 N No WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA	WDVM	12	N	No		HAGERSTOWN, MD
WNPB 6 E Yes O MORGANTOWN, WV WTTG 5 N No WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA	WJLA	7	N	Yes	0	WASHINGTON, DC
WTTG 5 N No WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA	WJZ	13	N	No		BALTIMORE, MD
WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA No No No No No	WNPB	6	E	Yes	0	MORGANTOWN, WV
WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA No No No No No	WTTG	5	N	No		WASHINGTON, DC
WJAC 17 N No JOHNSTOWN, PA No	WUSA	9	N	No		WASHINGTON, DC
No No	WWPB	11	E	No		HAGERSTOWN, MD
	WJAC	17	N	No		JOHNSTOWN, PA
WWPX 4 I No MARTINSBURG, WV				No		
	WWPX	4	I	No		MARTINSBURG, WV

G

Primary Transmitters: Television

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.

CHANNEL LINE-UP AE	,	0 .	• ′	•	•	•
SIGN CHANNEL NUMBER OF STATION (Yes or No) CARRIAGE (If Distant) WDCA 3 I No WASHINGTON, DC WDCW 10 I No WASHINGTON, DC WDVM 12 N No HAGERSTOWN, MD WJLA 7 N No WASHINGTON, DC WJZ 13 N Yes O BALTIMORE, MD WNPB 6 E Yes O MORGANTOWN, WV WTTG 5 N No WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA			CHANN	EL LINE-UP	AE	
WDCW 10 I No WASHINGTON, DC WDVM 12 N No HAGERSTOWN, MD WJLA 7 N No WASHINGTON, DC WJZ 13 N Yes O BALTIMORE, MD WNPB 6 E Yes O MORGANTOWN, WV WTTG 5 N No WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA		CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION
WDVM 12 N No HAGERSTOWN, MD WJLA 7 N No WASHINGTON, DC WJZ 13 N Yes O BALTIMORE, MD WNPB 6 E Yes O MORGANTOWN, WV WTTG 5 N No WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA	WDCA	3	I	No		WASHINGTON, DC
WJLA 7 N No WASHINGTON, DC WJZ 13 N Yes O BALTIMORE, MD WNPB 6 E Yes O MORGANTOWN, WV WTTG 5 N No WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA	WDCW	10	I	No		WASHINGTON, DC
WJZ 13 N Yes O BALTIMORE, MD WNPB 6 E Yes O MORGANTOWN, WV WTTG 5 N No WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA	WDVM	12	N	No		HAGERSTOWN, MD
WNPB 6 E Yes O MORGANTOWN, WV WTTG 5 N No WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA No No No No	WJLA	7	N	No		WASHINGTON, DC
WTTG 5 N No WASHINGTON, DC WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA No No No No	WJZ	13	N	Yes	0	BALTIMORE, MD
WUSA 9 N No WASHINGTON, DC WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA No No No No No	WNPB	6	E	Yes	0	MORGANTOWN, WV
WWPB 11 E No HAGERSTOWN, MD WJAC 17 N No JOHNSTOWN, PA No No No No No	WTTG	5	N	No		WASHINGTON, DC
WJAC 17 N No JOHNSTOWN, PA No	WUSA	9	N	No		WASHINGTON, DC
No No	WWPB	11	E	No		HAGERSTOWN, MD
	WJAC	17	N	No		JOHNSTOWN, PA
WWPX 4 I No MARTINSBURG, WV				No		
	WWPX	4	I	No		MARTINSBURG, WV

G

Primary Transmitters: Television

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name
Atlantic Broads	and (Penn)	LLC			007902	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
•			, ,		and low power television stations)	G
		-		• •	d only on a part-time basis under iin network programs [sections	G
•				•	nd (2) certain stations carried on a	Primary
substitute program bas	sis, as explaine	d in the next p	oaragraph.	,	, ,	Transmitters:
				carried by your ca	able system on a substitute program	Television
basis under specifc FCDo not list the station				e Special Stateme	ent and Program Log)—if the	
station was carried						
					ute basis and also on some other	
in the paper SA3 fo		erning substit	ute pasis station	is, see page (v) oi	the general instructions located	
· ·		sign. Do not r	eport origination	n program services	s such as HBO, ESPN, etc. Identify	
			-	_	ion. For example, report multi- stream separately; for example	
WETA-simulcast).	-2 . Oilliulcast	sucams musi	be reported in c	Column 1 (list each	i stream separately, for example	
			•		on for broadcasting over-the-air in	
its community of licens on which your cable sy			annel 4 in Wash	ington, D.C. This i	may be different from the channel	
			ation is a netwo	rk station, an inde	pendent station, or a noncommercial	
	•	,	,. ,		ast), "I" (for independent), "I-M"	
For the meaning of the	,, ,		,,	`	mmercial educational multicast).	
		- , ,	-		s". If not, enter "No". For an ex-	
planation of local servi		• ,	•			
· ·			-	=	tating the basis on which your ering "LAC" if your cable system	
carried the distant stati		-		•	-	
					payment because it is the subject	
-				•	tem or an association representing y transmitter, enter the designa-	
			•	•	ner basis, enter "O." For a further	
					d in the paper SA3 form. to which the station is licensed by the	
				-	which the station is identifed.	
Note: If you are utilizin	g multiple char	nnel line-ups,	use a separate s	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AF		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
		<u> </u>				
					ļ	
				 	<u> </u>	

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:				TEM ID#	Name
Atlantic Broadb	and (Penn)	LLC				007902	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, a basis. For further in in the paper SA3 for Column 1: List eacl each multicast stream cast stream as "WETA WETA-simulcast).	ystem during the ons in effect or .61(e)(2) and (4 sis, as explained tations: With record or a substand also in space only on a substand also in space only on a substand also in space only or a substand also in space only or a substand also in space or m. h station's call associated with -2". Simulcast states	ne accounting a June 24, 1984), or 76.63 (red in the next prespect to any attitute basis. In the state of the	period, except (81, permitting the eferring to 76.61 paragraph. distant stations orizations: tit in space I (the tition was carried ute basis station eport origination cording to its over be reported in control of the station was carried to be reported in control origination cording to its over be reported in control or the station of	(1) stations carried e carriage of certa (e)(2) and (4))]; are carried by your case Special Statemed both on a substitutions, see page (v) of a program services er-the-air designaticulumn 1 (list each	and low power television stations) only on a part-time basis under in network programs [sections id (2) certain stations carried on a ble system on a substitute program and Program Log)—if the ste basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multistream separately; for example on for broadcasting over-the-air in		G Primary Transmitters: Television
on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servin Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or Co	stem carried the in each case we entering the lesses), "E" (for no se terms, see pation is outside ce area, see pation edistant station on a part-tirion of a distant entered into or a primary transmissimulcasts, also ree categories, a location of each canadian station	ne station. whether the statter "N" (for ne concommercial page (v) of the concomment of the concommen	ation is a networe twork), "N-M" (freducational), or egeneral instructive area, (i.e. "day accounting perioduse of lack of of lac	rk station, an indepor network multicar "E-M" (for noncortions located in the listant"), enter "Yes ons located in the plete column 5, sold. Indicate by entertivated channel cubject to a royalty tween a cable systemating the primary channel on any other structions located ist the community with	r". If not, enter "No". For an expaper SA3 form. rating the basis on which your string "LAC" if your cable system apacity. payment because it is the subject em or an association representing ransmitter, enter the designater basis, enter "O." For a further I in the paper SA3 form. to which the station is identifed.		
Note: If you are utilizing	g multiple chan	nel line-ups, ı	use a separate s	space G for each o	channel line-up.		
	Γ	CHANN	EL LINE-UP	AG			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID	Namo
Atlantic Broadb	and (Penn)	LLC			00790	2
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76	ystem during the ons in effect or .61(e)(2) and (4	ne accounting n June 24, 19 4), or 76.63 (r	period, except (81, permitting th eferring to 76.61	(1) stations carried e carriage of certa	and low power television stations) d only on a part-time basis under nin network programs [sections nd (2) certain stations carried on a	G Primary
	tations: With r	espect to any	distant stations	carried by your ca	able system on a substitute program	Transmitters: Television
 basis under specifc FC Do not list the station station was carried 	here in space	G—but do lis		e Special Stateme	ent and Program Log)—if the	
List the station here,	and also in spa formation conc	ce I, if the sta			ute basis and also on some other f the general instructions located	
Column 1: List eac	h station's call				s such as HBO, ESPN, etc. Identify	
cast stream as "WETA					ion. For example, report multi- n stream separately; for example	
			-		on for broadcasting over-the-air in	
on which your cable sy	stem carried th	e station.			may be different from the channel pendent station, or a noncommercial	
					ast), "I" (for independent), "I-M"	
(for independent multion for the meaning of the	,		,.	,	mmercial educational multicast).	
Column 4: If the sta	ation is outside	the local serv	∕ice area, (i.e. "d	listant"), enter "Ye	s". If not, enter "No". For an ex-	
planation of local servi					paper SA3 form. tating the basis on which your	
·-			•	· ·	ering "LAC" if your cable system	
carried the distant stati	•					
					payment because it is the subject tem or an association representing	
the cable system and a	a primary transi	mitter or an as	ssociation repres	senting the primar	y transmitter, enter the designa-	
, , ,			-	-	ner basis, enter "O." For a further d in the paper SA3 form.	
					to which the station is licensed by the	
				•	which the station is identifed.	
Note: If you are utilizin	g multiple char		EL LINE-UP	•	channer illie-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	
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FORM SA3E. PAGE 3.						<u>_</u>	
LEGAL NAME OF OWN					S	YSTEM ID#	Name
Atlantic Broadb	pand (Penn)	LLC				007902	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s FCC rules and regulati	ystem during the ons in effect or 5.61(e)(2) and (4	ne accounting I June 24, 198 1), or 76.63 (r	period, except (31, permitting the eferring to 76.61	(1) stations carried e carriage of certa	and low power television station only on a part-time basis under in network programs [sections and (2) certain stations carried on the control of the contro	er	G Primary Transmitters:
				carried by your ca	able system on a substitute pro	gram	Television
 basis under specifc FC Do not list the station station was carried 	here in space	G—but do list		e Special Stateme	nt and Program Log)—if the		
List the station here,	and also in spa formation conc	ce I, if the sta			ute basis and also on some oth the general instructions locate		
		-			such as HBO, ESPN, etc. Ide	-	
cast stream as "WETA WETA-simulcast).	2". Simulcast	streams must	be reported in o	column 1 (list each	ion. For example, report multi- stream separately; for example on for broadcasting over-the-ai	le	
its community of licens on which your cable sy	se. For example estem carried th	e, WRC is Cha e station.	annel 4 in Wash	ington, D.C. This r	may be different from the chan	nel	
educational station, by (for independent multion For the meaning of the	entering the le cast), "E" (for no se terms, see p	tter "N" (for ne oncommercial page (v) of the	etwork), "N-M" (f educational), or e general instruc	or network multica r "E-M" (for nonco tions located in th	st), "I" (for independent), "I-M" mmercial educational multicast	t).	
-	ave entered "Ye	es" in column	4, you must con	nplete column 5, s	tating the basis on which your		
cable system carried tr		-			ering "LAC" if your cable syster apacity.	n	
For the retransmiss	ion of a distant	multicast stre	eam that is not s	ubject to a royalty	payment because it is the sub		
-				•	tem or an association represer y transmitter, enter the designa	-	
•			•	• .	er basis, enter "O." For a furth		
					d in the paper SA3 form. to which the station is licensed	d by the	
				•	which the station is identifed.) by the	
Note: If you are utilizin				•			
		CHANN	EL LINE-UP	Al			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			
		•••••					

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN					SYSTEM ID#	Name
Atlantic Broadk	pand (Penn)	LLC			007902	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
			, -		and low power television stations)	G
		-			d only on a part-time basis under	G
•				•	nd (2) certain stations carried on a	Primary
substitute program bas		,	-	(C)(Z) and (+))], an	na (2) cortain stations carried on a	Transmitters:
Substitute Basis S	Stations: With r	espect to any	distant stations	carried by your ca	able system on a substitute program	Television
basis under specifc FC	-			0		
station was carried	•		t it in space i (th	e Speciai Stateme	ent and Program Log)—if the	
	•		ition was carried	both on a substitu	ute basis and also on some other	
basis. For further in	formation conc	erning substit	ute basis statior	ns, see page (v) of	f the general instructions located	
in the paper SA3 fo		-i Dt			a cuelo de LIDO. ESPAI eta Identifi.	
		-			s such as HBO, ESPN, etc. Identify ion. For example, report multi-	
			-	-	stream separately; for example	
WETA-simulcast).			·	`	. ,,	
			-		on for broadcasting over-the-air in	
on which your cable sy	•		annel 4 in Wash	ington, D.C. This i	may be different from the channel	
			ation is a netwo	rk station, an inde	pendent station, or a noncommercial	
					ast), "I" (for independent), "I-M"	
					mmercial educational multicast).	
For the meaning of the					e paper SA3 form. s". If not, enter "No". For an ex-	
planation of local servi			,	•		
•		• ,	•		tating the basis on which your	
		-		•	ering "LAC" if your cable system	
carried the distant stat	•					
					payment because it is the subject tem or an association representing	
_				•	y transmitter, enter the designa-	
					ner basis, enter "O." For a further	
					d in the paper SA3 form. to which the station is licensed by the	
					which the station is identifed.	
Note: If you are utilizing						
		CHANN	EL LINE-UP	Δ.Ι		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
	NUMBER	STATION		(II DISIAIII)		
	••••••					
					 	
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		ļ			<u> </u>	
		<u> </u>			ļ	
					<u> </u>	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name
Atlantic Broads	and (Penn)	LLC			007902	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the	G, identify every ystem during the ons in effect or .61(e)(2) and (4 sis, as explained tations: With rectations: With rectation as explained and also in sparaformation concern. h station's call associated with -2". Simulcast sechannel number	r television stane accounting of June 24, 198 (1), or 76.63 (rd in the next espect to any tions, or authors of June 24, 198 (1), or authors of June 24, 198 (1), or authors it the basis. The stane of June 25 (1), or a station according to the following a station according to the following substitute the following substi	period, except (81, permitting the eferring to 76.61 paragraph. distant stations orizations: at it in space I (the tion was carried ute basis station eport origination cording to its over be reported in cas assigned to t	(1) stations carried e carriage of certa (e)(2) and (4))]; ar carried by your case Special Stateme both on a substitutions, see page (v) of a program services er-the-air designaticulum 1 (list each the television static	and low power television stations) I only on a part-time basis under in network programs [sections and (2) certain stations carried on a able system on a substitute program and Program Log)—if the ate basis and also on some other the general instructions located as such as HBO, ESPN, etc. Identify ion. For example, report multi- stream separately; for example on for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television
educational station, by (for independent multion For the meaning of the Column 4: If the state planation of local service Column 5: If you have cable system carried the carried the distant state For the retransmiss of a written agreement the cable system and a state of the cable system	in each case vertically a case of the cast, "E" (for not see terms, see partion is outside to the cast, see partion of a distant static of the cast of	whether the stater "N" (for near commercial coage (v) of the state local servers (v) or before Jumitter or an associated (v) see page (v) och station. For local state local servers (v) och station. For local servers (v) och station, given local servers (v) och servers (v) och station, given local servers (v) och station, given local servers (v) och station, given local servers (v) och se	etwork), "N-M" (fi educational), or e general instruc- rice area, (i.e. "d general instructi- 4, you must com- accounting perior ause of lack of ar- tem that is not si ane 30, 2009, bet issociation repres- you carried the co- of the general in tr U.S. stations, I e the name of th	or network multicar "E-M" (for noncortions located in the istant"), enter "Yes ons located in the nolete column 5, stid. Indicate by entertivated channel cubject to a royalty tween a cable systemating the primary channel on any other tructions located ist the community with	s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject tem or an association representing y transmitter, enter the designater basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
in you are amilin	gap.o oa		EL LINE-UP			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
Atlantic Broadl	pand (Penn)	LLC			007902	Nume
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
PRIMARY TRANSMITTE In General: In space (carried by your cable selection of the selection	ERS: TELEVISIO G, identify every system during the ions in effect or 6.61(e)(2) and (esis, as explaine stations: With no control of the ions in span formation concord. The station's call associated with a station's call associated with a section of a control of the in each case with a section is outside ions are all of the ions are all of the ions are all of the ions are all of a control of a control of a distant at the intered into or a primary transistimulcasts, also are categories are location of each intered into or a primary transistimulcasts, also are categories are location of each intered into or a primary transistimulcasts, also are categories are location of each intered into or a primary transistimulcasts, also are categories are location of each intered into or a primary transistimulcasts, also are categories are location of each intered into or a primary transistimulcasts, also are categories are categories.	r television stane accounting a June 24, 1944), or 76.63 (r d in the next perspect to any stions, or auth G—but do listitute basis. In a station acceptable of the station acceptable of the station acceptable of the station. In a station acceptable of the station acceptable of the station. In a station acceptable of the station of the local services are stationary of the services acceptable of the station of the station. In a station acceptable of the station of the station. It is see page (v) of the services acceptable of the station. It is see page (v) of the station. For the station is seen acceptable of the station.	period, except 81, permitting the eferring to 76.61 paragraph. If distant stations orizations: to the effect of th	(1) stations carried e carriage of certa (e)(2) and (4))]; and (e)(2) and (f)(2); and (f)(and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a suble system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify ion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial ast), "I" (for independent), "I-M" mmercial educational multicast). e paper SA3 form. s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AL		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
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LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Marro
Atlantic Broadl	oand (Penn)	LLC			007902	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program based basis under specific FC Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 fc Column 1: List eace ach multicast stream cast stream as "WETA" WETA-simulcast). Column 2: Give the its community of licens on which your cable is Column 3: Indicate educational station, by	G, identify every system during the ions in effect or 6.61(e)(2) and (4 sis, as explaine stations: With r CC rules, regular here in space only on a substand also in spanformation concorn. ch station's call associated with A-2". Simulcast e channel numbers, for example system carried the in each case we rentering the le cast), "E" (for no	r television state accounting in June 24, 1964), or 76.63 (t), or 76.63 (t) espect to any tions, or auth G—but do list itute basis. ce I, if the staterning substitute sign. Do not rear a station acceptreams must be the FCC has, WRC is Charle station.	period, except (all permitting the eferring to 76.61 paragraph. a distant stations orizations: a tit in space I (the effect of the effect of t	(1) stations carried e carriage of certa (e)(2) and (4))]; all carried by your case Special Statement both on a substitute, see page (v) of a program services er-the-air designation to (list each the television station of the television station of the station, an independent of the station, an independent of the station, and independent of the station of the stati	and low power television stations) If only on a part-time basis under John programs [sections and (2) certain stations carried on a Table system on a substitute program The and Program Log)—if the John program Log)—if the	G Primary Transmitters Television
column 5: If you he cable system carried the distant state for the retransmiss of a written agreement the cable system and ion "E" (exempt). For explanation of these the Column 6: Give the	ice area, see pa ave entered "Ye he distant static ion on a part-tir sion of a distant t entered into or a primary transr simulcasts, also aree categories, e location of eac Canadian station	age (v) of the ces" in column on during the center basis because the center of the cen	general instructi 4, you must con accounting perion ause of lack of act am that is not sone 30, 2009, bein association repressive carried the coordinate of the general in a trussive the name of the	ons located in the plete column 5, s of lindicate by enticativated channel cubject to a royalty tween a cable system on any other tructions located ist the community with	tating the basis on which your ering "LAC" if your cable system sapacity. payment because it is the subject tem or an association representing y transmitter, enter the designater basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
		CHANN	EL LINE-UP	AM		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

Atlantic Broad	NED OF CARLE OF					
					SYSTEM ID#	Name
DDIMARY TRANSMITT	band (Penn)	LLC			007902	
PRIMARY IRANSMII I	ERS: TELEVISIO	N				
In General: In space carried by your cable FCC rules and regular 76.59(d)(2) and (4), 7 substitute program be Substitute Program be Substitute Basis basis under specific Fon the Station was carried that station was carried basis. For further in the paper SA3 folumn 1: List eater and the stream as "WETA-simulcast). Column 2: Give the stream as "WETA-simulcast). Column 3: Indicate educational station, be (for independent multifor the meaning of the Column 4: If the separation of local sen Column 5: If you he cable system carried the distant star For the retransmiss of a written agreement the cable system and the	G, identify every system during the titons in effect or 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and associated with a sociated with a second or a second or a sociated with a second or a s	r television standard reaccounting in June 24, 1984, or 76.63 (red in the next prespect to any ations, or authors. The standard respect to any ations, or authors. The standard respect to any ations, or authors. The standard respect to any ations of the station account of the station account of the station. The station account of the sta	period, except (81, permitting the eferring to 76.61 paragraph. If distant stations orizations: to the eferring to the eferring to the eferring to 76.61 paragraph. If distant stations orizations: to the effect of	(1) stations carried to carriage of certa (e)(2) and (4))]; are carried by your case. Special Statement of both on a substitute, see page (v) of a program services the television static ington, D.C. This result in the television static ington, D.C. This result in the television static ington, D.C. This result is the television static in the television static in the primary of the television static in the properties of the television of the television static in the properties of the television static in the properties of the television of the televi	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
	ne location of ea	ch station. Fo	r U.S. stations, I	list the community	d in the paper SA3 form. to which the station is licensed by the	
FCC. For Mexican or	ne location of ea Canadian statio	ch station. For ns, if any, give	r U.S. stations, I e the name of th	list the community ne community with	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
FCC. For Mexican or	ne location of ea Canadian statio	ch station. For ns, if any, give nnel line-ups, i	r U.S. stations, I e the name of th	list the community ne community with space G for each o	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
FCC. For Mexican or	ne location of ea Canadian statio	ch station. For ns, if any, give nnel line-ups, i	tr U.S. stations, I to the name of the use a separate state of the use as the use of the use	list the community ne community with space G for each o	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
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FCC. For Mexican or Note: If you are utilizi	ne location of ea Canadian statio ng multiple char 2. B'CAST CHANNEL	ch station. For ns, if any, give nnel line-ups, to CHANN 3. TYPE OF	tr U.S. stations, I to the name of the use a separate state of the use as the use of the use	list the community the community with space G for each of AN 5. BASIS OF CARRIAGE	d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.	
FCC. For Mexican or Note: If you are utilizi	ne location of ea Canadian statio ng multiple char 2. B'CAST CHANNEL	ch station. For ns, if any, give nnel line-ups, to CHANN 3. TYPE OF	tr U.S. stations, I to the name of the use a separate state of the use as the use of the use	list the community the community with space G for each of AN 5. BASIS OF CARRIAGE	d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.	
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTE		Name
Atlantic Broadb	pand (Penn)	LLC			00	7902	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect or 6.61(e)(2) and (4 sis, as explaine	ne accounting June 24, 198 I), or 76.63 (red in the next p	period, except (31, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa (e)(2) and (4))]; ar	and low power television stations) I only on a part-time basis under in network programs [sections and (2) certain stations carried on a		Primary Transmitters: Television
basis under specifc FC Do not list the station	CC rules, regula here in space	tions, or autho G—but do list	orizations:		nt and Program Log)—if the		relevision
basis. For further in in the paper SA3 fo	and also in spa formation conc rm.	ce I, if the sta erning substit	ute basis station	ns, see page (v) of	the basis and also on some other the general instructions located		
each multicast stream cast stream as "WETA WETA-simulcast).	associated with a-2". Simulcast	a station acc streams must	cording to its over be reported in o	er-the-air designat column 1 (list each	such as HBO, ESPN, etc. Identify ion. For example, report multi- stream separately; for example		
its community of licens on which your cable sy Column 3: Indicate	se. For example estem carried the in each case v	, WRC is Cha e station. hether the sta	annel 4 in Washi ation is a networ	ington, D.C. This r	on for broadcasting over-the-air in may be different from the channel bendent station, or a noncommercial		
(for independent multic	cast), "E" (for no ese terms, see p ation is outside	oncommercial page (v) of the the local serv	educational), or e general instruc ice area, (i.e. "d	"E-M" (for noncontions located in the istant"), enter "Yes	s". If not, enter "No". For an ex-		
Column 5: If you had cable system carried the distant stati	ave entered "Ye ne distant statio ion on a part-tir	es" in column on during the a ne basis beca	4, you must com accounting perionuse of lack of a	nplete column 5, s d. Indicate by ente ctivated channel c	tating the basis on which your ering "LAC" if your cable system apacity.		
of a written agreement the cable system and a tion "E" (exempt). For s	entered into or a primary transi simulcasts, also	or before Juin mitter or an as o enter "E". If y	ne 30, 2009, bet sociation repres ou carried the c	ween a cable system senting the primary channel on any oth	payment because it is the subject tem or an association representing of transmitter, enter the designater basis, enter "O." For a further the paper SA3 form.		
Column 6: Give the	e location of ea Canadian statio	ch station. For ns, if any, give	r U.S. stations, l e the name of th	ist the community e community	to which the station is licensed by the which the station is identifed.		
		CHANN	EL LINE-UP	AO			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN					SYSTEM ID#	Name
Atlantic Broadb	oand (Penn)	LLC			007902	1140
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect or 6.61(e)(2) and (4 sis, as explaine	ne accounting n June 24, 198 4), or 76.63 (n d in the next p	period, except (31, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa I(e)(2) and (4))]; an	and low power television stations) d only on a part-time basis under nin network programs [sections nd (2) certain stations carried on a hable system on a substitute program	G Primary Transmitters: Television
basis under specifc FC • Do not list the station station was carried	here in space	G—but do list		e Special Stateme	ent and Program Log)—if the	
List the station here,	and also in spa formation conc	ice I, if the sta			ute basis and also on some other f the general instructions located	
each multicast stream	associated with	n a station acc	cording to its over	er-the-air designat	s such as HBO, ESPN, etc. Identify ion. For example, report multi- n stream separately; for example	
Column 2: Give the its community of licens on which your cable sy	se. For example estem carried th	e, WRC is Cha le station.	annel 4 in Wash	ington, D.C. This i	on for broadcasting over-the-air in may be different from the channel	
educational station, by (for independent multion For the meaning of the Column 4: If the sta	entering the le cast), "E" (for no se terms, see p ation is outside	tter "N" (for ne oncommercial page (v) of the the local serv	etwork), "N-M" (f educational), o e general instruc rice area, (i.e. "d	or network multica r "E-M" (for noncol ctions located in th listant"), enter "Ye	s". If not, enter "No". For an ex-	
<u> </u>	ave entered "Ye ne distant statio	es" in column on during the	4, you must con accounting perio	nplete column 5, s od. Indicate by ente	tating the basis on which your ering "LAC" if your cable system	
For the retransmiss of a written agreement	ion of a distant entered into or	multicast stre or before Ju	eam that is not s ne 30, 2009, bet	ubject to a royalty tween a cable sys	payment because it is the subject tem or an association representing y transmitter, enter the designa-	
explanation of these th Column 6: Give the	ree categories, e location of ea	see page (v) ch station. Fo	of the general in U.S. stations, I	nstructions located list the community	ner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the	
Note: If you are utilizin				-	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AP		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	U. EGGATION OF STATION	
	NUMBER	STATION		(If Distant)		
		<u> </u>				
		<u> </u>			ļ	

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name		
Atlantic Broadb	and (Penn)	LLC			007902	1101110		
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 program basis, as explained in the next paragraph. Substitute program basis, as explained in the next paragraph. Substitute program basis, as explained in the next paragraph. Trace Substitute Pasis 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 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, or "E-M" (for noncommer								
of a written agreement the cable system and a	entered into or a primary transi	n or before Ju mitter or an as	ne 30, 2009, bet ssociation repres	tween a cable syst senting the primary	iem or an association representing y transmitter, enter the designa-			
explanation of these th Column 6: Give the	ree categories, e location of ea	see page (v) ch station. Fo	of the general in U.S. stations, I	nstructions located ist the community	to which the station is identified by the which the station is licensed by the which the station is identified.			
Note: If you are utilizin	g multiple char	nnel line-ups,	use a separate s	space G for each o	channel line-up.			
		CHANN	EL LINE-UP	AQ				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
				••••••				

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name
Atlantic Broadb	and (Penn)	LLC			007902	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect or .61(e)(2) and (4 sis, as explaine	ne accounting n June 24, 198 4), or 76.63 (ro d in the next p	period, except (31, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa (e)(2) and (4))]; and	and low power television stations) d only on a part-time basis under hin network programs [sections hd (2) certain stations carried on a	G Primary Transmitters:
basis under specifc FC	CC rules, regula	itions, or auth	orizations:		able system on a substitute program ent and Program Log)—if the	Television
station was carried • List the station here, basis. For further in	only on a subst and also in spa formation conc	titute basis. ice I, if the sta	tion was carried	both on a substitu	ute basis and also on some other f the general instructions located	
each multicast stream	h station's call associated with	n a station acc	cording to its over	er-the-air designat	s such as HBO, ESPN, etc. Identify ion. For example, report multi- n stream separately; for example	
Column 2: Give the its community of licens on which your cable sy	e. For example stem carried th	e, WRC is Cha le station.	annel 4 in Wash	ington, D.C. This i	on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial	
(for independent multid For the meaning of the Column 4: If the sta	cast), "E" (for no se terms, see p ation is outside	oncommercial page (v) of the the local serv	educational), o e general instruc rice area, (i.e. "d	r "E-M" (for nonco ctions located in th listant"), enter "Ye	s". If not, enter "No". For an ex-	
cable system carried th	ave entered "Ye ne distant statio	es" in column on during the a	4, you must con accounting perio	nplete column 5, s od. Indicate by ente	tating the basis on which your ering "LAC" if your cable system	
of a written agreement the cable system and a	ion of a distant entered into or a primary transı	multicast stre n or before Ju mitter or an as	eam that is not s ne 30, 2009, be ssociation repres	ubject to a royalty tween a cable sys senting the primar	apacity. payment because it is the subject tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further	
Column 6: Give the FCC. For Mexican or C	e location of ea Canadian statio	ch station. Fo	r U.S. stations, le the name of th	ist the community e community	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
Note: If you are utilizin	g multiple char	• ′	•		channel line-up.	•
	<u> </u>	CHANN	EL LINE-UP	AR		
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
0.014	NUMBER	STATION	(100 01 110)	(If Distant)		
					<u> </u>	
					<u> </u>	
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Atlantic Broadband (Penn) LLC 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.	1 SA3E. PAGE 3.					
Attantic Broadband (Penn) LLC 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 (f) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76,59(d)(2) and (4), 76,61(e)(2) and (4), 76,61(e)(2) and (4), 76,61(e)(2) and (4), 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 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 "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), "HM" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), "For fo						Name
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, be retireng the letter 'In' (for network), 'N-M'' (for network multicast), "F" (for independent), "LM'' (for independent multicast), "E" (for noncommercial educational instructions located in the paper SA3 form. C	lantic Broadba	and (Penn) LLC			007902	
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 pessons 76.59(d)(2) and (4), 76.61(e)(2) and (4). 76.61(e)(2) and (4). 76.61(e)(2) and (4). 76.61(e)(2) and (4). 76.61(e	ARY TRANSMITTERS	RS: TELEVISION				
basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for 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 cab	ed by your cable systrules and regulation (d)(2) and (4), 76.6 itute program basis ubstitute Basis Staunder specifc FCC not list the station here.	stem during the accounting in a ffect on June 24, 161(e)(2) and (4), or 76.63 is, as explained in the nextations: With respect to a C rules, regulations, or authere in space G—but do I	ng period, except 1981, permitting th (referring to 76.6' of paragraph. Iny distant stations of the result of the	(1) stations carried ne carriage of certa 1(e)(2) and (4))]; and s carried by your ca	d only on a part-time basis under in network programs [sections and (2) certain stations carried on a able system on a substitute program	G Primary Transmitters: Television
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? (Yes or No) 5. BASIS OF CARRIAGE 6. LOCATION OF STATION	the station here, an asis. For further information the paper SA3 formolumn 1: List each a multicast stream as stream as "WETA-2 A-simulcast). Dilumn 2: Give the community of license. Dilumn 3: Indicate in ational station, by endependent multicast are meaning of these blumn 4: If the statistion of local service blumn 5: If you have system carried the distant station or the retransmission written agreement enable system and a pE" (exempt). For sinnation of these thre blumn 6: Give the lot For Mexican or Cal	and also in space I, if the sommation concerning subsom. In station's call sign. Do not associated with a station at 2". Simulcast streams muchannel number the FCC et. For example, WRC is Costem carried the station. In each case whether the entering the letter "N" (for east), "E" (for noncommerce terms, see page (v) of the veentered "Yes" in columned distant station during the on of a distant multicast some area, see page (v) and in a part-time basis become of a distant multicast some primary transmitter or an imulcasts, also enter "E". The categories, see page (coloration of each station. If anadian stations, if any, general stations is a station stations, if any, general stations is a station stations in the station station stations is a station station stations.	station was carried stitute basis station of report origination according to its owast be reported in the Channel 4 in Wash station is a network), "N-M" (total educational), of the general instruction 4, you must correct accounting period accounting the formula in the f	ns, see page (v) of an program services rer-the-air designat column 1 (list each the television stationington, D.C. This in the television stationington, D.C. This in the television stationington, D.C. This in the television, an independent of retwork multicator "E-M" (for nonconctions located in the distant"), enter "Yestions located in the mplete column 5, so and. Indicate by entractivated channel cativated channel cativated channel cativated channel cativated channel cativated channel consubject to a royalty structure a cable systemating the primary channel on any off instructions located list the community with	f the general instructions located as such as HBO, ESPN, etc. Identify ion. For example, report multinatream separately; for example on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial ast), "I" (for independent), "I-M" mmercial educational multicast). The paper SA3 form. s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system capacity. Payment because it is the subject tem or an association representing y transmitter, enter the designater basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
1. CALL SIGN 2. B'CAST CHANNEL OF 4. DISTANT? (Yes or No) 5. BASIS OF CARRIAGE 6. LOCATION OF STATION		CHAN	NEL LINE-LIP	ΔS	·	-
		2. B'CAST 3. TYPE CHANNEL OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					ACCOUNT	ING PERIOD: 2021/1				
LEGAL NAME OF OWN					SYSTEM ID#	Name				
Atlantic Broadb					007902					
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										
	here in space	G—but do lis		e Special Stateme	ent and Program Log)—if the					
basis. For further in in the paper SA3 for	and also in spa formation conc rm.	ice I, if the sta erning substit	ute basis statior	ns, see page (v) of	ute basis and also on some other f the general instructions located s such as HBO, ESPN, etc. Identify					
each multicast stream	associated with	n a station ac	cording to its over	er-the-air designat	ion. For example, report multi- n stream separately; for example					
Column 2: Give the its community of licens on which your cable sy	se. For example stem carried th	e, WRC is Cha le station.	annel 4 in Wash	ington, D.C. This i	on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial					
(for independent multic For the meaning of the	cast), "E" (for no	oncommercial page (v) of the	l educational), or e general instruc	r "E-M" (for nonco ctions located in th	st), "I" (for independent), "I-M" mmercial educational multicast). e paper SA3 form. s". If not, enter "No". For an ex-					
<u> </u>	ave entered "Ye ne distant statio	es" in column on during the	4, you must con accounting perio	nplete column 5, s od. Indicate by ente	tating the basis on which your ering "LAC" if your cable system					
For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	ion of a distant entered into or a primary transi simulcasts, also iree categories, e location of ea	multicast stren or before Ju mitter or an as o enter "E". If o see page (v) ch station. Fo	eam that is not s ne 30, 2009, bet ssociation repres you carried the o of the general in r U.S. stations, I	ubject to a royalty tween a cable sys senting the primar channel on any other tructions located ist the community	payment because it is the subject tem or an association representing y transmitter, enter the designater basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.					
Note: If you are utilizin										
		CHANN	EL LINE-UP	AT						
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION					

FORM SA3E. PAGE 3.							3 PERIOD: 2021/.
LEGAL NAME OF OWN					SYSTEM 0079		Name
Atlantic Broads					0073	902	
In General: In space C carried by your cable s FCC rules and regulati	G, identify every system during the ions in effect or 5.61(e)(2) and (4	television stane accounting 1 June 24, 198 1), or 76.63 (re	period, except (31, permitting the eferring to 76.61	(1) stations carried e carriage of certa	and low power television stations) I only on a part-time basis under in network programs [sections nd (2) certain stations carried on a		G Primary Transmitters:
Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the ste planation of local servi Column 5: If you ha cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For se explanation of these th Column 6: Give the FCC. For Mexican or C	Stations: With recording to rules, regular here in space only on a substand also in spatformation concern. The station's call associated with associated with a concern carried the in each case very entering the least), "E" (for not see terms, see pation is outside ce area, see pare entered "Year entered "Year entered "Year entered "Year entered into or a part-tirion of a distant station of a distant tentered into or a primary transis simulcasts, also aree categories, a location of each canadian statio	respect to any respec	distant stations orizations: cit in space I (the tion was carried ute basis station eport origination cording to its over be reported in coas assigned to the tannel 4 in Wash ation is a network), "N-M" (freducational), or expensed instruction earea, (i.e. "dogeneral instruction ear	e Special Statemer I both on a substitute, see page (v) of a program services er-the-air designat column 1 (list each the television static ington, D.C. This is rk station, an inde- for network multicar "E-M" (for noncolutions located in the instant"), enter "Ye- ons located in the inplete column 5, s od. Indicate by ente ctivated channel of tubject to a royalty tween a cable sys- senting the primar channel on any oth instructions located ist the community e community with	paper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.		Transmitters: Television
Note: If you are utilizin	ig multiple char		•	•	channel line-up.		
	1	CHANN	EL LINE-UP	AU			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name	
Atlantic Broadk	pand (Penn)	LLC			007902		
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program							
basis under specifc FC • Do not list the station station was carried	here in space	G—but do lis		e Special Stateme	ent and Program Log)—if the		
List the station here, basis. For further in in the paper SA3 fo	and also in spa formation conc rm.	ice I, if the sta erning substit	tute basis statior	ns, see page (v) of	ute basis and also on some other the general instructions located		
each multicast stream	associated with	n a station ac	cording to its over	er-the-air designat	s such as HBO, ESPN, etc. Identify ion. For example, report multi- a stream separately; for example		
Column 2: Give the	e. For example	e, WRC is Ch	-		on for broadcasting over-the-air in may be different from the channel		
Column 3: Indicate educational station, by (for independent multic For the meaning of the	e in each case we entering the le cast), "E" (for no ese terms, see p	whether the st tter "N" (for no oncommercia page (v) of the	etwork), "N-M" (f l educational), o e general instruc	or network multica r "E-M" (for nonco tions located in th	• •		
planation of local servi Column 5: If you ha	ce area, see pa ave entered "Ye ne distant statio	age (v) of the es" in column on during the	general instructi 4, you must con accounting perio	ons located in the plete column 5, sold. Indicate by enter	tating the basis on which your ering "LAC" if your cable system		
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th	entered into or a primary transi simulcasts, also iree categories	n or before Ju mitter or an as o enter "E". If , see page (v)	ne 30, 2009, bei ssociation repres you carried the c of the general in	tween a cable syssenting the primar channel on any oth instructions located	payment because it is the subject tem or an association representing y transmitter, enter the designater basis, enter "O." For a further d in the paper SA3 form.		
	Canadian statio	ns, if any, giv	e the name of th	e community with	to which the station is licensed by the which the station is identifed. channel line-up.		
		CHANN	EL LINE-UP	AV			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
Atlantic Broadb	and (Penn)	LLC			007902		
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.							
basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servi Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	cc rules, regular here in space only on a substand also in spatformation concern. In station's call associated with associated with associated with a channel numbers of the concern carried the in each case we entering the least), "E" (for not see terms, see pation is outside one area, see pation of a distant static ion on a part-tirion of a distant entered into or a primary transistimulcasts, also aree categories, a location of each	tions, or auth G—but do list itute basis. ce I, if the sta erning substit sign. Do not read a station acceptate with the local server the FCC heart and the local server the loc	orizations: it in space I (the tion was carried ute basis station eport origination cording to its ove be reported in c as assigned to t annel 4 in Wash ation is a networ etwork), "N-M" (fr educational), or e general instruct rice area, (i.e. "di general instruct 4, you must com accounting perior assem that is not s ane 30, 2009, bet essociation repres you carried the c of the general in r U.S. stations, I	e Special Stateme both on a substitus, see page (v) of a program services er-the-air designat column 1 (list each the television staticington, D.C. This result in the station, an indeport network multicar "E-M" (for noncolutions located in the instant"), enter "Yesons located in the inplete column 5, sold. Indicate by entertivated channel cubject to a royalty tween a cable systemating the primary channel on any other structions located ist the community	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system	Television	
Note: If you are utilizin	g multiple char	inel line-ups,	use a separate s	space G for each o	channel line-up.		
		CHANN	EL LINE-UP	AW			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 007902 Atlantic Broadband (Penn) 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

Atlantic Broadband (Penn) LLC SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizexplanation of the programming that must be included in this log, see page (v) of the general instructions located in 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE 1. During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television proadcast by a distant station? Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their med 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 accouperiod, was broadcast by a distant station and that your cable system substituted for the programming of anotiunder certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific protitites, 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 5: Give the month and day when your system carried the substitute program. Use numerals, with the case of Mexican or Canadian stations, if any, the community to which the station is identified). Column 6: State the times when the substitute program was carried by your cable system. List the times acto the nearest five minutes. Example: a program carried by a system from 6:0:15 p.m. to	zations. For a further n the paper SA3 form. program Yes X No program aning is unting ther station e paper ogram C or, in the month occurately d be required ed pro	Namo
SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorize explanation of the programming that must be included in this log, see page (v) of the general instructions located in 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television proadcast by a distant station? Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their medicar. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accouperiod, was broadcast by a distant station and that your cable system substituted for the programming of anoth under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific protitles, 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 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 first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your	system carried on a zations. For a further n the paper SA3 form. program Yes No program aning is unting ther station e paper ogram C or, in the month occurately d be required ed pro	Substitute Carriage: Special Statement a
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During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television procedures by a distant station? Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the point block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their mean 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 account of the program of the program of a distant station and that your cable system substituted for the programming of another certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific provides, 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 identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the irrst. 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 account 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 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 to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed	yes X No program aning is unting ther station e paper ogram C or, in the month ccurately d be required ed pro	Special Statement a
Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the page in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning and the substitute program or program (substitute program) that, during the account of the program or program (substitute program) that, during the account of the program or program (substitute program) that, during the account of the program or program (substitute program) that, during the account of the program or program (substitute program) that, during the account of the program or program (substitute program) that, during the account of the program or program (substitute program) that, during the account of the program or program (substitute program) that, during the account or program (substitute program) that, during the account or program (substitute program instructions located in the season or full program and that your cable system substitute program. It is the program was broadcast live, enter "Yes." Otherwise enter "No." 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 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 irst. 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 account of the case of the program in the substitute program of the earth of the program in the substitute program in the substitute program of the earth of the program in the substitute program of the earth of the program in the substitute program in the substitute program in the substitute program i	yes X No program aning is unting ther station e paper ogram C or, in the month ccurately d be required ed pro	Statement a
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	ions in	
ffect on October 19, 1976.		_
SUBSTITUTE PROGRAM WHEN SUBSTITUTE SUBSTITUTE PROGRAM CARRIAGE OCCURRI	I 7 REASON	
1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES Yes or No CALL SIGN 4. STATION'S LOCATION AND DAY FROM —		
		†
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		-
		-
		-
		-
		-

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Atlantic Broadband (Penn) LLC 007902 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	L NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Nama					
Atla	antic Broadband (Penn) LLC		007902	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. \$ 3,166,346.40 (Amount of gross receipts)									
 COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did 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. 									
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be ${\bf k}$ 3 below.	entered on	line 1 of						
	ort 6 of the DSE schedule was completed, the amount from line 7 of block C should be erelow.	ntered on lin	e 2 in block						
	ort 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoul block 4 below.	ld be entere	d 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	\$	3,166,346.40						
	Enter the result here. This is your minimum fee.	\$	33,689.93						
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the ispace G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule. No—Leave block 3 below blank and column to the column television stations.	n 4, you mus	st 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	\$	18,072.96						
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		4,910.98						
	Line 3. Add lines 1 and 2 and enter here	\$	22,983.94						
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	\$	33,689.93	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. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	Section 111(d)(7) should contact the Licensing					
	Line 4. FILING FEE	\$	725.00	additional fees. Division for the					
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	34,414.93	appropriate form for submitting the additional fees.					
Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See page (i) of the general instructions located in the paper SA3 form for more information.)									

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	Atlantic Broadband (Penn) LLC	007902
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stati to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations.	ions 11
	Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	216
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
for Further Information	Name Patrick Bratton Telephone 61.	7-786-8800
	Address 2 Batterymarch Park, Suite 205 (Number, street, rural route, apartment, or suite number)	
	Quincy, MA 02169 (City, town, state, zip)	
	Email pbratton@atlanticbb.com Fax (optional)	
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulation	ns.)
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system in line 1 of space B and that the owner is not a corporation or partnership; or	n as identified
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of in line 1 of space B.	the cable system
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herei 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)]	n
	/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 button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibilit	
	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 suffciency 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 (Penn) LLC	007902	Name			
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."					
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions					
made by satellite carriers to satellite dish owners? X NO					
YES. Enter the total here and list the satellite carrier(s) below					
Name Mailing Address Mailing Address Mailing Address					
INTEREST ASSESSMENTS					
You must complete this worksheet for those royalty payments submitted as a result of a late pay For an explanation of interest assessment, see page (viii) of the general instructions in the pape		Q			
Line 1 Enter the amount of late payment or underpayment		Interest Assessment			
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-				
Line 3 Multiply line 2 by the number of days late and enter the sum here	xdays				
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,					
space L, (page 7)	(interest charge)				
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For fu contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	urther assistance please				
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.					
NOTE: If you are filing this worksheet covering a statement of account already submitted to the please list below the owner, address, first community served, accounting period, and ID number filing.	17 0				
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)

DSL SCHLDOLL, FAGI	LEGAL NAME OF OWNER OF CABLE	SYSTEM:			S	YSTEM ID#					
1	Atlantic Broadband (Per				_	007902					
	SUM OF DSEs OF CATEGOR	-	IS:			1					
	 Add the DSEs of each station 		13.								
	Enter the sum here and in line		schedule.		3.50						
	Litter the same first interior of parts of this soficulie.										
2	Instructions:	ian": list the call	signs of all distant stations	identified by the	e letter "Ω" in column 5						
	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3).										
Computation	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."										
Category "O"			CATEGORY "O" STATIO		-						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
	WDCA	1.000	WJLA	0.250	WTTG	0.250					
	WDCW	1.000	WJZ	0.250	WUSA	0.250					
			WNPB	0.250	WWCP	0.250					
Add rows as											
necessary.											
Remember to copy all											
formula into new						···					
rows.											
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	 P	7	

Name		WNER OF CABLE SYSTEM: adband (Penn) LLC					\$	007902
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should of Column 3 Column 4 be carried out Column 5 give the type- Column 6	st the call sign of all distants: For each station, give the correspond with the information: For each station, give the Divide the figure in colurat least to the third decine: For each independent suralue as ".25." Multiply the figure in colurations.	ne number of h mation given in ne total numbe imn 2 by the fig nal point. This i station, give the lumn 4 by the f	ours your cable system is pace J. Calculate or r of hours that the statigure in column 3, and g is the "basis of carriage" "type-value" as "1.0."	m carried the stati nly one DSE for ea ion broadcast ove give the result in d e value" for the st For each network	on during the accounting ach station. It the air during the accoulecimals in column 4. This	nting period. If figure must ational station,	
Capacity			CATEGORY	LAC STATIONS:	COMPUTATI	ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	JRS ED BY M	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	-		iΕ
			÷			x	=	
			÷ ÷		=	x x	=	
			÷		=	x	=	
			÷		=	x	=	
			÷		=	x	=	
			÷ ÷		=	x x	=	
Computation of DSEs for Substitute-Basis Stations	space I). Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted							
		SI	JBSTITUTE	-BASIS STATION	NS: COMPUTA	ATION OF DSEs	_	
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBE OF DAY IN YEAI	'S	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		-				-		=
		-				-		=
		-		=		-		=
		4	-	=		4	•	=
	Add the DSEs	OF SUBSTITUTE-BASI of each station. m here and in line 3 of pa	S STATIONS:	edule,		0.00]	=
5		R OF DSEs: Give the ames applicable to your system		boxes in parts 2, 3, and	4 of this schedule	and add them to provide t	he total	
Total Number	1. Number	of DSEs from part 2 ●				>	3.50	
of DSEs	2. Number	of DSEs from part 3 ●				<u> </u>	0.00	
	3. Number	of DSEs from part 4 ●				-	0.00	
								
	TOTAL NUMBE	R OF DSEs						3.50

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

	WNER OF CABLE S						S	YSTEM ID# 007902	Name
								301302	
Instructions: Bloc In block A:	ck A must be comp	leted.							
• If your answer if schedule.	"Yes," leave the re	mainder of p	art 6 and part 7	of the DSE schedu	ile blank and o	complete part	8, (page 16) of the		6
	"No," complete blo	cks B and C							Computation of
la tha aabla ayatar	n la actad whally a	staida af all n		TELEVISION MA		on 76 E of FO	C rules and regule	tions in	Computation of 3.75 Fee
effect on June 24,	•	itside of all n	najor and small	er markets as defin	ea unaer secti	on 76.5 of FC	C rules and regula	uons in	
<u>=</u>			O NOT COMP	LETE THE REMAIN	IDER OF PAR	T 6 AND 7.			
X No—Comp	olete blocks B and	C below.							
		BLO	CK B: CARF	RIAGE OF PERM	/IITTED DSI	Es			
Column 1: CALL SIGN	FCC rules and re	gulations pri e DSE Sche	or to June 25, 1 dule. (Note: Th	part 2, 3, and 4 of th 1981. For further ex e letter M below refo Act of 2010.)	planation of pe	ermitted statio	ns, see the	Ţ	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)]	les and regu ed pursuant t	lations cited be to the FCC mar	sis on which you can low pertain to those ket quota rules [76.6 3.59(d)(1), 76.61(e)	e in effect on J 57, 76.59(b), 7	une 24, 1981. '6.61(b)(c), 76	5.63(a) referring to		
	C Noncommeric	al educationa I station (76.6	al station [76.59 65) (see paragr	5.59(d)(1), 76.61(e) 9(c), 76.61(d), 76.63 aph regarding subs	(a) referring to	76.61(d)]			
		viously carrie HF station w	ed on a part-tim rithin grade-B c	e or substitute basis ontour, [76.59(d)(5)			ring to 76.61(e)(5)]		
	W Retransmissio	in or a distan	it multioast stroi	am.					
Column 3:		stations ide	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2		nplete the wor	ksheet on page 14	of	
1. CALL	2. PERMITTED	3. DSE	1. CALL	2. PERMITTED	3. DSE	1. CALL	2. PERMITTED	3. DSE	
SIGN	BASIS A	1.00	SIGN WNPB	BASIS	0.25	SIGN	BASIS		
WDCW	G	1.00	WINED		0.23				
			WTTG	Α	0.25				
WJLA	D	0.25	WUSA	A	0.25 0.25				
WJZ	A	0.25	WWWCF	Α	0.25				
								3.50	
			BI OCK C: CC		2 75 EEE				
			DEOON C. CC	OMPUTATION OF	J. I J FEE				
Line 1: Enter the	total number of l	DSEs from	part 5 of this s	schedule					
Line 2: Enter the	sum of permitted	d DSEs fron	n block B abo	ve					
				of DSEs subject to 7 of this schedule)		te.			
Line 4: Enter gro	ss receipts from	space K (pa	age 7)						Do any of the
							x 0.03	375	DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375 a	nd enter su	m here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	s from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 and	d enter here	e and on line 2	?, block 3, space L	_ (page 7)			0.00	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 007902											
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	UED)					
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6		
									Computation o		
	_1		1	<u> </u>	<u> </u>	<u> </u>	1	1			

ACCOUNTING PERIOD: 2021/1

Name	Atlantic Broadb							SYSTEM ID#: 007902		
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. 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									
		PERMITT	ED DSE FOR	STATIONS CARRIE	ED ON A PART-TIME A	ND SUBSTI	STITUTE BASIS			
	1. CALL	2. PRIC		ACCOUNTING	4. BASIS OF		RESENT	6. PERMITTED		
	SIGN	DSE		PERIOD	CARRIAGE		DSE	DSE		
7	Instructions: Block A	must be comp	oleted.							
Computation	In block A: If your answer is	"Yes " complet	e blocks B and	C. below						
of the		•			art 8 of the DSE sched	ule.				
Syndicated			BLO	OCK A: MAJOR	TELEVISION MAR	KET				
Exclusivity						(
Surcharge	l —	-	•	najor television mark	as defined by section 76.5 of FCC rules in effect June 24, 1981?					
	Yes—Complete	blocks B and	C .		No—Proceed	to part 8				
	BLOCK B: C	arriage of VHF	-/Grade B Cont	our Stations	BLO	CK C: Comp	utation of Exempt	DSEs		
	Is any station listed in commercial VHF station or in part, over the cal	block B of par on that places	t 6 the primary	stream of a	Was any station listential nity served by the cast to former FCC rule 7	ed in block B able system p	of part 7 carried in	any commu-		
	Yes—List each st	•	n its appropriate p	permitted DSE	Yes—List each	station below v	with its appropriate p	ermitted DSE		
	X No—Enter zero a	nd proceed to p	art 8.		X No—Enter zero	and proceed to	o part 8.			
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	SALE SIGH	BOL	O/ALL GIGIT	562	ONEE GIGIT	502	O/IEE OIGIV	552		
			TOTAL DSEs	0.00			TOTAL DSEs	0.00		

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

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC	SYSTEM ID# 007902	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	3,166,346.40	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? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below. If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS is 4.00 or less, compute your surcharge here and leave section 3b blank.	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. 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			YSTEM ID# 007902							
_		Atlantic Broadband (Penn) LLC	007302							
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	ntione:								
8		ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part								
		checked "Yes," use the total number of DSEs from part 5. ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.								
Computation	,	r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.								
of Base Rate Fee	• If you blank	r answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below								
		s a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers								
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.								
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS									
	• Did yo	our cable system retransmit the signals of any partially distant television stations during the accounting period?								
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.								
		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)	<u> </u>							
		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							
	1	<u> </u>								

U.S. Copyright Office Form SA3E Long Form (Rev. 05-17) DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2021/1

	AME OF OWNER OF CABLE SYSTEM: tic Broadband (Penn) LLC	SYSTEM ID# 007902	Name
Section 4	If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.		
7	A. Enter 0.01064 of gross receipts (the amount in section 1)	_	8
	B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$		Computation of Base Rate Fee
	C. Multiply line B by 3.000 and enter here	_	Dase Rate Fee
	D. Enter 0.00330 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here \$		
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$\$\$\$\$\$\$\$\$	0.00	
	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca: I be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channe G.	0	9
receipt exclusi First: I station DSEs	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee s from subscribers located within the station's local service area, from your system's total gross receipts. To take acon, you must: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	dvantage of this of the same the number of	Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for
also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in pumpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B becable system is wholly located outside all major television markets, complete block A only.	, ,	Partially Distant Stations, and
Step 1	Didentify a Subscriber Group for Partially Distant Stations For each community served, determine the local service area of each wholly distant and each partially distant stat to that community.	ion you	for Partially Permitted Stations
outside	: For each wholly distant and each partially distant station you carried, determine which of your subscribers were loo the station's local service area. A subscriber located outside the local service area of a station is distant to that state the token, the station is distant to the subscriber.)		
subscr	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. iber 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.		
Comp	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system.	em's subscriber	
In each Identi Give	n section: fy the communities/areas represented by each subscriber group. the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all ibers in the group.	of the	
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in schedule; or,	n parts 2, 3, and	
2) any	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b 6 of this schedule.	lock B,	
•	the DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in expaper SA3 form.	nstructions	
page. DSEs t	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the for that group's complement of stations and total gross receipts from the subscribers in that group). You do not nee calculations on the form.	at is, the total	

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

	d (Penn)						007902	
				TE FEES FOR EA				
	FIRST	SUBSCRIBER GRO	UP		SECOND S	SUBSCRIBER GROU	JP	^
COMMUNITY/ AREA	1/Cumb	erland, Allegany	Cnty, Ca	COMMUNITY/ ARE	EA 2/Cumbe	rland Valley, Loi	ndonderry,	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
WJZ	0.25			WDCA	1.00			Base Rate F
WNPB	0.25							and
				WJLA	0.25			Syndicate
				WNPB	0.25			Exclusivit
				WTTG	0.25			Surcharge
								for
			••••					Partially
			••••					Distant
								Stations
			••••••					
			••••••					
								
	 							
Total DCF-			0.50	Total DOC-			4.75	
otal DSEs			0.50	Total DSEs			1.75	
Gross Receipts First G	roup	\$ 2,89	0,541.45	Gross Receipts Se	cond Group	\$	79,641.74	
							l	
Base Rate Fee First G						\$		
COMMUNITY/ AREA	THIRD	SUBSCRIBER GRO		Base Rate Fee Se	FOURTH S	SUBSCRIBER GROU		
	THIRD 3/South	SUBSCRIBER GRO	UP erset)	COMMUNITY/ ARE	FOURTH S	SUBSCRIBER GROU	JP rd)	
CALL SIGN	THIRD 3/South	SUBSCRIBER GRO	UP	COMMUNITY/ ARE	FOURTH S EA 4/South F	SUBSCRIBER GROU	JP	
CALL SIGN WJLA	THIRD 3/South DSE 0.25	SUBSCRIBER GRO	UP erset)	COMMUNITY/ ARE	FOURTH S A/South F DSE 0.25	SUBSCRIBER GROU	JP rd)	
CALL SIGN WJLA WDCA	THIRD 3/South DSE 0.25 1.00	SUBSCRIBER GRO	UP erset)	COMMUNITY/ ARE	FOURTH S EA 4/South F	SUBSCRIBER GROU	JP rd)	
CALL SIGN WJLA WDCA WDCW	THIRD 3/South DSE 0.25 1.00 1.00	SUBSCRIBER GRO	UP erset)	COMMUNITY/ ARE	FOURTH S A/South F DSE 0.25	SUBSCRIBER GROU	JP rd)	
CALL SIGN NJLA NDCA NDCW	THIRD 3/South DSE 0.25 1.00 1.00 0.25	SUBSCRIBER GRO	UP erset)	COMMUNITY/ ARE	FOURTH S A/South F DSE 0.25	SUBSCRIBER GROU	JP rd)	
CALL SIGN WJLA WDCA WDCW WJZ WNPB	THIRD 3/South DSE 0.25 1.00 1.00 0.25 0.25	SUBSCRIBER GRO	UP erset)	COMMUNITY/ ARE	FOURTH S A/South F DSE 0.25	SUBSCRIBER GROU	JP rd)	
CALL SIGN WJLA WDCA WDCW WJZ WNPB WTTG	THIRD 3/South DSE 0.25 1.00 1.00 0.25 0.25 0.25	SUBSCRIBER GRO	UP erset)	COMMUNITY/ ARE	FOURTH S A/South F DSE 0.25	SUBSCRIBER GROU	JP rd)	
CALL SIGN WJLA WDCA WDCW WJZ WNPB WTTG	THIRD 3/South DSE 0.25 1.00 1.00 0.25 0.25	SUBSCRIBER GRO	UP erset)	COMMUNITY/ ARE	FOURTH S A/South F DSE 0.25	SUBSCRIBER GROU	JP rd)	
CALL SIGN WJLA WDCA WDCW WJZ WNPB WTTG	THIRD 3/South DSE 0.25 1.00 1.00 0.25 0.25 0.25	SUBSCRIBER GRO	UP erset)	COMMUNITY/ ARE	FOURTH S A/South F DSE 0.25	SUBSCRIBER GROU	JP rd)	
CALL SIGN WJLA WDCA WDCW WJZ WNPB WTTG	THIRD 3/South DSE 0.25 1.00 1.00 0.25 0.25 0.25	SUBSCRIBER GRO	UP erset)	COMMUNITY/ ARE	FOURTH S A/South F DSE 0.25	SUBSCRIBER GROU	JP rd)	
COMMUNITY/ AREA CALL SIGN WJLA WDCA WDCW WJZ WNPB WTTG WUSA	THIRD 3/South DSE 0.25 1.00 1.00 0.25 0.25 0.25	SUBSCRIBER GRO	UP erset)	COMMUNITY/ ARE	FOURTH S A/South F DSE 0.25	SUBSCRIBER GROU	JP rd)	
CALL SIGN WJLA WDCA WDCW WJZ WNPB WTTG	THIRD 3/South DSE 0.25 1.00 1.00 0.25 0.25 0.25	SUBSCRIBER GRO	UP erset)	COMMUNITY/ ARE	FOURTH S A/South F DSE 0.25	SUBSCRIBER GROU	JP rd)	
CALL SIGN WJLA WDCA WDCW WJZ WNPB WTTG	THIRD 3/South DSE 0.25 1.00 1.00 0.25 0.25 0.25	SUBSCRIBER GRO	UP erset)	COMMUNITY/ ARE	FOURTH S A/South F DSE 0.25	SUBSCRIBER GROU	JP rd)	
CALL SIGN WJLA WDCA WDCW WJZ WNPB	THIRD 3/South DSE 0.25 1.00 1.00 0.25 0.25 0.25	SUBSCRIBER GRO	UP erset)	COMMUNITY/ ARE	FOURTH S A/South F DSE 0.25	SUBSCRIBER GROU	JP rd)	
CALL SIGN NJLA NDCA NDCW NJZ NNPB	THIRD 3/South DSE 0.25 1.00 1.00 0.25 0.25 0.25	SUBSCRIBER GRO	UP erset)	COMMUNITY/ ARE	FOURTH S A/South F DSE 0.25	SUBSCRIBER GROU	JP rd)	
CALL SIGN NJLA NDCA NDCW NJZ NNPB	THIRD 3/South DSE 0.25 1.00 1.00 0.25 0.25 0.25	SUBSCRIBER GRO	DSE	COMMUNITY/ ARE	FOURTH S A/South F DSE 0.25	SUBSCRIBER GROU	DSE	
CALL SIGN WJLA WDCA WDCW WJZ WNPB WTTG WUSA	THIRD 3/South DSE 0.25 1.00 1.00 0.25 0.25 0.25	SUBSCRIBER GRO	UP erset)	COMMUNITY/ ARE	FOURTH S A/South F DSE 0.25	SUBSCRIBER GROU	JP rd)	
CALL SIGN WJLA WDCA WDCW WJZ WNPB WTTG	THIRD 3/South DSE 0.25 1.00 1.00 0.25 0.25 0.25 0.25	SUBSCRIBER GRO Hampton (Some	DSE	COMMUNITY/ ARE CALL SIGN WJLA WNPB	DSE 0.25 0.25	SUBSCRIBER GROU	DSE	
CALL SIGN WJLA WDCA WDCW WJZ WNPB WTTG WUSA	THIRD 3/South DSE 0.25 1.00 1.00 0.25 0.25 0.25 0.25	SUBSCRIBER GRO Hampton (Some	DSE DSE 3.25	COMMUNITY/ ARE CALL SIGN WJLA WNPB Total DSEs	DSE 0.25 0.25	CALL SIGN	DSE DSE O.50	
CALL SIGN VJLA VDCA VDCW VJZ VNPB VTTG VUSA	THIRD 3/South DSE 0.25 1.00 1.00 0.25 0.25 0.25 0.25	SUBSCRIBER GRO Hampton (Some	DSE DSE 3.25	COMMUNITY/ ARE CALL SIGN WJLA WNPB Total DSEs	DSE 0.25 0.25 0.25 urth Group	CALL SIGN	DSE DSE O.50	

	EGAL NAME OF OWNER OF CABLE SYSTEM: ## SYSTEM ID# ## 107902									
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EACH	I SUBSCR	BER GROUP				
		SUBSCRIBER GROU				SUBSCRIBER GROU	Р	•		
COMMUNITY/ AREA	5/Hamp	shire, Ridgeley, I	Romney	COMMUNITY/ AREA			0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
WJZ	0.25							Base Rate Fee		
WNPB	0.25							and		
								Syndicated		
								Exclusivity		
								Surcharge		
								for		
								Partially		
								Distant		
								Stations		
		-								
			<u> </u>			-				
	<u></u>									
Total DSEs			0.50	Total DSEs			0.00			
Gross Receipts First G	roup	\$ 166	,385.47	Gross Receipts Secon	nd Group	\$	0.00			
•										
Base Rate Fee First G	roup	\$	885.17	Base Rate Fee Secon	nd Group	\$	0.00			
	SEVENTH	SUBSCRIBER GROU	JP							
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
			<mark></mark>							
		-								
		-	<mark></mark>		 					
			<mark></mark>		 					
			<u>-</u>							
			······································							
			·		···					
					••••••••••					
					···					
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00			
Base Rate Fee: Add the Enter here and in block			iber group a	II	bove.	\$				

LEGAL NAME OF OWNE Atlantic Broadban						S	007902	Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	BER GROUP		
	NINTH	SUBSCRIBER GRO	UP		TENTH	SUBSCRIBER GROU	IP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
	···		····			H		Surcharge
								for
								Partially
								Distant
								Stations
					•••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
E	LEVENTH	SUBSCRIBER GRO	UP					
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						 		
	···		····					
	···		···					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	•							
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block	e base rat e 3, line 1, s	e fees for each subso pace L (page 7)	criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN Atlantic Broadba						\$	007902	Name	
	BLOCK A:	COMPUTATION	OF BASE RA	ATE FEES FOR EAC					
Т		SUBSCRIBER GRO		TT .		SUBSCRIBER GROU	JP	9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
07.22 0.0.1	2 3 2	07.22 070.1	332	07.122 07011	332	07.122.01011	202	Base Rate F	
								and	
								Syndicate	
								Exclusivit	
								Surcharge	
								for	
		-						Partially	
								Distant Stations	
		H						Stations	
		<u> </u>	····			 			
otal DSEs			0.00	Total DSEs			0.00		
iross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
									
ase Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
	FIFTEENTH	SUBSCRIBER GRO	DUP		SIXTEENTH	SUBSCRIBER GROU	JP		
OMMUNITY/ AREA			0	COMMUNITY/ AREA	0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		<u> </u>				<u> </u>			
		-							
		H				 			
		H				<u> </u>			
otal DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
sase Rate Fee: Add	the base rat	e fees for each subs	criber group a	as shown in the boxes	above.				
nter here and in blo			ŭ i			\$			

LEGAL NAME OF OWNER Atlantic Broadband						S	YSTEM ID# 007902	Name
В	SLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRIE	BER GROUP		
SEVE	NTEENTH	SUBSCRIBER GROU	IP	EIC	GHTEENTH	SUBSCRIBER GROU	Р	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DSL	CALL SIGN	DSL	CALL SIGN	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
					·			
					-			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
NII	NTEENTH	SUBSCRIBER GROU	IP	Т	WENTIETH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					-			
			• • • • • • • • • • • • • • • • • • • •					
					-			
					-			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	us shown in the boxes ab	ove.	\$		

EGAL NAME OF OWN Atlantic Broadba						\$	007902	Name	
	BLOCK A:	COMPUTATION	OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP			
TW		SUBSCRIBER GRO		П		SUBSCRIBER GROU	JP	9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
O/ IEE O/O/I	DOL	O/ IEE OF IT	562	O/ LEE GIGIT	BOL	O/ LEE GIGIT	562	Base Rate F	
								and	
								Syndicate	
								Exclusivity	
								Surcharge	
								for	
		-						Partially	
								Distant Stations	
		H						Stations	
		<u> </u>	····			 			
		Щ							
otal DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
ase Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
TWE	ENTY-THIRD	SUBSCRIBER GRO	DUP	TWEN					
OMMUNITY/ AREA			0	COMMUNITY/ AREA	0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						<u> </u>			
		-							
		H				 			
		H				H			
						H			
otal DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
				<u> </u>					
			criber group a	as shown in the boxes	above.				
nter here and in blo	ck 3, line 1, s	pace L (page 7)				\$			

LEGAL NAME OF OW Atlantic Broadb						S	007902	Name
TW		COMPUTATION C		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee and
								Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	: Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	: Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				Ш				
Base Rate Fee: Add Enter here and in blo			criber group a	s shown in the boxes a	above.	\$		

EGAL NAME OF OWNER Atlantic Broadban						\$	SYSTEM ID# 007902	Name
E	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α	0		9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate F
								and
								Syndicated
								Exclusivity
		H						Surcharge
								for
								Partially
								Distant
								Stations
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THIR	TY-FIRST	SUBSCRIBER GRO	UP	THIF	RTY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	••••••••••••	H	···					
			····					
			····				······	
		<u> </u>						
			···					
			···					
		H	···					
otal DSEs	_		0.00	Total DSEs	'		0.00	
Gross Receints Third G	roup	\$		Gross Receints Fou	rth Group	\$	0.00	
	. 5 4P	-	0.00	J. 555 Rescipts Fou	Стоир	*	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Fotal DSEs Gross Receipts Third G Base Rate Fee Third G Base Rate Fee: Add the Enter here and in block	roup e base rat e	e fees for each subsc	0.00	Gross Receipts Fou	rth Group	\$ \$	0.00	

LEGAL NAME OF OWN Atlantic Broadba						\$	007902	Name
				TE FEES FOR EAC				
TH COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	i i		SUBSCRIBER GROU	JP 0	9
COMMUNITY/ AREA			<u> </u>	COMMUNITY/ AREA				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
			0.00					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TH	IIRTY-FIFTH	SUBSCRIBER GRO		Т	HIRTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						 		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	II	above.	\$		

Name	YSTEM ID# 007902	S						LEGAL NAME OF OWNER Atlantic Broadband
		BER GROUP	SUBSCRIF	TE FEES FOR EACH	BASE RA	COMPUTATION C	BLOCK A	P
	IP	SUBSCRIBER GROU				SUBSCRIBER GRO		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computation	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F	302	07.122 0.011	552	0.122 0.011		07.22 0.0.1	302	0,122 0.011
and								
Syndicated								
Exclusivity								
Surcharge								
for								
Partially								
Distant								
Stations		-						
			_					
			.					
							<u>-</u>	
								
			 				 	
-			<u> </u>					
-	0.00	-		Total DSEs	0.00			otal DSEs
-	0.00	\$	d Group	Gross Receipts Second	0.00	\$	roup	Fross Receipts First Gr
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	roup	ase Rate Fee First Gr
	IP	SUBSCRIBER GROU	FORTIETH		IP	SUBSCRIBER GRO	TY-NINTH	THIR'
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
<u></u>	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						<u> </u>		
								
							<u>-</u>	
								
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			†					
	0.00			Total DSEs	0.00			otal DSEs
- -	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	<u>\$</u>	Group	otal DSEs Gross Receipts Third G

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 007902								Name
	BLOCK A:	COMPUTATION (OF BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO		П		SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O/ IEE OIGIT	502	O/ LEE OF OTT	562	O/ LEE OF OTT	562	ON LEE GIGIT	562	Base Rate F
								and
								Syndicate
								Exclusivit
								Surcharge
								for
								Partially
								Distant
								Stations
						H		
		 				-		
		 				-		
		Щ						
otal DSEs			0.00	Total DSEs			0.00	
Fross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FO	RTY-THIRD	SUBSCRIBER GRO	DUP	FOF	RTY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u> </u>		
		-					······	
			····					
		H	····			-		
		H						
	••••		····			 		
		<u> </u>				-		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add t			criber group a	as shown in the boxes	above.	s		

FORTY-FIFTH SUE	CALL SIGN	0.00 0.00	COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Secon Base Rate Fee Secon	DSE DSE	SUBSCRIBER GROUP CALL SIGN \$ \$	0.00 0.00 0.00	Computation of Base Rate Fand Syndicated Exclusivity Surcharge for Partially Distant Stations
Total DSEs Gross Receipts First Group FORTY-FIFTH SUE FORTY-FIFTH SUE FORTY-SEVENTH SUE	CALL SIGN	0.00 0.00	CALL SIGN CALL SIGN Total DSEs Gross Receipts Secon Base Rate Fee Secon	DSE DSE	CALL SIGN Subscriber Group	0.00 0.00	of Base Rate F and Syndicate Exclusivit Surcharge for Partially Distant
CALL SIGN DSE COMMENT OF THE PROPERTY OF THE P		0.00 0.00	Total DSEs Gross Receipts Secon Base Rate Fee Secon	d Group	\$	0.00 0.00	of Base Rate F and Syndicate Exclusivit Surcharge for Partially Distant
Total DSEs Gross Receipts First Group \$ FORTY-SEVENTH SUE		0.00	Total DSEs Gross Receipts Secon Base Rate Fee Secon	d Group	\$	0.00	of Base Rate F and Syndicate Exclusivit Surcharge for Partially Distant
Total DSEs Gross Receipts First Group \$ FORTY-SEVENTH SUE		0.00	Total DSEs Gross Receipts Secon Base Rate Fee Secon	d Group	\$	0.00	Base Rate F and Syndicate Exclusivity Surcharge for Partially Distant
Gross Receipts First Group \$ Base Rate Fee First Group \$ FORTY-SEVENTH SUE	BSCRIBER GROUF	0.00	Gross Receipts Secon Base Rate Fee Secon			0.00	Syndicated Exclusivity Surcharged for Partially Distant
Gross Receipts First Group \$ Base Rate Fee First Group \$ FORTY-SEVENTH SUE	BSCRIBER GROUF	0.00	Gross Receipts Secon Base Rate Fee Secon			0.00	Exclusivity Surcharge for Partially Distant
Gross Receipts First Group \$ Base Rate Fee First Group \$ FORTY-SEVENTH SUE	BSCRIBER GROUF	0.00	Gross Receipts Secon Base Rate Fee Secon			0.00	Surcharge for Partially Distant
Gross Receipts First Group \$ Base Rate Fee First Group \$ FORTY-SEVENTH SUE	BSCRIBER GROUF	0.00	Gross Receipts Secon Base Rate Fee Secon			0.00	for Partially Distant
Gross Receipts First Group \$ Base Rate Fee First Group \$ FORTY-SEVENTH SUE	BSCRIBER GROUF	0.00	Gross Receipts Secon Base Rate Fee Secon			0.00	Partially Distant
Gross Receipts First Group \$ Gase Rate Fee First Group \$ FORTY-SEVENTH SUE	BSCRIBER GROUF	0.00	Gross Receipts Secon Base Rate Fee Secon			0.00	Distant
Gross Receipts First Group \$ Gase Rate Fee First Group \$ FORTY-SEVENTH SUE	BSCRIBER GROUF	0.00	Gross Receipts Secon Base Rate Fee Secon			0.00	
iross Receipts First Group \$ sase Rate Fee First Group \$ FORTY-SEVENTH SUE	BSCRIBER GROUF	0.00	Gross Receipts Secon Base Rate Fee Secon			0.00	Stations
Gross Receipts First Group \$ Gase Rate Fee First Group \$ FORTY-SEVENTH SUE	BSCRIBER GROUF	0.00	Gross Receipts Secon Base Rate Fee Secon			0.00	
Gross Receipts First Group \$ Gase Rate Fee First Group \$ FORTY-SEVENTH SUE	BSCRIBER GROUP	0.00	Gross Receipts Secon Base Rate Fee Secon			0.00	
Gross Receipts First Group \$ Gase Rate Fee First Group \$ FORTY-SEVENTH SUE	BSCRIBER GROUP	0.00	Gross Receipts Secon Base Rate Fee Secon			0.00	
Gross Receipts First Group \$ Gase Rate Fee First Group \$ FORTY-SEVENTH SUE	BSCRIBER GROUP	0.00	Gross Receipts Secon Base Rate Fee Secon			0.00	
Gross Receipts First Group \$ Base Rate Fee First Group \$ FORTY-SEVENTH SUE	BSCRIBER GROUP	0.00	Gross Receipts Secon Base Rate Fee Secon			0.00	
Gross Receipts First Group \$ Gase Rate Fee First Group \$ FORTY-SEVENTH SUE	BSCRIBER GROUP	0.00	Gross Receipts Secon Base Rate Fee Secon			0.00	
FORTY-SEVENTH SUE	BSCRIBER GROUP	0.00	Base Rate Fee Secon				
FORTY-SEVENTH SUE	BSCRIBER GROUP	•		d Group	\$	0.00	
FORTY-SEVENTH SUE	BSCRIBER GROUF	•		d Group	\$	0.00	
	BSCRIBER GROUF)	EOD.				
OMMUNITY/ AREA			II FUR	TY-EIGHTH	SUBSCRIBER GROUP	P	
		0	COMMUNITY/ AREA			0	
CALL SIGN DSE C	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				 			
							
				-			
							
				<u> </u>			
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group		0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Group \$		0.00	Base Rate Fee Fourth	ı Group	\$	0.00	

902 Name	SYSTEM ID# 007902	S						LEGAL NAME OF OWNE Atlantic Broadban
		BER GROUP	SUBSCRI	TE FEES FOR EACH	F BASE RA	COMPUTATION C	BI OCK A	F
	ROUP	SUBSCRIBER GROU				SUBSCRIBER GRO		
0 9	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
SE Computation	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and					-			
Syndicate								
Exclusivit								
Surcharge								
for								
Partially								
Distant								
Stations			<u>.</u>		<mark></mark>		<u> </u>	
					···			
					<u></u>			
.00_	0.00			Total DSEs	0.00			otal DSEs
.00	0.00	\$	d Group	Gross Receipts Second	0.00	\$	roup	Gross Receipts First Gr
								
.00	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	ase Rate Fee First Gr
	ROUP	SUBSCRIBER GROU	Y-SECOND	FIFT	JP	SUBSCRIBER GRO	FTY-FIRST	FIF
0	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
SE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
					<u> </u>			
					<mark></mark>			
					<u> </u>			
					<u>.</u>			
			<u> </u>					
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	otal DSEs Gross Receipts Third G

LEGAL NAME OF OWN Atlantic Broadba						\$	007902	Name
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
F		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
0.122 0.0.1	332	07.22 5.5.1	332	07.22 5.5.1	332	07.122.01.01.1	202	Base Rate F
								and
								Syndicate
								Exclusivit
								Surcharge
								for
								Partially
								Distant Stations
								Stations
			····			 		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
F	IFTY-FIFTH	SUBSCRIBER GRO	DUP		FIFTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		<u> </u>				<u> </u>		
						 		
								
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Foul	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t	the base rat	e fees for each subs	criber group a	as shown in the boxes	above.			
Base Rate Fee: Add to Enter here and in blood			criber group a	as shown in the boxes	above.	\$		

•			S						EGAL NAME OF OWNER Atlantic Broadbane
COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP			BER GROUP	SUBSCRIE	TE FEES FOR EACH	BASE RA	COMPUTATION C	BLOCK A:	
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LEGAL NAME OF OW Atlantic Broadb						S	007902	Name
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LEGAL NAME OF OWNI Atlantic Broadba						\$	007902	Name
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LEGAL NAME OF OWN Atlantic Broadb a						•	007902	Name
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	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	ase Rate Fee First Gro
	IP	SUBSCRIBER GROU	FOURTH	ONE HUNDREI	Р	SUBSCRIBER GRO	ED THIRD	ONE HUNDRE
-	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
			·····				<u></u>	
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•								
			<u> </u>					
			ļ				<mark></mark>	
			ļļ				<u>.</u>	
			 					
-				Total DSEs	0.00			otal DSEs
-	0.00							o.u 2 0 2 0
-	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	roup	ross Receipts Third G

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSITION ONE HUNDRED FIFTH SUBSCRIBER GROUP ONE HUNDRED SIX COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	CRIBER GROUP XTH SUBSCRIBER GROUP 0	
COMMUNITY/ AREA 0 COMMUNITY/ AREA		•
	0	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE		9 Computation
	CALL SIGN DSE	of
	OTEL SIGN	Base Rate F
		and
		Syndicated
		Exclusivity
		Surcharge
		for
		Partially
		Distant Stations
		Stations
	·····	
otal DSEs 0.00 Total DSEs	0.00	
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group	\$ 0.00	
ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group	\$ 0.00	
ONE HUNDRED SEVENTH SUBSCRIBER GROUP ONE HUNDRED EIGH	HTH SUBSCRIBER GROUP	
COMMUNITY/ AREA 0 COMMUNITY/ AREA	0	
CALL SIGN DSE CALL SIGN DSE	CALL SIGN DSE	
	······	
	······	
otal DSEs 0.00 Total DSEs	0.00	
	\$ 0.00	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group	\$ 0.00	
	\$ 0.00	

EGAL NAME OF OWNE Atlantic Broadbar						\$	007902	Name
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDI	RED NINTH	SUBSCRIBER GRO)UP	ONE HUNI	DRED TENTH	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	·····		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation
								Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
						<u> </u>		for
			····			 		Partially Distant
	·····	 	····			-		Stations
		H	····			 		
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First G	Group	\$	0.00	Base Rate Fee Second	ond Group	\$	0.00	
ONE HUNDRED	ELEVENTH	SUBSCRIBER GRO)UP	ONE HUNDRE	D TWELVTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····					
						-		
		H				H		
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts Third	Group	\$	0.00	Gross Receipts Fou	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t			criber group a	s shown in the boxes	above.	\$		

LEGAL NAME OF OWN Atlantic Broadba						\$	007902	Name
ONE HUNDRED T		COMPUTATION C SUBSCRIBER GRO		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge for
								Partially
								Distant Stations
			···					
Total DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
ONE HUNDRED COMMUNITY/ AREA		SUBSCRIBER GRO	<u>0</u>	ONE HUNDRED		SUBSCRIBER GROU	JP 0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			0.00				0.00	
Total DSEs Gross Receipts Third	Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	
C.000 Roodpio Hillu	Этоир	•	0.50	Siese Rescipts i ou	Стоир	*		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Enter here and in blo			criber group a	s shown in the boxes	apove.	\$		

	YSTEM ID# 007902	S					ER OF CABLE nd (Penn)	Atlantic Broadban
				TE FEES FOR EACH				
9	0	SUBSCRIBER GROU	SHTEENTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	ENTEENTH	ONE HUNDRED SEVE COMMUNITY/ AREA
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and Syndicated					<u></u>			
Exclusivity								
Surcharge								
for								
Partially Distant		<u> </u>						
Stations								
		-						
					<u></u>			
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	Group	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	sase Rate Fee First G
	IP	SUBSCRIBER GROU	WENTIETH	ONE HUNDRED T	JP	SUBSCRIBER GRO	IINTEENTH	ONE HUNDRED NI
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
							•••••	
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Fotal DSEs Gross Receipts Third G

							R OF CABLE d (Penn)	Atlantic Broadban
1		BER GROUP	SUBSCRIE	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	E
_		SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED TWENT	JP	SUBSCRIBER GROU	NTY-FIRST	ONE HUNDRED TWE
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computation	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F	DOL	OF REE STORY	DOL	CALL GIGIT	BOL	O/ LEE GIGIT	DOL	OTTEL CICIT
and					*			
Syndicated						-		
Exclusivity								
Surcharge								
for								
Partially					<u>.</u>			
Distant								
Stations					<u>.</u>			
								
			 		<u>.</u>			
		-	 		<u>-</u>		<u> </u>	
					<u> </u>			
			 		<u>-</u>		<u>-</u>	
			<u> </u>					
	0.00			Total DSEs	0.00			otal DSEs
_	0.00	\$	d Group	Gross Receipts Second	0.00	\$	roup	Bross Receipts First Gr
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	roup	ase Rate Fee First Gr
		SUBSCRIBER GROUP	ΓY-FOURTH	ONE HUNDRED TWENT		SUBSCRIBER GROUP	NTY-THIRD	ONE HUNDRED TWEN
)	COMMUNITY/ AREA 0			0			COMMUNITY/ AREA	
 	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
					<u>. </u>	-		
								
								
			†·····					
	0.00			Total DSEs	0.00			otal DSEs
_	0.00			Total DSEs	0.00			
_	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Fotal DSEs Gross Receipts Third G

9 Computation							R OF CABLE d (Penn)	Atlantic Broadban
	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED TWENTY-FIFTH SUBSCRIBER GROUP ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP							
	0	SUBSCRIBER GROUP	NTY-SIXTH	ONE HUNDRED TWE	0	SUBSCRIBER GROUP	NTY-FIFTH	ONE HUNDRED TWE
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and Syndicate								
Exclusivit								
Surcharg								
for Partially								
Distant								
Stations								
	0.00	! !	!	Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00			
			·				•	·
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First Gr
]		SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN		SUBSCRIBER GROUP	-SEVENTH	NE HUNDRED TWENTY
	COMMUNITY/ AREA 0				0			COMMUNITY/ AREA
-	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	·····		†					
					• • • • • • • • • • • • • • • • • • • •			
	0.00			Total DSEs	0.00			Fotal DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 007902								
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED TV	VENTY-NINTH	SUBSCRIBER GROUP)	ONE HUNDR	ED THIRTIETH	SUBSCRIBER GROUP		^
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
			<u></u>					and
						<u> </u>		Syndicated
						-		Exclusivity Surcharge
								for
								Partially
						<u> </u>		Distant
								Stations
						<u> </u>		
			···					
			···					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	oss Receipts First Group \$ 0.00			Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED	THIRTY-FIRST	SUBSCRIBER GROUP)	ONE HUNDRED TH	IRTY-SECOND	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
	•••••		···					
						-		
			<u></u>			H		
			···					
			<mark></mark>					
Total DSEs	1	-	0.00	Total DSEs	1		0.00	
Gross Receipts Third	d Group		0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group a	II	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 007902								
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP		
ONE HUNDRED THIS	RTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED THIS	RTY-FOURTH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<u></u>							Base Rate Fee
								and
								Syndicated Exclusivity
						-		Surcharge
	······································	+				-		for
								Partially
								Distant
								Stations
								
						<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	ross Receipts First Group \$ 0.00				nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second Group \$ 0.00				
ONE HUNDRED THI	RTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED TH	HIRTY-SIXTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···					-		
	······································					 		
								
	 				···	H		
		H						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Barris Barris Francis I Co			0.00	B B. t. F F II				
Base Rate Fee Third G	ιουμ	3	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes at	oove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC SYSTEM ID# 007902								Name
				TE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED THIRT	Y-SEVENTH	SUBSCRIBER GROUP		11		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
						-		Syndicated
								Exclusivity Surcharge
			···					for
								Partially
								Distant
						<u> </u>		Stations
						H		
		<u> </u>				H		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	oss Receipts First Group \$ 0.00				Gross Receipts Second Group \$ 0.00			
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED TH	IRTY-NINTH	SUBSCRIBER GROUP)	ONE HUNDRE	D FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····					
						-		
						<u> </u>		
			···					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 007902								
	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP		
ONE HUNDRED FO	RTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED FOR	TY-SECOND	SUBSCRIBER GROUP		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
								and
						<u> </u>		Syndicated
		-				H		Exclusivity Surcharge
	···			-				for
	···	+				 	····	Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
-	•							
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FO	RTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED FOR	RTY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA	NITY/ AREA 0			COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u> </u>		
					···	H		
						 		
						-		
						-		
						<u> </u>		
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	II as shown in the boxes ab	oove.	\$		

		LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 007902							
		BER GROUP	SUBSCRIE	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	E	
	ı	SUBSCRIBER GROUP	RTY-SIXTH	ONE HUNDRED FO		SUBSCRIBER GROUP	ORTY-FIFTH	ONE HUNDRED FO	
9 Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate I									
and									
Syndicate									
Exclusivit									
Surcharg									
for									
Partially									
Distant									
Stations									
			-						
					<u>.</u>		<u> </u>		
			 		<u>-</u>				
.			 		<u> </u>				
	0.00	<u> </u>	<u> </u>	T	0.00				
	0.00			Total DSEs	0.00			otal DSEs	
	0.00 Gross Receipts Second Group \$ 0.00				\$	Group	Gross Receipts First Gr		
	0.00 Base Rate Fee Second Group \$ 0.00				\$	Group	Base Rate Fee First Gr		
4	· ·					ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP			
		SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FOR			•	ONE HUNDRED FORTY	
=	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FOR	0		•	ONE HUNDRED FORTY	
	_	SUBSCRIBER GROUP CALL SIGN	TY-EIGHTH		O DSE		•		
	0			COMMUNITY/ AREA		SUBSCRIBER GROUP	Y-SEVENTH	COMMUNITY/ AREA	
	0			COMMUNITY/ AREA		SUBSCRIBER GROUP	Y-SEVENTH	COMMUNITY/ AREA	
	0			COMMUNITY/ AREA		SUBSCRIBER GROUP	Y-SEVENTH	COMMUNITY/ AREA	
	0			COMMUNITY/ AREA		SUBSCRIBER GROUP	Y-SEVENTH	COMMUNITY/ AREA	
	0			COMMUNITY/ AREA		SUBSCRIBER GROUP	Y-SEVENTH	COMMUNITY/ AREA	
	0			COMMUNITY/ AREA		SUBSCRIBER GROUP	Y-SEVENTH	COMMUNITY/ AREA	
	0			COMMUNITY/ AREA		SUBSCRIBER GROUP	Y-SEVENTH	COMMUNITY/ AREA	
	0			COMMUNITY/ AREA		SUBSCRIBER GROUP	Y-SEVENTH	COMMUNITY/ AREA	
	0			COMMUNITY/ AREA		SUBSCRIBER GROUP	Y-SEVENTH	COMMUNITY/ AREA	
	0			COMMUNITY/ AREA		SUBSCRIBER GROUP	Y-SEVENTH	COMMUNITY/ AREA	
	0			COMMUNITY/ AREA		SUBSCRIBER GROUP	Y-SEVENTH	COMMUNITY/ AREA	
	0			COMMUNITY/ AREA		SUBSCRIBER GROUP	Y-SEVENTH	COMMUNITY/ AREA	
	0			COMMUNITY/ AREA		SUBSCRIBER GROUP	Y-SEVENTH	COMMUNITY/ AREA	
	DSE			CALL SIGN	DSE	SUBSCRIBER GROUP	Y-SEVENTH	CALL SIGN	
	0 DSE		DSE	CALL SIGN CALL SIGN Total DSEs	DSE	SUBSCRIBER GROUP	Y-SEVENTH	CALL SIGN	
	DSE		DSE	CALL SIGN	DSE	SUBSCRIBER GROUP	y-seventh DSE	COMMUNITY/ AREA	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 007902								
				TE FEES FOR EAC				
ONE HUNDRED FOR COMMUNITY/ AREA	RTY-NINTH	SUBSCRIBER GRO	UP 0	ONE HUNDR		SUBSCRIBER GROU	JP 0	9
OOMMONT 1774 CER				CONNICION 17 7 A CE				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	····		····					Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge for
		H						Partially
								Distant
								Stations
			····					
Total DSEs		Ш	0.00	Total DSEs			0.00	
Gross Receipts First G				Gross Receipts Seco	ond Group	\$	0.00	
·	•							
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	FTY-FIRST	SUBSCRIBER GRO				SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····					
Total DSEs			0.00	Total DSEs			0.00	
	0				th. C			
Gross Receipts Third	Group	<u>\$</u>	0.00	Gross Receipts Four	ui Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				II				
Base Rate Fee: Add t Enter here and in bloc			criber group a	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNE Atlantic Broadba n						\$	007902	Name
		COMPUTATION C		ATE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe and
								Syndicated
			····					Exclusivity Surcharge
								for
								Partially
								Distant Stations
			····					
Total DSEs		<u> </u>	0.00	Total DSEs		Ц	0.00	
Gross Receipts First G				Gross Receipts Seco	ond Group	\$	0.00	
•	·				•	·		
Base Rate Fee First G	roup	\$	0.00 Base Rate Fee Second Group \$ 0.00					
	FTY-FIFTH	SUBSCRIBER GRO		ii -		SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····					
			····					
			····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Add th	ne base rat			Base Rate Fee Four	· 	\$	0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 007902								Name
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED FIFT	Y-SEVENTH	SUBSCRIBER GROU	P	ONE HUNDRED I	IFTY-EIGHTH	SUBSCRIBER GROUP		^
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of
CALL CICIT	562	OF ILL STOTA	DOL	O'ALL SIGIV	BOL	OF ILLE STORY	562	Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
		<u> </u>						Distant Stations
		H						Stations
		 						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First C	ss Receipts First Group \$ 0.00			Gross Receipts Seco	ond Group	\$	0.00	
								
Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.0				0.00				
ONE HUNDRED F	IFTY-NINTH	SUBSCRIBER GROU	P	ONE HUNDI	RED SIXTIETH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u>.</u>							
		-						
		<u> </u>						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Danie Bate Est Till 1	0		0.00	Base Bate 5 - 5	41- 0-		0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	ui Group	\$	0.00	
Base Rate Fee: Add t			criber group a	s shown in the boxes a	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC SYSTEM ID# 007902								Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EACH	SUBSCRIE	BER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA	1/Cumb	perland, Allegany	Cnty, Ca	COMMUNITY/ AREA	2/Cumbe	rland Valley, Lo	ndonderry,	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				WDCW	1.00			Base Rate Fee
				WJZ	0.25			and
				WUSA	0.25			Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
			<u> </u>					
Total DSEs			0.00	Total DSEs	<u> </u>		1.50	
Gross Receipts First G	pss Receipts First Group \$ 2,890,541.45			Gross Receipts Secon	d Group	\$	79,641.74	
Base Rate Fee First G	Base Rate Fee First Group \$ 0.00			Base Rate Fee Secon	d Group	\$	4,479.85	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	3/South	n Hampton (Some	erset)	COMMUNITY/ AREA 4/South Hampton (Bedford)				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				WDCW	1.00			
Total DSEs		_	0.00	Total DSEs	1		1.00	
Gross Receipts Third C	Group	<u>\$</u> 18	,280.80	Gross Receipts Fourth	Group	\$	11,496.93	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	ı Group	\$	431.13	
Base Rate Fee: Add th	ne base rate	e fees for each subsci	riber group a	II as shown in the boxes ab	pove.			
Enter here and in block			U			\$	4,910.98	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 007902								
E				TE FEES FOR EAC				
		SUBSCRIBER GROU				H SUBSCRIBER GROU		9
COMMUNITY/ AREA	5/Hamp	oshire, Ridgeley, I	Romney	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<mark></mark>					Base Rate Fee
	<u></u>		<mark></mark>					and
								Syndicated Exclusivity
			<mark></mark>					Surcharge
	<u></u>							for
			<u></u>					Partially
								Distant
								Stations
			<u>.</u>					
	<u></u>		<mark></mark>					
Total DSEs			0.00	Total DSEs			0.00	
ross Receipts First Group \$ 166,385.47				Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GROU	JP		EIGHT	H SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	NITY/ AREA 0			COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<mark></mark>					
			<mark>-</mark>					
			<mark></mark>					
			<u>.</u>					
			-					
			<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add th		e fees for each subscr pace L (page 7)	riber group a	II as shown in the boxes	above.			

Name	YSTEM ID# 007902	3					R OF CABLE	Atlantic Broadban
				TE FEES FOR EACH				E
9	1P 0	SUBSCRIBER GROU	TENTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	NINTH	COMMUNITY/ AREA
Computatio				COMMONT IT THE				COMMONT IT TO THE
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fo								
and						-		
Syndicated Exclusivity			<u> </u>					
Surcharge		 	<u>-</u>					
for								
Partially								
Distant								
Stations								
		 						
		 	······································			-	•••	
		-	•					
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	TWELVTH SUBSCRIBER GROUP COMMUNITY/ AREA 0					SUBSCRIBER GRO	LEVENTH	E
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	Total DSEs	DSE	CALL SIGN	DSE	Total DSEs
		CALL SIGN				\$		
	0.00			Total DSEs	0.00			Total DSEs

Name	007902						R OF CABLE	Atlantic Broadban
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	JRTEENTH	ii		SUBSCRIBER GRO	IRTEENTH	
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								
Surcharg								
for								
Partially								
Distant								
Stations					<mark></mark>		····	
		- 			<mark></mark>			
			+		<u>-</u>		-	
		+	-		<u>-</u>		-	
		<u> </u>						
	0.00			Total DSEs	0.00			Γotal DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	iroup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Seco	0.00	\$	iroup	Base Rate Fee First G
	<u>_</u>				FIFTEENTH SUBSCRIBER GROUP			
	-	I SUBSCRIBER GROU	SIXTEENTH		UP	SUBSCRIBER GRO	IFTEENTH	F
	-	I SUBSCRIBER GROU	SIXTEENTH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	IFTEENTH	
	JP	SUBSCRIBER GROU	DSE			SUBSCRIBER GROI	DSE	
	JP 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	JP 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	JP 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	JP 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	JP 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	JP 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	JP 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	JP 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	JP 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	JP 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	JP 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	JP 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	JP 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	JP 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	JP 0			COMMUNITY/ AREA	0			CALL SIGN
	DSE		DSE	COMMUNITY/ AREA	DSE		DSE	CALL SIGN CALL SIGN Total DSEs
	DSE DSE O.00	CALL SIGN	DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	0.00	CALL SIGN	DSE	COMMUNITY/ AREA

LEGAL NAME OF OWNER Atlantic Broadbane						S	007902	Name
				TE FEES FOR EAC				
	NTEENTH	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 Gro	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NIN	NTEENTH	SUBSCRIBER GROU	Р		JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					•••••			
					•••••			
	ļ							
	.							
							<u> </u>	
Total DSEs	-		0.00	Total DSEs	•		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes a	above.	\$		

Name	007902						id (Penn)	Atlantic Broadban
		BER GROUP	SUBSCRII	TE FEES FOR EACH				
9		SUBSCRIBER GROU	Y-SECOND			SUBSCRIBER GROU	NTY-FIRST	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and					<u>.</u>			
Syndicate		H			<mark></mark>			
Exclusivit Surcharge					<mark></mark>			
for		<u> </u>						
Partially								
Distant								
Stations								
			-		-		<u> </u>	
					<u> </u>		<u> </u>	
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROU				\$ SUBSCRIBER GROU		
	0.00							TWEN
	0.00			TWENT	JP			TWEN
	0.00 JP 0	I SUBSCRIBER GROU	Y-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	ITY-THIRD	TWEN
	0.00 JP 0	I SUBSCRIBER GROU	Y-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	ITY-THIRD	TWEN
	0.00 JP 0	I SUBSCRIBER GROU	Y-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	ITY-THIRD	TWEN
	0.00 JP 0	I SUBSCRIBER GROU	Y-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	ITY-THIRD	TWEN
	0.00 JP 0	I SUBSCRIBER GROU	Y-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	ITY-THIRD	TWEN
	0.00 JP 0	I SUBSCRIBER GROU	Y-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	ITY-THIRD	TWEN
	0.00 JP 0	I SUBSCRIBER GROU	Y-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	ITY-THIRD	TWEN
	0.00 JP 0	I SUBSCRIBER GROU	Y-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	ITY-THIRD	TWEN
	0.00 JP 0	I SUBSCRIBER GROU	Y-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	ITY-THIRD	TWEN
	0.00 JP 0	I SUBSCRIBER GROU	Y-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	ITY-THIRD	TWEN
	0.00 JP 0	I SUBSCRIBER GROU	Y-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	ITY-THIRD	COMMUNITY/ AREA
	0.00 JP 0	I SUBSCRIBER GROU	Y-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	ITY-THIRD	TWEN
	0.00 JP O DSE	I SUBSCRIBER GROU	Y-FOURTH	TWENT COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	ITY-THIRD	TWEN COMMUNITY/ AREA CALL SIGN
	0.00 JP O O O O O O O O O O O O O	CALL SIGN	y-FOURTH DSE	TWENT COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	DSE	TWEN COMMUNITY/ AREA CALL SIGN Fotal DSEs
	0.00 JP O DSE	I SUBSCRIBER GROU	y-FOURTH DSE	TWENT COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	TWEN

LEGAL NAME OF OWNE Atlantic Broadbar						\$	007902	Name
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	NTY-FIFTH	SUBSCRIBER GRO		11		H 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 Fe
								and
								Syndicated
								Exclusivity
		-						Surcharge
		H	<mark></mark>					for
	····		·····					Partially Distant
		H						Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
TWENTY	TWENTY-SEVENTH SUBSCRIBER GROUP			TWE				
COMMUNITY/ AREA			0	TWENTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		H						
	····		····		·····			
	····	<u> </u>	·····					
		-						
		-						
		+						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Barris Barris Francis III	2		2.00	B B. t. F F			2.22	
Base Rate Fee Third (∍rouþ	\$	0.00	Base Rate Fee Four	ui Group	\$	0.00	
		e fees for each subs	criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN Atlantic Broadba						•	007902	Name
				TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	NTY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
			····					Exclusivity Surcharge
			····			H		for
								Partially
								Distant
								Stations
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
TH	IRTY-FIRST	SUBSCRIBER GRO	DUP	THIR	TY-SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····					
		-	····					
		-						
			····					
Total DSEs			0.00	Total DSEs		11	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
		_						
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t			criber group a	II as shown in the boxes a	above.	s		

LEGAL NAME OF OWN Atlantic Broadba						,	007902	Name
				TE FEES FOR EAC	H SUBSCR	IBER GROUP		
		SUBSCRIBER GRO		THIF	RTY-FOURTH	SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
			<mark></mark>					Syndicated
								Exclusivity Surcharge
			·····					for
								Partially
								Distant
								Stations
			·····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
TH	IIRTY-FIFTH	SUBSCRIBER GRO)UP	Т	HIRTY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			·····					
		-	····					
			<mark></mark>					
			·····					
			····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Atlantic Broadban						,	007902	Name
-	BLOCK A:	COMPUTATION C	OF BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	SEVENTH	SUBSCRIBER GRO		TH	RTY-EIGHTH	SUBSCRIBER GRO	UP	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 G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec	-	\$	0.00	
	RTY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···		·····					
	<u></u>							
			·····					
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	th Group	\$	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fou	th Group	\$	0.00	
Fee: Add th	ne base rate			s shown in the boxes	· 	\$	5.55	

COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	LEGAL NAME OF OWNER Atlantic Broadban			-			;	007902	Name
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Sase Rate Fee and Syndicated Exclusivity Distant Stations Total DSEs 0.000 Base Rate Fee Second Group \$ 0.000 SUBSCRIBER GROUP FORTY-FOURTH SUBSCRIBER GROUP CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	E	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fee Second Group \$ 0.00 SUBSCRIBER GROUP FORTY-FOURTH SUBSCRIBER GROUP CALL SIGN DSE CAL		TY-FIRST	SUBSCRIBER GRO		FOR	TY-SECONE	SUBSCRIBER GRO	JP	٥
CALL SIGN DSE CALL SIGN DSE and Syndicated Exclusivity Surcharge for Partially Distant Stations	COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	_
Base Rate Fee O.00 Total DSEs O.00 Subscriber Group FORTY-FOURTH SUBSCRIBER GROUP CALL SIGN DSE Base Rate Fee	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Syndicated Exclusivity Surcharge for Partially Distant Stations									Base Rate Fee
Exclusivity Surcharge for Partially Distant Stations Total DSEs 0.00 Subscriber group Communitry/ Area Call Sign DSE Call Sig				<mark></mark>			<u> </u>		
Surcharge for Partially Distant Stations				<mark></mark>					
for Partially Distant Stations									
Partially Distant Stations			<u> </u>			•••••	- 		
0.00									Distant
\$ 0.00 Base Rate Fee Second Group \$ 0.00 SUBSCRIBER GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE				<u></u>					Stations
\$ 0.00 Base Rate Fee Second Group \$ 0.00 SUBSCRIBER GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE									
\$ 0.00 Base Rate Fee Second Group \$ 0.00 SUBSCRIBER GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE				<mark></mark>		····			
\$ 0.00 Base Rate Fee Second Group \$ 0.00 SUBSCRIBER GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE				<u></u>					
\$ 0.00 Base Rate Fee Second Group \$ 0.00 SUBSCRIBER GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE									
\$ 0.00 Base Rate Fee Second Group \$ 0.00 SUBSCRIBER GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE									
SUBSCRIBER GROUP FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	Total DSEs			0.00	Total DSEs			0.00	
SUBSCRIBER GROUP O COMMUNITY/ AREA O CALL SIGN DSE CALL SI	Gross Receipts First Gr	oup	<u>\$</u>	0.00	Gross Receipts Seco	nd Group	\$	0.00	
SUBSCRIBER GROUP O COMMUNITY/ AREA O CALL SIGN DSE CALL SI									
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	Base Rate Fee First Gr	-		•				1	
CALL SIGN DSE CALL SIGN DSE A CALL SIGN DSE CALL SIGN DSE A CALL SIGN DS		TY-THIRD	SUBSCRIBER GRO				I SUBSCRIBER GRO		
	COMMUNITY/ AREA			U	COMMUNITY/ AREA			U	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u> </u>			•••••	- 		
		<u> </u>							
							H		
ll l	Total DSEs			0.00	Total DSEs			0.00	
\$ 0.00 Gross Receipts Fourth Group \$ 0.00	Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
\$ 0.00 Base Rate Fee Fourth Group \$ 0.00	Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	

Name	907902							LEGAL NAME OF OWNER Atlantic Broadbane
				TE FEES FOR EACH				
9	P 0	SUBSCRIBER GROU	KTY-SIXTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	KTY-FIFTH	FOR COMMUNITY/ AREA
Computation	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe	DOL	OALE GIGIT	DOL	OALE GIGIN	DOL	CALL CICIA	DOL	CALL GIGIV
and								
Syndicated								
Exclusivity								
Surcharge for								
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Stations								
	···	<u> </u>	·		···			
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	Р	SUBSCRIBER GROU	ΓΥ-EIGHTH	FOR	JP	SUBSCRIBER GRO	SEVENTH	FORTY-
	COMMUNITY/ AREA 0		0			COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

Name	007902						nd (Penn)	
		BER GROUP	SUBSCRI	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	E
9		SUBSCRIBER GROU	FIFTIETH			SUBSCRIBER GROU	RTY-NINTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
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	····		-		<u>-</u>			
	0.00		 	Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	3ase Rate Fee First Gr
	•	\$ SUBSCRIBER GROU			-	\$ SUBSCRIBER GROU		
	•				-			FIF
	IP			FIFT	JP			FIF
	0 0	SUBSCRIBER GROU	Y-SECOND	FIFT' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTY-FIRST	FIF COMMUNITY/ AREA
	0 0	SUBSCRIBER GROU	Y-SECOND	FIFT' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTY-FIRST	FIF COMMUNITY/ AREA
	0 0	SUBSCRIBER GROU	Y-SECOND	FIFT' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTY-FIRST	FIF COMMUNITY/ AREA
	0 0	SUBSCRIBER GROU	Y-SECOND	FIFT' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTY-FIRST	FIF COMMUNITY/ AREA
	0 0	SUBSCRIBER GROU	Y-SECOND	FIFT' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTY-FIRST	FIF COMMUNITY/ AREA
	0 0	SUBSCRIBER GROU	Y-SECOND	FIFT' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTY-FIRST	FIF COMMUNITY/ AREA
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	0 0	SUBSCRIBER GROU	Y-SECOND	FIFT' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTY-FIRST	FIF COMMUNITY/ AREA
	0 0	SUBSCRIBER GROU	Y-SECOND	FIFT' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTY-FIRST	FIF COMMUNITY/ AREA
	0 0	SUBSCRIBER GROU	Y-SECOND	FIFT' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTY-FIRST	FIF COMMUNITY/ AREA
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	0 0	SUBSCRIBER GROU	Y-SECOND	FIFT' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTY-FIRST	FIF COMMUNITY/ AREA
	0 0	SUBSCRIBER GROU	Y-SECOND	FIFT' COMMUNITY/ AREA	DSE	SUBSCRIBER GROU	FTY-FIRST	COMMUNITY/ AREA
	DSE	SUBSCRIBER GROU	y-second DSE	CALL SIGN CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	DSE DSE	CALL SIGN CALL SIGN Total DSEs
	DSE	SUBSCRIBER GROU	y-second DSE	CALL SIGN	DSE	SUBSCRIBER GROU	DSE DSE	CALL SIGN

0 Computation SE of Base Rate Fe and Syndicated Exclusivity Surcharge	SUBSCRIBER GROUP		TE FEES FOR EACH	F BASE RA	COMPLITATION O	LOCK A	
Computation SE of Base Rate Fe and Syndicated Exclusivity		/-FOURTH					
Computation SE of Base Rate Fe and Syndicated Exclusivity	0	FIFTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				ΓY-THIRD	
SE of Base Rate Fe and Syndicated Exclusivity							COMMUNITY/ AREA
and Syndicated Exclusivity	CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Syndicated Exclusivity							
Exclusivity							
for				<u>"</u>			
Partially							
Distant							
Stations							
	0.00		Total DSEs	0.00			Total DSEs
.00	\$ 0.00	l Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr
.00	\$ 0.00	l Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	SUBSCRIBER GROUP	F	FIFTY-FIFTH SUBSCRIBER GROUP			FIF	
0			0			COMMUNITY/ AREA	
SE	CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
				···			
							
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.00	0.00		Total DSEs	0.00			Total DSEs
.00	\$ 0.00	Group	Gross Receipts Fourth	0.00	\$	oup	Gross Receipts Third G
.00	\$ 0.00	Group	Base Rate Fee Fourth	0.00	\$	oup	Base Rate Fee Third G

Name	YSTEM ID# 007902							LEGAL NAME OF OWNER Atlantic Broadbane
				TE FEES FOR EACH				
9	P 0	SUBSCRIBER GROU	TY-EIGHTH	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	SEVENTH	FIFTY-S COMMUNITY/ AREA
Computation								
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated Exclusivity		H						
Surcharge								
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Partially								
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			-					
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	0.00	<u> </u>		Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	Р	SUBSCRIBER GROU	SIXTIETH		JP	SUBSCRIBER GRO	TY-NINTH	FIF
	0	COMMUNITY/ AREA 0		0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

Name	007902						d (Penn)	Atlantic Broadban
		BER GROUP	SUBSCRI	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	E
9	JP	SUBSCRIBER GROU	Y-SECOND	SIXT	JP	SUBSCRIBER GRO	KTY-FIRST	SIX
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
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	0.00		•	Total DSEs	0.00			otal DSEs
		\$			0.00			D : 1 E: 10
	0.00	<u>*</u>	d Group	Gross Receipts Secon	0.00	\$	roup	iross Receipts First Gi
	0.00	\$		Gross Receipts Secon Base Rate Fee Secon	0.00	\$		
	0.00		d Group	Base Rate Fee Secon	0.00		roup	lase Rate Fee First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	iase Rate Fee First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-THIRD	Sase Rate Fee First Gr SIX COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-THIRD	SIX
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-THIRD	SIX
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-THIRD	Sase Rate Fee First Gr SIX COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-THIRD	SIXE COMMUNITY / AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-THIRD	SIX
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-THIRD	Sase Rate Fee First Gr SIX COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-THIRD	SIXE COMMUNITY / AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-THIRD	SIXE COMMUNITY / AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-THIRD	Sase Rate Fee First Gr SIX COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-THIRD	SIXE COMMUNITY / AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-THIRD	SIXE COMMUNITY / AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-THIRD	Base Rate Fee First Gr SIX COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-THIRD	SIX COMMUNITY/ AREA CALL SIGN
	0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH DSE	Base Rate Fee Secon SIXT COMMUNITY/ AREA CALL SIGN	0.00 JP O DSE	\$ SUBSCRIBER GRO	TY-THIRD DSE	SIX COMMUNITY/ AREA CALL SIGN Fotal DSEs
	0.00	SUBSCRIBER GROU CALL SIGN	d Group Y-FOURTH DSE	Base Rate Fee Secon SIXT COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 DSE 0.00	SUBSCRIBER GRO CALL SIGN	TY-THIRD DSE	COMMUNITY/ AREA

Name	YSTEM ID# 007902						R OF CABLE d (Penn)	Atlantic Broadban
		BER GROUP	SUBSCRI	TE FEES FOR EACH	F BASE RA	COMPUTATION C	BLOCK A:	E
9		SUBSCRIBER GROU	XTY-SIXTH	Si		SUBSCRIBER GRO	KTY-FIFTH	
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					<u></u>			
Exclusivity								
Surcharge		<u> </u>						
for Partially		<u> </u>						
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Stations			·					
			<u> </u>					
			<u> </u>					
	0.00	Total DSEs 0.00				0.00		Total DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First Gr
	SIXTY-EIGHTH SUBSCRIBER GROUP					SUBSCRIBER GRO	SEVENTH	SIXTY-
	0	COMMUNITY/ AREA 0		0		COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		<u> </u>			<u></u>			
		<u> </u>						
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

LEGAL NAME OF OWN Atlantic Broadba							SYSTEM ID# 007902	Name
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
		SUBSCRIBER GRO		TI .		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-						Syndicated
		 	····					Exclusivity Surcharge
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		H						
			····					
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SEVE	NTY-FIRST	SUBSCRIBER GRO	DUP	SEVEN	TY-SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		H	····					
		<u> </u>	····					
		<u> </u>						
		 	····					
		 						
		 						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group a	as shown in the boxes	above.	\$		

Name	007902	S						LEGAL NAME OF OWNER Atlantic Broadbane
				TE FEES FOR EACH				
9	JP	SUBSCRIBER GROU	Y-FOURTH			SUBSCRIBER GRO	TY-THIRD	
Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fo								
and								
Syndicated								
Exclusivity			<u>.</u>		<u></u>			
Surcharge for			<u>-</u>		<u></u>			
Partially			<u>-</u>		···	 		
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			ļ				<u> </u>	
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	0.00			Total DSEs	0.00	<u> </u>	-	Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	IP	SUBSCRIBER GROU	NTY-SIXTH	SEVE	JP	SUBSCRIBER GRO	ITY-FIFTH	SEVEN
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						=		
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G

Name	007902						d (Penn)	
		BER GROUP	SUBSCRI	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	
0	IP	SUBSCRIBER GROU	TY-EIGHTH	SEVEN		SUBSCRIBER GRO	SEVENTH	
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
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	0.00		-	Total DSEs	0.00			otal DSEs
	eceipts Second Group \$ 0.00				\$ 0.00		roup	Gross Receipts First G
	0.00			'			•	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$		
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	0.00			Base Rate Fee Secon	,		roup	Base Rate Fee First G
	0.00			Base Rate Fee Secon	JP		roup	Base Rate Fee First G
	0.00	SUBSCRIBER GROU	EIGHTIETH	Base Rate Fee Secon	JP 0	SUBSCRIBER GRO	roup	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROU	EIGHTIETH	Base Rate Fee Secon	JP 0	SUBSCRIBER GRO	roup	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROU	EIGHTIETH	Base Rate Fee Secon	JP 0	SUBSCRIBER GRO	roup	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROU	EIGHTIETH	Base Rate Fee Secon	JP 0	SUBSCRIBER GRO	roup	SEVEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROU	EIGHTIETH	Base Rate Fee Secon	JP 0	SUBSCRIBER GRO	roup	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROU	EIGHTIETH	Base Rate Fee Secon	JP 0	SUBSCRIBER GRO	roup	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROU	EIGHTIETH	Base Rate Fee Secon	JP 0	SUBSCRIBER GRO	roup	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROU	EIGHTIETH	Base Rate Fee Secon	JP 0	SUBSCRIBER GRO	roup	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROU	EIGHTIETH	Base Rate Fee Secon	JP 0	SUBSCRIBER GRO	roup	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROU	EIGHTIETH	Base Rate Fee Secon	JP 0	SUBSCRIBER GRO	roup	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROU	EIGHTIETH	Base Rate Fee Secon	JP 0	SUBSCRIBER GRO	roup	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROU	EIGHTIETH	Base Rate Fee Secon	JP 0	SUBSCRIBER GRO	roup	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROU	EIGHTIETH	Base Rate Fee Secon	JP 0	SUBSCRIBER GRO	roup	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROU	EIGHTIETH	Base Rate Fee Secon	JP 0	SUBSCRIBER GRO	roup	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROU	EIGHTIETH	Base Rate Fee Secon	JP 0	SUBSCRIBER GRO	roup	SEVEN COMMUNITY/ AREA CALL SIGN
	0.00	SUBSCRIBER GROU	DSE	Base Rate Fee Second COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	ITY-NINTH DSE	Base Rate Fee First G SEVEN COMMUNITY/ AREA

DUP		id (Penn)	Atlantic Broadban
	COMPUTATION O	BLOCK A:	E
	SUBSCRIBER GRO	HTY-FIRST	EIGH
0			COMMUNITY/ AREA
DSE	CALL SIGN	DSE	CALL SIGN
	H		
0.00			otal DSEs
0.00	\$	roup	Gross Receipts First Gr
0.00	\$	roup	Base Rate Fee First Gr
HTY-THIRD SUBSCRIBER GROUP			EIGH
0			COMMUNITY/ AREA
DSE	CALL SIGN	DSE	CALL SIGN
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0.00			otal DSEs
0.00	\$	Group	otal DSEs Gross Receipts Third G
	\$		
0.00 0.00		\$ SUBSCRI	roup \$

Name	YSTEM ID# 007902	S						LEGAL NAME OF OWNER Atlantic Broadband
				E FEES FOR EACH				
9	P 0	SUBSCRIBER GROU	IY-SIXTH	EIGH COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	I I'Y-FIFTH	EIGH COMMUNITY/ AREA
Computation	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and								
Syndicated								
Exclusivity								
Surcharge							<u></u>	
for Partially							<u></u>	
Distant							<u> </u>	
Stations								
								
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	0.00			Total DSEs	0.00		-	Total DSEs
	0.00	\$	Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gro
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro
	Р	SUBSCRIBER GROU	Y-EIGHTH	EIGHT	JP	SUBSCRIBER GROU	SEVENTH	EIGHTY-S
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
								
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	1			Total DSEs	0.00			Total DSEs
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	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third Gr

LEGAL NAME OF OWNER Atlantic Broadband						\$	007902	Name
		COMPUTATION O SUBSCRIBER GROU		ATE FEES FOR EAC		IBER GROUP	JP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
		-						
Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts First Gro	auc	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gro		\$	0.00	Base Rate Fee Seco		\$	0.00	
NINE COMMUNITY/ AREA	TY-FIRST	SUBSCRIBER GROU	JP 0	NINE COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	oup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	oup-	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWN Atlantic Broadba						,	007902	Name
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	ETY-THIRD	SUBSCRIBER GRO		NINI	ETY-FOURTH	SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA	***************************************		0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
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	<u>.</u>	<u> </u>	<mark></mark>					Exclusivity
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Total DSEs	·		0.00	Total DSEs	•		0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NIN	IETY-FIFTH	SUBSCRIBER GRO	UP	N	INETY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DOFa			0.00	Total DCFs			0.00	
Total DSEs	_	-	0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
		e fees for each subsepace L (page 7)	criber group a	II	above.	\$		

Computation of Base Rate Fand Syndicate	UP		SUBSCRI	TE FEES FOR EACH	E DACE DA	001101171710110	· · · · · · · · · · · · · · · · · · ·	
Computation of Base Rate F	JP	CLIDCODIDED ODOL		11				
Computation of Base Rate F	^	SUBSCRIBER GROU	TY-EIGHTH	Ħ		SUBSCRIBER GRO	SEVENTH	
of Base Rate F	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
and	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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Surcharge								
for								
Partially								
Distant Stations							<u></u>	
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	0.00			Total DCFa	0.00	<u> </u>		Total DCFa
-	_			Total DSEs		-		Total DSEs
- -	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	3ase Rate Fee First G
	ONE HUNDREDTH SUBSCRIBER GROUP				JP	SUBSCRIBER GRO	TY-NINTH	NINE
) 	COMMUNITY/ AREA 0		0			COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	Group	Base Rate Fee Third (

Computation							R OF CABLE d (Penn)	Atlantic Broadban
Computation		BER GROUP	SUBSCRI	TE FEES FOR EACH	F BASE RA	COMPUTATION C	BLOCK A:	
Computation	JP	SUBSCRIBER GROU) SECOND	ONE HUNDRE	UP	SUBSCRIBER GRO	RED FIRST	ONE HUNDF
<u> </u>	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computati of Base Rate I and Syndicate Exclusivit Surcharg for Partially Distant	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	JP	SUBSCRIBER GROU	D FOURTH	ONE HUNDRE	UP	SUBSCRIBER GRO	ED THIRD	ONE HUNDR
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	0.00	\$				\$		
				Total DSEs	0.00			Total DSEs Gross Receipts Third G

LEGAL NAME OF OWN Atlantic Broadba								Name
•	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP	-	
	RED FIFTH	SUBSCRIBER GRO)UP	ONE HUN	DRED SIXTI	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٠		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
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		H	·····					Surcharge
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED	SEVENTH	SUBSCRIBER GRO	UP	ONE HUND	RED EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Data Bata E . Titl	0			B B.(7 5				
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	tn Group	\$	0.00	
Rate Fee: Add t	he base rat	e fees for each subs	criber group a	II as shown in the boxes	above.			

Name	007902	s						LEGAL NAME OF OWNER Atlantic Broadband
		BER GROUP	SUBSCRI	TE FEES FOR EACH				
0	JP	SUBSCRIBER GROU	ED TENTH	ONE HUND	IP	SUBSCRIBER GROU	D NINTH	ONE HUNDRE
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F						-		
and								
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	0.00		1	Total DSEs	0.00		<u> </u>	Total DSEs
				Gross Receipts Seco	0.00	\$	oup	Gross Receipts First Gro
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		\$		Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro
	0.00		d Group	Base Rate Fee Secon	•	\$ SUBSCRIBER GROU		
	0.00	\$	d Group	Base Rate Fee Secon	•			ONE HUNDRED EL
	0.00 0.00	\$	d Group	Base Rate Fee Secon	IP			Base Rate Fee First Gro ONE HUNDRED EL COMMUNITY/ AREA CALL SIGN
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
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Name	007902	E SYSTEM: LLC SYSTEM ID 00790						Atlantic Broadban
		BER GROUP	SUBSCRIE	TE FEES FOR EACH	BASE RA	COMPUTATION O	BLOCK A:	
^	IP	SUBSCRIBER GROU	JRTEENTH	ONE HUNDRED FOR	JP	SUBSCRIBER GRO	RTEENTH	ONE HUNDRED THI
9 Computati	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		<u> </u>	Total DSEs	0.00		<u> </u>	otal DSEs
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	0.00	\$	d Group	Base Rate Fee Secon ONE HUNDRED S	0.00	\$	roup	ONE HUNDRED F
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED S COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROU	roup	ONE HUNDRED FOOMMUNITY/ AREA
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Name	007902	SYSTEM: SYSTEM ID: LLC 007902						Atlantic Broadban
		BER GROUP	SUBSCRIE	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	
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9 Computati	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	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G
		\$ SUBSCRIBER GROU	-		<u>\</u>	\$UBSCRIBER GRO		
			-		<u>\</u>			ONE HUNDRED NI
	IP .		-	ONE HUNDRED	JP			ONE HUNDRED NI
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	DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED COMMUNITY/ AREA CALL SIGN	JP O DSE	SUBSCRIBER GRO	DSE	ONE HUNDRED NI

LEGAL NAME OF OWNER Atlantic Broadbane						S	YSTEM ID# 007902	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
	NTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED TWEN	TY-SECOND	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
					•	H		Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
					<u>-</u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gr	-	\$	0.00	Base Rate Fee Second		\$	0.00	
	ITY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWEN	TY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	s shown in the boxes ab	ove.	\$		

	YSTEM ID# 007902							LEGAL NAME OF OWNER Atlantic Broadban
9	0	BER GROUP SUBSCRIBER GROUP		ONE HUNDRED TW	BASE RA	COMPUTATION O SUBSCRIBER GROUP		
Computatio	U			COMMUNITY/ AREA	U			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F		_				-	<u></u>	
and		_				-		
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Exclusivity						-		
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for Partially								
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	0.00			Total DSEs	0.00		•	Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	l Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
		SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWE		SUBSCRIBER GROUP	-SEVENTH	ONE HUNDRED TWENTY
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						-		
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	0.00			Total DSEs	0.00			Total DSEs
				Total DSEs	0.00			
	0.00	\$	Group	Total DSEs Gross Receipts Fourtl	0.00	\$	roup	Total DSEs Gross Receipts Third G

0 9 Computation E of Base Rate F and Syndicate Exclusivit		BER GROUP	E SYSTEM: SYSTEM IC 00790					
Computation Of Base Rate I and Syndicate		DEIT GITGGI	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:		
Computation Of Base Rate I and Syndicate	. 1						NTY-NINTH	ONE HUNDRED TWE
Base Rate F and Syndicate	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
and Syndicate	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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Surcharg			······································		<u>. </u>			
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\neg l								
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		SUBSCRIBER GROUP	TY-SECONE	ii .		SUBSCRIBER GROUP	IIRTY-FIRST	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
E	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		H						
O	0.00			Total DSEs	0.00			otal DSEs
_	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	
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Name	007902						ınd (Penn)	LEGAL NAME OF OWNE Atlantic Broadban
		BER GROUP SUBSCRIBER GROUP		TE FEES FOR EAC	F BASE RA	COMPUTATION OF SUBSCRIBER GROUP		
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F						-		
and Syndicated		<u> </u>			<mark></mark>			
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	0.00		<u>-</u>	Total DSEs	0.00		•	Total DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	Group	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Seco	0.00	\$	Group	Base Rate Fee First G
	*	\$ SUBSCRIBER GROU			•			Base Rate Fee First G
	*				•		IIRTY-FIFTH	ONE HUNDRED THII
	JP			ONE HUNDRED TH	JP		IIRTY-FIFTH	ONE HUNDRED THII
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	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED TH	JP 0	SUBSCRIBER GROU	HIRTY-FIFTH	ONE HUNDRED THII
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED TH	JP 0	SUBSCRIBER GROU	HIRTY-FIFTH	ONE HUNDRED THII
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED TH	JP 0	SUBSCRIBER GROU	HIRTY-FIFTH	ONE HUNDRED THII
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED TH	JP 0	SUBSCRIBER GROU	HIRTY-FIFTH	ONE HUNDRED THII
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED TH	JP 0	SUBSCRIBER GROU	HIRTY-FIFTH	ONE HUNDRED THII
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED TH	JP 0	SUBSCRIBER GROU	HIRTY-FIFTH	ONE HUNDRED THII
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED TH	JP 0	SUBSCRIBER GROU	HIRTY-FIFTH	ONE HUNDRED THII
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED TH	JP 0	SUBSCRIBER GROU	HIRTY-FIFTH	ONE HUNDRED THII
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED TH	JP 0	SUBSCRIBER GROU	HIRTY-FIFTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED TH	JP 0	SUBSCRIBER GROU	HIRTY-FIFTH	ONE HUNDRED THII
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED TH	JP 0	SUBSCRIBER GROU	HIRTY-FIFTH	ONE HUNDRED THII COMMUNITY/ AREA CALL SIGN
	DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED THE COMMUNITY AREA	JP 0 DSE	SUBSCRIBER GROU	DSE DSE	ONE HUNDRED THII

LEGAL NAME OF OWNE Atlantic Broadbar								Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED THIRT	Y-SEVENTH	SUBSCRIBER GROUP	0	ONE HUNDRED TH	IIRTY-EIGHTI	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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Total DSEs		Ш	0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED THIF	RTY-NINTH	SUBSCRIBER GRO	UP	ONE HUNDRE	D FORTIETI	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		H						
		 						
			••••					
		H						
		H						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group a	as shown in the boxes a	above.	\$		

Name	007902	SYSTEM: SYSTEM ID LLC 00790						Atlantic Broadban
		BER GROUP	SUBSCRII	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	
•		SUBSCRIBER GROUP	TY-SECOND	ONE HUNDRED FOR		SUBSCRIBER GROUP	ORTY-FIRST	ONE HUNDRED FO
9 Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndicate								
Exclusivi			-		<u></u>			
Surcharg for			-		<u></u>			
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	•	\$ SUBSCRIBER GROUP			•	\$UBSCRIBER GROUP	-	
	•				•	<u>I</u>	-	ONE HUNDRED FO
	,			ONE HUNDRED FO		<u>I</u>	-	ONE HUNDRED FO
	0	SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	DRTY-THIRD	ONE HUNDRED FO
	0	SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	DRTY-THIRD	ONE HUNDRED FO
	0	SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	DRTY-THIRD	ONE HUNDRED FO
	0	SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	DRTY-THIRD	ONE HUNDRED FO
	0	SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	DRTY-THIRD	ONE HUNDRED FO
	0	SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	DRTY-THIRD	ONE HUNDRED FO
	0	SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	DRTY-THIRD	ONE HUNDRED FO
	0	SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	DRTY-THIRD	ONE HUNDRED FO
	0	SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	DRTY-THIRD	ONE HUNDRED FO
	0	SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	DRTY-THIRD	ONE HUNDRED FO
	0	SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	DRTY-THIRD	COMMUNITY/ AREA
	0	SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	DRTY-THIRD	ONE HUNDRED FO
	0	SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	DRTY-THIRD	ONE HUNDRED FO
	0	SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	DRTY-THIRD	ONE HUNDRED FO
	DSE	SUBSCRIBER GROUP	DSE	ONE HUNDRED FO COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROUP	DSE DSE	ONE HUNDRED FO COMMUNITY/ AREA CALL SIGN Fotal DSEs
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Name	007902	E SYSTEM: SYSTEM ID LLC 00790						Atlantic Broadban
		BER GROUP	SUBSCRII	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	ļ
9	_	SUBSCRIBER GROUP	ORTY-SIXTH	Ħ		SUBSCRIBER GROUP	ORTY-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F						-		
and						-		
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	0.00			Total DSEs	0.00			Total DSEs
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	0.00		d Group	Base Rate Fee Secon		\$	roup	Base Rate Fee First G
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	0.00	\$	d Group	Base Rate Fee Secon		\$	roup	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROUP	d Group	ONE HUNDRED FO	0	\$ SUBSCRIBER GROUP	Y-SEVENTH	Base Rate Fee First G ONE HUNDRED FORTY COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	d Group	ONE HUNDRED FO	0	\$ SUBSCRIBER GROUP	Y-SEVENTH	Base Rate Fee First G ONE HUNDRED FORTY COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	d Group	ONE HUNDRED FO	0	\$ SUBSCRIBER GROUP	Y-SEVENTH	Base Rate Fee First G ONE HUNDRED FORTY COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	d Group	ONE HUNDRED FO	0	\$ SUBSCRIBER GROUP	Y-SEVENTH	Base Rate Fee First G ONE HUNDRED FORTY COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	d Group	ONE HUNDRED FO	0	\$ SUBSCRIBER GROUP	Y-SEVENTH	Base Rate Fee First G ONE HUNDRED FORTY COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	d Group	ONE HUNDRED FO	0	\$ SUBSCRIBER GROUP	Y-SEVENTH	Base Rate Fee First G ONE HUNDRED FORTY COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	d Group	ONE HUNDRED FO	0	\$ SUBSCRIBER GROUP	Y-SEVENTH	Base Rate Fee First G ONE HUNDRED FORTY COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	d Group	ONE HUNDRED FO	0	\$ SUBSCRIBER GROUP	Y-SEVENTH	Base Rate Fee First G ONE HUNDRED FORTY COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	d Group	ONE HUNDRED FO	0	\$ SUBSCRIBER GROUP	Y-SEVENTH	Base Rate Fee First G ONE HUNDRED FORTY COMMUNITY/ AREA
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	0.00	\$ SUBSCRIBER GROUP	d Group	ONE HUNDRED FO	0	\$ SUBSCRIBER GROUP	Y-SEVENTH	Base Rate Fee First G ONE HUNDRED FORTY COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	d Group	ONE HUNDRED FO	0	\$ SUBSCRIBER GROUP	Y-SEVENTH	ONE HUNDRED FORTY COMMUNITY/ AREA
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	0.00	SUBSCRIBER GROUP CALL SIGN	d Group RTY-EIGHTH DSE	Dase Rate Fee Second ONE HUNDRED FO COMMUNITY/ AREA CALL SIGN	0 DSE	SUBSCRIBER GROUP CALL SIGN	Y-SEVENTH DSE	ONE HUNDRED FORTY COMMUNITY/ AREA CALL SIGN Fotal DSEs
	0.00 DSE 0.00	\$ SUBSCRIBER GROUP	d Group RTY-EIGHTH DSE	Base Rate Fee Second ONE HUNDRED FO COMMUNITY/ AREA	DSE	\$ SUBSCRIBER GROUP	Y-SEVENTH DSE	ONE HUNDRED FORTY COMMUNITY/ AREA CALL SIGN Fotal DSEs
	0.00 DSE 0.00	SUBSCRIBER GROUP CALL SIGN	d Group RTY-EIGHTH DSE Group	Dase Rate Fee Second ONE HUNDRED FO COMMUNITY/ AREA CALL SIGN	0 DSE	SUBSCRIBER GROUP CALL SIGN	Y-SEVENTH DSE Group	Base Rate Fee First G ONE HUNDRED FORTY COMMUNITY/ AREA

LEGAL NAME OF OWN Atlantic Broadba								Name
	BLOCK A:	COMPUTATION C	OF BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED FO	RTY-NINTH	SUBSCRIBER GRO	UP	ONE HUNDR	ED FIFTIETH	SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
			·····			H		Syndicated Exclusivity
	·····					H		Surcharge
								for
								Partially
								Distant
								Stations
	····		····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (\$	0.00	Base Rate Fee Sec	-	\$	0.00	
ONE HUNDRED F	IFTY-FIRST	SUBSCRIBER GRO	UP	ONE HUNDRED FIF	TY-SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<mark></mark>					
			····					
	•••••				•••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Foul	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
	•	<u>. </u>			·	<u>. </u>		
Base Rate Fee: Add t			criber group a	as shown in the boxes	above.	\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 007902										
		BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
•	IP	ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP									
9 Computatio	COMMUNITY/ AREA 0				0		COMMUNITY/ AREA				
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
Base Rate Fe											
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Stations											
											
	Total DSEs			0.00			Total DSEs				
	0.00	\$	a Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr			
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr			
	ONE HUNDRED FIFTY-SIXTH SUBSCRIBER GROUP				JP	ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP					
	COMMUNITY/ AREA 0				NITY/ AREA 0			COMMUNITY/ AREA			
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
						-					
											
		Ш									
	0.00			Total DSEs	0.00			Total DSEs			
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G			

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC SYSTEM ID# 007902									
	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
9 Computation		SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FIR		SUBSCRIBER GROUP	/-SEVENTH	ONE HUNDRED FIFTY		
	COMMUNITY/ AREA 0				0		COMMUNITY/ AREA			
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
Base Rate I										
and										
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Exclusivit										
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	Total DSEs			al DSEs			otal DSEs			
	0.00	Gross Receipts Second Group \$ 0.00			\$ 0.00					
	-	\$	l Group	Gross Receipts Secon	0.00	\$	roup	ross Receipts First Gr		
	-	\$		Gross Receipts Secon	0.00	\$				
	0.00		l Group	Base Rate Fee Second	0.00	\$	roup			
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	roup	ONE HUNDRED FIF		
	0.00 0.00	\$	l Group	Base Rate Fee Second	0.00	\$	roup	ONE HUNDRED FIF		
	0.00 0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-NINTH	ONE HUNDRED FIF		
	0.00 0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-NINTH	ONE HUNDRED FIF		
	0.00 0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-NINTH	ONE HUNDRED FIF		
	0.00 0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-NINTH	ONE HUNDRED FIF OMMUNITY/ AREA		
	0.00 0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-NINTH	ONE HUNDRED FIF		
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	0.00 0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-NINTH	ONE HUNDRED FIF		
	0.00 0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-NINTH	ONE HUNDRED FIF		
	0.00 0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-NINTH	ONE HUNDRED FIF		
	0.00 0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-NINTH	ONE HUNDRED FIF		
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	0.00 0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-NINTH	ONE HUNDRED FIF OMMUNITY/ AREA		
	0.00 0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-NINTH	ase Rate Fee First Gr ONE HUNDRED FIF OMMUNITY/ AREA		
	0.00 0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	TY-NINTH	ONE HUNDRED FIF		
	0.00 0.00 DSE	\$ SUBSCRIBER GROU	DSE	Base Rate Fee Second ONE HUNDREI COMMUNITY/ AREA CALL SIGN	0.00 JP O DSE	\$ SUBSCRIBER GRO	DSE DSE	COMMUNITY/ AREA		

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