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					
03/01/2022	\$ 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	2021/2								
B	Instructions:  Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo rate title of the subsidiary, not that of the parent corporation  List any other name or names under which the owner conducts the business of the cable system  If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period  Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.								
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM								
	Cogeco US (Penn), LLC								
				06373720212					
				063737 2021/2					
	2 Batterymarch Park, Suite 205 Quincy, MA 02169								
С	<b>INSTRUCTIONS:</b> In line 1, give any business or trade names used to it names already appear in space B. In line 2, give the mailing address of								
System	1 IDENTIFICATION OF CABLE SYSTEM:  Cogeco US, LLC	the system, ii uiii	erent from the address give	пп ѕрасе в.					
	MAILING ADDRESS OF CABLE SYSTEM:  120 Southmont Blvd.  [Number, street, rural route, apartment, or suite number]  Johnstown, PA 15905  [City, town, state, zip code]								
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and rel	ist on page 1b					
Area	with all communities.								
Served	CITY OR TOWN	STATE							
First	WEATHERLY	PA							
Community	Below is a sample for reporting communities if you report multiple cha								
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#					
Sample	Alda	MD	A	1					
	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 th 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.			Account	114G FEMOD: 2021/2						
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#							
Cogeco US (Penn), LLC			063737							
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.										
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.										
If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).										
When reporting the carriage of television broadcast stations on a community-by-commu channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns by	l a subscriber gro									
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	-						
WEATHERLY	PA	Α	2	First						
BEAR CREEK	PA	Α	1	Community						
BLYTHE TWP	PA	В	4							
CHESTNUT HILL	РА	Α	1	See instructions for						
DENNICON TWO	D.A.			additional information on alphabetization.						
DENNISON TWP  EAST SIDE	PA PA	A A	1	on diphasedzadion.						
FOSTER TWP	PA PA	A A	<u>2</u> 1							
FOSIER IWF	FA	^								
KIDDER TWP	PA	Α	2	Add rows as necessary.						
KIDDER TWP	PA	Ā	1							
LAUSANNE TWP	PA	Α	2							
LEHIGH TWP	PA	A	2							
MIDDLEPORT	PA	В	4							
NEW PHILADELPHIA	PA	В	4							
PACKER TWP	PA	Α	2							
PENN LAKE	PA	Α	1							
TOBYHANNA TWP	PA	Α	2							
TUNKHANNOCK TWP	PA	Α	2							
WHITE HAVEN	PA	Α	1							
SCHULYKILL	PA									

Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:

Cogeco US (Penn), LLC

SYSTEM ID#

063737

### 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			BLO	CK 2		
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE
Residential:							
<ul> <li>Service to first set</li> </ul>	3,194	\$	39.99	Res Expanded	2,638	\$	64.99
<ul> <li>Service to additional set(s)</li> </ul>				Digital Value	544	\$	69.98
<ul> <li>FM radio (if separate rate)</li> </ul>				Digital Plus	146	\$	114.97
Motel, hotel	26	\$	39.99	HD Ultra	-	\$	9.99
Commercial	441	\$	39.99				
Converter							
<ul> <li>Residential</li> </ul>		\$	4.99				
<ul> <li>Non-residential</li> </ul>							
	1	1		I	1	1	

### F

#### Services Other Than Secondary Transmissions: Rates

#### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2				
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
Pay cable	1.99 - 19.99	Motel, hotel		Expanded Basic	\$ 64.99
<ul> <li>Pay cable—add'l channel</li> </ul>		Commercial		Digital Basic	\$ 69.98
Fire protection		Pay cable		Digital Plus	\$ 114.97
Burglar protection		Pay cable-add'l channel		HD Ultra	\$ 9.99
Installation: Residential		Fire protection			
First set	\$ 50.00	Burglar protection			
<ul> <li>Additional set(s)</li> </ul>	\$ 40.00	Other services:			
• FM radio (if separate rate)		Reconnect	\$ 40.00		
Converter		Disconnect			
		Outlet relocation	\$ 40.00		
		<ul> <li>Move to new address</li> </ul>	\$ 40.00		

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Cogeco US (Penn), LLC 063737 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP A 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) **WBRE** 28 Ν No **WILKES BARRE, PA** WBRE.2 28.2 I-M No WILKES BARRE, PA See instructions for additional information WBRE.3 I-M No 28.3 **WILKES BARRE, PA** on alphabetization. **WLVT** 39 Ε No ALLENTOWN, PA **WNEP** 16 Ε No SCRANTON, PA WNEP.2 SCRANTON, PA 16.2 I-M No WOLF 56 Ν No HAZELTOWN, PA **WQMY** 53 ı No WILLIAMSPORT, PA **WQPX** 64 Ī No SCRANTON, PA **WSWB** 38 ı No SCRANTON, PA WSWB.2 38.2 I-M No SCRANTON, PA WSWB.3 38.3 I-M No SCRANTON, PA WSWB.4 38.4 I-M No SCRANTON, PA **WVIA** 44 Ε No SCRANTON, PA WVIA.2 44.2 E-M No SCRANTON, PA WVIA.3 44.3 E-M No SCRANTON, PA **WWOR** 9 ı SECAUCUS, NJ Yes 0

FORM SA3E. PAGE 3.					ACCOUNTI	NG PERIOD: 2021/2
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
Cogeco US (Pe	nn), LLC				063737	
PRIMARY TRANSMITTE						
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during the ions in effect or 5.61(e)(2) and ( sis, as explaine	he accounting n June 24, 19 4), or 76.63 (r d in the next <sub>l</sub>	period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie te carriage of certa 1(e)(2) and (4))]; a	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	Primary Transmitters:
basis under specifc FC	CC rules, regula here in space	ntions, or auth G—but do lis	orizations:		ent and Program Log)—if the	Television
List the station here, basis. For further in in the paper SA3 fo	and also in spa formation cond rm.	ice I, if the staterning substit	ute basis station	ns, see page (v) o	tute basis and also on some other f the general instructions located	
each multicast stream cast stream as "WETA	associated with	n a station ac	cording to its over	er-the-air designa	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example	
	e. For example	e, WRC is Cha	O		on for broadcasting over-the-air in may be different from the channel	
Column 3: Indicate educational station, by	in each case we entering the le	vhether the st tter "N" (for n	etwork), "N-M" (	for network multic	ependent station, or a noncommercial ast), "I" (for independent), "I-M" pmmercial educational multicast).	
For the meaning of the	ese terms, see ation is outside	page (v) of the	e general instruc vice area, (i.e. "c	ctions located in th distant"), enter "Ye	ne paper SA3 form. es". If not, enter "No". For an ex-	
cable system carried the carried the distant stati	ne distant statio ion on a part-tir	on during the me basis beca	accounting perions	od. Indicate by ent	. ,	
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th	entered into on a primary trans simulcasts, also aree categories	n or before Ju mitter or an a o enter "E". If , see page (v)	ine 30, 2009, be ssociation repre you carried the of the general i	etween a cable system senting the primal channel on any ot instructions locate	y payment because it is the subject stem or an association representing ry transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form.	
FCC. For Mexican or C <b>Note:</b> If you are utilizin		. ,		•	which the station is identifed.	
,			EL LINE-UP		<u>'</u>	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	o. Looking of Charlet	
MOZI NI	NUMBER	STATION	Nie	(If Distant)	LIAZEL TOWAL DA	
WYLN	36	l N	No		HAZELTOWN, PA	
WYOU	22	N	No No		SCRANTON, PA	
WYOU (2)	109	N	No		SCRANTON, PA	
WYOU (3)	110	N	No		SCRANTON, PA	

G

**Primary** 

Transmitters:

Television

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Cogeco US (Penn), LLC 063737 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 identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	В	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBRE	28	N	No		WILKES BARRE, PA
WBRE.2	28.2	I-M	No		WILKES BARRE, PA
WBRE.3	28.3	I-M	No		WILKES BARRE, PA
WLVT	39	E	No		ALLENTOWN, PA
WNEP	16	E	No		SCRANTON, PA
WNEP.2	16.2	I-M	No		SCRANTON, PA
			No		
WOLF	56	N	No		HAZELTOWN, PA
WQMY	53	I	No		WILLIAMSPORT, PA
WQPX	64	I	No		SCRANTON, PA
WSWB	38	I	No		SCRANTON, PA
WSWB.2	38.2	I-M	No		SCRANTON, PA
WSWB.3	38.3	I-M	No		SCRANTON, PA
WSWB.4	38.4	I-M	No		SCRANTON, PA
WVIA	44	E	No		SCRANTON, PA
WVIA.2	44.2	E-M	No		SCRANTON, PA
WVIA.3	44.3	E-M	No		SCRANTON, PA

FORM SA3E. PAGE 3.					Account	NG PERIOD: 2021/
LEGAL NAME OF OWN		YSTEM:			SYSTEM ID#	Name
Cogeco US (Pe	•				063737	
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here,	G, identify even system during to ions in effect or ions in effect or ions in effect or sis, as explaine stations: With In CC rules, regular in here in space only on a subs and also in space	y television st he accounting n June 24, 19 4), or 76.63 (I d in the next respect to any ations, or auth G—but do lis titute basis. ace I, if the sta	g period, except 81, permitting the referring to 76.6 paragraph. distant stations porizations: t it in space I (the ation was carried	(1) stations carried carriage of cert 1(e)(2) and (4))]; a carried by your one Special Statem both on a substi	s and low power television stations) ed only on a part-time basis under tain network programs [sections and (2) certain stations carried on a cable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located	<b>G</b> Primary  Transmitters:  Television
in the paper SA3 for Column 1: List each each multicast stream cast stream as "WETA-Simulcast). Column 2: Give the its community of licens on which your cable sy	orm.  ch station's call associated with a-2". Simulcast channel numl se. For example system carried th	sign. Do not it has a station acostreams must ber the FCC has, WRC is Change station.	report origination cording to its over the reported in one has assigned to annel 4 in Wash	n program service er-the-air designa column 1 (list eac the television stat ington, D.C. This	es such as HBO, ESPN, etc. Identify ation. For example, report multi- h stream separately; for example cion for broadcasting over-the-air in may be different from the channel	
educational station, by (for independent multice For the meaning of the Column 4: If the st planation of local service Column 5: If you heable system carried the distant state For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	rentering the lecast), "E" (for no ese terms, see ation is outside ce area, see prave entered "Y he distant staticion on a part-tipion of a distant at entered into o a primary trans simulcasts, also ree categories e location of ea	etter "N" (for noncommercial page (v) of the the local senage (v) of the es" in column on during the me basis becar multicast stranor before Jumitter or an accenter "E". If , see page (v) ch station. Fo	etwork), "N-M" (I educational), of general instructivice area, (i.e. "cgeneral instruct 4, you must coraccounting perioduse of lack of a geam that is not some 30, 2009, be association repreyou carried the of the general in U.S. stations,	for network multion "E-M" (for noncetions located in the distant"), enter "Yions located in the placetions located in the placetion of the primary of 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	
Note: If you are utilizing		nnel line-ups,		space G for each		
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	
WYLN	36	ı	No	,	HAZELTOWN, PA	
WYOU	22	N	No		SCRANTON, PA	
wwor	9	I	Yes	0	SECAUCUS, NJ	
WYOU (2)	109	N	No		SCRANTON, PA	

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Cogeco US (Penn), LLC

SYSTEM ID#
Name
Name

#### PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	С	
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
WBRE	28	N	No		WILKES BARRE, PA
WBRE.2	28.2	I-M	No		WILKES BARRE, PA
WBRE.3	28.3	I-M	No		WILKES BARRE, PA
WLVT	39	E	No		ALLENTOWN, PA
WNEP	16	E	No		SCRANTON, PA
WNEP.2	16.2	I-M	No		SCRANTON, PA
			No		
WOLF	56	N	No		HAZELTOWN, PA
WQMY	53	I	No		WILLIAMSPORT, PA
WQPX	64	I	No		SCRANTON, PA
WSWB	38	I	No		SCRANTON, PA
WSWB.2	38.2	I-M	No		SCRANTON, PA
WSWB.3	38.3	I-M	No		SCRANTON, PA
WSWB.4	38.4	I-M	No		SCRANTON, PA
WVIA	44	E	No		SCRANTON, PA
WVIA.2	44.2	E-M	No		SCRANTON, PA
WVIA.3	44.3	E-M	No		SCRANTON, PA

G

Primary Transmitters: Television

**ACCOUNTING PERIOD: 2021/2** FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Cogeco US (Penn), LLC 063737 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP C

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)	
WYLN	36	I	No		HAZELTOWN, PA
WYOU	22	N	No		SCRANTON, PA
WYOU (2)	109	N	No		SCRANTON, PA
WYOU (3)	110	N	No		SCRANTON, PA
			No		
	"		No		
	"		No		

G

**Primary** 

Transmitters:

Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Cogeco US (Penn), LLC

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	D	
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
WBRE	28	N	No		WILKES BARRE, PA
WBRE.2	28.2	I-M	No		WILKES BARRE, PA
WBRE.3	28.3	I-M	No		WILKES BARRE, PA
WLVT	39	E	No		ALLENTOWN, PA
WNEP	16	E	No		SCRANTON, PA
WNEP.2	16.2	I-M	No		SCRANTON, PA
			No		
WOLF	56	N	No		HAZELTOWN, PA
WQMY	53	I	No		WILLIAMSPORT, PA
WQPX	64	I	No		SCRANTON, PA
WSWB	38	I	No		SCRANTON, PA
WSWB.2	38.2	I-M	No		SCRANTON, PA
WSWB.3	38.3	I-M	No		SCRANTON, PA
WSWB.4	38.4	I-M	No		SCRANTON, PA
WVIA	44	E	No		SCRANTON, PA
WVIA.2	44.2	E-M	No		SCRANTON, PA
WVIA.3	44.3	E-M	No		SCRANTON, PA

FORM SA3E. PAGE 3.					ACCOUNT	ING PERIOD: 2021/2
LEGAL NAME OF OW	NER OF CABLE SY	YSTEM:			SYSTEM ID#	Name
Cogeco US (P	enn), LLC				063737	Name
PRIMARY TRANSMITT	TERS: TELEVISIO	ON				
In General: In space carried by your cable FCC rules and regular 6.59(d)(2) and (4), 7 substitute Basis basis under specific F Do not list the station station was carried. List the station here basis. For further in the paper SA3 f Column 1: List ea each multicast stream cast stream as "WET. WETA-simulcast). Column 2: Give the its community of licer on which your cables Column 3: Indicated aducational station, be (for independent multifor the meaning of the Column 5: If you cable system carried the distant state For the retransmis of a written agreement the cable system and tion "E" (exempt). For explanation of these to Column 6: Give the state of the column 6: Give the	G, identify even system during the system during the titions in effect or 6.61(e)(2) and (esis, as explaine Stations: With a CC rules, regular here in space donly on a subsequence of a system carried with a community of the community of the community of the community of the community of a c	y television st he accounting in June 24, 194, or 76.63 (i 4), or 76.63 (i 4), or 76.63 (i 4) do in the next   respect to any ations, or auth G—but do lis titute basis. ace I, if the state erning substiff sign. Do not re ha station acceptance with the station acceptance with the station. Whether the state or the stater "N" (for no concommercial page (v) of the the local servage (v) of the the local servage (v) of the ers" in column on during the communities the control in or before Ju mitter or an acceptance of the station. For	g period, except 81, permitting the referring to 76.6 paragraph. If distant stations corrizations: It it in space I (the ation was carried tute basis station report origination cording to its own be reported in containing to its own betwork), "N-M" (I educational), one general instructive area, (i.e. "containing period general instructive area, in the station is a network of accounting period cause of lack of a seam that is not some 30, 2009, be sesociation representation of the general in the product of the general in the containing period in U.S. stations, stations,	(1) stations carried to carriage of certa 1(e)(2) and (4))]; as a carried by your case Special Statement of both on a substitute, see page (v) on program services er-the-air designate column 1 (list each the television statington, D.C. This lark station, an indefor network multicular "E-M" (for noncoctions located in the mplete column 5, so d. Indicate by entactivated channel of subject to a royalty stewern a cable systematical in the primaticular than the p	s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilize	ing multiple chai		·	•	спаппетше-ир.	
		CHANN	EL LINE-UP	D	I	
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	
WYLN	36	I	No		HAZELTOWN, PA	
WYOU	22	N	No		SCRANTON, PA	
WYOU (2)	109	N	No No		SCRANTON, PA	
			No No No			
			No No			
			No No			
			No			
			No No			

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

No No ACCOUNTING PERIOD: 2021/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 063737 Cogeco US (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 LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.								ACCOUNTING	PERIOD: 2021/2
LEGAL NAME OF OWNER OF Cogeco US (Penn), LL		ГЕМ:					S	YSTEM ID# 063737	Name
SUBSTITUTE CARRIAGE In General: In space I, ident					n that vour	cable	e svstem c	arried on a	ı
substitute basis during the acexplanation of the programm  1. SPECIAL STATEMENT  • During the accounting per	ccounting pe ing that must CONCER	eriod, under spe st be included in NING SUBST	ecific present and former FC in this log, see page (v) of the TTUTE CARRIAGE	C rules, regula e general instr	ations, or a ructions loc	authori cated i	izations. F in the pap	or a further	Substitute Carriage: Special
broadcast by a distant state  Note: If your answer is "No		rest of this pag	ge blank. If your answer is '	'Yes," you mu	ust comple			X No	Statement and Program Log
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the prograr Column 3: Give the call Column 4: Give the broathe case of Mexican or Can Column 5: Give the mor first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progra ce, please a of every no distant stati gulations, o tion. Do no Lucy" or "NE n was broad sign of the s adcast static atth and day we "5/7." es when the Example: a er "R" if the and regulatic ogramming	am on a separa attach addition nnetwork telev ion and that your or authorization it use general of BA Basketball: dcast live, ente station broadca on's location (thons, if any, the when your system e substitute pro a program carri	al pages. ision program (substitute pour cable system substitute) s. See page (vi) of the gencategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the tem carried the substitute program was carried by your ged by a system from 6:01:  was substituted for programing the accounting period	rogram) that, d for the progeral instruction "basketball".  lo." m. station is lice station is iderorogram. Use cable system. 15 p.m. to 6:2 mming that y; enter the let	during the gramming of the properties of the pro	e accoord anough and the end of t	counting other static e paper ogram  C or, in the month accurately ld be required ed pro	h ,	
S	SUBSTITUT	E PROGRAM	1	1 1	EN SUBS			7. REASON FOR	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	-	TIME —	S TO	DELETION	
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ACCOUNTING I	PERIOD: 2021/2	FORM SA3E. PAGE 6.
Massa	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	Cogeco US (Penn), LLC	063737
_1	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	t-

### Part-Time Carriage

Log

time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages.

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

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

- Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give
- · 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

LEG	AL NAME OF OWNER OF CABLE SYSTEM:  geco US (Penn), LLC			SYSTEM ID# 063737	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)										
IMP	during the accounting period.  **PORTANT: You must complete a statement in space P concerning gross receipts.		\$ (Amount o	<b>1,207,214.00</b> 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.										
bloo	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should back 3 below.									
3 be ▶ If pa	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be a elow. art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.									
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.  Line 1. Enter the amount of gross receipts from space K  Line 2. Multiply the amount in line 1 by 0.01064  Enter the result here.									
	Enter the result here.  This is your minimum fee.	\$		12,844.76						
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting peri   x Yes—Complete the DSE schedule.  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	nn 4, y od?	ou must	t check						
3	Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero			0.00						
	Line 3. Add lines 1 and 2 and enter here	\$		10,624.81						
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger  Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter	r	\$	12,844.76	Cable systems submitting additional deposits under					
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)									
	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	\$		13,569.76	appropriate form for submitting the additional fees.					
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See pa	age (i) of	f the						

Name	LEGAL NAME OF OWNER	OF CABLE S	YSTEM:	SYSTEM ID#					
Name	Cogeco US (Penn	), LLC		063737					
<b>M</b> Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations 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								
		system	ctivated channels arried television broadcast stations	225+					
N Individual to Be Contacted	INDIVIDUAL TO BE we can contact abou		CTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual dement of account.)						
for Further	Name Patrick	Bratto	nTelephone	617-786-8800					
Information	Address 2 Batte (Number, st	erymaro reet, rural r	ch Park, Suite 205 oute, apartment, or suite number)						
	Quincy (City, town,		2169						
	Email		on@breezeline.com Fax (optional)						
	CERTIFICATION (Th	is statem	ent of account must be certifed and signed in accordance with Copyright Office reg	ulations.					
0	,		3	,					
Certifcation	• I, the undersigned, h	nereby ce	tify that (Check one, but only one, of the boxes.)						
	(Owner other tha	n cornor	ition or partnership) I am the owner of the cable system as identifed in line 1 of space	e B: or					
	(Owner other tha	ii corpor	tuon of partnership) rain the owner of the cause system as identified in line 1 of space	; b, oi					
			n corporation or partnership) I am the duly authorized agent of the owner of the cabl	e system as identified					
	in line 1 of spa	ace B and	that the owner is not a corporation or partnership; or						
	(Officer or partner in line 1 of spa	•	n officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as o	wner of the cable system					
			t of account and hereby declars under negality of law that all statements of fact contain	and haroin					
	are true, complete, a	nd correct	t of account and hereby declare under penalty of law that all statements of fact contair to the best of my knowledge, information, and belief, and are made in good faith.	led Hereim					
	[18 U.S.C., Section 1	001(1986							
		Χ	/s/ Patrick Bratton						
		(e.g., /s/	electronic signature on the line above using an "/s/" signature to certify this statement. John Smith). Before entering the first forward slash of the /s/ signature, place your cursor on, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotu	·					
		Typed	or printed name: Patrick Bratton						
		Title:	Chief Financial Officer (Title of official position held in corporation or partnership)						
		Date:	February 28, 2022						

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 th 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 telephor 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 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

SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended fills 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 Name  Maling Address  INTEREST ASSESSMENTS  You must complete this worksheet for those royally payments submitted as a result of a late payment or underpayment.  For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.  Line 1 Enter the amount of late payment or underpayment.  Line 2 Multiply line 1 by the interest rate* and enter the sum here  x 14/6  Line 3 Multiply line 2 by the number of days late and enter the sum here  x 0.00274  Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7).  (Interest charge)  * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.  ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.  NOTE: If you are filing his worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.  Owner  Address	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name					
The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:  I'm 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 transmities; 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	Cogeco US (Penn), LLC	063737						
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	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."							
Name	paper SA3 form.  During the accounting period did the cable system exclude any amounts of gross receipts for		-					
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You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.  For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.  Line 1 Enter the amount of late payment or underpayment								
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For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.  Line 1 Enter the amount of late payment or underpayment	INTEREST ASSESSMENTS							
Assessment    X			Q					
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Line 1 Enter the amount of late payment or underpayment	x 1%						
Line 3 Multiply line 2 by the number of days late and enter the sum here	Line O. Maltinhelling Alberthe International and automatic constraints							
Line 3 Multiply line 2 by the number of days late and enter the sum here	Line 2 Multiply line 1 by the interest rate" and enter the sum here							
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)		xdays						
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	Line 3 Multiply line 2 by the number of days late and enter the sum here							
space L, (page 7)		x 0.00274						
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Address  First community served Accounting period	please list below the owner, address, first community served, accounting period, and ID nur							
First community served Accounting period	Owner							
Accounting period	Address							
Accounting period	First community corred							

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ACCOUNTING PERIOD: 2021/2

DSE SCHEDULE. PAGE 10.

# INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

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

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

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

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

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

Note that local stations are not counted at all in computing DSEs.

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

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

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

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

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

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

#### **TOTAL OF DSEs**

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

#### THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

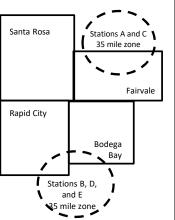
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

#### **EXAMPLE:**

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

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



	<b>Distant Stations Carried</b>		Identification	of Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
in	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
,	B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
	C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
	D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
	E (network)	0.25	Fairvale	Stations B, D, and E	120,000.00
	TOTAL DSEs	2 472		TOTAL GROSS RECEIPTS	\$600,000,00

Minimum Fee Total Gross Receipts	\$600,000.00
	x .01064
	C 204 00

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

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

**ACCOUNTING PERIOD: 2021/2** 

DSE SCHEDULE. PAG	E 11. (CONTINUED)											
4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			S	YSTEM ID#						
ı	Cogeco US (Penn), LLC	;				063737						
	SUM OF DSEs OF CATEGOR	RY "O" STATIOI	NS:									
	Add the DSEs of each station											
	Enter the sum here and in line	1 of part 5 of thi	s schedule.		1.00							
•	Instructions:			<u> </u>								
2	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5											
Computation	of space G (page 3).  In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-											
of DSEs for Category "O"  CATEGORY "O" STATIONS: DSEs												
Category "O"			CATEGORY "O" STATION	IS: DSEs								
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
	WWOR	1.000										
Add rows as												
necessary. Remember to copy												
all formula into new												
rows.												
10W3.												

Name	Cogeco US (Per						S	YSTEM ID# 063737			
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	figure should correspond with the information given in space J. Calculate only one DSE for each station.  Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period.  Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station.  Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25."  Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.										
Capacity		C	ATEGORY LAC	STATIONS: (	COMPUTATI	ON OF DSEs					
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	R 3. N JRS O ED BY S	UMBER F HOURS TATION N AIR	4. BASIS OF CARRIAG VALUE	5. TYPE		iΕ			
			÷	=		x	=				
			÷ ÷	=		x x	=				
			÷	=		x	=				
			÷	=		x	=				
			÷			x x	=				
			÷	=		x	=				
	Add the DSEs of ea	CATEGORY LAC S ach station. ere and in line 2 of p		Э,	<b>&gt;</b>	0.00					
Computation of DSEs for Substitute-Basis Stations	Was carried by tions in effect of Broadcast one of space I).     Column 2: For of at your option. This Column 3: Ente Column 4: Divide Column 4: Divide Column 4: Divide Column 5: Column 6: Co	your system in subst n October 19, 1976 ( or more live, nonnetwood each station give the figure should correst the number of days de the figure in colum	itution for a program as shown by the lett ork programs during number of live, non spond with the informs in the calendar yean 2 by the figure in	that your system er "P" in column 7 that optional carrie network programs nation in space I. ir: 365, except in a column 3, and giv	was permitted to of space I); and age (as shown by a carried in substance the result in content of the carried in substance the result in content of the carried in substance the result in content of the carried in substance the result in content of the carried in substance the carried in substance in su	rograms) if that station: o delete under FCC rule: d the word "Yes" in column titution for programs that blumn 4. Round to no les the general instructions in	2 of were deleted s than the third	·m).			
		SU	BSTITUTE-BAS	IS STATIONS	: COMPUTA	ATION OF DSEs					
	SIGN	NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE			
		÷				-		=			
								=			
		-		=		-	-	=			
		÷		=		-		=			
	Add the DSEs of ea	SUBSTITUTE-BAS	IS STATIONS:		▶	0.00					
5		<b>PF DSEs:</b> Give the am plicable to your systen		in parts 2, 3, and	4 of this schedule	e and add them to provide	the tota				
Total Number	1. Number of DS	Es from part 2●				<u> </u>	1.00				
of DSEs	2. Number of DS	Es from part 3 ●			!	<b>-</b>	0.00				
	3. Number of DS	Es from part 4 ●			ı	<b>&gt;</b>	0.00				
	TOTAL NUMBER O	F DSEs						1.00			

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2021/2

LEGAL NAME OF C		SYSTEM:					S'	YSTEM ID#	
Cogeco US (P	enn), LLC							063737	Name
Instructions: Bloc In block A:	ck A must be com	pleted.		-					
<ul> <li>If your answer if schedule.</li> </ul>	"Yes," leave the re	emainder of p	art 6 and part	7 of the DSE sche	edule blank ar	nd complete pa	art 8, (page 16) of	the	6
If your answer if	If your answer if "No," complete blocks B and C below.  BLOCK A: TELEVISION MARKETS								Computation of
Is the cable syster	m located wholly o					ection 76.5 of	FCC rules and re	gulations in	3.75 Fee
effect on June 24,			•					galations in	
X No—Comp	olete blocks B and	C below.							
		BLOC	K B: CARR	IAGE OF PERI	MITTED DS	Es			
Column 1: CALL SIGN	under FCC rules instructions for the	and regulatione DSE Sche	ons prior to Jur dule. (Note: Th	part 2, 3, and 4 o ne 25, 1981. For fu ne letter M below r Act of 2010.)	urther explana	ition of permitt	ed stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE  B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(b)(c)  B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(d)  C Sundathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule).  E Carried pursuant to individual waiver of FCC rules (76.7)  *F A station previously carried on a part-time or substitute basis prior to June 25, 198′ G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)  M Retransmission of a distant multicast stream.									
Column 3:	*(Note: For those this schedule to	e stations ide determine the	ntified by the lessential by t	parts 2, 3, and 4 etter "F" in column	n 2, you must	complete the v	. °	T	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
WWOR	D	1.00							
								1.00	
		В	LOCK C: CO	MPUTATION O	F 3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule			,	,	
Line 2: Enter the	sum of permitte	ed DSEs fror	n block B abo	ove					
Line 3: Subtract (If zero, I	line 2 from line 1 eave lines 4–7 b			•		rate.			
Line 4: Enter gro	oss receipts from	ı space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent
Line 5: Multiply li	ine 4 by 0.0375	and enter su	ım here						partially permited/ partially nonpermitted
Line 6: Enter tota	al number of DS	Es from line	3						carriage?  If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 aı	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00	

	Penn), LLC	SYSTEM:				S'	YSTEM ID# 063737	Name
1. CALL	2. PERMITTED		1. CALL	2. PERMITTED	1. CALL	2. PERMITTED BASIS	3. DSE	6
SIGN	BASIS		SIGN	BASIS	SIGN	BASIS		Computation o
								3.75 Fee
					 •			
					 •			

Name	Cogeco US (Pe		E SYSTEM:						SY	STEM ID# 063737
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the F A—Part-time sp 76.59 B—Late-night p 76.61 S—Substitute congener Column 5: Indicate Column 6: Compar in block	or to June 25, call sign for eather DSE for the DSE for the accounting the basis of CC rules and ecialty programming: (e)(3)). arriage under all instructions the station's the the DSE fige B, column 3 information yet.	1981, under forme ach distant station in his station for a sin ing period and year rarriage on which the regulations cited by mming: Carriage, colon, or 76.63 (refer Carriage under FCC certain FCC rules, in the paper SA3 for the current ures listed in column of part 6 for this state ou give in columns	r FCC rules govidentifed by the gle accounting in which the car he station was to the prize of the prize of the station was to the prize of the priz	verr lett peri rriag carri thos asis ((1)) s 76 auth riod list	entified by the letter "F" ning part-time and sub ter "F" in column 2 of priod, occurring between ge and DSE occurred ied by listing one of the se in effect on June 24 s, of specialty program.). 6.59(d)(3), 76.61(e)(3) thorizations. For further as computed in parts the smaller of the two e accurate and is subject to the subject in the smaller of the	estitute carricant 6 of the n January 1 (e.g., 1981, e following 4, 1981, aming unde 1), or 76.63 (er explanation 2, 3, and 4 of figures he	age. DSE schedule 1978 and June 1) letters  r FCC rules, sect referring tc on, see page (vi) of this schedule re. This figure sh	30, 198	a1
	1 CALL	PERMITT 2. PRI			ED	ON A PART-TIME AN			6 05	DMITTED
	1. CALL SIGN	2. PRIO	-	COUNTING ERIOD		4. BASIS OF CARRIAGE		RESENT DSE		RMITTED DSE
	OIOIN	DOL	. '	LITIOD		OARTHAGE		362		DOL
		•								
7 Computation of the	,	"Yes," comple	ete blocks B and C locks B and C blan	k and complete	•	rt 8 of the DSE sched				
Syndicated			BLOCI	K A: MAJOR	TE	ELEVISION MARK	ET			
Exclusivity Surcharge	Is any portion of the	cable system v	vithin a top 100 majo	or television mar	ket	as defned by section 7	6.5 of FCC	rules in effect Jun	ie 24, 19	981?
•	Yes—Complete	e blocks B and	IC.			No—Proceed to	part 8		·	
	BLOCK B: C	arriage of VH	F/Grade B Contour	Stations		BLOCK	C: Compu	ıtation of Exempt	DSEs	
	Is any station listed ir commercial VHF stat or in part, over the ca	ion that place			Ш	Was any station listed nity served by the cab to former FCC rule 76	le system p			
	Yes—List each s  X No—Enter zero a		th its appropriate per part 8.	mitted DSE		Yes—List each st  X No—Enter zero a		with its appropriate to part 8.	permitte	ed DSE
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIGN		DSE
				0.00						0.00
			TOTAL DSEs	0.00	Ш			TOTAL DSEs	i	0.00

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:  Cogeco US (Penn), LLC	SYSTEM ID# 063737	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,207,214.00	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC?  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 D is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	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		
	Syliulcated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	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 4b blank. NOTE: If the D 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)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name			STEM ID#
7 Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.  A. Enter 0.00300 of gross receipts (the amount in section 1).  B. Enter 0.00189 of gross receipts (the amount in section 1).  C. Multiply line B by 3.000 and enter here.  D. Enter 0.00089 of gross receipts (the amount in section 1).  E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.  F. Multiply line D by line E and enter here.  G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)	063737
	Instru	Syndicated Exclusivity Surcharge	<u></u> .
Computation of Base Rate Fee	You m 6 was In blo If you If you blank What i	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. bck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. It answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. It answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	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.	
	Section	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	1	Enter the amount of gross receipts from space K (page 7) ▶ <b>\$</b>	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule.  (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.).	
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.  A. Enter 0.01064 of gross receipts  (the amount in section 1)	
		Base Rate Fee	0.00
	l		

EGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM IC	
Coge	co US (Penn), LLC 06373	7 Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.	
4	A. Enter 0.01064 of gross receipts	8
	(the amount in section 1) ▶\$	
	B. Enter 0.00701 of gross receipts	Computatio
	(the amount in section 1) \$	of
	C. Multiply line B by 3.000 and enter here	Base Rate Fo
	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.	1
	Enter here and in block 3, line 1, space L (page 7)  Base Rate Fee  \$ 0.00	
	Dase Nate 1 ee	<u> </u>
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shal be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in G.	9
	<b>eral:</b> If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of thi	Computation of
	on, you must:	Base Rate F
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	and Syndicate
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.	Exclusivit
Finally	: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge for
	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you mus mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However	
	cable system is wholly located outside all major television markets, complete block A only.	Stations, ar
	Identify a Subscriber Group for Partially Distant Stations	for Partiall Permitted
•	For each community served, determine the local service area of each wholly distant and each partially distant station you to that community.	Stations
-	For each wholly distant and each partially distant station you carried, determine which of your subscribers were located	
	the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by ne token, the station is distant to the subscriber.)	
	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each	
	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
•	iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscribe	er
groups In each	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 of the bers in the group.	
• If·	v r	

- 1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, and 4 of this schedule; or,
- 2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, part 6 of this schedule.
- Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.
- Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions in the paper SA3 form.
- Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your actual calculations on the form.

# SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 063737 Cogeco US (Penn), LLC Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

	), LLC	E SYSTEM:					063737	Name
В	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCRII	BER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA	Bear Cr	eek, White Havei	n, Foster	COMMUNITY/ AREA	East Sid	e, Tobyhanna, K	idder, Tunı	9 Computat
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
WWOR	1.00			WWOR	1.00			Base Rate
								and
						-		Syndicate
			1					Exclusivi
			1		Surcharg			
			<u> </u>			for		
			<u>-</u>		Partially			
					Solution District Dis			
	-	-				Distant		
		-			DSEs 1.00  Receipts Second Group \$ 695,947.00	Stations		
			<u></u>		otal DSEs 1.00 ross Receipts Second Group \$ 695,947.00  ase Rate Fee Second Group \$ 7,404.88  FOURTH SUBSCRIBER GROUP			
		-	<u></u>					
	<mark>.</mark>	-	<u>_</u>	Total DSEs				
					Gross Receipts Second Group \$ 695,947.00  Base Rate Fee Second Group \$ 7,404.88  FOURTH SUBSCRIBER GROUP  COMMUNITY/ AREA Blythe, Middleport, New Philadelph			
				Gross Receipts Second Group \$ 695,947.00  Base Rate Fee Second Group \$ 7,404.88  FOURTH SUBSCRIBER GROUP  COMMUNITY/ AREA Blythe, Middleport, New Philadelph				
otal DSEs			1.00	Gross Receipts Second Group \$ 695,94  Base Rate Fee Second Group \$ 7,46  FOURTH SUBSCRIBER GROUP  COMMUNITY/ AREA Blythe, Middleport, New Phila	1.00			
Gross Receipts First G	roup	\$ 302	,625.00	Gross Receipts Seco	ond Group	\$ 6	95,947.00	
<b>3ase Rate Fee</b> First G	roup	\$ 3	,219.93	Base Rate Fee Seco	and Group	\$	7,404.88	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	SCHUY	LKILL		COMMUNITY/ AREA	Blythe, N	/liddleport, New	Philadelph	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	1.00 s 695,947.00 pp \$ 7,404.88  RTH SUBSCRIBER GROUP he, Middleport, New Philadelph		
	·							
		-						
				Gross Receipts Second Group \$ 695,947.00  Base Rate Fee Second Group \$ 7,404.88  FOURTH SUBSCRIBER GROUP  COMMUNITY/ AREA Blythe, Middleport, New Philadelph				
					Rate Fee Second Group \$ 695,947.00  Rate Fee Second Group \$ 7,404.88  FOURTH SUBSCRIBER GROUP  MUNITY/ AREA Blythe, Middleport, New Philadelph			
						\$ 695,947.00 \$ 7,404.88  UBSCRIBER GROUP iddleport, New Philadelph		
Total DSEs			0.00	Total DSEs			0.00	
	iroup	s 62	0.00	Total DSEs Gross Receipts Four	th Group	\$ 1	0.00	
Total DSEs Gross Receipts Third C			2,671.00	Gross Receipts Four	·		45,971.00	
Gross Receipts Third G		\$ 62			·	\$ 1 \$		
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Four	th Group		45,971.00	

LEGAL NAME OF OW Cogeco US (Per		E SYSTEM:				S	063737	Name
				ATE FEES FOR EAC				
COMMUNITY/ AREA		SUBSCRIBER GRO	JP <b>0</b>	COMMUNITY/ AREA		I SUBSCRIBER GRO	UP <b>0</b>	9
CALL SICN	Dec	CALLSION	I Dec	CALLSION	l Dec	T CALL SIGN	l Dec	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
						1	2.22	
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 GRO	UP	
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
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			criber group	as shown in the boxes	s above.	\$		

							063737	9 Computation
В				TE FEES FOR EACH			-	
		SUBSCRIBER GROU				SUBSCRIBER GRO		a
COMMUNITY/ AREA	Bear C	reek, White Havei	n, Foste	COMMUNITY/ AREA	East Sid	le, Tobyhanna, K	idder, Tuni	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
								Syndicat
								Exclusiv
								Surchar
						_		for
								Partiall
						_		Distant
								Stations
otal DSE-			0.00	Total DCC-			0.00	
otal DSEs		-	0.00	Total DSEs			0.00	
ross Receipts First G	roup	\$ 302,	,625.00	Gross Receipts Secon	d Group	\$ 6	95,947.00	
ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	•		'				•	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GRO	UP	
OMMUNITY/ AREA	SCHUY	'LKILL		COMMUNITY/ AREA	Blythe, I	Middleport, New	Philadelph	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
	<u>"</u>					_		
							······	
otal DSEs			0.00	Total DSEs			0.00	
							-	
ross Receipts Third (	roup	\$ 62,	671.00	Gross Receipts Fourth	Group	\$ 1	45,971.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
	•			11	-			
				<u>                                     </u>				
				<u>II</u>				
	ne <b>base ra</b> t	te fees for each subsc	riber group	as shown in the boxes a	above.		0.00	

		IRED COOLID	SLIBSODI	TE FEES FOR EACH	BV6E DV	COMPLITATION OF	OCK 4 · · ·	DI
	JP	SUBSCRIBER GROU		TE FEES FOR EACH		SUBSCRIBER GROU		DL
9	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computat of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate	DOL	O/ LEE OF OTT	DOL	CALL GIGIN	DOL	CALL CIGIT	DOL	OALL CICIV
and		•				_		
Syndicate						-		
Exclusiv								
Surcharg								
for		-					-	
Partially								
Distant								
Stations								
		-						
		•						
		•						
	0.00	<del>! !</del>		Total DSEs	0.00	<del>-</del>		otal DSEs
	•	-				-		
	0.00	\$	I Group	Gross Receipts Second	0.00	\$	oup	ross Receipts First Gr
		_						
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	ase Rate Fee First Gr
	•			Base Rate Fee Second	<b>'</b>			
	•	\$ SUBSCRIBER GROU			JP	\$ SUBSCRIBER GROU		S
	JP			Base Rate Fee Second COMMUNITY/ AREA	<b>'</b>			S
	JP				JP			S
	JP <b>0</b>	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH :	S COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH :	S OMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH :	S OMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH :	SOMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH :	S OMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH :	S OMMUNITY/ AREA
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LEGAL NAME OF OWN Cogeco US (Penr		LE SYSTEM:				S	YSTEM ID# 063737	Name
				TE FEES FOR EACH				
	SEVENTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9
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Name	YSTEM ID# 063737	31						LEGAL NAME OF OWNE Cogeco US (Penn)
				TE FEES FOR EACH				
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	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	FORTY COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	FORTY-S OMMUNITY/ AREA
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	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	FORTY COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	FORTY-S
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	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	FORTY COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	FORTY-S OMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	FORTY COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	FORTY-S OMMUNITY/ AREA
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	DSE O.000	SUBSCRIBER GROU	/-EIGHTH  DSE  Group	CALL SIGN  CALL SIGN  Total DSEs	DSE  DSE	SUBSCRIBER GROU	DSE	FORTY-S COMMUNITY/ AREA  CALL SIGN  Cotal DSEs

Name	YSTEM ID# 063737	S'				E SYSTEM:		LEGAL NAME OF OWNE
				TE FEES FOR EACH				
9	JP <b>0</b>	SUBSCRIBER GROU	FIFTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-NINTH	FOR COMMUNITY/ AREA
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9		SUBSCRIBER GROU	'-FOURTH			SUBSCRIBER GROU	ΓY-THIRD	
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LEGAL NAME OF OWN Cogeco US (Penr		LE SYSTEM:				S	YSTEM ID# 063737	Name
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LEGAL NAME OF OWNE Cogeco US (Penn		LE SYSTEM:				S	YSTEM ID# 063737	Name
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	0.00 0.00 JP	\$ SUBSCRIBER GROU	l Group TY-SIXTH	Base Rate Fee Second ONE HUNDRED FIF COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED FIF
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	0.00    DSE	SUBSCRIBER GROU	d Group  TY-SIXTH  DSE  Group	Dase Rate Fee Second ONE HUNDRED FIF COMMUNITY/ AREA  CALL SIGN  Total DSEs	0.00  JP  OSE  O.00	SUBSCRIBER GROU	DSE DSE	Base Rate Fee First Gr ONE HUNDRED FIF

Name	YSTEM ID# 063737	S`						LEGAL NAME OF OWNE Cogeco US (Penn)
		RIBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
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of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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and								
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Exclusivity Surcharge								
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	0.00 0.00 JP	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TY-NINTH	Base Rate Fee First G ONE HUNDRED FIFT COMMUNITY/ AREA
	0.00 0.00 JP	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FIFT COMMUNITY/ AREA  CALL SIGN
	0.00  0.00  JP  DSE	\$ I SUBSCRIBER GROU	d Group  SIXTIETH  DSE	Base Rate Fee Secon  ONE HUNDRED  COMMUNITY/ AREA  CALL SIGN	0.00	\$ SUBSCRIBER GROU	Y-NINTH  DSE	Base Rate Fee First G ONE HUNDRED FIFT COMMUNITY/ AREA

ACCOUNTING PERIOD: 2021/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Cogeco US (Penn), LLC 063737 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group . . . . . . . . . . . . . . . THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

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