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				
08/29/2022	\$ 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	2022/1								
<b>B</b> Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the busine If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account of the counting period of the	ess of the cable system on the last day of the counting perion	em the accounting period should s	•					
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM								
	MEDIACOM ILLINOIS LLC (Pontiac, IL)								
				00382220221					
				003822 2022/1					
	ONE MEDIACOM WAY MEDIACOM PARK, NY 10918								
С	INSTRUCTIONS: In line 1, give any business or trade names used to i								
System	names already appear in space B. In line 2, give the mailing address of a libentification of cable system:  1   MEDIACOM ILLINOIS LLC	i the system, ii dili	erent from the address give	п іп ѕрасе в.					
	MAILING ADDRESS OF CABLE SYSTEM:  1102 N. Fourth Streeet, PO Box 334  (Number, street, rural route, apartment, or suite number)  Chillicothe, IL 61523  (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.	<u> </u>							
Served	CITY OR TOWN	STATE IL							
First Community	Pontiac		0						
	Below is a sample for reporting communities if you report multiple characteristics of the CITY OR TOWN (SAMPLE)	annel line-ups in S STATE	pace G. CH LINE UP	SUB GRP#					
	Alda	MD	A	1					
Sample	Alliance	MD	В	2					
	Gering	MD	В	3					

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on 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	ING PERIOD: 2022/1		
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#			
MEDIACOM ILLINOIS LLC (Pontiac, IL)			003822			
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., on all communities with the channel line-up "A" in the appropriate column below or leave the on a partially distant or partially permitted basis in the DSE Schedule, associate each redesignated by a number (based on your reporting from Part 9).	e column blank. If levant community	you report any st with a subscriber	ations group,			
When reporting the carriage of television broadcast stations on a community-by-commuchannel 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	a subscriber grou					
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#			
Pontiac	IL	AA	2	First		
Cullom	IL	AA	2	Community		
Saunemin	IL	AA	2			
Cornell	IL.	AA	3			
Odell	IL ''	AA	4			
Dwight South Wilmington	IL IL	AA AB	4	See instructions for additional information		
Livingston County	IL	AA	5	on alphabetization.		
Rutland	IL	AB	1			
				Add rows as necessary.		
				Add Tows as flecessary.		
				1		

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

MEDIACOM ILLINOIS LLC (Pontiac, IL)

SYSTEM ID#

003822

### Ε

### Secondary Transmission Service: Subscribers and Rates

### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1		BLOCK 2			
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	
Residential:						
Service to first set	1,964	29.95-79.49				
Service to additional set(s)						
<ul> <li>FM radio (if separate rate)</li> </ul>						
Motel, hotel						
Commercial	1	29.95-79.49				
Converter						
Residential						
Non-residential						
1	I			T	T	

## F

### Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLO	CK 1		BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
• Pay cable	PP	Motel, hotel		Family Cable	\$ 100.00
<ul> <li>Pay cable—add'l channel</li> </ul>	PP	Commercial			
Fire protection		Pay cable			
•Burglar protection		Pay cable-add'l channel			
Installation: Residential		Fire protection			
First set	\$ 109.99	Burglar protection			
<ul> <li>Additional set(s)</li> </ul>	15.00-49.00	Other services:			
• FM radio (if separate rate)		Reconnect	\$ 49.00		
Converter	\$ 10.50	Disconnect			
		Outlet relocation	15.00-49.00		
		<ul> <li>Move to new address</li> </ul>			

FORM SA3E. PAGE 3.						ı	
LEGAL NAME OF OWN					SYSTEM ID#	Namo	
MEDIACOM ILL	INOIS LLC	(Pontiac, I	L)		003822		
PRIMARY TRANSMITTE							
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the	G, identify ever system during to the second of the second	y television state accounting of June 24, 19 4), or 76.63 (and in the next respect to any attions, or authors, or authors, or authors, or authors, if the state accell, if the state accelled a sta	g period, except 81, permitting the referring to 76.6 paragraph. If you was carried to the basis station was carried to the basis station cording to its own to be reported in the basis station was assigned to annel 4 in Wash tation is a network, "N-M" (Ill educational), ce general instructions 76.6 permitting to 76.0 permitting to 16.0 permitting to 16.0 permitting to 16.0 permitting to 76.0 permitting to 76.	(1) stations carried carriage of cert 1(e)(2) and (4))]; is carried by your one Special Statemed both on a substitus, see page (v) on program service er-the-air designation of the television statington, D.C. This pork station, an indiffer network multipor "E-M" (for nonections located in terms of the carried of the television of the television, an indicated in the television of the telev	s and low power television stations) ed only on a part-time basis under ain 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 es such as HBO, ESPN, etc. Identify ation. For example, report multi- th stream separately; for example ion for broadcasting over-the-air in may be different from the channel expendent station, or a noncommercial cast), "I" (for independent), "I-M" commercial educational multicast). the paper SA3 form. es". If not, enter "No". For an ex-	Primary Transmitters: Television	
planation 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.							
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LEGAL NAME OF OWN	IED OE CABI E S	VSTEM:			SYSTEM ID#	ŧ	
MEDIACOM ILL			L)		003822	Namo	
PRIMARY TRANSMITTE	ERS: TELEVISION	ON					
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 in in the paper SA3 fo Column 1: List each each multicast stream cast stream as "WETA-Simulcast). Column 2: Give the	formation cond rm. h station's call associated wit -2". Simulcast e channel num se. For example	sign. Do not has a station ac streams must ber the FCC he, WRC is Ch	tute basis station report origination cording to its over the reported in the case assigned to	ns, see page (v) on program service er-the-air designate column 1 (list each the television star	of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi- th stream separately; for example tion for broadcasting over-the-air in may be different from the channel		
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		CHANN	EL LINE-UP	AA Cont			
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		
WTTW-DT4 V-ME	11.4	E	Yes	0	Chicago, IL		
WYZZ/WYZZ (HD)	28	l	No		Bloomington, IL	See instructions for	
WYZZ-DT3 Get TV	28.3		No		Bloomington, IL	additional information  on alphabetization.	

G

**Primary** 

Transmitters:

Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

MEDIACOM ILLINOIS LLC (Pontiac, IL)

PRIMARY TRANSMITTERS: TELEVISION

SYSTEM ID#

003822

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

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

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

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

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

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

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

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

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

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

CHANNEL LINE-UP AB								
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			
WBBM/WBBM (HI	12	N	No		Chicago, IL			
WBBM-DT2 Start	12.2	I	No		Chicago, IL			
WCIU/WCIU (HD)	27	I	No		Chicago, IL			
WCIU-DT2 The U	27.2	I	No		Chicago, IL			
WCIU-DT3 Me TV	27.3	I	No		Chicago, IL			
WCIU-DT4 Heros	27.4	I	No		Chicago, IL			
WCIU-DT5 Story 1	27.5	I	No		Chicago, IL			
WFLD/WFLD (HD)	31	I	No		Chicago, IL			
WFLD-DT2 Movie	31.2	I	No		Chicago, IL			
WFLD-DT3 BUZZI	31.3	I	No		Chicago, IL			
WGN/WGN (HD)	19	I	No		Chicago, IL			
WGN-DT2 Antenn	19.2	I	No		Chicago, IL			
WGN-DT3 Court 1	19.3	I	No		Chicago, IL			
WLS/WLS (HD) AI	7	N	No		Chicago, IL			
WLS-DT2 Localis	7	I	No		Chicago, IL			
WMAQ/WMAQ (H	29	N	No		Chicago, IL			
WMAQ-DT2 Cozi	29.2	I	No		Chicago, IL			
WPWR/WPWR (H	50	I	No		Chicago, IL			

**ACCOUNTING PERIOD: 2022/1** FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **MEDIACOM ILLINOIS LLC (Pontiac, IL)** 003822 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 AB								
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			
WSNS Telemunde	45	I	No		Chicago, IL			
WTTW/WTTW (HE	11	E	No		Chicago, IL			
WTTW-DT3 CREA	11.3	Е	No		Chicago, IL			
WTTW-DT4 V-ME	11.4	E	No		Chicago, IL			
WBBM-DT3 DABL	12.3	l	No		Chicago, IL			
WCPX/WCPX HD	34	l	No		Chicago, IL			
WCPX-DT2 Bound	34.2	I	No		Chicago, IL			
WCPX-DT3 Laff	34.3	l	No		Chicago, IL			
WGBO/WGBO HD	35	I	No		Joliet, IL			
WGBO-DT2 Laff	35.2	l	No		Joliet, IL			
WGBO-DT3 getT\	35.3	I	No		Joliet, IL			
WGBO-DT4 True	35.4	I	No		Joliet, IL			
WGBO-DT5 Grit	35.5	I	No		Joliet, IL			
WCIU-DT6 Decad	27.6	l	No		Chicago, IL			
	1							

ACCOUNTING PERIOD: 2022/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **MEDIACOM ILLINOIS LLC (Pontiac, IL)** 003822 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: 2022/1
LEGAL NAME OF OWNER OF						S	SYSTEM ID#	Name
MEDIACOM ILLINOIS I	LLC (Pont	iac, IL)					003822	Nume
SUBSTITUTE CARRIAGE								
In General: In space I, identi substitute basis during the ac explanation of the programm	ccounting pe	riod, under spe	ecific present and former FC	C rules, regula	ations, or aut	thorizations. I	For a further	Substitute
1. SPECIAL STATEMENT								Carriage:
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?								Special Statement and Program Log
<b>Note:</b> If your answer is "No log in block 2.	", leave the	rest of this pag	ge blank. If your answer is "	Yes," you mu	ust complete	the progran	n	
2. LOG OF SUBSTITUTE In General: List each subst clear. If you need more spa	itute progra ce, please a of every no distant stat	m on a separa attach additiona nnetwork televi ion and that yo	al pages. ision program (substitute p ur cable system substituted	rogram) that, d for the prog	during the a	accounting another stati	ion	
SA3 form for futher informa titles, for example, "I Love L Column 2: If the program Column 3: Give the call	tion. Do no ucy" or "NE n was broad sign of the s	t use general of A Basketball: Icast live, ente station broadca	categories like "movies", or	"basketball". o." n.	List specific	c program		l
the case of Mexican or Can Column 5: Give the mon first. Example: for May 7 giv	adian statio th and day /e "5/7."	ns, if any, the when your sys	community with which the stem carried the substitute p	station is iden program. Use	ntified). numerals, v	vith the mon		l
to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	program carri	gram was carried by your or ed by a system from 6:01:1 was substituted for progra	5 p.m. to 6:2	8:30 p.m. sł	nould be		ı
to delete under FCC rules a gram was substituted for pr effect on October 19, 1976.	ogramming							l
S	SUBSTITUT	E PROGRAM			EN SUBSTI		7. REASON FOR	ı
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. T	TIMES TO	DELETION	1
					-	_		1
					-	_		1
					-	_		1
					_			1
	<del> </del>							1
	<b></b>							1
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					_	_		1
								1
								1

ACCOUNTING PERIOD: 2022/1 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 003822 **MEDIACOM ILLINOIS LLC (Pontiac, IL) PART-TIME CARRIAGE LOG** J In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.– 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.-12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS HOURS** DATE **FROM** TO DATE **FROM** TO

LEGA	NAME OF OWNER OF CABLE SYSTEM:  DIACOM ILLINOIS LLC (Pontiac, IL)		SYSTEM ID# 003822	Name
Inst all a (as i page	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount mounts (gross receipts) paid to your cable system by subscribers for the system's secondentified in space E) during the accounting period. For a further explanation of how to ce (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s) during the accounting period.  ORTANT: You must complete a statement in space P concerning gross receipts.	ondary transmission s ompute this amount,	service see 252,986.72	<b>K</b> Gross Receipts
<ul><li>Instru</li><li>Con</li><li>Con</li><li>If you feet</li><li>If you accommoded</li></ul>	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. For block 3 blank. Enter the arternation block 1 on line 1 of block 4, and calculate the total royalty fee. For system did carry any distant television stations, you must complete the applicable prompanying this form and attach the schedule to your statement of account.	arts of the DSE Sched	dule	L Copyright Royalty Fee
bloc ▶ If pa 3 be ▶ If pa	or t 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be k 3 below.  For the DSE schedule was completed, the amount from line 7 of block C should be a slow.  For part 9, block B, of the DSE schedule was completed, the surcharge amount shoblock 4 below.	entered on line 2 in bl	lock	
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.  This is your minimum fee.	e is 1.064 percent of t		
	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 perion of the column of t	information you gave nn 4, you must check od?	e in	
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero  Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE	\$	12,104.52 499.58	
	schedule. If none, enter zero  Line 3. Add lines 1 and 2 and enter here	\$	12,604.10	
4	<ul> <li>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</li> <li>Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.</li> <li>Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)</li> </ul>	\$	0.00	Cable systems submitting additional deposits under Section 111(d)(7) should contact
	Line 4. FILING FEE  TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.	<u>\$</u>	725.00	the Licensing additional fees. Division for the appropriate form for
	Add Lines 1, 2 and 3 of block 4 and enter total here	\$ See page (i) of the	13,329.10	submitting the additional fees.

Name	LEGAL NAME OF OWNER OF CABLE SY	YSTEM:	SYSTEM ID#						
IVAIIIE	MEDIACOM ILLINOIS LLC	(Pontiac, IL)	003822						
<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.								
	Enter the total number of acon which the cable system calls.	•	74						
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACt we can contact about this state	CTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual ement of account.)							
for Further Information	Name Kenneth J. Ko	<b>hrs</b> Telephone	845-443-2762						
	Address One Mediacon (Number, street, rural ro	n Way ute, apartment, or suite number)							
	Mediacom Par								
		ghts@mediacomcc.com Fax (optional)							
_	CERTIFICATION (This stateme	nt of account must be certifed and signed in accordance with Copyright Office req	gulations.						
O Certifcation	• I, the undersigned, hereby cert	ify that (Check one, but only one, of the boxes.)							
	(Owner other than corpora	tion or partnership) I am the owner of the cable system as identifed in line 1 of space	e B; or						
		corporation or partnership) I am the duly authorized agent of the owner of the cabl that the owner is not a corporation or partnership; or	e system as identified						
	(Officer or partner) I am an in line 1 of space B.	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 declare under penalty of law that all statements of fact contain to the best of my knowledge, information, and belief, and are made in good faith.	ned herein						
	X	/s/ Kenneth J. Kohrs							
	(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 o	r printed name: <b>Kenneth J. Kohrs</b>							
		Vice President, Financial Reporting (Title of official position held in corporation or partnership)							
	Date:	August 11, 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

LEGAL NAME OF OWNER OF CABLE SYSTEM:  MEDIACOM ILLINOIS LLC (Pontiac, IL)  003822	Name					
MEDIACOM ILLINOIS LLC (Pontiac, IL) 003822						
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."						
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.	Concerning Gross Receipts Exclusion					
During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?						
X NO						
YES. Enter the total here and list the satellite carrier(s) below						
Name Name Mailing Address Mailing Address						
INTERFOL ACCECOMENTS						
INTEREST ASSESSMENTS						
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q					
	Interest					
Line 1 Enter the amount of late payment or underpayment	Assessment					
X						
Line 2 Multiply line 1 by the interest rate* and enter the sum here						
xdays						
Line 3 Multiply line 2 by the number of days late and enter the sum here						
x 0.00274						
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,						
space L, (page 7)						
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please						
contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.						
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.						
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.						
Owner						
Address						
First community served						
Accounting period						
ID number						

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on 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 sufficiency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2022/1

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 carried by a cable system during an accounting period. Your system's total number of DSEs determines the royalty you owe. For the full definition, see page (v) of the General Instructions in the paper SA3 form.

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

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

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

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

Step 2: Calculate the station's basis of carriage value: The DSE of

**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 of hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

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

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

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

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

Step 2: Divide the result of step 1 by the total number of days in the calendar year (365—or 366 in a leap year). This gives you the 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.

Santa Rosa	Stations A and C 35 mile zone
<b>\</b> an	Bodega Bay ns B, D, d E le zone

Distant Stations Carried			Identification	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 DSFs	2 472		TOTAL GROSS RECEIPTS	\$600,000,00				

Minimum Fee Total Gross Receipts	\$600,000.00
	x .01064
	00.004.00

		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: 2022/1** 

DSE SCHEDULE. PAG	E 11. (CONTINUED)												
4	LEGAL NAME OF OWNER OF CABLE	SYSTEM:			S	YSTEM ID#							
•	MEDIACOM ILLINOIS LLC (Pontiac, IL) 00382												
	SUM OF DSEs OF CATEGOR	-											
	Add the DSEs of each station.												
	Enter the sum here and in line 1 of part 5 of this schedule.												
	Instructions:												
2	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5												
	of space G (page 3).												
Computation of DSEs for	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."												
Category "O"	mercial educational station, give	e the DSE as	25. CATEGORY "O" STATIO	NS: DSEs									
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE							
Stations	WFLD/WFLD (HD) FOX	1.000	OALL SIGN	DOL	OALL GIGIN	DOL							
	WILL/WILL (HD) PBS	0.250											
	WILL-DT2 PBS WORLD	0.250											
	WILL-DT3 PBS CREATE												
	WTTW/WTTW (HD) PBS	0.250											
Add rows as	WTTW-DT3 CREATE	0.250											
necessary.	WTTW-DT4 V-ME	0.250											
Remember to copy	VV11VV-D14 V-MIC	0.230											
all formula into new													
rows.													
1													
1													
1													
1													
1													

	LEGAL NAME OF O	WNER OF CABLE SYSTEM:						YSTEM ID#			
Name	MEDIACOM I	LLINOIS LLC (Ponti	ac, IL)				_	003822			
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This 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.										
			ATEGORY LAC				1				
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	JRS C ED BY S M C	UMBER OF HOURS TATION ON AIR	4. BASIS OF CARRIAG VALUE			SE.			
			····		=	X	=				
			÷ ÷			<u>x</u>	<u> </u>				
			<u>-</u>		=	x x					
			÷		=	x	=				
			÷		=	x	=				
			÷		=	x	=				
			÷	•	=	x	=				
	Add the DSEs of	OF CATEGORY LAC S of each station. m here and in line 2 of pa		e,	▶	0.00					
Computation of DSEs for Substitute-Basis Stations	Was carried tions in effections in effections in effections processed by the second space I).     Column 2: Fat your option. The second s	ct on October 19, 1976 (and or more live, nonnetwoner or each station give the This figure should correst or the number of days Divide the figure in columner or the number of days Divide the number of	tution for a progran as shown by the let ork programs during number of live, nor spond with the infor in the calendar ye in 2 by the figure in	n that your systen ter "P" in column that optional carr metwork program mation in space I. ar: 365, except in column 3, and gi	n was permitted to the following of space (); and the following ()	to delete under FCC rule	2 of were deleted as than the third	rm).			
		SUI	BSTITUTE-BAS	SIS STATION	S: COMPUTA	ATION OF DSEs					
	1. CALL SIGN	2. 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			
		÷		=		<mark></mark>		=			
		÷		=				=			
		÷		=		+	÷	=			
		÷		=		+	-	=			
	Add the DSEs of	OF SUBSTITUTE-BASI of each station. m here and in line 3 of pa		e,	▶	0.00					
5		R OF DSEs: Give the am applicable to your system		s in parts 2, 3, and	4 of this schedule	e and add them to provide	e the tota				
Total Number	1. Number of	DSEs from part 2 ●				<b>-</b>	2.50				
of DSEs	2. Number of	DSEs from part 3 ●				<b>-</b>	0.00				
	3. Number of	DSEs from part 4 ●				<b>&gt;</b>	0.00				
	TOTAL NUMBER	R OF DSEs						2.50			

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2022/1

LEGAL NAME OF C			.)				S	YSTEM ID# 003822	Name
Instructions: Bloc In block A: • If your answer if schedule.	"Yes," leave the re	emainder of		7 of the DSE sche	edule blank an	nd complete pa	art 8, (page 16) of	f the	6
If your answer if '	"No," complete bio			ELEVISION MA	ARKETS				Computation of
=	1981?	outside of all	major and sma		fined under se			gulations in	3.75 Fee
		BLO	CK B: CARR	IAGE OF PERI	MITTED DS	Es			
Column 1: CALL SIGN	under FCC rules instructions for the	and regulati ne DSE Sche	ons prior to Jur edule. (Note: Th	part 2, 3, and 4 of ne 25, 1981. For fu ne letter M below r Act of 2010.)	ırther explana	tion of permitt	ed stations, see t	he	
Satellite Television Extension and Localism Act of 2010.)  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(d) D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule).  E Carried pursuant to individual waiver of FCC rules (76.7)  *F A station previously carried on a part-time or substitute basis prior to June 25, 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:		e stations ide	entified by the le	parts 2, 3, and 4 etter "F" in column			vorksheet on pag	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
WFLD/WFL		1.00	WTTW-DT4		0.25	01014	Briefe		
WILL/WILL	С	0.25							
WILL-DT2 F		0.25							
WILL-DT3 F		0.25							
WTTW/WT7		0.25							
WTTW-DT3	С	0.25							-
								2.50	
		Е	BLOCK C: CO	MPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule					
Line 2: Enter the	sum of permitte	d DSEs fro	m block B abo	ove					
Line 3: Subtract (If zero, le				r of DSEs subjec 7 of this schedu		rate.	n <del></del>		
Line 4: Enter gro	ss receipts from	space K (p	page 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375	and enter s	um here				х		permited/ partially nonpermitted carriage?
Line 6: Enter tota	al number of DS	Es from line	3						If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 ar	nd enter he	re and on line	2, block 3, spac	e L (page 7)			0.00	

Name	YSTEM ID# 003822					)	sysтем: Pontiac, IL	LINOIS LLC (F	
			ED)	(CONTINU	SION MARKETS	A: TELEVIS	BLOCK		
6	3. DSE	2. PERMITTED BASIS		3. DSE	2. PERMITTED		3. DSE	2. PERMITTED	1. CALL SIGN
Computatio		BASIS	SIGN		BASIS	SIGN		BASIS	SIGN
3.75 Fee									
								•	
								•	
								•	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  MEDIACOM ILLINOIS LLC (Pontiac, IL)  003822											
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.  A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections											
	1 CALL				ED				6.0	EDMITTED		
	1. CALL SIGN	2. PRIC		COUNTING ERIOD		4. BASIS OF CARRIAGE		RESENT DSE	0. P	ERMITTED DSE		
7 Computation of the Syndicated Exclusivity Surcharge	If your answer is	"Yes," comple "No," leave b	ete blocks B and C locks B and C blan BLOC	k and complete	TE	rt 8 of the DSE schedu LEVISION MARKI as defned by section 7	ET	rules in effect J	une 24,	1981?		
	Yes—Complete	blocks B and	IC.			X No—Proceed to	part 8					
	BLOCK B: C	arriage of VHI	-/Grade B Contour	Stations		BLOCK	C: Compu	ıtation of Exem	pt DSEs	3		
	Is any station listed in commercial VHF stati or in part, over the ca	ion that places			r	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 sta			ate permi	tted DSE		
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	iN	DSE		
		-										
		-										
		-										
			TOTAL DSEs	0.00				TOTAL DS	Es	0.00		

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:  MEDIACOM ILLINOIS LLC (Pontiac, IL)	SYSTEM ID# 003822	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	752,986.72	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defned by the FCC?  Yes—Complete section 3 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?	_	
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS is 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		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	Yes—Complete part 9 of this schedule.  X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.  A. Enter 0.00300 of gross receipts (the amount in section 1)	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		ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID# 003822
		MEDIACOM ILLINOIS LLC (Pontiac, IL)	003022
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)	
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$	
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1)	
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.	
		F. Multiply line D by line E and enter here	
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)	
		Syndicated Exclusivity Surcharge	<u></u> .
8 Computation of Base Rate Fee	You m 6 was In blo If you If you blank What i	ctions:  ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of prochecked "Yes," use the total number of DSEs from part 5.  bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.  ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.  ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below.  is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers becated within that station's local service area and others were located outside that area. For the definition of a station's "local area," see page (v) of the general instructions.	low
		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?	
		Yes—Complete part 9 of this schedule. No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ _\$	
	Section 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)	
		B. Enter 0.00701 of gross receipts  (the amount in section 1) ▶	
		C. Subtract 1.000 from total DSEs  (the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	<u> </u>
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	
		Base Rate Fee	0.00
	i		

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2022/1

	AME OF OWNER OF CABLE SYSTEM: ACOM ILLINOIS LLC (Pontiac, IL)	SYSTEM ID# 003822	Name
Section 4	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		_
4	A. Enter 0.01064 of gross receipts (the amount in section 1)   **State		8
	B. Enter 0.00701 of gross receipts  (the amount in section 1) \$		Computation
	C. Multiply line B by 3.000 and enter here	_	Base Rate Fee
	D. Enter 0.00330 of gross receipts  (the amount in section 1)  \$\bigsim \bigsim \bigsi		
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your base rate fee.  Enter here and in block 3, line 1, space L (page 7)  Base Rate Fee  \$	0.00	
instead	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channe	0	9
receipt exclusi First: [	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fees from subscribers located within the station's local service area, from your system's total gross receipts. To take acon, you must:  Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to	dvantage of this the same	Computation of Base Rate Fee and Syndicated
DSEs a	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for : Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		Exclusivity Surcharge for
also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in purply a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B becable system is wholly located outside all major television markets, complete block A only.		Partially Distant Stations, and
Step 1	Identify a Subscriber Group for Partially Distant Stations  For each community served, determine the local service area of each wholly distant and each partially distant stat to that community.	ion you	for Partially Permitted Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were lo the station's local service area. A subscriber located outside the local service area of a station is distant to that sta- ne token, the station is distant to the subscriber.)		
subscr	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Compi groups	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your syst	tem's subscriber	
In each Identi Give	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 bers in the group.	of the	
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in fithis schedule; or,	n parts 2, 3,	
	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b 6 of this schedule.	lock B,	
	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
in the	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in paper SA3 form.		
page. DSEs f	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the or that group's complement of stations and total gross receipts from the subscribers in that group). You do not nee calculations on the form.	at is, the total	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 003822 **MEDIACOM ILLINOIS LLC (Pontiac, IL)** 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.

	GAL NAME OF OWNER OF CABLE SYSTEM:  EDIACOM ILLINOIS LLC (Pontiac, IL)  003822									
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP				
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GRO	JP	^		
COMMUNITY/ AREA	South \	Wilmington, Rutla	ınd	COMMUNITY/ AREA	Saunem	in, Cullom, Ponti	ac	9 Computation		
CALL SIGN	DSE	CALL SIGN DSE		CALL SIGN	DSE	CALL SIGN	DSE	of		
				WFLD/WFLD (HD)				Base Rate Fe		
		-		WTTW/WTTW (HD	<b>.</b>			and		
				WTTW-DT3 CREA	•			Syndicated		
				WTTW-DT4 V-ME	0.25			Exclusivity		
								Surcharge		
								for		
								Partially		
								Distant Stations		
								Stations		
	<u></u>									
	<u> </u>	-								
Total DSEs			0.00	Total DSEs			1.75			
Gross Receipts First G	iroup	\$ 40	,469.41	Gross Receipts Second	d Group	\$ 5	33,700.32			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	d Group	\$	8,484.50			
	THIRD	SUBSCRIBER GROU	JP			SUBSCRIBER GRO	JP			
COMMUNITY/ AREA	Cornell			COMMUNITY/ AREA	Dwight,	Odell				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
WILL/WILL (HD) P	0.25			WFLD/WFLD (HD)	1.00					
WILL-DT2 PBS W	C 0.25			WILL/WILL (HD) P	0.25					
WILL-DT3 PBS CF	R 0.25			WILL-DT2 PBS W	0.25					
WTTW/WTTW (HD	0.25			WILL-DT3 PBS CF	0.25					
WTTW-DT3 CREA				WTTW/WTTW (HD						
WTTW-DT4 V-ME	0.25	-		WTTW-DT3 CREA	•					
				WTTW-DT4 V-ME	0.25					
	<u></u>									
Total DSEs			1.50	Total DSEs			2.50			
Gross Receipts Third (	Group	\$ 13	,322.00	Gross Receipts Fourth	Group	<u>\$ 1</u>	60,222.57			
Base Rate Fee Third (	Group	\$	188.44	Base Rate Fee Fourth	Group	\$	3,389.51			
Base Rate Fee: Add th	ne <b>base rat</b>	te fees for each subsc	riber group	as shown in the boxes al	bove.					
Enter here and in block			g.oup	u.s boxes u		\$	12,104.52			

	S LLC (	E SYSTEM: ( <b>Pontiac, IL)</b>				3	003822	Na
BLO	CK A: C	OMPUTATION OF						
	FIFTH S	SUBSCRIBER GRO	UP		SIXTH	SUBSCRIBER GRO	JP	•
COMMUNITY/ AREA L				COMMUNITY/ AREA 0				Comp
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	c
	0.25							Base R
WTTW-DT3 CREAT	0.25							ar
WTTW-DT4 V-ME	0.25							Syndi
								Exclu
								Surc fo
								Part
			<u> </u>					Dis
			<u> </u>					Stat
			<u> </u>					
Γotal DSEs			0.75	Total DSEs			0.00	
Gross Receipts First Grou	מנ	\$ 5	,272.42	Gross Receipts Seco	nd Group	\$	0.00	
,	· .		<u></u>			·		
		1						
Base Rate Fee First Grou	ıb	\$	42.07	Base Rate Fee Secon	nd Group	\$	0.00	
	• !	\$ SUBSCRIBER GRO	· · · · · · · · · · · · · · · · · · ·	Base Rate Fee Secon		SUBSCRIBER GROU	<u>, , , , , , , , , , , , , , , , , , , </u>	
SE	• !		· · · · · · · · · · · · · · · · · · ·	Base Rate Fee Secon	EIGHTH	<u> </u>	<u>, , , , , , , , , , , , , , , , , , , </u>	
SE <sup>*</sup> COMMUNITY/ AREA	• !		UP		EIGHTH	<u> </u>	UP	
SE'COMMUNITY/ AREA	VENTH S	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP <b>0</b>	
SE'COMMUNITY/ AREA	VENTH S	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP <b>0</b>	
SE'COMMUNITY/ AREA	VENTH S	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP <b>0</b>	
SE'COMMUNITY/ AREA	VENTH S	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP <b>0</b>	
SE'COMMUNITY/ AREA	VENTH S	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP <b>0</b>	
SE'COMMUNITY/ AREA	VENTH S	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP <b>0</b>	
SE'COMMUNITY/ AREA	VENTH S	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP <b>0</b>	
SE'COMMUNITY/ AREA	VENTH S	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP <b>0</b>	
SE'COMMUNITY/ AREA	VENTH S	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP <b>0</b>	
SE'	VENTH S	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP <b>0</b>	
SE'	VENTH S	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP <b>0</b>	
SE'	VENTH S	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP <b>0</b>	
SE'COMMUNITY/ AREA	VENTH S	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP <b>0</b>	
SE'COMMUNITY/ AREA	VENTH S	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP <b>0</b>	
CALL SIGN	VENTH S	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP <b>0</b>	
CALL SIGN  CALL SIGN  Fotal DSEs	DSE OF THE STATE O	CALL SIGN	DSE DSE D.00	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	SUBSCRIBER GROU	DSE O.000	
CALL SIGN  CALL SIGN  Total DSEs	DSE OF THE STATE O	SUBSCRIBER GRO	DSE	COMMUNITY/ AREA  CALL SIGN	DSE	SUBSCRIBER GROU	DSE	
COMMUNITY/ AREA	DSE OF THE STATE O	CALL SIGN	DSE DSE D.00	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	SUBSCRIBER GROU	DSE O.000	

EGAL NAME OF OWNER OF CABLE SYSTEM:  MEDIACOM ILLINOIS LLC (Pontiac, IL)  003822								
[	RIBER GROUP							
COMMUNITY/ AREA		SUBSCRIBER GROU	JP <b>0</b>	COMMUNITY/ AREA		I SUBSCRIBER GRO	UP <b>0</b>	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DSE	CALL SIGN	DOE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs		Ц	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	
	ELEVENTH	SUBSCRIBER GROU			TWELVTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  MEDIACOM ILLINOIS LLC (Pontiac, IL)  003822								
BL				TE FEES FOR EACH				
		SUBSCRIBER GROU				SUBSCRIBER GROU		9
COMMUNITY/ AREA	South \	Wilmington, Rutla	ınd	COMMUNITY/ AREA	Saunen	nin, Cullom, Pontia	IC	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
						<b>-</b>		for Partially
								Distant
								Stations
	<u> </u>				<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	<b>\$</b> 40,	469.41	Gross Receipts Secon	d Group	\$ 53	3,700.32	
Base Bate Eas First Cr	au n		0.00	Page Pate Fee Coope	d Croup		0.00	
Base Rate Fee First Gr		\$		Base Rate Fee Secon		\$	1	
		SUBSCRIBER GROU	JP			SUBSCRIBER GROU	Р	
COMMUNITY/ AREA	Cornell			COMMUNITY/ AREA	Dwight,	Odell		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
WFLD/WFLD (HD)	1.00							
							<u> </u>	
						·		
						•		
Total DSEs	I		1.00	Total DSEs	1		0.00	
Gross Receipts Third G	roup	<b>\$</b> 13,	322.00	Gross Receipts Fourth	Group	\$ 16	0,222.57	
<b>Base Rate Fee</b> Third G	roup	\$	499.58	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th	e <b>base ra</b> t	te fees for each subsc	riber group	as shown in the boxes a	above.			
Enter here and in block			group	as one will in the boxes o		\$	499.58	

Name	EGAL NAME OF OWNER OF CABLE SYSTEM:  MEDIACOM ILLINOIS LLC (Pontiac, IL)  003822													
				TE FEES FOR EACH		BLOCK A: COMPUTATION OF BASE F								
9		SUBSCRIBER GROU	SIXTH		JP	SUBSCRIBER GROU								
Computati	0		COMMUNITY/ AREA		TY/ AREA Livingston County									
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN						
Base Rate I														
and						-								
Syndicate														
Exclusivit Surcharg						_								
for														
Partially		•					-							
Distant														
Stations														
	0.00		•	Total DSEs	0.00			Γotal DSEs						
		¢		0 0 1 0	272.42		oun	Gross Receipts First Gr						
	0.00	\$	d Group	Gross Receipts Secon		\$ 5,	oup	order recorpto i not or						
	0.00	<b>3</b>	d Group	Gross Receipts Secon		\$ <u>5,</u>	oup	order redespite i met er						
	0.00	\$		Base Rate Fee Secon	0.00	\$ 5,								
	0.00		d Group		0.00		oup	<b>3ase Rate Fee</b> First Gr						
	0.00	\$	d Group		0.00	\$	oup	<b>3ase Rate Fee</b> First Gr S						
	0.00	\$	d Group	Base Rate Fee Secon	<b>0.00</b>	\$	oup	<b>3ase Rate Fee</b> First Gr S						
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00	\$ SUBSCRIBER GROU	oup SEVENTH	Base Rate Fee First Gr S COMMUNITY/ AREA						
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00	\$ SUBSCRIBER GROU	oup SEVENTH	Base Rate Fee First Gr S COMMUNITY/ AREA						
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00	\$ SUBSCRIBER GROU	oup SEVENTH	Base Rate Fee First Gr S COMMUNITY/ AREA						
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00	\$ SUBSCRIBER GROU	oup SEVENTH	Base Rate Fee First Gr S COMMUNITY/ AREA						
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00	\$ SUBSCRIBER GROU	oup SEVENTH	Base Rate Fee First Gr S COMMUNITY/ AREA						
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00	\$ SUBSCRIBER GROU	oup SEVENTH	Base Rate Fee First Gr S COMMUNITY/ AREA						
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00	\$ SUBSCRIBER GROU	oup SEVENTH	Base Rate Fee First Gr S COMMUNITY/ AREA						
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00	\$ SUBSCRIBER GROU	oup SEVENTH	Base Rate Fee First Gr S COMMUNITY/ AREA						
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00	\$ SUBSCRIBER GROU	oup SEVENTH	Base Rate Fee First Gr S COMMUNITY/ AREA						
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00	\$ SUBSCRIBER GROU	oup SEVENTH	Base Rate Fee First Gr S COMMUNITY/ AREA						
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00	\$ SUBSCRIBER GROU	oup SEVENTH	Base Rate Fee First Gr S COMMUNITY/ AREA						
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00	\$ SUBSCRIBER GROU	oup SEVENTH	Base Rate Fee First Gr S COMMUNITY/ AREA						
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00	\$ SUBSCRIBER GROU	oup SEVENTH	Base Rate Fee First Gr S COMMUNITY/ AREA						
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00	\$ SUBSCRIBER GROU	oup SEVENTH	Base Rate Fee First Gr S COMMUNITY/ AREA						
	JP 0	\$ SUBSCRIBER GROU	d Group  EIGHTH  DSE	Base Rate Fee Secon  COMMUNITY/ AREA  CALL SIGN	0.00  JP  OSE	\$ SUBSCRIBER GROU	DSE	SCOMMUNITY/ AREA  CALL SIGN						

NI	EGAL NAME OF OWNER OF CABLE SYSTEM:  MEDIACOM ILLINOIS LLC (Pontiac, IL)  003822										
	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP										
9		SUBSCRIBER GROU	TENTH			SUBSCRIBER GROU	NINTH				
Computati	COMMUNITY/ AREA 0					MUNITY/ AREA <b>0</b>					
of	DSE										
Base Rate											
and						-					
Syndicate											
Exclusivi Surcharg							<u> </u>				
for											
Partially							-				
Distant											
Stations											
_	0.00			Total DSEs	0.00			Total DSEs			
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	roup	Gross Receipts First G			
-											
-   T											
	0.00	\$		Base Rate Fee Second	0.00	\$					
	JP	\$ SUBSCRIBER GROU			JP	SUBSCRIBER GROU		E			
	•			Base Rate Fee Second COMMUNITY/ AREA				E			
	JP				JP			E			
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA			
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA			
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA			
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA			
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA			
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA			
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA			
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA			
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA			
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA			
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA			
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA			
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA			
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	CALL SIGN			
	JP O DSE	SUBSCRIBER GROU	DSE	CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	CALL SIGN  CALL SIGN  Total DSEs			
	DSE O.00	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	JP  O  DSE  O  O  O  O  O  O  O  O  O  O  O  O  O	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA			
	DSE O.00	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	JP  O  DSE  O  O  O  O  O  O  O  O  O  O  O  O  O	SUBSCRIBER GROU	DSE	CALL SIGN  CALL SIGN  Total DSEs			

ACCOUNTING PERIOD: 2022/1

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MEDIACOM ILLINOIS LLC (Pontiac, IL) 003822 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 

	C (Pontiac, IL)					YSTEM ID# 003822		
			TE FEES FOR EAC					
THIRTEENT	H SUBSCRIBER GRO	0 <b>0</b>	COMMUNITY/ AREA		I SUBSCRIBER GRO	<u>UP</u> 0		
		U		OOMNOW!! / ARCA				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
otal DSEs		0.00	Total DSEs			0.00		
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec		\$	0.00		
	H SUBSCRIBER GRO				SUBSCRIBER GROU			
OMMUNITY/ AREA		0	COMMUNITY/ AREA					
				Α		0		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
ALL SIGN DSE	CALL SIGN				CALL SIGN			
ALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
	CALL SIGN				CALL SIGN			
Total DSEs	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
CALL SIGN DSE  Control DSEs  Gross Receipts Third Group		DSE	CALL SIGN  Total DSEs	DSE		DSE		

	C (Pontiac, IL)					003822	
			TE FEES FOR EAC			ID	
COMMUNITY/ AREA	H SUBSCRIBER GRO	0 0	EIGHTEENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs		0.00	Total DSEs		<u>!</u> !	0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	H SUBSCRIBER GRO		li		SUBSCRIBER GROU		
OMMUNITY/ AREA		0	COMMUNITY/ ARE				
				Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
	CALL SIGN				CALL SIGN		
Fotal DSEs	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE  CALL SIGN  DSE  Fotal DSEs  Gross Receipts Third Group		DSE	CALL SIGN  Total DSEs	DSE		0.00	

SAL NAME OF OWNER OF CABLE SYSTEM:  EDIACOM ILLINOIS LLC (Pontiac, IL)  003822								
			TE FEES FOR EAC					
	SUBSCRIBER GRO			SUBSCRIBER GRO	UP <b>0</b>			
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0					
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	.							
	+							
otal DSEs	-11	0.00	Total DSEs		11	0.00		
			Total DSEs					
ross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
	SUBSCRIBER GRO				SUBSCRIBER GRO			
TWENTY-THIRD				ΓΥ-FOURTH				
TWENTY-THIRD		OUP	TWEN	ΓΥ-FOURTH		UP		
TWENTY-THIRE	SUBSCRIBER GRO	0 0	TWENT	ry-fourth	SUBSCRIBER GRO	UP <b>0</b>		
TWENTY-THIRE	SUBSCRIBER GRO	0 0	TWENT	ry-fourth	SUBSCRIBER GRO	UP <b>0</b>		
TWENTY-THIRE	SUBSCRIBER GRO	0 0	TWENT	ry-fourth	SUBSCRIBER GRO	UP <b>0</b>		
TWENTY-THIRD	SUBSCRIBER GRO	0 0	TWENT	ry-fourth	SUBSCRIBER GRO	UP <b>0</b>		
TWENTY-THIRD	SUBSCRIBER GRO	0 0	TWENT	ry-fourth	SUBSCRIBER GRO	UP <b>0</b>		
TWENTY-THIRE  OMMUNITY/ AREA	SUBSCRIBER GRO	0 0	TWENT	ry-fourth	SUBSCRIBER GRO	UP <b>0</b>		
TWENTY-THIRE  OMMUNITY/ AREA	SUBSCRIBER GRO	0 0	TWENT	ry-fourth	SUBSCRIBER GRO	UP <b>0</b>		
TWENTY-THIRE OMMUNITY/ AREA	SUBSCRIBER GRO	0 0	TWENT	ry-fourth	SUBSCRIBER GRO	UP <b>0</b>		
TWENTY-THIRE OMMUNITY/ AREA	SUBSCRIBER GRO	0 0	TWENT	ry-fourth	SUBSCRIBER GRO	UP <b>0</b>		
TWENTY-THIRE OMMUNITY/ AREA	SUBSCRIBER GRO	0 0	TWENT	ry-fourth	SUBSCRIBER GRO	UP <b>0</b>		
TWENTY-THIRE OMMUNITY/ AREA	SUBSCRIBER GRO	0 0	TWENT	ry-fourth	SUBSCRIBER GRO	UP <b>0</b>		
TWENTY-THIRE OMMUNITY/ AREA	SUBSCRIBER GRO	0 0	TWENT	ry-fourth	SUBSCRIBER GRO	UP <b>0</b>		
TWENTY-THIRE COMMUNITY/ AREA  CALL SIGN DSE	SUBSCRIBER GRO	0 0	TWENT	ry-fourth	SUBSCRIBER GRO	UP <b>0</b>		
COMMUNITY/ AREA	SUBSCRIBER GRO	DUP 0	CALL SIGN	DSE	SUBSCRIBER GRO	DSE		
TWENTY-THIRE COMMUNITY/ AREA  CALL SIGN DSE  Total DSEs	CALL SIGN	DUP  DSE  DOME  DO	TWENT COMMUNITY/ AREA CALL SIGN  Total DSEs	DSE	SUBSCRIBER GROU	DSE		

	EGAL NAME OF OWNER OF CABLE SYSTEM:  MEDIACOM ILLINOIS LLC (Pontiac, IL)  003822								
				TE FEES FOR EAC					
		SUBSCRIBER GROU		ii —		SUBSCRIBER GRO		9	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN DSE		CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
								Syndicated Exclusivity	
								Surcharge	
								for	
								Partially	
								Distant Stations	
								Stations	
Total DSEs	•		0.00	Total DSEs	•		0.00		
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00		
		SUBSCRIBER GROU		ii —		SUBSCRIBER GRO	_		
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	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		
	- r	<u>  '</u>				i.	,,,,,		
			riber group	as shown in the boxes	s above.				
Enter here and in blo	ock 3, line 1, s	space L (page 7)				\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM:  MEDIACOM ILLINOIS LLC (Pontiac, IL)  003822								
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP TWENTY-NINTH SUBSCRIBER GROUP THIRTIETH SUBSCRIBER GROUP								
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
		-						Surcharge
								for
								Partially
								Distant
								Stations
								1
Total DSEs			0.00	Total DSEs		1	0.00	
			0.00					
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First Group \$ 0.00				Base Rate Fee Second Group \$ 0.00			0.00	
THIRTY-FIRST SUBSCRIBER GROUP				THIRTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								1
								1
								1
								1
Total DSEs		l	0.00	Total DSEs		-11	0.00	
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group \$ 0.00			0.00	
Base Rate Fee Third Group		\$	0.00	Base Rate Fee Fourth Group		\$ 0.00		
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW MEDIACOM ILLI						S	YSTEM ID# 003822	Name
				ATE FEES FOR EACI				
TH COMMUNITY/ ARE		SUBSCRIBER GROU	JP <b>0</b>	COMMUNITY/ AREA		I SUBSCRIBER GRO	UP <b>0</b>	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DSL	CALL SIGIV	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant Stations
								Stations
Total DSEs	•	•	0.00	Total DSEs	•	-	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROU		ii —		I SUBSCRIBER GRO	_	
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
T-4-1 DOF-			0.00	T-A-I DOE-			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	n Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

MEDIACOM ILLIN						S	YSTEM ID# 003822	Name
				ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
		SUBSCRIBER GROU		it .		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
		-						Partially
								Distant
								Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First (		\$	0.00	Base Rate Fee Seco		\$	0.00	
		SUBSCRIBER GROU				SUBSCRIBER GRO	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		•						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
	•				•			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE MEDIACOM ILLINO						S	YSTEM ID# 003822	Name
BL	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
FOR 1	TY-FIRST	SUBSCRIBER GRO	JP	FORT	TY-SECONE	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		_						Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
<b>Base Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
FORT	Y-THIRD	SUBSCRIBER GRO	JP	FORT	TY-FOURTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e <b>base rat</b> 3, line 1, s	e fees for each subso	criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE MEDIACOM ILLINO						S	YSTEM ID# 003822	Name
BL	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	IBER GROUP		
FOR	ΓY-FIFTH	SUBSCRIBER GRO		FC	ORTY-SIXTH	SUBSCRIBER GROU	JP	٥
COMMUNITY/ AREA			0	COMMUNITY/ AREA	١		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
		31.122.21.011						Base Rate Fee
		-						and
								Syndicated
								Exclusivity Surcharge
								for
		-						Partially
		-						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	EVENTH	SUBSCRIBER GRO	UP	11		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						·		
		••••••				•		
Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
<b></b>								
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	in Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e <b>base rat</b> 3, line 1, s	e fees for each subse space L (page 7)	criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OW MEDIACOM ILLI						S	YSTEM ID# 003822	Name	
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER GROUP	UP	9	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fee	
								and	
		-						Syndicated	
								Exclusivity Surcharge	
		-						for	
								Partially	
								Distant	
								Stations	
								l	
		-						l	
								l	
								l	
								l	
Total DSEs			0.00	Total DSEs			0.00	i	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	l	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
F	IFTY-FIRST	SUBSCRIBER GROU	JP	FIFT	Y-SECONE	SUBSCRIBER GRO	UP	İ	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	1	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	1	
								l	
		-						i	
								l	
		-						i	
								l	
								l	
		-						l	
								l	
								l	
								l	
								l	
								i	
Total DSEs			0.00	Total DSEs			0.00	1	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	İ	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	1	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$			

MEDIACOM ILLINOIS LLO	BLE SYSTEM: C (Pontiac, IL)				S	YSTEM ID# 003822
	COMPUTATION OF					
FIFTY-THIRE COMMUNITY/ AREA	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA		SUBSCRIBER GRO	JP <b>0</b>
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		<u>"</u>				
		0.00	T			0.00
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Second	ond Group	\$	0.00
FIFTY-FIFT	H SUBSCRIBER GRO	UP	· ·	FIFTY-SIXTH	SUBSCRIBER GRO	JP
OMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	_11	0.00	Total DSEs			0.00
otal DSEs						
Fotal DSEs  Gross Receipts Third Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00

MEDIACOM ILLII						S	003822	Name
				ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
		SUBSCRIBER GROU		it .		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
		-						Partially
								Distant
								Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	•	\$	0.00	Base Rate Fee Seco		\$	0.00	
		SUBSCRIBER GROU	JP <b>0</b>			SUBSCRIBER GRO	_	
COMMUNITY/ AREA			U	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						H		
		-						
		-						
Total DSEs			0.00	Total DSEs		11	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	h Group	\$	0.00	
2.555 Rossipto Hilla	2.5up	· ·		3.555 (1000)pto ( 001)	С.очр	·		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

MEDIACOM ILLINOIS LLC	LE SYSTEM: (Pontiac, IL)					YSTEM ID# 003822	
			TE FEES FOR EAC				
	SUBSCRIBER GRO				SUBSCRIBER GRO		
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	,						
	-						
	, <u> </u>						
	,						
	-						
					Щ		
otal DSEs		0.00	Total DSEs			0.00	
oss Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SIXTY-THIRD	SUBSCRIBER GRO	UP	SIX	TY-FOURTH	H SUBSCRIBER GRO	UP	
MMUNITY/ AREA		0	COMMUNITY/ AREA	<b>A</b>		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	-						
otal DSEs		0.00	Total DSEs			0.00	
ross Receipts Third Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
			11		I		

MEDIACOM ILLINOIS LLO	C (Pontiac, IL)					YSTEM ID# 003822	
			TE FEES FOR EAC				
OMMUNITY/ AREA	I SUBSCRIBER GRO	<u>0</u>	SIXTY-SIXTH SUBSCRIBER GROUP  COMMUNITY/ AREA  0				
			oommon 1771CD				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	.						
otal DSEs	<u> </u>	0.00	Total DSEs	<u> </u>	11	0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
, , ,	·				·		
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SIXTY-SEVENTH	SUBSCRIBER GRO	UP	SIX	XTY-EIGHTH	I SUBSCRIBER GROU	JP	
OMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	u <del>-  </del>						
	"						
otal DSEs		0.00	Total DSEs			0.00	
otal DSEs cross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Foul	rth Group	\$	0.00	
	\$			rth Group	\$		
	\$			·	\$ \$		

MEDIACOM ILLINOIS LLO	BLE SYSTEM: C (Pontiac, IL)				S	YSTEM ID# 003822
			TE FEES FOR EAC			
	I SUBSCRIBER GRO				SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
Fross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00
	SUBSCRIBER GRO		ii .		SUBSCRIBER GROU	
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
					Щ	
	, <del>-                                   </del>					
	-					
otal DSEs		0.00	Total DSEs			0.00
	\$	0.00	Total DSEs Gross Receipts Four	th Group	\$	0.00
Total DSEs Gross Receipts Third Group	\$			th Group	\$	_
	\$			·	\$	_

MEDIACOM ILLINOIS		E SYSTEM: (Pontiac, IL)				S	YSTEM ID# 003822	
				TE FEES FOR EAC				
	THIRD :	SUBSCRIBER GROU				I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs	•		0.00	Total DSEs	!		0.00	
Bross Receipts First Group	0	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
ase Rate Fee First Group	)	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
SEVENTY-I	FIFTH:	SUBSCRIBER GROU	JP	SEVE	ENTY-SIXTH	I SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs			0.00	Total DSEs			0.00	
Total DSEs Gross Receipts Third Grou	p	\$	0.00	Total DSEs Gross Receipts Four	th Group	\$	0.00	

LEGAL NAME OF OWN MEDIACOM ILLIN						S	003822	Name
				TE FEES FOR EAC				
	SEVENTH	SUBSCRIBER GROU		it .		I SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Condinated
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Otations
Total DSEs	l l	<del>'</del>	0.00	Total DSEs	<del>- 1</del>	+	0.00	
Gross Receipts First (	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
						<u>*</u>		
Base Rate Fee First (	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	ITY-NINTH	SUBSCRIBER GROU		ii e		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
222 1200 130 111110	- · ·  P	<u> </u>	3.00		-:p	<u>L*</u>	0.00	
Base Rate Fee: Add t Enter here and in bloo			riber group	as shown in the boxes	above.	\$		

MEDIACOM ILLINOIS LL	BLE SYSTEM: C (Pontiac, IL)					YSTEM ID# 003822
			TE FEES FOR EAC			
EIGHTY-FIRS COMMUNITY/ AREA	T SUBSCRIBER GRO	)UP <b>0</b>	EIGHT COMMUNITY/ AREA		SUBSCRIBER GRO	UP <b>0</b>
		U				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		<u></u>				
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
EIGHTY-THIR	SUBSCRIBER GRO	DUP	EIGH'	TY-FOURTH	\$ I SUBSCRIBER GRO	UP
EIGHTY-THIR	L'			TY-FOURTH		
EIGHTY-THIR DMMUNITY/ AREA	L'	DUP	EIGH'	TY-FOURTH		UP
EIGHTY-THIR DMMUNITY/ AREA	O SUBSCRIBER GRO	0 0	EIGH' COMMUNITY/ AREA	TY-FOURTH	SUBSCRIBER GRO	UP <b>0</b>
EIGHTY-THIR DMMUNITY/ AREA	O SUBSCRIBER GRO	0 0	EIGH' COMMUNITY/ AREA	TY-FOURTH	SUBSCRIBER GRO	UP <b>0</b>
EIGHTY-THIR DMMUNITY/ AREA	O SUBSCRIBER GRO	0 0	EIGH' COMMUNITY/ AREA	TY-FOURTH	SUBSCRIBER GRO	UP <b>0</b>
EIGHTY-THIR DMMUNITY/ AREA	O SUBSCRIBER GRO	0 0	EIGH' COMMUNITY/ AREA	TY-FOURTH	SUBSCRIBER GRO	UP <b>0</b>
EIGHTY-THIR OMMUNITY/ AREA	O SUBSCRIBER GRO	0 0	EIGH' COMMUNITY/ AREA	TY-FOURTH	SUBSCRIBER GRO	UP <b>0</b>
EIGHTY-THIR OMMUNITY/ AREA	O SUBSCRIBER GRO	0 0	EIGH' COMMUNITY/ AREA	TY-FOURTH	SUBSCRIBER GRO	UP <b>0</b>
EIGHTY-THIR OMMUNITY/ AREA	O SUBSCRIBER GRO	0 0	EIGH' COMMUNITY/ AREA	TY-FOURTH	SUBSCRIBER GRO	UP <b>0</b>
EIGHTY-THIR OMMUNITY/ AREA	O SUBSCRIBER GRO	0 0	EIGH' COMMUNITY/ AREA	TY-FOURTH	SUBSCRIBER GRO	UP <b>0</b>
EIGHTY-THIR	O SUBSCRIBER GRO	0 0	EIGH' COMMUNITY/ AREA	TY-FOURTH	SUBSCRIBER GRO	UP <b>0</b>
EIGHTY-THIR OMMUNITY/ AREA	O SUBSCRIBER GRO	0 0	EIGH' COMMUNITY/ AREA	TY-FOURTH	SUBSCRIBER GRO	UP <b>0</b>
EIGHTY-THIR OMMUNITY/ AREA	O SUBSCRIBER GRO	0 0	EIGH' COMMUNITY/ AREA	TY-FOURTH	SUBSCRIBER GRO	UP <b>0</b>
EIGHTY-THIR	O SUBSCRIBER GRO	0 0	EIGH' COMMUNITY/ AREA	TY-FOURTH	SUBSCRIBER GRO	UP <b>0</b>
EIGHTY-THIR COMMUNITY/ AREA  CALL SIGN DSE	O SUBSCRIBER GRO	0 0	EIGH' COMMUNITY/ AREA	TY-FOURTH	SUBSCRIBER GRO	UP <b>0</b>
EIGHTY-THIR COMMUNITY/ AREA  CALL SIGN DSE  Total DSEs	O SUBSCRIBER GRO	DUP  DSE	EIGH COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GRO	DSE
COMMUNITY/ AREA	CALL SIGN	DUP  DSE  DOUB  DO	EIGH COMMUNITY/ AREA CALL SIGN  Total DSEs	DSE	CALL SIGN	DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE

	.C (Pontiac, IL)					YSTEM ID# 003822
	: COMPUTATION O					15
	H SUBSCRIBER GRO	0 <b>0</b>	EI COMMUNITY/ ARE		SUBSCRIBER GROU	<u>JP</u>
COMMUNITY/ AREA		U				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
	<u> </u>					
OMMUNITY/ AREA	H SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		SUBSCRIBER GROU	<u> </u>
OWWONT IT ANLA			COMMONT I/ ARE	^		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	H					
					1.1	
otal DSEs		0.00	Total DSEs			0.00
otal DSEs cross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Fou	orth Group	\$	0.00

LEGAL NAME OF OWN MEDIACOM ILLIN						S	003822	Name
E	BLOCK A: (	COMPUTATION O	F BASE RA	ATE FEES FOR EAC				
		SUBSCRIBER GRO		<u> </u>		H SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
			<u></u>					for
		=						Partially
								Distant
								Stations
								1
								I
			<u>"</u>					I
								1
								I
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NIN	ETY-FIRST	SUBSCRIBER GRO	UP	NINE	TY-SECONI	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
		_						I
								1
								I
								1
								1
		-						
		_						1
								I
								1
								I
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Foul	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxe	s above.	\$		

	(Pontiac, IL)					003822
			TE FEES FOR EAC			
NINETY-THIRD	SUBSCRIBER GRO	<u>UP</u> 0	NINE COMMUNITY/ AREA		1 SUBSCRIBER GRO	UP <b>0</b>
		U				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	-					
	-					
otal DSEs	Ш	0.00	Total DSEs			0.00
	_			1.0	_	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
NINETY-FIFTH	SUBSCRIBER GRO	UP	NI	NETY-SIXTH	SUBSCRIBER GRO	UP
OMMUNITY/ AREA		0	COMMUNITY/ AREA	4		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	-					
	H					
	  -					
otal DSEs		0.00	Total DSEs	•		0.00
Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00
	i .					
Base Rate Fee Third Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00

WEDIACOW ILLINOIS LL	BLE SYSTEM: C (Pontiac, IL)				<u> </u>	YSTEM ID# 003822
			TE FEES FOR EACH			
	I SUBSCRIBER GRO		11		SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs	11	0.00	Total DSEs		Ц	0.00
	•	0.00		nd Cuarra	•	0.00
ross Receipts First Group	\$	0.00	Gross Receipts Seco	na Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00
NINETY-NINTI	SUBSCRIBER GRO	UP	ONE H	JNDREDTE	I SUBSCRIBER GROU	ID
			H		I GODGONIBEN GNOC	Jr .
DMMUNITY/ AREA		0	COMMUNITY/ AREA		T GODGONIDEN GNOC	0
	CALL SIGN		li		CALL SIGN	
		0	COMMUNITY/ AREA			0
		0	COMMUNITY/ AREA			0
		0	COMMUNITY/ AREA			0
		0	COMMUNITY/ AREA			0
		0	COMMUNITY/ AREA			0
		0	COMMUNITY/ AREA			0
		0	COMMUNITY/ AREA			0
		0	COMMUNITY/ AREA			0
		0	COMMUNITY/ AREA			0
		0	COMMUNITY/ AREA			0
		0	COMMUNITY/ AREA			0
		0	COMMUNITY/ AREA			0
CALL SIGN DSE		0	COMMUNITY/ AREA			0
CALL SIGN DSE		DSE	COMMUNITY/ AREA	DSE		DSE
CALL SIGN DSE  CALL SIGN DSE  Cotal DSEs  Gross Receipts Third Group	CALL SIGN	DSE DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	CALL SIGN	0 DSE

MEDIACOM ILLINOIS LLC	SLE SYSTEM: C (Pontiac, IL)				S	YSTEM ID# 003822
			TE FEES FOR EACH			
ONE HUNDRED FIRST	SUBSCRIBER GRO		H .		SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	. –					
	·					
otal DSEs		0.00	Total DSEs	•		0.00
ross Receipts First Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00
ONE HUNDRED THIRD	SUBSCRIBER GRO	UP	ONE HUNDRE	D FOURTH	H SUBSCRIBER GROU	JP
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	. 📙					
otal DSEs		0.00	Total DSEs			0.00
	\$	0.00	Gross Receipts Fourt	h Group	<b>\$</b>	0.00
ross Receipts Third Group	<del>*</del>	5.50	J. 555 P. Goodpia P Ourt	C.Oup	<u>*</u>	0.00
ross Receipts Third Group						

MEDIACOM ILLINOIS LL	BLE SYSTEM: C (Pontiac, IL)					003822
			TE FEES FOR EAC			
ONE HUNDRED FIFT COMMUNITY/ AREA	1 SUBSCRIBER GRO	OUP <b>0</b>	ONE HUND		SUBSCRIBER GRO	UP <b>0</b>
COMMUNITY AREA						
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		<u></u>				
otal DSEs		0.00	Total DSEs			0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
<b>B</b> 4 <b>E</b> 5: 40						
	\$	0.00	Base Rate Fee Seco		\$	0.00
ONE HUNDRED SEVENT	·	DUP	ONE HUNDR	ED EIGHTH	SUBSCRIBER GRO	UP
ONE HUNDRED SEVENT	·			ED EIGHTH		
ONE HUNDRED SEVENT	·	DUP	ONE HUNDR	ED EIGHTH		UP
ONE HUNDRED SEVENT	H SUBSCRIBER GRO	OUP 0	ONE HUNDR	ED EIGHTH	SUBSCRIBER GRO	UP <b>0</b>
ONE HUNDRED SEVENT	H SUBSCRIBER GRO	OUP 0	ONE HUNDR	ED EIGHTH	SUBSCRIBER GRO	UP <b>0</b>
ONE HUNDRED SEVENT	H SUBSCRIBER GRO	OUP 0	ONE HUNDR	ED EIGHTH	SUBSCRIBER GRO	UP <b>0</b>
ONE HUNDRED SEVENT	H SUBSCRIBER GRO	OUP 0	ONE HUNDR	ED EIGHTH	SUBSCRIBER GRO	UP <b>0</b>
ONE HUNDRED SEVENT	H SUBSCRIBER GRO	OUP 0	ONE HUNDR	ED EIGHTH	SUBSCRIBER GRO	UP <b>0</b>
ONE HUNDRED SEVENT	H SUBSCRIBER GRO	OUP 0	ONE HUNDR	ED EIGHTH	SUBSCRIBER GRO	UP <b>0</b>
ONE HUNDRED SEVENT	H SUBSCRIBER GRO	OUP 0	ONE HUNDR	ED EIGHTH	SUBSCRIBER GRO	UP <b>0</b>
ONE HUNDRED SEVENT	H SUBSCRIBER GRO	OUP 0	ONE HUNDR	ED EIGHTH	SUBSCRIBER GRO	UP <b>0</b>
ONE HUNDRED SEVENT	H SUBSCRIBER GRO	OUP 0	ONE HUNDR	ED EIGHTH	SUBSCRIBER GRO	UP <b>0</b>
ONE HUNDRED SEVENT	H SUBSCRIBER GRO	OUP 0	ONE HUNDR	ED EIGHTH	SUBSCRIBER GRO	UP <b>0</b>
ONE HUNDRED SEVENT	H SUBSCRIBER GRO	OUP 0	ONE HUNDR	ED EIGHTH	SUBSCRIBER GRO	UP <b>0</b>
ONE HUNDRED SEVENT	H SUBSCRIBER GRO	OUP 0	ONE HUNDR	ED EIGHTH	SUBSCRIBER GRO	UP <b>0</b>
ONE HUNDRED SEVENT COMMUNITY/ AREA  CALL SIGN  DSE	H SUBSCRIBER GRO	OUP 0	ONE HUNDR	ED EIGHTH	SUBSCRIBER GRO	UP <b>0</b>
ONE HUNDRED SEVENT COMMUNITY/ AREA  CALL SIGN DSE	H SUBSCRIBER GRO	DUP  DSE	ONE HUNDR COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GRO	DSE
ONE HUNDRED SEVENT COMMUNITY/ AREA  CALL SIGN DSE	CALL SIGN	DUP  DSE  DSE  0.00	ONE HUNDR COMMUNITY/ AREA CALL SIGN  Total DSEs	DSE	CALL SIGN	DSE O.00
COMMUNITY/ AREA	CALL SIGN	DUP  DSE  DSE  0.00	ONE HUNDR COMMUNITY/ AREA CALL SIGN  Total DSEs	DSE th Group	CALL SIGN	DSE O.00

MEDIACOM ILLINOIS LLC	SLE SYSTEM: S (Pontiac, IL)					YSTEM ID# 003822
			TE FEES FOR EAC			
ONE HUNDRED NINTH	SUBSCRIBER GRO				1 SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs	<b>!</b>		0.00
ross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00
ONE HUNDRED ELEVENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	) TWELVTH	I SUBSCRIBER GROU	JP
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	-					
		0.00	Total DSEs			0.00
otal DSEs				N- O	•	
otal DSEs Gross Receipts Third Group	\$	0.00	Gross Receipts Fourt	in Group	\$	0.00
	\$	0.00	Gross Receipts Fourt	in Group	3	0.00

LEGAL NAME OF OWN MEDIACOM ILLII						S	003822	Name
-	BLOCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED TH	IIRTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED FO	DURTEENTH	SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
						 		Syndicated
								Exclusivity
								Surcharge
						-		for Partially
								Distant
						-		Stations
T-4-1 DOE-			0.00	T-4-LDOF-			0.00	
Total DSEs	Croup	•	0.00	Total DSEs	and Craun	•	0.00	
Gross Receipts First	Gloup	\$	0.00	Gross Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED F	FIFTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	SIXTEENTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u> </u>		
		<del>-</del>				-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN						S	YSTEM ID# 003822	Name
E ONE HUNDRED SEVE				ATE FEES FOR EACH		RIBER GROUP	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
		_				·		Surcharge
								for
								Partially
								Distant
								Stations
							2.22	
Total DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts First (	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First (	Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
ONE HUNDRED N	INTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED T	WENTIETH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_				·		
		-						
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
							<del></del>	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE						S	003822	Name
В	LOCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED TWE	NTY-FIRST	SUBSCRIBER GRO	JP	ONE HUNDRED TWE	NTY-SECOND	SUBSCRIBER GROUI	P	^
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
<b>Base Rate Fee</b> First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWEN	NTY-THIRD	SUBSCRIBER GROUP	1	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP	Р	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···							
	<u></u>							
							········	
Total DSEs	· ·		0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	•					<u> </u>		
Base Rate Fee: Add the Enter here and in block	ne <b>base rat</b> < 3, line 1, s	te fees for each subso space L (page 7)	criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER OF CAMEDIACOM ILLINOIS LL						003822
BLOCK A	A: COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCR	RIBER GROUP	
ONE HUNDRED TWENTY-FIF	H SUBSCRIBER GROU				SUBSCRIBER GROUP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	4		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		<u></u>				
					-	
					<u> </u>	
otal DSEs		0.00	Total DSEs	•		0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
5. 555 . 1555 pts 5. 5. 5. p						
2.000						
Base Rate Fee First Group	\$	0.00	Base Rate Fee Seco		\$	0.00
Base Rate Fee First Group  IE HUNDRED TWENTY-SEVEN		P	ONE HUNDRED TWE	NTY-EIGHTH	\$ I SUBSCRIBER GROUP	5
Base Rate Fee First Group  BE HUNDRED TWENTY-SEVEN				NTY-EIGHTH		
Base Rate Fee First Group  BE HUNDRED TWENTY-SEVEN		P	ONE HUNDRED TWE	NTY-EIGHTH		5
Base Rate Fee First Group  BE HUNDRED TWENTY-SEVEN  COMMUNITY/ AREA	TH SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
E HUNDRED TWENTY-SEVEN	TH SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
Base Rate Fee First Group  E HUNDRED TWENTY-SEVEN  COMMUNITY/ AREA	TH SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
Base Rate Fee First Group  E HUNDRED TWENTY-SEVEN  COMMUNITY/ AREA	TH SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
Base Rate Fee First Group  IE HUNDRED TWENTY-SEVEN  COMMUNITY/ AREA	TH SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
Base Rate Fee First Group IE HUNDRED TWENTY-SEVEN COMMUNITY/ AREA	TH SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
Base Rate Fee First Group IE HUNDRED TWENTY-SEVEN COMMUNITY/ AREA	TH SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
Base Rate Fee First Group  IE HUNDRED TWENTY-SEVEN  COMMUNITY/ AREA	TH SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
Base Rate Fee First Group NE HUNDRED TWENTY-SEVEN COMMUNITY/ AREA	TH SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
Base Rate Fee First Group NE HUNDRED TWENTY-SEVEN COMMUNITY/ AREA	TH SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
Base Rate Fee First Group NE HUNDRED TWENTY-SEVEN COMMUNITY/ AREA	TH SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
Base Rate Fee First Group NE HUNDRED TWENTY-SEVEN COMMUNITY/ AREA	TH SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
CALL SIGN DSE	TH SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
Base Rate Fee First Group  RE HUNDRED TWENTY-SEVEN  COMMUNITY/ AREA  CALL SIGN  DSE  Total DSEs	TH SUBSCRIBER GROU	DSE	CALL SIGN	DSE DSE	SUBSCRIBER GROUP	DSE DSE
Base Rate Fee First Group NE HUNDRED TWENTY-SEVEN COMMUNITY/ AREA	CALL SIGN	DSE  DSE	CALL SIGN  CALL SIGN  Total DSEs	DSE DSE	CALL SIGN	0 DSE

LEGAL NAME OF OWI MEDIACOM ILLI						S	003822	Name
	BLOCK A: (	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
		SUBSCRIBER GROU		П		SUBSCRIBER GROUP	<b>D</b>	•
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TH	HIRTY-FIRST	SUBSCRIBER GROU	Þ	ONE HUNDRED TH	IRTY-SECOND	SUBSCRIBER GROUI	)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<mark></mark>	_						
		_						
		_						
		_				H		
						•		
Total DSEs			0.00	Total DSEs		I I	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Cross Receibts Hillo	отоир	<u>*</u>	0.00	Torosa Necelpis Pou	rai Gioup	<b>V</b>		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxe	es above.	\$		

MEDIACOM ILLINOIS LL	ABLE SYSTEM: .C (Pontiac, IL)					003822
	A: COMPUTATION O		TI .			
ONE HUNDRED THIRTY-THII COMMUNITY/ AREA	LD SUBSCRIBER GROU	P 0	ONE HUNDRED THI		I SUBSCRIBER GROUP	
COMMONT T/ AREA			COMMONT I/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		0.00				0.00
Total DSEs		0.00	Total DSEs			•
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00 0.00 0.00 GROUP
Base Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00 0.00 SROUP
ase Rate Fee First Group ONE HUNDRED THIRTY-FIF					SUBSCRIBER GROUP	0.00 0.00 ROUP
ONE HUNDRED THIRTY-FIF				HIRTY-SIXTH		)
ONE HUNDRED THIRTY-FIF OMMUNITY/ AREA		P	ONE HUNDRED T	HIRTY-SIXTH		0
ONE HUNDRED THIRTY-FIF OMMUNITY/ AREA	TH SUBSCRIBER GROU	P 0	ONE HUNDRED T	THIRTY-SIXTH	I SUBSCRIBER GROUF	0
ONE HUNDRED THIRTY-FIF	TH SUBSCRIBER GROU	P 0	ONE HUNDRED T	THIRTY-SIXTH	I SUBSCRIBER GROUF	0
ONE HUNDRED THIRTY-FIF	TH SUBSCRIBER GROU	P 0	ONE HUNDRED T	THIRTY-SIXTH	I SUBSCRIBER GROUF	0
ONE HUNDRED THIRTY-FIF OMMUNITY/ AREA	TH SUBSCRIBER GROU	P 0	ONE HUNDRED T	THIRTY-SIXTH	I SUBSCRIBER GROUF	0
ONE HUNDRED THIRTY-FIF	TH SUBSCRIBER GROU	P 0	ONE HUNDRED T	THIRTY-SIXTH	I SUBSCRIBER GROUF	0
ONE HUNDRED THIRTY-FIF OMMUNITY/ AREA	TH SUBSCRIBER GROU	P 0	ONE HUNDRED T	THIRTY-SIXTH	I SUBSCRIBER GROUF	0
ONE HUNDRED THIRTY-FIF OMMUNITY/ AREA	TH SUBSCRIBER GROU	P 0	ONE HUNDRED T	THIRTY-SIXTH	I SUBSCRIBER GROUF	0
ONE HUNDRED THIRTY-FIF	TH SUBSCRIBER GROU	P 0	ONE HUNDRED T	THIRTY-SIXTH	I SUBSCRIBER GROUF	0.00 0.00
ONE HUNDRED THIRTY-FIF	TH SUBSCRIBER GROU	P 0	ONE HUNDRED T	THIRTY-SIXTH	I SUBSCRIBER GROUF	0.00
ONE HUNDRED THIRTY-FIF	TH SUBSCRIBER GROU	P 0	ONE HUNDRED T	THIRTY-SIXTH	I SUBSCRIBER GROUF	0
ONE HUNDRED THIRTY-FIF	TH SUBSCRIBER GROU	P 0	ONE HUNDRED T	THIRTY-SIXTH	I SUBSCRIBER GROUF	0
ONE HUNDRED THIRTY-FIF COMMUNITY/ AREA  CALL SIGN DSE	TH SUBSCRIBER GROU	P 0	ONE HUNDRED T	THIRTY-SIXTH	I SUBSCRIBER GROUF	DSE
ONE HUNDRED THIRTY-FIF COMMUNITY/ AREA  CALL SIGN DSE	TH SUBSCRIBER GROU	DSE	ONE HUNDRED TO COMMUNITY AREA	DSE	I SUBSCRIBER GROUF	DSE
COMMUNITY/ AREA	CALL SIGN	DSE  DSE	ONE HUNDRED TO COMMUNITY AREA	DSE	CALL SIGN	DSE

LEGAL NAME OF OW MEDIACOM ILLI						S	YSTEM ID# 003822	Name
				ATE FEES FOR EACH				
ONE HUNDRED THIR COMMUNITY/ AREA		SUBSCRIBER GROUP	0	ONE HUNDRED THI		I SUBSCRIBER GROUP	0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
		-						Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
		-						
		•						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	•	\$	0.00	Base Rate Fee Seco		\$	0.00	
ONE HUNDRED THE		SUBSCRIBER GROUP	0	ONE HUNDRED		I SUBSCRIBER GRO	0 0	
COMMONT TO AREA			<u> </u>	COMMONT I/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-			<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add	I the <b>base rat</b>	e fees for each subsc	riber group	as shown in the boxes	above.			
Enter here and in blo			- '			\$		

LEGAL NAME OF OWNE						S	YSTEM ID# 003822	Name
BL	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	RTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED FOR	RTY-SECONE	SUBSCRIBER GROUP	)	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	<b>A</b>		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
0.1.2.2.1011		31.122.21.011						Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
		-						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
	RTY-THIRD	SUBSCRIBER GROUP		11		SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block	e <b>base rat</b> 3, line 1, s	e fees for each subse	criber group	as shown in the boxes	s above.	\$		

MEDIACOM ILLI						S	003822	Name
	BLOCK A: (	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED F	ORTY-FIFTH	SUBSCRIBER GROUP		TT .		H SUBSCRIBER GROUP	0	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
		-						Exclusivity
								Surcharge for
		-						Partially
								Distant
								Stations
								I
								I
								I
		•						I
								1
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED FORT	TY-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FO	RTY-EIGHTH	H SUBSCRIBER GROUP	<b>D</b>	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
								1
		-						1
								I
		-						1
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								1
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								1
								I
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	ı Group	\$	0.00	Gross Receipts Four	.n Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE						S	YSTEM ID# 003822	Name
В	LOCK A: (	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED FOR	TY-NINTH	SUBSCRIBER GRO	UP	ONE HUNDRE	ED FIFTIETH	SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
			<u></u>					for Partially
			<u>"</u>					Distant
								Stations
								I
								I
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T			0.00	T 1 1 DOE			0.00	
Total DSEs		•	0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-FIRST	SUBSCRIBER GRO	UP	ONE HUNDRED FIF	TY-SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								I
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$		

MEDIACOM ILLINOIS LL	ABLE SYSTEM: .C (Pontiac, IL)					YSTEM ID# 003822
	: COMPUTATION C					ID.
ONE HUNDRED FIFTY-THIF COMMUNITY/ AREA	D SUBSCRIBER GRO	OUP <b>0</b>	ONE HUNDRED FIR		I SUBSCRIBER GROU	
						DSE DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs		11	0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
ONE HUNDRED FIFTY-FIFT	H SUBSCRIBER GRO		İ		1 SUBSCRIBER GROU	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	0.00 0.00 ER GROUP
						0 0
						0.00 DUP
						0.00 0.00
Total DSEs		0.00	Total DSEs			0.00
	\$	0.00	Total DSEs Gross Receipts Fou	rth Group		0.00
Total DSEs Gross Receipts Third Group	\$			rth Group	\$	

	.C (Pontiac, IL)				3	003822
			ATE FEES FOR EACH			
ONE HUNDRED FIFTY-SEVEN	TH SUBSCRIBER GROU		TT .	TY-EIGHTH	SUBSCRIBER GROUP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00
ONE HUNDRED FIFTY-NIN	TH SUBSCRIBER GROU		ii e	D SIXTIETH	SUBSCRIBER GROUP	)
	TH SUBSCRIBER GROU	P <b>0</b>	ONE HUNDRE	D SIXTIETH	SUBSCRIBER GROUP	0
DMMUNITY/ AREA	CALL SIGN		ii e	DSE	SUBSCRIBER GROUF	_
DMMUNITY/ AREA		0	COMMUNITY/ AREA			0
DMMUNITY/ AREA		0	COMMUNITY/ AREA			0
DMMUNITY/ AREA		0	COMMUNITY/ AREA			0
DMMUNITY/ AREA		0	COMMUNITY/ AREA			0
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
DMMUNITY/ AREA		0	COMMUNITY/ AREA			0
DMMUNITY/ AREA		0	COMMUNITY/ AREA			0
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE		DSE	COMMUNITY/ AREA  CALL SIGN	DSE		DSE
CALL SIGN DSE  CALL SIGN DSE  contail DSEs	CALL SIGN	DSE  DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	CALL SIGN	0 DSE

B1 63:1	A 00115:	TATION 6	. D.A.C	TE EEEO EOO E: ::	1011500=	IDED ODC: 15		
		RIBER GROU		ATE FEES FOR EACH		SUBSCRIBER GRO	LIP	
COMMUNITY/ AREA	50550		0	COMMUNITY/ AREA		SSECTION ON O	0	9
								Computa
CALL SIGN DSE	CALI	SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE Base Syr Exc	of
								Base Rate
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otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First Group	\$		0.00	Gross Receipts Seco	nd Group	\$	0.00	
1000 Redelpto Filot Group	<u>*</u>		0.00	Gross recorpts eccor	па Огоар	*	0.00	
ase Rate Fee First Group	\$		0.00	Base Rate Fee Secon	nd Group	\$	0.00	
		RIBER GROU					•	
FIFTEEN		RIBER GROU		5	SIXTEENTH	\$ SUBSCRIBER GROU	•	
FIFTEEN		RIBER GROU	JP		SIXTEENTH		UP	
FIFTEEN OMMUNITY/ AREA	ITH SUBSC	RIBER GROU	JP	5	SIXTEENTH		UP	
FIFTEEN OMMUNITY/ AREA	ITH SUBSC		JP <b>0</b>	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP <b>0</b>	
FIFTEEN OMMUNITY/ AREA	ITH SUBSC		JP <b>0</b>	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP <b>0</b>	
FIFTEEN OMMUNITY/ AREA	ITH SUBSC		JP <b>0</b>	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP <b>0</b>	
FIFTEEN OMMUNITY/ AREA	ITH SUBSC		JP <b>0</b>	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP <b>0</b>	
FIFTEEN OMMUNITY/ AREA	ITH SUBSC		JP <b>0</b>	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP <b>0</b>	
FIFTEEN OMMUNITY/ AREA	ITH SUBSC		JP <b>0</b>	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP <b>0</b>	
FIFTEEN OMMUNITY/ AREA	ITH SUBSC		JP <b>0</b>	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP <b>0</b>	
FIFTEEN OMMUNITY/ AREA	ITH SUBSC		JP <b>0</b>	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP <b>0</b>	
FIFTEEN OMMUNITY/ AREA	ITH SUBSC		JP <b>0</b>	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP <b>0</b>	
FIFTEEN	ITH SUBSC		JP <b>0</b>	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP <b>0</b>	
FIFTEEN	ITH SUBSC		JP <b>0</b>	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP <b>0</b>	
FIFTEEN	ITH SUBSC		JP <b>0</b>	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP <b>0</b>	
FIFTEEN OMMUNITY/ AREA	ITH SUBSC		JP <b>0</b>	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP <b>0</b>	
FIFTEEN OMMUNITY/ AREA	ITH SUBSC		JP <b>0</b>	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GRO	UP <b>0</b>	
FIFTEEN OMMUNITY/ AREA  CALL SIGN DSI	ITH SUBSC		JP 0	COMMUNITY/ AREA  CALL SIGN	SIXTEENTH	SUBSCRIBER GRO	DSE	
FIFTEEN OMMUNITY/ AREA  CALL SIGN DSI	ITH SUBSC		JP  O  DSE  O  O  O O O O O O	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	SUBSCRIBER GRO	DSE O.00	
FIFTEEN COMMUNITY/ AREA  CALL SIGN DSI	ITH SUBSC		JP 0	COMMUNITY/ AREA  CALL SIGN	DSE	SUBSCRIBER GRO	DSE	
COMMUNITY/ AREA	E CALL		JP  O  DSE  O  O  O O O O O O	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	SUBSCRIBER GROU	DSE O.00	
FIFTEEN COMMUNITY/ AREA  CALL SIGN DSI	E CALL		JP  O  DSE  O  O  O O O O O O	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE h Group	SUBSCRIBER GROU	DSE O.00	

EGAL NAME OF OWNER OF IEDIACOM ILLINOIS							003822	Na
				ATE FEES FOR EAC			LID	
OMMUNITY/ AREA	NTH SUBSC	RIBER GRO	0	COMMUNITY/ AREA		1 SUBSCRIBER GRO	<b>0</b>	(
CALL SIGN DS	E CAL	L SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Comp
								Base R
								a
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								fo
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	-							Stati
							0.00	
otal DSEs			0.00	Total DSEs			0.00	
Di-t- 5: +0	\$		0.00	Gross Receipts Seco	nd Group	\$	0.00	
ross Receipts First Group	Ψ			Gross receipts occe				
ross Receipts First Group	<del>*</del>			Gross recorpts occo				
ase Rate Fee First Group	\$		0.00	Base Rate Fee Seco		\$	0.00	
ase Rate Fee First Group		RIBER GRO	<b>0.00</b>	Base Rate Fee Seco	WENTIETH	\$ I SUBSCRIBER GROU	UP	
ase Rate Fee First Group	\$	RIBER GRO	0.00	Base Rate Fee Seco	WENTIETH			
ase Rate Fee First Group	\$	RIBER GRO	<b>0.00</b>	Base Rate Fee Seco	WENTIETH		UP	
ase Rate Fee First Group  NINTEE  OMMUNITY/ AREA	\$		0.00 DUP	Base Rate Fee Second To COMMUNITY/ AREA	WENTIETH	I SUBSCRIBER GRO	UP <b>0</b>	
ase Rate Fee First Group  NINTEE  OMMUNITY/ AREA	\$		0.00 DUP	Base Rate Fee Second To COMMUNITY/ AREA	WENTIETH	I SUBSCRIBER GRO	UP <b>0</b>	
ase Rate Fee First Group  NINTEE  OMMUNITY/ AREA	\$		0.00 DUP	Base Rate Fee Second To COMMUNITY/ AREA	WENTIETH	I SUBSCRIBER GRO	UP <b>0</b>	
ase Rate Fee First Group  NINTEE  OMMUNITY/ AREA	\$		0.00 DUP	Base Rate Fee Second To COMMUNITY/ AREA	WENTIETH	I SUBSCRIBER GRO	UP <b>0</b>	
ase Rate Fee First Group  NINTEE  OMMUNITY/ AREA	\$		0.00 DUP	Base Rate Fee Second To COMMUNITY/ AREA	WENTIETH	I SUBSCRIBER GRO	UP <b>0</b>	
ase Rate Fee First Group  NINTEE  OMMUNITY/ AREA	\$		0.00 DUP	Base Rate Fee Second To COMMUNITY/ AREA	WENTIETH	I SUBSCRIBER GRO	UP <b>0</b>	
ase Rate Fee First Group  NINTEE  OMMUNITY/ AREA	\$		0.00 DUP	Base Rate Fee Second To COMMUNITY/ AREA	WENTIETH	I SUBSCRIBER GRO	UP <b>0</b>	
ase Rate Fee First Group  NINTEE  OMMUNITY/ AREA	\$		0.00 DUP	Base Rate Fee Second To COMMUNITY/ AREA	WENTIETH	I SUBSCRIBER GRO	UP <b>0</b>	
ase Rate Fee First Group  NINTEE  OMMUNITY/ AREA	\$		0.00 DUP	Base Rate Fee Second To COMMUNITY/ AREA	WENTIETH	I SUBSCRIBER GRO	UP <b>0</b>	
ase Rate Fee First Group  NINTEE  OMMUNITY/ AREA	\$		0.00 DUP	Base Rate Fee Second To COMMUNITY/ AREA	WENTIETH	I SUBSCRIBER GRO	UP <b>0</b>	
ase Rate Fee First Group  NINTEE  OMMUNITY/ AREA	\$		0.00 DUP	Base Rate Fee Second To COMMUNITY/ AREA	WENTIETH	I SUBSCRIBER GRO	UP <b>0</b>	
NINTEE OMMUNITY/ AREA  CALL SIGN  DS	\$		0.00	Base Rate Fee Second To COMMUNITY/ AREA	WENTIETH	I SUBSCRIBER GRO	DSE	
NINTEE OMMUNITY/ AREA  CALL SIGN DS  DS  Datal DSEs	SE CAL		0.00	Base Rate Fee Second COMMUNITY/ AREA CALL SIGN	DSE	CALL SIGN	DSE O.00	
NINTEE OMMUNITY/ AREA  CALL SIGN  DS	SE CAL		0.00	Base Rate Fee Second To COMMUNITY/ AREA	DSE	I SUBSCRIBER GRO	DSE	

3822 Nam						, , , ,	OIS LLC	
				TE FEES FOR EACH				
<u> </u>	R GROUP	SUBSCRIBER GF	/-SECOND			SUBSCRIBER GROU	TY-FIRST	
				COMMUNITY/ AREA	0			COMMUNITY/ AREA
Compu	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate and Syndica Exclusi Surcha for Partial Distar Station								
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.00				Total DSEs	0.00			Total DSEs
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	R GROUP		d Group	Base Rate Fee Secon	0.00		roup	Base Rate Fee First G
	R GROUP	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
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0.00		\$ SUBSCRIBER GF	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	roup TY-THIRD	Base Rate Fee First G TWENT COMMUNITY/ AREA
0.00		\$ SUBSCRIBER GF	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	roup TY-THIRD	Base Rate Fee First G TWENT COMMUNITY/ AREA
0.00		\$ SUBSCRIBER GF	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	roup TY-THIRD	Base Rate Fee First G TWENT COMMUNITY/ AREA
0.00		\$ SUBSCRIBER GF	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	roup TY-THIRD	Base Rate Fee First G TWENT COMMUNITY/ AREA
0.00		\$ SUBSCRIBER GF	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	roup TY-THIRD	COMMUNITY/ AREA
0.00		\$ SUBSCRIBER GF	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	roup TY-THIRD	Base Rate Fee First G TWENT COMMUNITY/ AREA
0.00		\$ SUBSCRIBER GF	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	roup TY-THIRD	Base Rate Fee First G TWENT COMMUNITY/ AREA
0.00		\$ SUBSCRIBER GF	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	roup TY-THIRD	Base Rate Fee First G TWENT COMMUNITY/ AREA
0.00		\$ SUBSCRIBER GF	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	roup TY-THIRD	Base Rate Fee First G TWENT COMMUNITY/ AREA
0.00		\$ SUBSCRIBER GF	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	roup TY-THIRD	Base Rate Fee First G TWENT COMMUNITY/ AREA
0.00		\$ SUBSCRIBER GF	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	roup TY-THIRD	Base Rate Fee First G TWENT COMMUNITY/ AREA
0.00		\$ SUBSCRIBER GF	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	roup TY-THIRD	Base Rate Fee First G TWENT COMMUNITY/ AREA
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0.00 OSE		SUBSCRIBER GF	d Group  Y-FOURTH  DSE	Total DSEs	0.00  JP  OSE  O.00	SUBSCRIBER GROU	roup  TY-THIRD  DSE	TWENT COMMUNITY/ AREA  CALL SIGN  Total DSEs
0.00 0 DSE		\$ SUBSCRIBER GF	d Group  Y-FOURTH  DSE	Base Rate Fee Secon TWENT COMMUNITY/ AREA CALL SIGN	0.00  JP  OSE	SUBSCRIBER GROU	roup  TY-THIRD  DSE	TWENT COMMUNITY/ AREA  CALL SIGN  Fotal DSEs
0.00 OSE		SUBSCRIBER GF	d Group  Y-FOURTH  DSE	Total DSEs	0.00  JP  OSE  O.00	SUBSCRIBER GROU	roup  TY-THIRD  DSE  Sroup	TWENT COMMUNITY/ AREA  CALL SIGN

NI	YSTEM ID# 003822	S						MEDIACOM ILLING
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	TY-SIXTH			SUBSCRIBER GROU	TY-FIFTH	
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I								
and								
Syndicate								
Exclusivit Surcharg								
for Partiall Distant						-		
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Partially Distant								
Partially Distant Stations						-		
Distant								
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NI	YSTEM ID# 003822					(Pontiac, IL)		MEDIACOM ILLING
				TE FEES FOR EACH				
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AL NAME OF OWNER OF CABLE SYSTEM: EDIACOM ILLINOIS LLC (Pontiac, IL)	)			S	003822	Nam
BLOCK A: COMPUTATIO		П				
THIRTY-THIRD SUBSCRIBER MMUNITY/ AREA	GROUP 0	COMMUNITY/ AREA		1 SUBSCRIBER GRO	<u>UP</u>	9
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						and
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se Rate Fee First Group \$  THIRTY-FIFTH SUBSCRIBER	0.00  GROUP  0	Base Rate Fee Seco	nd Group IRTY-SIXTH	\$	0.00	
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CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fe and Syndicated Exclusivity, Surcharge for Partially Distant Stations  O.00 \$ 0.0	GAL NAME OF OWNE						S	YSTEM ID# 003822	Name
COMMUNITY/ AREA  O COMMUNITY/ AREA  E CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE  Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant Stations  Total DSEs Gross Receipts Second Group  S 0.00  Base Rate Fee Second Group TOTAL SUBSCRIBER GROUP  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O									
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and Syndicated Exclusivity Surcharge for Partially Distant Stations  1. 0.00 Gross Receipts Second Group \$ 0.00  \$ 0.00 Base Rate Fee Second Group \$ 0.00  TH SUBSCRIBER GROUP  COMMUNITY/ AREA  0	CALL SIGN	DSE	CALL SIGN	DSE			CALL SIGN	DSE	of
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0 COMMUNITY/ AREA 0	<b>ase Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
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WEDIACOW ILLING		E SYSTEM: (Pontiac, IL)				S	003822	Name
BL	OCK A: C	OMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCR	RIBER GROUP		
FOR	TY-FIRST	SUBSCRIBER GRO	UP	FOR	TY-SECOND	SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	_
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Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
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CALL SIGN  CALL SIGN  Total DSEs	Y-THIRD DSE		DSE	FOR COMMUNITY/ AREA CALL SIGN	TY-FOURTH A DSE	SUBSCRIBER GRO	DSE	
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SIGN DSE SIGN DSE Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations  0.00 0.00 0.00	SUBSCRIBER GRO			•			LEGAL NAME OF OWNER MEDIACOM ILLINO
O Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations  O.00  O.00  O.00  D.00  O.00  O.00  O.00			TE FEES FOR EACH				
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FIFTY-FIRS	T SUBSCRIBER GRO	0 0	FIFT COMMUNITY/ AREA	Y-SECOND	SUBSCRIBER GRO	UP <b>0</b>	
FIFTY-FIRS	T SUBSCRIBER GRO	0 0	FIFT COMMUNITY/ AREA	Y-SECOND	SUBSCRIBER GRO	UP <b>0</b>	
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LEGAL NAME OF OWNER MEDIACOM ILLINO			•			S	YSTEM ID# 003822	Name
			BASE RA	TE FEES FOR EACH				
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Name	YSTEM ID# 003822					(Pontiac, IL)	DIS LLC	MEDIACOM ILLING
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LEGAL NAME OF OWNER MEDIACOM ILLINO			•			S	YSTEM ID# 003822	Name
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ACCOUNTING PERIOD: 2022/1

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MEDIACOM ILLINOIS LLC (Pontiac, IL) 003822 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. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group . . . . . . . . . . . . . . . SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 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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