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
08/26/2022	\$ 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	AC	COUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting Period		2022/1				
B Owner	rate	Give the full legal name of the owner of the cable system. If the owner is a 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 owneringle statement of account and royalty fee payment covering the entire accounts. Check here if this is the system's first filing. If not, enter the system's ID	ess of the cable syst or on the last day of counting period	em the accounting period should s		007412
	LE	EGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM CABLE ONE, INC.				
					00741	220221
					007412	2022/1
		210 E. EARLL DRIVE PHOENIX, AZ 85012-2626				
С		STRUCTIONS: In line 1, give any business or trade names used to id the already appear in space B. In line 2, give the mailing address of				
System	1	IDENTIFICATION OF CABLE SYSTEM: SPARKLIGHT	are system, ir ain	orent from the address give		<u>. </u>
	2	MAILING ADDRESS OF CABLE SYSTEM: 2624 CROSSROADS DR. (Number, street, rural route, apartment, or suite number) ARDMORE, OK 73401				
D	Ine	(City, town, state, zip code) tructions: For complete space D instructions, see page 1b. Identify	only the fret comm	nunity served below and rel	list on nage	
Area		n all communities.	orny the not com	namity served below and ref	iot on page	, 15
Served		CITY OR TOWN	STATE			
First		ARDMORE	ок			
Community	В	elow is a sample for reporting communities if you report multiple cha	nnel line-ups in S	pace G.		
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB	3 GRP#
Sample	Ald		MD	A		1
_		ance	MD	В		2
	Gei	ring	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 SAJE. PAGE 10.			OVOTEN ID#	
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	
CABLE ONE, INC.			007412	
Instructions: List each separate community served by the cable system. A "community' in FCC rules: "a separate and distinct community or municipal entity (including unincorporareas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst of system identification hereafter known as the "first community." Please use it as the first	orated communition to the community that	es within unincorp you list will serve	orated	D Area Served
Note: Entities and properties such as hotels, apartments, condominiums, or mobile hom below the identified city or town.	e parks should be	e reported in pare	ntheses	
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 rel designated by a number (based on your reporting from Part 9).	e column blank. İt levant community	f you report any si with a subscribe	tations r group,	
When reporting the carriage of television broadcast stations on a community-by-community channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns be	a subscriber grou			
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	_
ARDMORE	OK	AA	1	First
CARTER COUNTY	OK	AA	1	Community
DICKSON	OK	AA	1	
LONG GROVE	OK	AA	1	
MADILL	OK	AA	3	
MANNSVILLE	OK	AA	3	
MARIETTA	OK OK	AA	2	See instructions for additional information
				on alphabetization.
MARSHALL COUNTY	OK	AA	3	on diphabetization.
OAKLAND	OK	AA	3	
				Add rows as necessary.
				Add Tows as flecessary.

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

007412

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			BLOG	CK 2		
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE
Residential:							
 Service to first set 	1,700	\$	42.00	COMMERCIAL	199	\$	42.00
 Service to additional set(s) 							
 FM radio (if separate rate) 							
Motel, hotel		Ī					
Commercial		Ī					
Converter		Ī					
Residential							
Non-residential		1					
	<u> </u>	•			·	†	

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLO	CK 1			BLOCK 2		
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	F	RATE	CATEGORY OF SERVICE	F	RATE
Continuing Services:		Installation: Non-residential					
 Pay cable 	\$ 19.00	Motel, hotel			EXPANDED	\$	57.75
 Pay cable—add'l channel 		Commercial					
Fire protection		Pay cable					
Burglar protection		Pay cable-add'l channel					
Installation: Residential		Fire protection					
First set	\$ 90.00	Burglar protection					
 Additional set(s) 	\$	Other services:					
• FM radio (if separate rate)	 	Reconnect	\$	60.00			
Converter	 	Disconnect					
	 	Outlet relocation	\$	60.00			
		Move to new address	\$	30.00			

FORM SA3E. PAGE 3. LEGAL NAME OF OWN	IED OE CARI E S'	VSTEM:			SYSTEM ID#	
CABLE ONE, IN		TOTEWI.			007412	Namo
PRIMARY TRANSMITTE		ON.				
In General: In space of carried by your cable is FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis is basis under specific FC in Do not list the station station was carried in the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the station which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the staplanation of local service Column 5: If you have	G, identify ever eystem during to ions in effect of ions in expanding in expanding in expanding ions ions ions ions ions ions ions ions	y television si he accounting in June 24, 19 (4), or 76.63 (4), or 76.63 (4), or 76.63 (5) acc l, if the stations, or authorized the station of the station account in the station account in the station account in the station of the station. Whether the setter "N" (for interest on the station on commercial page (v) of the station of the station of the station on the station on the station on the station of the station on the station of the station on the station of th	g period, excep 181, permitting the referring to 76.6 paragraph. y distant station norizations: at it in space I (the ation was carried tute basis station report origination as assigned to nannel 4 in Waslatton is a network), "N-M" all educational), of the general instructivice area, (i.e. general instruction 14, you must con accounting period to 76.6 paragraphs.	t (1) stations carri- he carriage of cer 51(e)(2) and (4))]; is carried by your he Special Staten and both on a substance, see page (v) on program service ver-the-air designacolumn 1 (list each the television state hington, D.C. This ork station, an ind (for network multi or "E-M" (for nonce cuctions located in distant"), enter "Y tions located in the proper of the column 5, ind. Indicate by en	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your ntering "LAC" if your cable system	Primary Transmitters: Television
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LEGAL NAME OF OWNER OF						
	F CABLE SYSTE	EM:			SYSTEM ID#	Name
CABLE ONE, INC.					007412	Name
PRIMARY TRANSMITTERS: 1	TELEVISION					
PRIMARY TRANSMITTERS: 1 In General: In space G, ideicarried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, as Substitute Basis Station basis under specific FCC rul • Do not list the station here station was carried only of • List the station here, and a basis. For further informa in the paper SA3 form. Column 1: List each state each multicast stream associast stream as "WETA-2". SWETA-simulcast). Column 2: Give the chartist community of license. Foon which your cable system Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these terms	entify every telem during the a merited and (4), case explained in the second and (4), case explained in space of the second and (4), case explained in the second and (4), case explained in the second explained explained in the second explained explained in the second explained explain	ne 24, 198 or 76.63 (rethe next pect to any ns, or authorate basis. I, if the sta ing substitut. Do not restation accomms must the FCC have a community the recommercial e (v) of the	period, except B1, permitting the eferring to 76.6 paragraph. distant stations orizations: it it in space I (the tition was carried ute basis station eport origination cording to its own be reported in commendation as assigned to annel 4 in Wash attion is a netwoetwork), "N-M" (deducational), of egeneral instructions of the station is a section of the station is a network), "N-M" (deducational), of egeneral instructions of the station is a section of the station is a network), "N-M" (deducational), of egeneral instructions of the station is a section of the station is a network), "N-M" (deducational), of egeneral instructions of the station is a network).	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your of the Special Statement of both on a substifficial see page (v) on program service er-the-air designation of the television statifington, D.C. This work station, an indefor network multicur "E-M" (for noncoptions located in the station of	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the tute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel expendent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). The paper SA3 form.	G Primary Transmitters: Television
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	C	CHANNE	EL LINE-UP	·	channel line-up.	
SIGN CH	CAST 3. T		EL LINE-UP	·	channel line-up. 6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.					CVCTEM ID#	
LEGAL NAME OF OWN		YSTEM:			SYSTEM ID# 007412	Name
CABLE ONE, II					007412	
PRIMARY TRANSMITTI						
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eam 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	system during to ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and also in spartformation concurr. The station's call associated with associated with associated with a concurrency and concurrency associated with a concurrency and concurrency associated with a concurrency and concurrency associated with a concurrency as a c	he accounting In June 24, 19 (4), or 76.63 (ed in the next respect to any ations, or auth G—but do listitute basis. ace I, if the streeming substitute basis berthe FCC I be, WRC is Chhe station. Whether the setter "N" (for moncommercia page (v) of the the local ser	g period, except 181, permitting the referring to 76.6 paragraph. It is paragraph. It is space I (the ation was carried tute basis station report origination of the report origination is a sassigned to annel 4 in Wash tation is a network to the report of	(1) stations carried carriage of cert (1(e)(2) and (4))]; as carried by your one Special Statem d both on a substitute, see page (v) on program service for the television statington, D.C. This pork station, an indefer network multiple or "E-M" (for noncontions located in the distant"), enter "Yes	es". If not, enter "No". For an ex-	G Primary Transmitters: Television
					e paper SA3 form. stating the basis on which your	
carried the distant stat	ion on a part-ti	me basis bec	ause of lack of a	activated channel	tering "LAC" if your cable system capacity. / payment because it is the subject	
of a written agreement	t entered into o	n or before Ju	une 30, 2009, be	etween a cable sy	stem or an association representing ry transmitter, enter the designa-	
tion "E" (exempt). For	simulcasts, als	o enter "E". If	you carried the	channel on any o	ther basis, enter "O." For a further	
					ed in the paper SA3 form. y to which the station is licensed by the	
FCC. For Mexican or (Note: If you are utilizing				•	n which the station is identifed.	
Note: If you are utilizing	ig multiple cha		· · · · · ·	•	channel inte-up.	
	1	CHANN	EL LINE-UP	AC		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		YSTEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				007412	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Program Cast in the station was carried List the station here, basis. For further ir in the paper SA3 for Column 1: List eac each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give thits community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multiper the meaning of the Column 5: If you cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify even- system during to ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2	y television st he accounting in June 24, 19 4), or 76.63 (in the next respect to any ations, or authors, or authors, or authors, or authors, in June 26, if the statement of the station acceptable of the station acceptable of the station. Whether the station, whether the station, whether the station acceptable (v) of the the local seriage (v) of the est in column on during the me basis becar multicast strain or before Junitter or an acceptable of the station. For example, it is see page (v) ch station. For example, in the local serial in column or during the me basis becar multicast strain or before Junitter or an acceptable of the station. For example, it is see page (v) ch station.	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations to report origination coording to its owner be reported in the station is a network that is not station is a network that is not stationally, or general instructive area, (i.e. "or general instructive accounting perions of lack of a seam that is not some 30, 2009, be secondation repression or general instructive accounting perions of the general or U.S. stations,	t (1) stations carried to carriage of certific (e)(2) and (4))]; as carried by your one Special Statemed both on a substitute, see page (v) on program service rer-the-air designate column 1 (list each the television statington, D.C. This pork station, an indefer network multipor "E-M" (for noncontions located in the distant"), enter "Yestions located in the implete column 5, od. Indicate by enactivated channel subject to a royalty extended to a cable system of the primal channel on any orienstructions located list the community.	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing	ig multiple chai	• •	•	•	спаппетине-ир.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE S	YSTEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				007412	Nume
PRIMARY TRANSMITTI	ERS: TELEVISION	ON				
PRIMARY TRANSMITTI In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis Subasis under specific FC • Do not list the station was carried • List the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA-Simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicated educational station, by (for independent multifor the meaning of the Column 4: If the st planation of local service Column 5: If you h	ERS: TELEVISION Comments of the comments of th	y television so the accounting in June 24, 19 (4), or 76.63 (4), or 76.63 (5) and in the next respect to any ations, or authorized for June 20, or authorized for June 20, or any ations, or authorized for June 20, or any ations are sign. Do not the a station account of the FCC here, WRC is Chere station. Whether the some concommercial page (v) of the the local seriage (v) of the es" in column on during the	g period, except 81, permitting the referring to 76.6 paragraph. y distant stations orizations: at it in space I (the ation was carried tute basis stations ording to its own the reported in the sassigned to annel 4 in Wash tation is a network), "N-M" (I educational), coe general instructivice area, (i.e. "ugeneral instruction 4, you must coaccounting perion of 76.6 paragraphs."	t (1) stations carried to carriage of certifice (2) and (4))]; as carried by your one Special Statement of the Special Special Statement of the Special Special Special Statement of the Special	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 etion. For example, report multi- h stream separately; for example ion for broadcasting over-the-air in may be different from the channel expendent station, or a noncommercial exast), "I" (for independent), "I-M" commercial educational multicast). The paper SA3 form. The pa	Primary Transmitters: Television
	•				capacity. y payment because it is the subject	
of a written agreement	t entered into o	n or before Ju	une 30, 2009, be	etween a cable sy	stem or an association representing	
tion "E" (exempt). For	simulcasts, als	o enter "E". If	you carried the	channel on any o	ry transmitter, enter the designa- ther basis, enter "O." For a further	
					ed in the paper SA3 form. y to which the station is licensed by the	
FCC. For Mexican or (Note: If you are utilizing		. ,		•	n which the station is identifed.	
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1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)	6. LOCATION OF STATION	
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CABLE ONE, INC. PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.	Namo
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.	G Primary Transmitters:
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.	Primary Transmitters:
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.	Primary Transmitters:
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 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 th	
Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AF	-
1. CALL 2. B'CAST SIGN CHANNEL OF (Yes or No) (Yes or No) (If Distant) CHANDEL (CHANNEL OF (If Distant)	
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lender of the state of the stat	
Company	
Company	

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
CABLE ONE, INC.	007412	
PRIMARY TRANSMITTERS: TELEVISION		
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and lo carried by your cable system during the accounting period, except (1) stations carried only FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain net 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) substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable sy 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 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. For further information concerning substitute basis stations, see page (v) of the ge in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such each multicast stream associated with a station according to its over-the-air designation. For cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for I its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independe educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I' (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommerc For the meaning of these terms, see page (v) of the general instructions located in the paper Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". In planation of local service area, see page (v) of the general instructions located in	y on a part-time basis under etwork programs [sections 2] certain stations carried on a system on a substitute program and Program Log)—if the asis and also on some other general instructions located that as HBO, ESPN, etc. Identify For example, report multiam separately; for example report multiam separately; for example redifferent from the channel ent station, or a noncommercial "I" (for independent), "I-M" roial educational multicast), per SA3 form. In the content of the sais on which your "LAC" if your cable system ity, ment because it is the subject or an association representing assitter, enter "O." For a further	Primary Transmitters: Television
Column 6: Give the location of each station. For U.S. stations, list the community to whi FCC. For Mexican or Canadian stations, if any, give the name of the community with which Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-ups.	hich the station is licensed by the the station is identifed.	
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Column 6: Give the location of each station. For U.S. stations, list the community to whi FCC. For Mexican or Canadian stations, if any, give the name of the community with which Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel CHANNEL LINE-UP AG 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CHANNEL SIGN CHANNEL OF (Yes or No) CARRIAGE	hich the station is licensed by the the station is identifed. nel line-up.	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		YSTEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				007412	
PRIMARY TRANSMITT	ERS: TELEVISION	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Program Cast in the station was carried List the station here, basis. For further ir in the paper SA3 for Column 1: List eac each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give thits community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multiper the meaning of the Column 5: If you cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify ever system during to ions in effect on 6.61(e)(2) and (6.61(e)(2)	y television st he accounting in June 24, 19 4), or 76.63 (in the next respect to any ations, or authors, or authors, or authors, or authors, in June 26, if the statement of the station acceptable of the station acceptable of the station. Whether the station, whether the station, whether the station acceptable (v) of the the local seriage (v) of the est in column on during the me basis becar multicast strain or before Junitter or an acceptable of the station. For example, it is see page (v) ch station. For example, in the local serial in column or during the me basis becar multicast strain or before Junitter or an acceptable of the station. For example, it is see page (v) ch station.	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations to report origination coording to its owner be reported in the station is a network that is not station is a network that is not stationally, or general instructive area, (i.e. "or general instructive accounting perions of lack of a seam that is not some 30, 2009, be secondation repression or general instructive accounting perions of the general or U.S. stations,	t (1) stations carried to carriage of certific (e)(2) and (4))]; as carried by your one Special Statemed both on a substitute, see page (v) on program service rer-the-air designate column 1 (list each the television statington, D.C. This pork station, an indefer network multipor "E-M" (for noncontions located in the distant"), enter "Yestions located in the implete column 5, od. Indicate by enactivated channel subject to a royalty extended to a cable system of the primal channel on any orienstructions located list the community.	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing	ng manapio onai	• •	•	•	charmer into up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
				•		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE S	YSTEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				007412	Nume
PRIMARY TRANSMITTI	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 specife 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 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). For the meaning of these term						
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	ng multiple chai	• •	use a separate	<u>'</u>	channel line-up.	
4 0411	o Bloact				S LOCATION OF STATION	
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	
			•			
	ı	1		I	1	

Annual Content of CABLE ON TOTAL CABLE ON TOTAL CABLE ON THE CABLE ON	FORM SA3E. PAGE 3.						
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under PCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs (3, 78.61(e)/2) and (4),			/STEM:			SYSTEM ID#	Name
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 75.59(g)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: -0 not not list the station here and also in space (-1) 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 associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station. Column 5: 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 multicast), "for independent multicast)." For one commercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 6: If you have entered 'Yes' in column 4, you must complete column 5, stating t	CABLE ONE, II	NC.				007412	
Course to by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules an effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4)); and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: 10 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. 1. 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 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), "To, (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission	PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
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 AJ 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CARRIAGE	In General: In space carried by your cable serviced by your cable system carried to your cable serviced by your cable system carried to your cable serviced by your cable system carried to your cable serviced by your cable service	G, identify even system during the constructions in effect or sets and also in space only on a substand also in spationation concorm. The station's call associated with a sec channel number of the construction concorm. The channel number of the ineach case we wentering the lecast), "E" (for nease terms, see pation is outside ice area, see pation experted "You he distant station.	y television st he accounting in June 24, 19 4), or 76.63 (in the next respect to any attons, or auth G—but do listitute basis. In the state of the station accounting substitute basis in a station account of the station account of the station. In a station account of the station whether the station in a station account of the local series age (v) of the local series in column on during the	g period, except 81, permitting the referring to 76.6 paragraph. y distant station: norizations: t it in space I (the ation was carried tute basis station report origination cording to its over the bear of the cording to its over the basis station or an assigned to annel 4 in Wash tation is a network etwork), "N-M" I educational), or e general instruct vice area, (i.e. " general instruct 4, you must co accounting peri	t (1) stations carried carriage of certifice)(2) and (4))]; is scarried by your one Special Statem of both on a substinus, see page (v) on program service fer-the-air designation of the television statington, D.C. This pork station, an indefer metwork multipor "E-M" (for network multipor "E-M" (for network multipor "E-M"), enter "Yestions located in the indicated in the indicate column 5, od. Indicate by en	ed only on a part-time basis under cain 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 as such as HBO, ESPN, etc. Identify ation. For example, report multish stream separately; for example did in for broadcasting over-the-air in may be different from the channel dependent station, or a noncommercial cast), "I" (for independent), "I-M" commercial educational multicast). The paper SA3 form. ses". If not, enter "No". For an example sating the basis on which your tering "LAC" if your cable system	Primary Transmitters:
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 AJ 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CARRIAGE 6. LOCATION OF STATION	For the retransmiss	sion of a distant	multicast stre	eam that is not	subject to a royalty	y payment because it is the subject	
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 AJ 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? (Yes or No) CARRIAGE 6. LOCATION OF STATION	the cable system and	a primary trans	mitter or an a	ssociation repre	esenting the prima	ry transmitter, enter the designa-	
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 1. CALL SIGN 2. B'CAST CHANNEL OF (Yes or No) CARRIAGE 6. LOCATION OF STATION CARRIAGE	explanation of these th	ree categories	, see page (v	of the general	instructions locate	ed in the paper SA3 form.	
CHANNEL LINE-UP AJ 1. CALL SIGN 2. B'CAST CHANNEL OF (Yes or No) CARRIAGE 6. LOCATION OF STATION CARRIAGE	FCC. For Mexican or	Canadian statio	ns, if any, giv	e the name of t	he community with	n which the station is identifed.	
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CARRIAGE 6. LOCATION OF STATION (Yes or No) CARRIAGE	Note: II you are utilizir	ig mulliple char	•	·	•	channel line-up.	
Image: Control of the control of th		CHANNEL	3. TYPE OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				007412	- Tumo
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis s basis under specific FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give th its community of licens on which your cable so Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the st planation of local serv	G, identify every system during the constructions in effect or 6.61(e)(2) and (6.5is, as explaine Stations: With record record only on a substand also in spanformation concord. The station's call associated with experimental constructions on the station of the construction of the const	y television st he accounting h June 24, 19 4), or 76.63 (red) din the next respect to any attions, or auth G—but do lis titute basis. ace I, if the state erning substiff sign. Do not red h a station accestreams must beer the FCC has whether the station. whether the state etter "N" (for noncommercial page (v) of the tage (v) of the	g period, except 81, permitting the referring to 76.6 paragraph. y distant station: norizations: at it in space I (the ation was carried tute basis stations cording to its own the reported in the reported in the same of the reported in the same of the reported in the same of the reported in the report	t (1) stations carried carriage of certifice (2) and (4))]; is scarried by your one Special Statem d both on a substins, see page (v) on program service fer-the-air designation of the television statington, D.C. This pork station, an indefer network multipor "E-M" (for network multipor "E-M" (for network multipor "E-M" (for network multipor "E-M") (for network multipor "Green") (for network multipor	es". If not, enter "No". For an ex-	G Primary Transmitters: Television
cable system carried t	he distant statio	on during the	accounting peri	od. Indicate by en	tering "LAC" if your cable system	
carried the distant state For the retransmiss	•				capacity. y payment because it is the subject	
of a written agreemen	t entered into o	n or before Ju	une 30, 2009, be	etween a cable sy	stem or an association representing ry transmitter, enter the designa-	
tion "E" (exempt). For	simulcasts, also	o enter "E". If	you carried the	channel on any o	ther basis, enter "O." For a further	
					ed in the paper SA3 form. y to which the station is licensed by the	
FCC. For Mexican or (Note: If you are utilizing				•	n which the station is identifed.	
	. 9		EL LINE-UP	·		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
				•		
			•			

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE S	YSTEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				007412	Name
PRIMARY TRANSMITTI	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 specife 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 "\mathbf{W}" (for network), "\mathbf{W}" (for network), "\mathbf{W}" (for network), "\ma						
the cable system and	a primary trans	mitter or an a	ssociation repre	esenting the prima	ry transmitter, enter the designa-	
` '			•	•	ther basis, enter "O." For a further ed in the paper SA3 form.	
					y to which the station is licensed by the n which the station is identifed.	
Note: If you are utilizing		. ,		•		
		CHANN	EL LINE-UP	AL		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
				•		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OW		YSTEM:			SYSTEM ID#	Name
CABLE ONE, I	NC.				007412	
PRIMARY TRANSMITT	ERS: TELEVISION	ON				
In General: In space carried by your cable FCC rules and regular 76.59(d)(2) and (4), 7 substitute program ba Substitute Basis: basis under specific Fe Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fc Column 1: List eace each multicast stream cast stream as "WETA-simulcast). Column 2: Give th its community of licen on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you he cable system carried the distant state For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify ever system during to tions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2	y television st he accounting n June 24, 19 (4), or 76.63 (14) di nthe next prespect to any ations, or auth G—but do listitute basis. ace I, if the stateming substitute basis. Sign. Do not reference to a streams must ber the FCC hee, WRC is Chine station. Whether the station. Whether the station are page (v) of the ethe local servage (v) of the es" in column on during the eme basis becat multicast stream or before Jumitter or an accenter "E". If a see page (v) ch station. Fo	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations to report origination coording to its owner be reported in the station is a network that is not station is a network that is not stationally, or general instructive area, (i.e. "or general instructive accounting perions of lack of a seam that is not some 30, 2009, be secondation repression or general instructive accounting perions of the general or U.S. stations,	t (1) stations carried be carriage of cert (1) (2) and (4))]; as carried by your one Special Statemed both on a substitute, see page (v) on program service (ver-the-air designate column 1 (list each the television state (for network multicor "E-M" (for noncottions located in the distant"), enter "Ye timplete column 5, od. Indicate by enactivated channel is subject to a royalty etween a cable system in the primal channel on any or instructions located list the community.	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	Primary Transmitters: Television
Note: If you are utilizing	ng mulupic chai		•	•	спаппстипе-ир.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
				•		
				•		
				•		

LEGAL NAME OF OWNER OF CABLE SYSTEM:		
	SYSTEM ID#	Name
CABLE ONE, INC.	007412	
PRIMARY TRANSMITTERS: TELEVISION		
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power televisic carried by your cable system during the accounting period, except (1) stations carried only on a part-time be FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [s 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations 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 subst 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)—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 s basis. For further information concerning substitute basis stations, see page (v) of the general instruction in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, each multicast stream associated with a station according to its over-the-air designation. For example, repo cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the 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 needucational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent from the original particular of these terms, see page (v) of the general instructions located in the paper SA3 form. Column	asis under sections carried on a titute program if the some other as located at located	Primary Transmitters: Television
Column 6: Give the location of each station. For U.S. stations, list the community to which the station is FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is ide Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.	licensed by the	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE S	YSTEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				007412	Nume
PRIMARY TRANSMITTI	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), 76.61(e						
For the retransmiss	ion of a distant	multicast str	eam that is not s	subject to a royalty	payment because it is the subject	
				•		
tion "E" (exempt). For	simulcasts, als	o enter "E". If	you carried the	channel on any o	ther basis, enter "O." For a further ed in the paper SA3 form.	
Column 6: Give the	e location of ea	ch station. Fo	or U.S. stations,	list the community	y to which the station is licensed by the	
FCC. For Mexican or (Note: If you are utilizing)		. ,		•	n which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AO	·	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
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				•		

FORM SA3E. PAGE 3.					_		
LEGAL NAME OF OWN	IER OF CABLE SY	YSTEM:			SYSTEM ID#	Name	
CABLE ONE, II	NC.				007412	Name	
PRIMARY TRANSMITTI	RS: TELEVISIO	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 specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-N" (for network multicast), "I' (for independent), "I-N"							
(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 identifed.							
Note: If you are utilizing	<u> </u>	• •	EL LINE-UP	<u>'</u>			
		CHANN	EL LINE-UP	AP			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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				•			
				•			

FORM SA3E. PAGE 3.					,	
LEGAL NAME OF OWN	IER OF CABLE SY	YSTEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				007412	Nume
PRIMARY TRANSMITTI	ERS: TELEVISIO	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 specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "F" (for independent), "I-M" (for ind						Primary Transmitters: Television
of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	entered into o a primary trans simulcasts, also ree categories e location of ea	n or before Ju mitter or an a o enter "E". If , see page (v ch station. Fo	une 30, 2009, be ssociation repre you carried the) of the general or U.S. stations,	etween a cable sy- esenting the prima channel on any o instructions locate list the community	stem or an association representing ry transmitter, enter the designa-	
Note: If you are utilizing	ng multiple char	• •	use a separate	<u>'</u>	channel line-up.	
	o DIGAGE				O LOCATION OF STATION	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
			•	•		
				••••••		
				•		

FORM SA3E. PAGE 3	3.				,	
	WNER OF CABLE S	YSTEM:			SYSTEM ID#	Name
CABLE ONE,	, INC.				007412	
PRIMARY TRANSMI	TTERS: TELEVISION	NC				
In General: In space carried by your cable FCC rules and regul 76.59(d)(2) and (4), substitute Basile basis under specife. Do not list the station was carriele. List the station was carriele. List the station her basis. For further in the paper SA3 Column 1: List eleach multicast streacast stream as "WE WETA-simulcast). Column 2: Give its community of lice on which your cable Column 3: Indiceducational station, (for independent multiple for the meaning of Column 4: If the planation of local second for the distant second for the retransmoof a written agreement cable system artion "E" (exempt). Fexplanation of these Column 6: Give	te G, identify ever le system during to lations in effect or 76.61(e)(2) and (basis, as explaines S Stations : With FCC rules, regulation here in space ed only on a substre, and also in spar information conditions. For example, and associated with TA-2". Simulcast the channel numberse. For example esystem carried thate in each case to by entering the leulticast), "E" (for not these terms, see estation is outside ervice area, see put have entered "Y do the distant station on a part-timission of a distant ent entered into ond a primary transfor simulcasts, also three categories the location of each Canadian station Canadian station.	y television statche accounting in June 24, 19 (4), or 76.63 (4), or 76.63 (6) (6) (7) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7	g period, except 981, permitting the referring to 76.6 paragraph. It is paragraph. It is space I (the ation was carried that the basis station report origination coording to its own to be reported in the assigned to the ation is a network of the reported in the assigned to the ation is a network of the reported in the ation is a network of the general instruction The general instruction of the general or U.S. stations, we the name of the stations in the reference of the general instruction of the general instruction of the general instruction.	t (1) stations carried he carriage of certical (e)(2) and (4))]; as a carried by your one Special Statement of the Specia	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed.	Primary Transmitters: Television
		CHANN	EL LINE-UP	AR		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
			•			

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE S	YSTEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				007412	Nume
PRIMARY TRANSMITTI	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), 76.61(e						
For the retransmiss	ion of a distant	multicast str	eam that is not s	subject to a royalty	payment because it is the subject	
_				•		
tion "E" (exempt). For	simulcasts, als	o enter "E". If	you carried the	channel on any o	ther basis, enter "O." For a further	
Column 6: Give the	e location of ea	ch station. Fo	or U.S. stations,	list the community	ed in the paper SA3 form. y to which the station is licensed by the	
FCC. For Mexican or (Note: If you are utilizing		. ,		•	n which the station is identifed. channel line-up.	
		•	EL LINE-UP			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
	NOWIDER	STATION		(II Distant)		
			•			

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	IER OF CABLE SY	YSTEM:			SYSTEM ID#	Name		
CABLE ONE, IN	NC.				007412	Name		
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON						
In General: In space of carried by your cable's FCC rules and regulated 76.59(d)(2) and (4), 76 substitute program bases Substitute Pasis Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA-Simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicated	G, identify even system during to ions in effect of 6.61(e)(2) and (6.51(e)(2)	y television state accounting in June 24, 19 4), or 76.63 (ad in the next respect to any attons, or auth G—but do listitute basis. ace I, if the state acring substitute is sign. Do not a station ac streams must be the FCC has, WRC is Chaestation.	g period, except 81, permitting the referring to 76.6 paragraph. It is pace I (the ation was carried tute basis station report origination cording to its own to be reported in the assigned to annel 4 in Wash tation is a network 181, permitting to the reported in the assigned to annel 4 in Wash tation is a network 181, permitting to 76.0 permitting the 76.0 permitting the 76.0 permitting to	t (1) stations carried carriage of cert (1)(e)(2) and (4))]; as carried by your one Special Statemed both on a substitute, see page (v) on program service rer-the-air designate column 1 (list each the television statington, D.C. This ork station, an independent of certain contents of the station, an independent of certain contents of the station, an independent of certain carried the station, an independent of certain carried the station, an independent of certain carried the station, an independent carried the certain carried the station, an independent carried the carried the station carried the c	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 as such as HBO, ESPN, etc. Identify tion. For example, report multi- h stream separately; for example ion for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial cast). "I" (for independent). "I-M"	G Primary Transmitters: Television		
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 identifed.								
Note: If you are utilizing	<u> </u>	• •	EL LINE-UP	<u>'</u>	'			
		CHANN	EL LINE-UP	AI				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
				•				
				•				
				•				
				•				

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE S	YSTEM:			SYSTEM ID#	Name	
CABLE ONE, IN	NC.				007412	Nume	
PRIMARY TRANSMITTI	ERS: TELEVISION	ON					
PRIMARY TRANSMITTI In General: In space (carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you he cable system carried ti	ERS: TELEVISION Considerations: Televisions in effect on a sexplaine stations: With CC rules, regular here in space only on a substantion concern. The station's call associated with case in each case	y television so the accounting in June 24, 19 (4), or 76.63 (4), or 76.63 (5) and in the next respect to any ations, or authorized for June 20, or authorized for June 20, or any ations, or authorized for June 20, or any ations are sign. Do not the a station account of the FCC here, WRC is Chere station. Whether the some concommercial page (v) of the the local seriage (v) of the es" in column on during the	g period, except g period, except 181, permitting the referring to 76.6 paragraph. The variations or stations or station was carried to the tute basis station or sta	t (1) stations carried to carriage of certifice (2) and (4))]; as carried by your one Special Statement of the Special Special Statement of the Special Special Special Statement of the Special	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 etion. For example, report multi- h stream separately; for example ion for broadcasting over-the-air in may be different from the channel expendent station, or a noncommercial exast), "I" (for independent), "I-M" commercial educational multicast). The paper SA3 form. The pa	Primary Transmitters: Television	
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							
Note: If you are utilizing		nnel line-ups,	use a separate	space G for each	n which the station is identifed. channel line-up.		
	1	CHANN	EL LINE-UP	AU			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
			•	•			
			•	•			
			•	•			
				•			

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
CABLE ONE, II	NC.				007412	Name	
PRIMARY TRANSMITTI	RS: TELEVISIO	ON					
PRIMARY TRANSMITTI In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis is basis under specific FC • Do not list the station station was carried • List the station here, basis. For further in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by	ers: TELEVISIO G, identify every system during to ions in effect or 6.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular there in space only on a subs and also in spa formation conc and the station's call associated with associated with call associated with the channel number there is example there is example there is each case to the entering the left	y television state accounting in June 24, 19 4), or 76.63 (4) in the next respect to any ations, or authors, or authors, or authors, or authors, in the state of the station accounts as a station account of the station account of the station. Whether the state "N" (for in station in a station.	g period, except 81, permitting the referring to 76.6 paragraph. It is in space I (the ation was carried tute basis station cording to its over the reported in the reported i	t (1) stations carried carriage of cert (1(e)(2) and (4))]; as carried by your one Special Statemed both on a substitute, see page (v) on program service rer-the-air designate column 1 (list each the television statington, D.C. This ork station, an indefer network multic	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 as such as HBO, ESPN, etc. Identify tition. For example, report multi- th stream separately; for example ion for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial cast), "I" (for independent), "I-M"	G Primary Transmitters: Television	
(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.							
,	· .	CHANN	EL LINE-UP	Δ\/			
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		
	I						

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name		
CABLE ONE, II	NC.				007412	Nume		
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON						
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76,59(d)(2) and (4), 76,616(e)(2) and (4), 76,63 (referring to 76,61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: - Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. - List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi-cast 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),								
				•	n which the station is identifed.			
Note: If you are utilizing	ng multiple char	nel line-ups,	use a separate	space G for each	channel line-up.			
	1	CHANNI	EL LINE-UP	AW				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007412 CABLE ONE, INC. PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). AM or FM CALL SIGN LOCATION OF STATION CALL SIGN S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.							ACCOUNTING	PERIOD: 2022/		
CABLE ONE, INC.	CABLE SYST	EM:				;	SYSTEM ID# 007412	Name		
SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	IT AND PROGRAM LOG	i				1		
In General: In space I, ident substitute basis during the acexplanation of the programm	ccounting pe	riod, under spe	cific present and former FC	C rules, regula	ations, or auth	norizations.	For a further	Substitute Carriage:		
During the accounting per	1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program proadcast by a distant station?									
Note: If your answer is "No log in block 2.			e blank. If your answer is	'Yes," you mu	ıst complete	the prograi		Program Log		
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the program Column 3: Give the call Column 4: Give the broathe case of Mexican or Can Column 5: Give the mor first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	citute prograce, please a of every nor distant stati gulations, or tion. Do not ucy" or "NB n was broad sign of the sadcast statio adian statio at and day we "5/7." es when the Example: a er "R" if the land regulatic ogramming	m on a separa attach additional attach additional anetwork televition and that your authorizations: use general of A Basketball: cast live, entertation broadcan's location (thins, if any, the when your system to program carried isted program ons in effect du	al pages. Ision program (substitute pur cable system substitute pur cable system substitute so. See page (vi) of the genategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Notherwise enter "	rogram) that, d for the progeral instructio "basketball". lo." m. station is lice station is iderorogram. Use cable system. 15 p.m. to 6:2 mming that y; enter the let	during the arramming of a ns located in List specific nsed by the latified). numerals, which is the time 8:30 p.m. shour system was ter "P" if the	ccounting another star the paper program FCC or, in with the mores accurate ould be was required listed pro	nth Jy			
S	UBSTITUT	E PROGRAM			EN SUBSTIT		7. REASON			
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN		5. MONTH AND DAY		MES	FOR DELETION			
						- <u>-</u>				
						_				
						- <u>-</u>				
						<u>-</u> -				
						_				
						- 				
						_				
						-				
						- -				
					_	-				

ACCOUNTING PERIOD: 2022/1 FORM SA3E, PAGE 6. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007412 CABLE ONE, INC. 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		OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Name				
CA	BLE O	NE, INC.		007412	Name				
Inst all a (as i page	ructions imounts identifed e (vii) of Gross r during t	cceipts s: The figure you give in this space determines the form you fle and the amount (gross receipts) paid to your cable system by subscribers for the system's second in space E) during the accounting period. For a further explanation of how to complete the general instructions. eceipts from subscribers for secondary transmission service(s) he accounting period. T: You must complete a statement in space P concerning gross receipts.	ndary transmissompute this amo	ion service	K Gross Receipts				
Instru Con Con If you fee t	COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account. If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of								
	art 8 or p k 3 belo		e entered on line	: 1 of					
	art 6 of the	ne DSE schedule was completed, the amount from line 7 of block C should be e	entered on line 2	in block					
	art 7 or p block 4	art 9, block B, of the DSE schedule was completed, the surcharge amount shown below.	uld be entered o	n line					
	least the system Line 1.	JM FEE: All cable systems with semiannual gross receipts of \$527,600 or more eminimum fee, regardless of whether they carried any distant stations. This fees gross receipts for the accounting period. Enter the amount of gross receipts from space K Multiply the amount in line 1 by 0.01064							
		Enter the result here. This is your minimum fee.	\$	8,592.81					
	space ("Yes" in • Did yo	NT TELEVISION STATIONS CARRIED: Your answer here must agree with the G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column this block. Four cable system carry any distant television stations during the accounting periods—Complete the DSE schedule. X No—Leave block 3 below blank and column the period of the DSE schedule. X No—Leave block 3 below blank and column the period of the DSE schedule. X No—Leave block 3 below blank and column the period of the DSE schedule. X No—Leave block 3 below blank and column the period of the DSE schedule. X No—Leave block 3 below blank and column the period of the DSE schedule. X No—Leave block 3 below blank and column the period of the DSE schedule. X No—Leave block 3 below blank and column the period of the DSE schedule. X No—Leave block 3 below blank and column the period of the DSE schedule. X No—Leave block 3 below blank and column the period of the period of the DSE schedule. X No—Leave block 3 below blank and column the period of the peri	nn 4, you must c	heck					
3	Line 2.	3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	Ψ —	0.00					
	Line 3.	Add lines 1 and 2 and enter here	\$	-					
Block 4		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	\$	8,592.81	Cable systems				
	Line 2.	SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter		0.00	submitting additional				
	Line 3.	zero. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	deposits under Section 111(d)(7) should contact the Licensing				
	Line 4.	725.00	additional fees. Division for the appropriate						
	_	ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. es 1, 2 and 3 of block 4 and enter total here	\$	9,317.81	form for submitting the additional fees.				
		Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (separal instructions located in the paper SA3 form for more information.)	See page (i) of t	he					

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#									
Hamo	CABLE ONE, INC.	007412									
	CHANNELS										
M		Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations									
Channels	to its subscribers and (2) the cable system's total number of activated channels, during t	ne accounting period.									
	Enter the total number of channels on which the cable	13									
	system carried television broadcast stations										
	2. Enter the total number of activated channels										
	on which the cable system carried television broadcast stations	256									
	and nonbroadcast services										
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)										
for Further	Name JENAE HECK	Telephone 602-364-6092									
Information	Address 210 E. EARLL DRIVE (Number, street, rural route, apartment, or suite number)										
	PHOENIX, AZ 85012-2626										
	(City, town, state, zip)										
	Email Jenae.Heck@cableone.biz Fax	(optional) 602-364-6013									
	CERTIFICATION (This statement of account must be certifed and signed in accordance v	with Convight Office regulations									
0	CENTIFICATION (This statement of account must be certified and signed in accordance v	with copyright office regulations.									
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)										
	(Owner other than corporation or partnership) I am the owner of the cable system as it	dentifed in line 1 of space B; or									
	(Agent of owner other than corporation or partnership) I am the duly authorized agent in line 1 of space B and that the owner is not a corporation or partnership; or	of the owner of the cable system as identified									
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the I	agal antity identified as aways of the cable system									
	in line 1 of space B.	egal entity identified as owner of the cable system									
	I have examined the statement of account and hereby declare under penalty of law that all sare true, complete, and correct to the best of my knowledge, information, and belief, and are [18 U.S.C., Section 1001(1986)]										
	X /s/ Quynh Tran										
	Enter an electronic signature on the line above using an "/s/" signature to (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ sig "F2" button, then type /s/ and your name. Pressing the "F" button will av	gnature, place your cursor in the box and press the									
		on one of the state of the stat									
	Typed or printed name: QUYNH TRAN										
	Title: VICE PRESIDENT & TREASURER (Title of official position held in corporation or partnership)										
	Date: August 26, 2022										
İ											

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: CABLE ONE, INC. SYSTEM ID# 007412	Name					
CABLE ONE, INC. 007412						
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the						
paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?	Gross Receipts Exclusion					
X NO						
YES. Enter the total here and list the satellite carrier(s) below						
Name Mailing Address Mailing Address						
INTEREST ASSESSMENTS						
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q					
Line 1 Enter the amount of late payment or underpayment	Interest Assessment					
Line 2 Multiply line 1 by the interest rate* and enter the sum here						
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 ε 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 beer 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; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

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

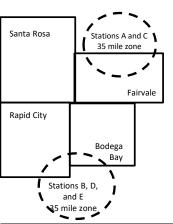
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

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



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

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

		ψ0,504.00			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

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

ACCOUNTING PERIOD: 2022/1

1	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC.					SYSTEM ID# 007412	
	SUM OF DSEs OF CATEGORY "O" STATIONS:						
	Add the DSEs of each station. Enter the sum here and in line 1 of part 5 of this schedule.				0.00		
					0.00		
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column £						
_	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" STATIONS: DSEs						
Category "O" Stations	CALL SIGN	DSE	CALL SIGN	DSE DSE	CALL SIGN	DSE	
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Add rows as							
necessary.							
Remember to copy all							
formula into new							
rows.							

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 007412 Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). 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. Computation 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 of DSEs for be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Stations Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, **Carried Part** give the type-value as ".25." Time Due to Lack of 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 Activated Channel Capacity CATEGORY LAC STATIONS: COMPUTATION OF DSEs 1. CALL 2. NUMBER 6. DSE 3. NUMBER 4. BASIS OF 5. TYPE OF HOURS OF HOURS VALUE SIGN CARRIAGE **CARRIED BY** STATION VALUE SYSTEM ON AIR SUM OF DSEs OF CATEGORY LAC STATIONS: Add the DSEs of each station. 0.00 Enter the sum here and in line 2 of part 5 of this schedule, Instructions: Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station: 4 Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulartions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and • Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of Computation of DSEs for Substitute-Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I. **Basis Stations** Column 3: Enter the number of days in the calendar year: 365, except in a leap year. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form). SUBSTITUTE-BASIS STATIONS: COMPUTATION OF DSEs 1. CALL 2. NUMBER 3. NUMBER 4. DSE 1. CALL 3. NUMBER 4. DSE 2. NUMBER SIGN OF OF DAYS SIGN OF OF DAYS **PROGRAMS** IN YEAR IN YEAR **PROGRAMS** SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS: Add the DSEs of each station 0.00 Enter the sum here and in line 3 of part 5 of this schedule, TOTAL NUMBER OF DSEs: Give the amounts from the boxes in parts 2, 3, and 4 of this schedule and add them to provide the total number of DSEs applicable to your system. **Total Number** 1. Number of DSEs from part 2. 0.00 of DSEs 2. Number of DSEs from part 3● 0.00 3. Number of DSEs from part 4 • 0.00 TOTAL NUMBER OF DSEs

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

CABLE ONE, I		SYSTEM:					S	YSTEM ID# 007412	Name
Instructions: Blod In block A: • If your answer if schedule. • If your answer if	"Yes," leave the re	emainder of p	•	7 of the DSE sche	edule blank ar	nd complete pa	art 8, (page 16) of	the	6
,	, ,			ELEVISION MA	ARKETS				Computation of
I -	1981? plete part 8 of the blete blocks B and List the call signs under FCC rules	schedule—[C below. BLOC s of distant st and regulating DSE Sche	CK B: CARR ations listed in ons prior to Jur	PLETE THE REMANDED IN THE REMA	AINDER OF F MITTED DS f this schedule urther explana	PART 6 AND 7 BES e that your systation of permitte	tem was permitter	d to carry	3.75 Fee
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC r. A Stations carrie 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfathered instructions for E Carried pursus *F A station pre	les and regued pursuant on as defined al education of DSE schedant to individuously carries of the station with the station will be station will be set to the station will be set to t	ulations cited be to the FCC ma d in 76.5(kk) (7 d in 76.5) 65) (see parag dule). ual waiver of F ed on a part-tin vithin grade-B o	ne or substitute ba contour, [76.59(d)(se in effect or 6.57, 76.59(b e)(1), 76.63(a 63(a) referring bstitution of g sis prior to Ju	n June 24, 198), 76.61(b)(c), n) referring to 7 g to 76.61(d) randfathered s	76.63(a) referring 6.61(e)(1 tations in the		
Column 3:		e stations ide	entified by the le	parts 2, 3, and 4 etter "F" in column			vorksheet on page	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	
								0.00	
								0.00	
		В	LOCK 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, l				of DSEs subject 7 of this schedu		rate.		0.00	
Line 4: Enter gro	ss receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent
Line 5: Multiply li	ine 4 by 0.0375	and enter s	um here				.,-		partially permited/ partially
Line 6: Enter tota	al number of DS	Es from line	3				X	<u>-</u>	nonpermitted carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 ar	nd enter her	e and on line	2, block 3, space	e L (page 7)			0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 007412 **BLOCK A: TELEVISION MARKETS (CONTINUED)** 6 3. DSE 1. CALL 2. PERMITTED 3. DSE 1. CALL 2. PERMITTED 1. CALL 2. PERMITTED 3. DSE BASIS SIGN BASIS SIGN SIGN **BASIS** Computation of 3.75 Fee

Name	CABLE ONE, IN		E SYSTEM:						SY	STEM ID# 007412					
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the c Column 2: Indicate Column 3: Indicate (Note that the Fi A—Part-time sp 76.59 B—Late-night pr 76.61 S—Substitute ca gener Column 5: Indicate Column 6: Compan in block IMPORTANT: The	Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage. Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule 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 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station.													
	1. CALL	PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN DSE PERIOD CARRIAGE DSE DSE													
	SIGN	SIGN DSE PERIOD CARRIAGE DSE DSE													
Computation of the Syndicated Exclusivity Surcharge	•	"Yes," compl "No," leave b	ete blocks B and C locks B and C blan BLOCh	k and complete	TELE	EVISION MARK	ET	C rules in effect Ju	ıne 24, ²	1981?					
	Yes—Complete	e blocks B and	d C .			No—Proceed to	part 8								
	BLOCK B: Ca	arriage of VH	F/Grade B Contour	Stations		BLOCK	(C: Compu	utation of Exemp	DSEs						
	Is any station listed ir commercial VHF stat or in part, over the ca	ion that place able system?	s a grade B contou	r, in whole	nity	as any station listed y served by the cab former FCC rule 76	le system į	•	•						
	Yes—List each s X No—Enter zero a		ith its appropriate per part 8.	mitted DSE		Yes—List each stack No—Enter zero a		with its appropriate to part 8.	e permitt	ed DSE					
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIGN		DSE					
			-												
								-							
			TOTAL DSEs	0.00				TOTAL DSE	; <u> </u>	0.00					

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC.	SYSTEM ID# 007412	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	807,595.04	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is any	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSI is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	≣	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here	_	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
3b			
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)	_	
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here	_	
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSI 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)		
	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#
	(CABLE ONE, INC.	007412
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)	
of the Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)	
Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ \$	
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here	
		F. Multiply line D by line E and enter here	
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)	
		Syndicated Exclusivity Surcharge	<u></u> .
8 Computation of Base Rate Fee	6 was 6 In blo If you If you blank What i	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of p checked "Yes," use the total number of DSEs from part 5. ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. If answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. If answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B be	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?	
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ _\$	
	Section 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 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts (the amount in section 1)	
		B. Enter 0.00701 of gross receipts (the amount in section 1) ▶	
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	
		Base Rate Fee	0.00

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
CABLE ONE, INC.	007412	Name
Section If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
A. Enter 0.01064 of gross receipts (the amount in section 1)		8
B. Enter 0.00701 of gross receipts (the amount in section 1) \$		Computation of
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)		
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	
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television bro instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple ch Space G.	•	9
In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rat	·	Computation
receipts from subscribers located within the station's local service area, from your system's total gross receipts. To ta exclusion, you must:	ke advantage of this	of Base Rate Fee
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are dist station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Detern DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fe Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system	mine the number of e for each group.	and Syndicated Exclusivity Surcharge
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exemple also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and if your cable system is wholly located outside all major television markets, complete block A only.		for Partially Distant Stations, and
How to Identify a Subscriber Group for Partially Distant Stations Step 1: For each community served, determine the local service area of each wholly distant and each partially distant	t station you	for Partially Permitted
carried to that community.	t station you	Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers we outside the station's local service area. A subscriber located outside the local service area of a station is distant to the same token, the station is distant to the subscriber.)		
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are dis subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. No system will have only one subscriber group when the distant stations it carried have local service areas that coincide.	te that a cable	
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of you groups.	r system's subscriber	
In each section: • Identify the communities/areas represented by each subscriber group.		
• Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant subscribers in the group.	to all of the	
• If:		
 your system is located wholly outside all major and smaller television markets, give each station's DSE as you gav of this schedule; or, 		
 any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave in part 6 of this schedule. 	t in block B,	
Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
 Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the gen- in the paper SA3 form. 	eral instructions	
Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group DSEs for that group's complement of stations and total gross receipts from the subscribers in that group. You do not	p (that is, the total	

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

actual calculations on the form.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007412 CABLE ONE, INC. Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

CABLE ONE, INC.		LE SYSTEM:				S	3YSTEM ID# 007412	Name
BI		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA	Ardmo	re, Carter,Long G	rove,Dic	COMMUNITY/ AREA	Marietta	2		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
		-						
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 722,	699.81	Gross Receipts Seco	and Group	\$	32,986.60	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Madill,I	Marshall County,	Dakland	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
					<u> </u>	-		
		-						
		-						
						+		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$ 51,	908.63	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				Ш				
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e fees for each subsc space L (page 7)	riber group	as shown in the boxes	above.	\$	0.00	

O COMMUNITY/ AREA O Computation SIGN DSE CALL SIGN DSE CALL SIGN DSE of Base Rate Ference and Syndicated Exclusivity Surcharge for Partially	SIX		COMPUTATION OF		
O COMMUNITY/ AREA O Computation SIGN DSE CALL SIGN DSE CALL SIGN DSE of Base Rate Form and Syndicated Exclusivity Surcharge for Partially		· I		OON A. C	BLO
SIGN DSE CALL SIGN DSE CALL SIGN DSE of Base Rate For and Syndicated Exclusivity Surcharge for Partially	HTV/ ADE A		SUBSCRIBER GROU	FIFTH	
SIGN DSE CALL SIGN DSE CALL SIGN DSE of Base Rate Formand Syndicated Exclusivity Surcharge for Partially	III Y/ AREA	0			COMMUNITY/ AREA
Base Rate F and Syndicated Exclusivity Surcharge for Partially		DSE	CALL SIGN	DSE	CALL SIGN
Syndicated Exclusivity Surcharge for Partially					
Exclusivity Surcharge for Partially					
Surcharge for Partially					
for Partially					
Partially					
Distant					
Stations			-	•	
0.00		0.00	<u> </u>		
					Total DSEs
0.00 Gross Receipts Second Group \$ 0.00	ceipts Second Group	0.00	\$	oup	Gross Receipts First Gro
0.00 Base Rate Fee Second Group \$ 0.00	e Fee Second Group	0.00	\$	oup	Base Rate Fee First Gro
IBER GROUP EIGHTH SUBSCRIBER GROUP	EIGH	•	SUBSCRIBER GROU	EVENTH	S
O COMMUNITY/ AREA O	IITY/ AREA	0			COMMUNITY/ AREA
SIGN DSE CALL SIGN DSE CALL SIGN DSE	IGN DSE	DSE	CALL SIGN	DSE	CALL SIGN
			-		
0.00 Total DSEs	s	0.00			otal DSEs
0.00 Gross Receipts Fourth Group \$ 0.00	ceipts Fourth Group	0.00	\$	roup	Gross Receipts Third Gr
	·			•	,
0.00 Base Rate Fee Fourth Group \$ 0.00	e Fee Fourth Group	0.00	\$	roup	Base Rate Fee Third Gr

EGAL NAME OF OWNER CABLE ONE, INC.	OF CABL	E SYSTEM:				S	YSTEM ID# 007412	Name
BLC		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of
								Base Rate Fo
								Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
						. –		Stations
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First Gro	up	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Gro	up	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	VENTH	SUBSCRIBER GROU				SUBSCRIBER GROU		
OMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts Third Gro	oup	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
ase Rate Fee Third Gro	oup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
e: Add the	base rat	se fees for each subscripace L (page 7)		Base Rate Fee Four		\$	0.00	

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007412	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
THIF	RTEENTH	SUBSCRIBER GROU		H		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicated
		_						Exclusivity
								Surcharge for
		-				<u> </u>		Partially
		-						Distant
		-						Stations
		-						
otal DSEs		•	0.00	Total DSEs	•	•	0.00	
Gross Receipts First G	าดเมท	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
oroso recocipio i ilot Oi	oup		0.00	Cross recorpts eee	она отоар			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FII	TEENTH	SUBSCRIBER GROU	JP			SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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		-				<u> </u>		
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		-				+		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	r .	ļ·	3.50		- ·/ F	<u>, </u>		
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 007412	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								Syndicated
						.		Exclusivity Surcharge
								for
								Partially Distant
								Stations
		- 1111111111111111111111111111111111111						
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		\$	0.00	Base Rate Fee Seco		\$	0.00	
NIN COMMUNITY/ AREA	NIEENIH	SUBSCRIBER GRO	<u> </u>	COMMUNITY/ AREA		SUBSCRIBER GROU)P 0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		- 1111111111111111111111111111111111111						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 007412	Name
				ATE FEES FOR EAC				
	TY-FIRST	SUBSCRIBER GROU		t t		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
		-				 		and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
		-						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
,	•	·						
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
TWEN	Y-THIRD	SUBSCRIBER GRO	JP	TWEN	TY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u></u>		
		-						
		-						
		-						
							0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
	•							
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 007412	Name
				ATE FEES FOR EAC				
	TY-FIFTH	SUBSCRIBER GRO		†		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
		-						Syndicated
								Exclusivity Surcharge
						·		for
								Partially
								Distant
	<u> </u>	-						Stations
						·		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
3ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
TWENTY-	SEVENTH	SUBSCRIBER GRO	UP	TWEN	NTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						·		
	<u> </u>							
	<u></u>	-						
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
		_						
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007412	Name
				TE FEES FOR EAC				
TWENT COMMUNITY/ AREA	Y-NINTH	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA		SUBSCRIBER GROU)P 0	9
COMMONT IT AREA				COMMONT IT AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fe
								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	
THIR	ΓY-FIRST	SUBSCRIBER GROU	JP	11		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
		-						
		-						
Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
	•	-						
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007412	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								Syndicated
		- 1111111111111111111111111111111111111						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	
THIR'	TY-FIFTH	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	
				COMMONT 17 AIL				
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 Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007412	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA	***************************************		0	COMMUNITY/ ARE	4		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								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	
	Y-NINTH	SUBSCRIBER GROU				SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
Tatal DCCa			0.00	Total DOFa			0.00	
Total DSEs Gross Receipts Third G	roup	¢	0.00	Total DSEs Gross Receipts Foul	th Croup	•	0.00	
Cross Necelpla IIIII G	ισαρ	\$	J.00	Orosa Medelpis Foul	ит Отоир	<u>Ψ</u>	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007412	Name
BL	OCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
FOR	TY-FIRST	SUBSCRIBER GROU				SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
		-						Syndicated
		-						Exclusivity
		-						Surcharge for
		-						Partially
		-						Distant
								Stations
		-						
		-						
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
						·		
3ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FORT	Y-THIRD	SUBSCRIBER GROU	JP	11		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
·	-				•			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
• Fee: Add the	e base rat	e fees for each subscapace L (page 7)		Base Rate Fee Four		\$	0.00	

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007412	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	TY-FIFTH	SUBSCRIBER GROU		1		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	4		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
0.122.2.2.2		0.12231011						Base Rate F
								and
		-						Syndicated
		-						Exclusivity
	.	-						Surcharge for
		-						Partially
		-						Distant
								Stations
		-						
		-						
		-						
								
otal DSEs	•		0.00	Total DSEs	•	••	0.00	
Gross Receipts First Gr	nun	\$	0.00	Gross Receipts Sec	and Group	\$	0.00	
orosa receipta i iist Oi	oup	4	0.00	Cross receipts occ	ond Group	<u> </u>	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FORTY-S	SEVENTH	SUBSCRIBER GROU	JP	FOF	RTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				<u></u>		
	<u> </u>							
		-						
		-				n=		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
•					•			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
e Fee: Add th	e base rat	e fees for each subscapace L (page 7)		Base Rate Fee Four		\$	0.00	

LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABL	LE SYSTEM:				SY	STEM ID# 007412	Name
				ATE FEES FOR EACH				
FORT COMMUNITY/ AREA	Y-NINTH	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	FIFTIETH	SUBSCRIBER GROUP	0	9
COMMONT IT AREA				COMMONT IT AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
		-						Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
FIFT	Y-FIRST	SUBSCRIBER GROU	JP	FIFTY	'-SECOND	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 Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$		

Computation		TI .		COMPUTATION OF	OCK A: 0	DI
O Computation DSE CALL SIGN DSE Base Rate Fe and Syndicated Exclusivity	/-FOURTH	FIFT				BL
DSE CALL SIGN DSE of Base Rate For and Syndicated Exclusivity		ii .		SUBSCRIBER GRO	Y-THIRD	
DSE CALL SIGN DSE of Base Rate For and Syndicated Exclusivity		COMMUNITY/ AREA	0			COMMUNITY/ AREA
and Syndicated Exclusivity		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Syndicated Exclusivity						
Exclusivity				-		
Surcharge						
for						
Partially						
Distant				-		
Stations						
······································						
	<u> </u>					
	.					
0.00		Total DSEs	0.00		•	Fotal DSEs
	d Group	Gross Receipts Secon	0.00	\$	oun	Gross Receipts First Gr
	а Стоар	Orosa reacipia accor	0.00		oup	Stood Redelpto 1 list of
ond Group \$ 0.00	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
FIFTY-SIXTH SUBSCRIBER GROUP	TY-SIXTH	FI	JP	SUBSCRIBER GRO	ΓY-FIFTH	FIF
A		COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
				-		
**************************************				-		
	.			-		
0.00		Total DSEs	0.00			otal DSEs
	0			•		
rth Group \$ 0.00	Group	Gross Receipts Fourtl	0.00	\$	roup	Gross Receipts Third G
rth Group \$ 0.00	Group	Base Rate Fee Fourth	0.00	\$	roup	Base Rate Fee Third G

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 007412	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								Syndicated
								Exclusivity
								Surcharge for
		-						Partially
								Distant Stations
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
3ase Rate Fee First G	-oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	ΓY-NINTH	SUBSCRIBER GRO				I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		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	iroup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxe	s above.	\$		

Computation	P	COMPUTATION OF SUBSCRIBER GROU		
O COMMUNITY/ AREA O Computation E CALL SIGN DSE CALL SIGN DSE of Base Rate For and Syndicated Exclusivity Surcharge for Partially		SUBSCRIBER GROU	TY-FIRST	011/7
E CALL SIGN DSE CALL SIGN DSE of Base Rate F and Syndicated Exclusivity Surcharge for Partially	0			SIXI
E CALL SIGN DSE CALL SIGN DSE Base Rate F and Syndicated Exclusivity Surcharge for Partially				COMMUNITY/ AREA
and Syndicated Exclusivity Surcharge for Partially	DSE	CALL SIGN	DSE	CALL SIGN
Syndicated Exclusivity Surcharge for Partially		-		
Exclusivity Surcharge for Partially		-		
Surcharge for Partially				
for Partially		_		
		-		
Distant				
		-		
Stations		-		
		-	•	
0 Total DSEs 0.00	0.00			otal DSEs
Gross Receipts Second Group \$ 0.00	0.00	\$	oup	ross Receipts First Gr
Base Rate Fee Second Group \$ 0.00	0.00	\$	oup	a se Rate Fee First Gro
CIVTY FOURTH SUBSCRIPED CROUD	ID.	CLIBCODIDED CDOL	V TUIDD	CIVI
SIXTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O		SUBSCRIBER GROU	ואוחורט	COMMUNITY/ AREA
COMMONITY AREA	U			OMMONIT I/ AREA
E CALL SIGN DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN
		-		
		-		
		-		
		-		
			.	
0 Total DSEs 0.00	0.00			otal DSEs
Oross Receipts Fourth Group \$ 0.00	0.00	\$	roup	Gross Receipts Third G
			•	,
Base Rate Fee Fourth Group \$ 0.00	0.00	\$	roup	Base Rate Fee Third G

	YSTEM ID# 007412	S				E SYSTEM:	R OF CABL	LEGAL NAME OF OWNER CABLE ONE, INC.
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
9		SUBSCRIBER GROU	(TY-SIXTH			SUBSCRIBER GRO	Y-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicate								
Exclusivity								
Surcharge for								
Partially								
Distant								
Stations								
<u> </u>							-	
"						-		
							-	
"								
	0.00			Total DSEs	0.00	•		Fotal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oun	Gross Receipts First Gro
	0.00	Ψ	а Огоар	Gross Receipts decom	0.00	4	oup	orosa recocipis i iisi Giv
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gro
	JP	SUBSCRIBER GROU	Y-EIGHTH	SIXT	JP	SUBSCRIBER GRO	EVENTH	SIXTY-S
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		-				-		
1.		_						
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11								
10						-		
"]								
1	0.00			Tatal DCFa	0.00			Fatal DCFa
	-		_	Total DSEs	0.00			Γotal DSEs
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G
				i i				

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007412	Name
BL	OCK A: C	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
SIXT	Y-NINTH	SUBSCRIBER GRO		t e		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
3.12.3.3.								Base Rate Fe
								and
		-						Syndicated
		-				.		Exclusivity
		-						Surcharge for
		-						Partially
		-						Distant
								Stations
		-						
		-						
		-						
Γotal DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVEN ⁻	TY-FIRST	SUBSCRIBER GRO	JP	SEVEN	TY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						<u></u>		
						H		
		-						
						<u></u>		
Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				<u> </u>				
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	s		

Name	YSTEM ID# 007412	S				E SYSTEM:	R OF CABL	LEGAL NAME OF OWNER CABLE ONE, INC.
		IBER GROUP	SUBSCR	E FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BLO
9	JP	SUBSCRIBER GROU	-FOURTH	SEVENTY		SUBSCRIBER GRO	Y-THIRD	SEVENT
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and		,				-		
Syndicated Exclusivity						-		
Surcharge								
for						-		
Partially								
Distant						-		
Stations						-		
		-				-	•	
	0.00			Total DSEs	0.00			Γotal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gro
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gro
	JP	SUBSCRIBER GROU	ITY-SIXTH	SEVEN	JP	SUBSCRIBER GRO	ΓY-FIFTH	SEVENT
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						-		
						-		
						-		
						-		
		-				-	•	
	0.00			Total DSEs	0.00			Fotal DSEs
	0.00		0			_		
	0.00			Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third Gr
	0.00	\$	Group	·		•	•	·

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABI	LE SYSTEM:				S	YSTEM ID# 007412	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
		-						Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec				
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Seco		\$	0.00	
SEVEN	Y-NINTH	SUBSCRIBER GROU	<u> </u>	COMMUNITY/ AREA		I SUBSCRIBER GROU)P	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 007412	Name
BL	OCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
EIGH	TY-FIRST	SUBSCRIBER GRO		EIGH	TY-SECOND	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fo
		-				 		and
								Syndicated
								Exclusivity Surcharge
								for
		-				-		Partially
								Distant
								Stations
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	oup	\$	0.00	Gross Receipts Sec				
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
EIGH	Y-THIRD	SUBSCRIBER GROU		11		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 007412	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	TY-FIFTH	SUBSCRIBER GRO		1		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
		-						and
								Syndicated
								Exclusivity
								Surcharge for
						<u></u>		Partially
		-						Distant
		-						Stations
	.							
Γotal DSEs			0.00	Total DSEs	•	!!	0.00	
Gross Receipts First Gr	oun	\$	0.00	Gross Receipts Sec				
oroso resorpto i not or	очр	<u> </u>		Cross rescipts see	ona Oroap	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
EIGHTY-S	SEVENTH	SUBSCRIBER GRO	JP	EIGH	HTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
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 G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roun	¢	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Suse Nate 1 66 Hill G	Joup	4	0.00	Dase Nate i ee roui	ил Огоир	Ψ	3.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007412	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP 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
		- 1111111111111111111111111111111111111						Base Rate Fe
								Syndicated
						.		Exclusivity Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs	Total DSEs			
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	ΓY-FIRST	SUBSCRIBER GROU		ii		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
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 Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007412	Name
BL	OCK A: C	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP	-	
	Y-THIRD	SUBSCRIBER GRO		Ħ		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
						<u> </u>		and
		-						Syndicated
		-						Exclusivity
						H		Surcharge for
		-						Partially
								Distant
		-						Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec				
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NINE	Y-FIFTH	SUBSCRIBER GRO	JP	11		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
						H		
		-				+		
	•							
Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Door Date From Add the	haa- =	a face for each subse	ribor	oo oboum in the barre	o obove			
Base Rate Fee: Add the Inter here and in block			inei group	as shown in the boxe	:∍ abuve.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007412	Name
E	BLOCK A: (COMPUTATION O	BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
		SUBSCRIBER GRO		li		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
			<mark></mark>			_		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	
NINE	ETY-NINTH	SUBSCRIBER GRO	UP	ONE F	IUNDREDTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				-		
						_		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
ļ <u>.</u>	•				F			
Base Rate Fee Third	Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Foun	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in blood			criber group	as shown in the boxe	s above.	•		
	,, o, iii io 1, 8	paoo L (page 1,				*		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABI	E SYSTEM:				S	YSTEM ID# 007412	Name
BL	OCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	ED FIRST	SUBSCRIBER GROU		†		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
	<u> </u>	-				 		Syndicated
		-						Exclusivity
	<u> </u>	-						Surcharge for
								Partially
		-						Distant
								Stations
Total DSEs	L	ų.	0.00	Total DSEs		!!	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRE	D THIRD	SUBSCRIBER GROU	JP	11		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ 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 G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
, ,				, , , , , ,				
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWN CABLE ONE, INC		LE SYSTEM:				S	O07412	Name
В	LOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDE	RED FIFTH	SUBSCRIBER GROU	JP	ONE HUND	RED SIXTH	SUBSCRIBER GROU	Р	•
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 C	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
ONE HUNDRED	SEVENTH	SUBSCRIBER GROU	JP	ONE HUNDR	ED EIGHTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		H						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			riber group	as shown in the boxes	s above.	\$		

CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 007412	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP SUBSCRIBER GROU	IP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
					<u></u>			Syndicated
								Exclusivity
		-						Surcharge
								for Partially
								Distant
								Stations
			0.00	T			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	LEVENTH	SUBSCRIBER GROU		ii -		SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	o as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE	R OF CABL	E SYSTEM:				S	YSTEM ID# 007412	Name
				ATE FEES FOR EAC				
ONE HUNDRED THIR	RTEENTH	SUBSCRIBER GROU				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
						H		Exclusivity Surcharge
		-						for
								Partially
		-						Distant
		-						Stations
		-						
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	and Group	\$	0.00	
ONE HUNDRED FIF	TEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED	SIXTEENTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				-		
		=				 		
		-						
	<u> </u>							
		-				u —		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
•	-							
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	s above.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007412	Name
BL	OCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED SEVEN	ITEENTH	SUBSCRIBER GROU		1		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-						Syndicated
								Exclusivity Surcharge
		-			.			for
								Partially
								Distant
		-			<u></u>			Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED NIN	ITEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED T	WENTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007412	Name
BL	OCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED TWEN	ITY-FIRST	SUBSCRIBER GROU		h		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fe
								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	
							1	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROUP	1	TI .		SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u> </u>							
		-						
		-				n -		
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABI	LE SYSTEM:				S	YSTEM ID# 007412	Name
				ATE FEES FOR EAC				
ONE HUNDRED TWEN	NIY-FIFIH	SUBSCRIBER GROUP	0	COMMUNITY/ AREA		SUBSCRIBER GROUP	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fe
								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 Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NE HUNDRED TWENTY-	SEVENTH	SUBSCRIBER GROUP	ı	ONE HUNDRED TWE	NTY-EIGHTH	SUBSCRIBER GROUP	1	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		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 Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	s above.	\$		

CABLE ONE, INC.	R OF CABL	LE SYSTEM:				SY	STEM ID# 007412	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED TWEN	TY-NINTH	SUBSCRIBER GROUP		1	THIRTIETH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fee and
								Syndicated
		-						Exclusivity
								Surcharge
		-						for
								Partially
								Distant Stations
								Stations
					<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED THIR	TY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED THIRT	Y-SECOND	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 Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 007412	Name
		COMPUTATION OF SUBSCRIBER GROUP		ATE FEES FOR EAC		RIBER GROUP		
COMMUNITY/ AREA		SUBSCRIBER GROUP	0	COMMUNITY/ AREA		I SUBSCRIBER GROUP	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fe
		- 1111111111111111111111111111111111111						and Syndicated
								Exclusivity
								Surcharge for
		-						Partially
								Distant Stations
								Otations
		- 1111111111111111111111111111111111111						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	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	
	RTY-FIFTH	SUBSCRIBER GROUP		#		SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
T / LD05			0.00	T			0.00	
Total DSEs		•	0.00	Total DSEs	oth Coore		0.00	
Gross Receipts Third G	ιουρ	\$	0.00	Gross Receipts Foul	ш отоир	Ÿ	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC.	R OF CABI	E SYSTEM:				S	YSTEM ID# 007412	Name
BL	OCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED THIRTY-	SEVENTH	SUBSCRIBER GROUP				I SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DSL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	Base Rate Fee
		-				. =		and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
		-				n -		Stations
	<u> </u>							
	<u> </u>							
								
Total DSEs	ļ	Ц	0.00	Total DSEs		!!	0.00	
Gross Receipts First Gr	oun	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Cross resorpts river of	очр	<u>*</u>		Cross ressipts seek	ona Oroap	<u>*</u>		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED THIS	TY-NINTH	SUBSCRIBER GROUP	1	11		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						H		
						<u> </u>		
	<u> </u>							
								
	†	-						
T			0.00	T 1 1 DOE			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	tn Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC.	R OF CABL	LE SYSTEM:				SY	STEM ID# 007412	Name
				TE FEES FOR EACH				
	TY-FIRST	SUBSCRIBER GROUP			Y-SECOND	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
		-						Exclusivity
		-						Surcharge
								for
								Partially Distant
								Stations
Total DSEs		+	0.00	Total DSEs	•	-	0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	TY-THIRD	SUBSCRIBER GROUP			Y-FOURTH	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 Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				11				
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 007412	Name
В	SLOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	ORTY-FIFTH	SUBSCRIBER GROUF)	TT .		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
		-				_		Syndicated Exclusivity
		-						Surcharge
		-				-		for
								Partially
								Distant
								Stations
						_		
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FORT	Y-SEVENTH	SUBSCRIBER GROUP)	ONE HUNDRED FO	RTY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		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 t			criber group	as shown in the boxe	s above.			
Enter here and in bloc	۸, III التار ا, S	phace r (hade /				Ψ		

CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 007412	Name
				ATE FEES FOR EAC				
ONE HUNDRED FORT	Y-NINTH	SUBSCRIBER GROU				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
						-		for
								Partially
						<u> </u>		Distant
								Stations
						·		
			<u></u>					
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	and Group	\$	0.00	
ONE HUNDRED FIFT	TY-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIFT	TY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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 Four	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			riber group	as shown in the boxes	s above.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007412	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED FIFT	Y-THIRD	SUBSCRIBER GROU				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
		-						for
								Partially
		-						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GROU	JP	ONE HUNDRED F	IFTY-SIXTH	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 Four	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			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 007412	Name
				ATE FEES FOR EAC				
ONE HUNDRED FIFTY COMMUNITY/ AREA	-SEVENTH	SUBSCRIBER GROUP	0	COMMUNITY/ AREA		SUBSCRIBER GROUP	0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fe
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
		-						Stations
Total DSEs	-		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	
ONE HUNDRED FIR COMMUNITY/ AREA	TY-NINTH	SUBSCRIBER GROUP	0	COMMUNITY/ AREA		SUBSCRIBER GROUP	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 Four	rth Group	\$	0.00	
Raco Data Eso Third C	roup	c	0.00	Raco Poto Foo Foor	th Group	e	0.00	
Base Rate Fee Third G		Ψ	0.00	Base Rate Fee Four	ш Стоир	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007412								
Bl				TE FEES FOR EACH			ID.	
COMMUNITY/ AREA		SUBSCRIBER GROUTE, Carter, Long G		COMMUNITY/ AREA		SUBSCRIBER GROU	IP .	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
								and
	<u> </u>	+						Syndicated
								Exclusivity
		-						Surcharge
								for
								Partially Distant
								Stations
		-						
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T			0.00	T			0.00	
otal DSEs 0.00				Total DSEs		s 3		
Gross Receipts First Group \$ 722,699.81				Gross Receipts Secon				
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA	Madill,	Marshall County,	Oaklanc	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	s 51.	908.63	Gross Receipts Fourth	Group	\$	0.00	
	•							
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
			riber group	as shown in the boxes	above.			
Enter here and in block						\$	0.00	

Name	O07412	SY			,	E SYSTEM:	R OF CABL	LEGAL NAME OF OWNER CABLE ONE, INC.
				TE FEES FOR EACH				BL
9		SUBSCRIBER GROU	SIXTH			SUBSCRIBER GRO	FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of Base Rate and Syndicate Exclusivi Surcharg for Partially	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00		!	Total DSEs	0.00	'	-!	Total DSEs
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	Р	SUBSCRIBER GROU	EIGHTH			SUBSCRIBER GRO	SEVENTH	S
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0.00			Total DSEs	0.00			
	_	\$	Group			\$	Group	Gross Receipts Third G
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G

Name	O07412					E SYSTEM:		CABLE ONE, INC.
				TE FEES FOR EACH				Bl
9		SUBSCRIBER GROU	TENTH	#		SUBSCRIBER GRO	NINTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of Base Rate and Syndicate Exclusivi Surcharg for Partially	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						-		
Surcharge						-		
''']								
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for Partially Distant								
						-		
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	roup	Gross Receipts First G
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	Р	SUBSCRIBER GROU	TWELVTH		UP	SUBSCRIBER GRO	LEVENTH	E
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		\$	n Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

	YSTEM ID# 007412	SY			•	E SYSTEM:	R OF CABL	LEGAL NAME OF OWNER CABLE ONE, INC.
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	RTEENTH			SUBSCRIBER GRO	RTEENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of Base Rate and Syndicate Exclusivi Surcharg for Partially Distant	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	IP	SUBSCRIBER GROU	XTEENTH	S	JP	SUBSCRIBER GRO	TEENTH	FIF
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	_	\$	Group	Gross Receipts Fourth	0.00	\$	Broup	Gross Receipts Third G

CABLE ONE, INC	NER OF CABL C.	L STOTEIVI.					007412	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		l		SUBSCRIBER GRO	_	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
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Γotal DSEs			0.00	Total DSEs		II.	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	
1	NINTEENTH	\$ SUBSCRIBER GRO	OUP		TWENTIETH	\$ SUBSCRIBER GRO		
1	NINTEENTH		-		TWENTIETH	SUBSCRIBER GRO		
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COMMUNITY/ AREA	NINTEENTH	SUBSCRIBER GRO	OUP 0	COMMUNITY/ ARE	TWENTIETH A		UP 0	
COMMUNITY/ AREA	NINTEENTH	SUBSCRIBER GRO	OUP 0	COMMUNITY/ ARE	TWENTIETH A		UP 0	
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COMMUNITY/ AREA	NINTEENTH	SUBSCRIBER GRO	OUP 0	COMMUNITY/ ARE	TWENTIETH A		UP 0	
CALL SIGN	NINTEENTH	SUBSCRIBER GRO	OUP 0	COMMUNITY/ ARE	TWENTIETH A		UP 0	
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CALL SIGN CALL SIGN Total DSEs	DSE	SUBSCRIBER GRO	DUP DSE O.00	COMMUNITY/ ARE	TWENTIETH A DSE	CALL SIGN	DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE	
COMMUNITY/ AREA	DSE	SUBSCRIBER GRO	DUP DSE O.00	COMMUNITY/ ARE CALL SIGN Total DSEs	TWENTIETH A DSE	CALL SIGN	DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE	

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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	nd Group	\$	0.00	
					\$ SUBSCRIBER GRO		
TWENTY-THIR	SUBSCRIBER GRO	DUP	TWENT	ΓΥ-FOURTH	\$ SUBSCRIBER GRO		
				ΓΥ-FOURTH	SUBSCRIBER GRO		
TWENTY-THIR		DUP	TWENT	ΓΥ-FOURTH	SUBSCRIBER GRO		
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	YSTEM ID# 007412					E SYSTEM:	R OF CABL	CABLE ONE, INC.
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	ITY-SIXTH	T .		SUBSCRIBER GRO	TY-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of Base Rate and Syndicate Exclusivi Surcharg for Partially	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
								
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First G
	IP	SUBSCRIBER GROU	Y-EIGHTH	Ti .	UP	SUBSCRIBER GRO	SEVENTH	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	CALL SIGN	DSE	Total DSEs	DSE	CALL SIGN	DSE	
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Name	YSTEM ID# 007412	S`				.E SYSTEM:	R OF CABL	CABLE ONE, INC.
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	HIRTIETH	11		SUBSCRIBER GROU	Y-NINTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of Base Rate and Syndicate Exclusivi Surcharg for Partially Distant Stations	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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for								
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	oup	Gross Receipts First G
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Name	O07412					.E SYSTEM:		CABLE ONE, INC.
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	/-FOURTH	i e		SUBSCRIBER GRO	TY-THIRD	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of Base Rate and Syndicate Exclusivi Surcharg for Partially	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	Р	SUBSCRIBER GROU	RTY-SIXTH	THIF	UP	SUBSCRIBER GRO	TY-FIFTH	THIR
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0.00_			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations D.00 Total DSEs	THIRTY-EIGHTH	JP 0	COMPUTATION OF SUBSCRIBER GROI	SEVENTH	
O COMMUNITY/ AREA DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations D.00 Total DSEs DSE CALL SIGN DSE CALL SIGN DSE Description of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations	ITY/ AREA	0			
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	eipts Second Group	0.00	\$	roup	Gross Receipts First Gr
		0.00	\$		Base Rate Fee First Gr
FORTIETH SUBSCRIBER GROUP			SUBSCRIBER GROU	ΓΥ-NINTH	THIRT
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DSE CALL SIGN DSE CALL SIGN DSE	GN DSE	DSE	CALL SIGN	DSE	CALL SIGN
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0.00 Total DSEs	s	0.00			Total DSEs
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0.00 Base Rate Fee Fourth Group \$ 0.00	Foo Founds Organia	0.00	\$	Group	Base Rate Fee Third G

LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007412	Name
				TE FEES FOR EACH				
	Y-FIRST	SUBSCRIBER GRO		T .	Y-SECOND	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate and Syndicate Exclusivi Surcharg for Partially
						<u> </u>		Base Rate F
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Total DSEs	<u> </u>		0.00	Total DSEs	4		0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First Gro		\$	0.00	Base Rate Fee Secon		\$	0.00	
	Y-THIRD	SUBSCRIBER GRO		Ti .	Y-FOURTH	SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs	_		0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
oup	_ 	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	

	007412	SY				E SYSTEM:	R OF CABL	LEGAL NAME OF OWNER CABLE ONE, INC.
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	TY-SIXTH			SUBSCRIBER GRO	TY-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of Base Rate and Syndicate Exclusivi Surcharg for Partially Distant Stations	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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Partially Distant Stations								
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=	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gro
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	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	YSTEM ID# 007412	S`	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007412									
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LEGAL NAME OF OWN		LE SYSTEM:				S	007412	Name
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Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
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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	
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Base Rate Fee: Add	the base rat	te fees for each sub-	scriber aroun	as shown in the boxe	s above			
Enter here and in blo			oonber group	as shown in the boxe	abuve.	\$		

LEGAL NAME OF OWNE	R OF CABL	E SYSTEM:				S	YSTEM ID# 007412	Name
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	Y-NINTH	SUBSCRIBER GRO		T .		I SUBSCRIBER GRO		9
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Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
SEVEN ⁻	TY-FIRST	SUBSCRIBER GRO	UP	SEVENT	Y-SECOND	SUBSCRIBER GROU	JP	
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	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007412									
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9		SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GRO	TY-THIRD			
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LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007412	Name
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Total DSEs			0.00	Total DSEs	<u> </u>	<u> </u>	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
SEVENT	Y-NINTH	SUBSCRIBER GRO	UP		EIGHTIETH	SUBSCRIBER GROU	JP	
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	YSTEM ID# 007412	SY			•	E SYSTEM:	R OF CABL	CABLE ONE, INC.
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9		SUBSCRIBER GROU	'-SECOND			SUBSCRIBER GRO	TY-FIRST	
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BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP EIGHTY-FIFTH SUBSCRIBER GROUP TY/ AREA 0 COMMUNITY/ AREA 0	
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eipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	
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eipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	

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ase Rate Fee First Group S O.00 Base Rate Fee Second Group NINETY-FIRST SUBSCRIBER GROUP OMMUNITY/ AREA OCALL SIGN DSE CALL SIGN DSE		
ase Rate Fee First Group S O.00 Base Rate Fee Second Group NINETY-FIRST SUBSCRIBER GROUP OMMUNITY/ AREA OCALL SIGN DSE CALL SIGN DSE		11111111111111111111111111111111111111
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Asse Rate Fee First Group NINETY-FIRST SUBSCRIBER GROUP NINETY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE	st Group \$ 0.00 Gross Receipts Second Group \$	0.00
NINETY-FIRST SUBSCRIBER GROUP OMMUNITY/ AREA OCALL SIGN DSE CALL SIGN DSE		
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Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	INETY-FIRST SUBSCRIBER GROUP INETY-FIRST SUBSCRIBER GROUP INETY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA	BER GROUP 0
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Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	INETY-FIRST SUBSCRIBER GROUP INETY-FIRST SUBSCRIBER GROUP INETY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA	BER GROUP 0
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ase Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	INETY-FIRST SUBSCRIBER GROUP O COMMUNITY/ AREA DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN O COMMUNITY/ AREA O COMMUNITY/ AREA DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN O COMMUNITY/ AREA	BER GROUP O O O O O O O O O O O O O
	INETY-FIRST SUBSCRIBER GROUP O COMMUNITY/ AREA DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN O Total DSES	BER GROUP O O O O O O O O O O O O O

RATE FEES FOR EACH SUBSCRIBER GROUP NINETY-FOURTH SUBSCRIBER GROUP		COMPUTATION OF SUBSCRIBER GROU		
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O Gross Receipts Second Group \$ 0.00	0.00	\$	oup	Fross Receipts First Gr
D Base Rate Fee Second Group \$ 0.00	0.00	\$	oup	ase Rate Fee First Gro
NINETY-SIXTH SUBSCRIBER GROUP	JP	SUBSCRIBER GROU	Y-FIFTH S	NINET
0 COMMUNITY/ AREA	0			OMMUNITY/ AREA
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	_	\$	oup .	ross Receipts Third G

LEGAL NAME OF OWNER CABLE ONE, INC.	ABLE ONE, INC. SYSTEM ID# 007412										
				TE FEES FOR EACH							
NINETY-S	EVENTH	SUBSCRIBER GRO		NINET	Y-EIGHTH	I SUBSCRIBER GROUP)	9			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of			
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Total DSEs			0.00	Total DSEs	1		0.00				
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00				
							2.22				
Base Rate Fee First Gr		SUBSCRIBER GRO	0.00	Base Rate Fee Secon		SUBSCRIBER GROUP	0.00				
	T-INIINI II	SUBSCRIBER GRO	0	COMMUNITY/ AREA	NUKEUIT	SUBSCRIBER GROUP	0				
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Total DSEs			0.00	Total DSEs			0.00				
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00				
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Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$					

CABLE ONE, INC.	R OF CABL	E SYSTEM:	•			SY	STEM ID# 007412	Name
				TE FEES FOR EACH				
	D FIRST	SUBSCRIBER GROU		ii ee	SECOND	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fee
		-						and
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRE	D THIRD	SUBSCRIBER GROU	JP	TT .	FOURTH	SUBSCRIBER GROU	Р	
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Total DSEs			0.00	Total DSEs	1		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gi	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$		

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	JP	IBER GROUP SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GROU		
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Computation	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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Station						-		
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	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	ase Rate Fee First Gr
	IP	SUBSCRIBER GROU	D EIGHTH	ONE HUNDRE	JP	SUBSCRIBER GROU	EVENTH	ONE HUNDRED S
	0			COMMUNITY/ AREA	0		***************************************	OMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	roup	otal DSEs ross Receipts Third G

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	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	ross Receipts First Gr
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		SUBSCRIBER GROU		ONE HUNDRED	JP	SUBSCRIBER GROU		ONE HUNDRED EL
		SUBSCRIBER GROU			·			ONE HUNDRED EL
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	JP 0		TWELVTH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
	JP 0		TWELVTH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
	JP 0		TWELVTH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
	JP 0		TWELVTH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
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	DSE DSE O.00	CALL SIGN	DSE	ONE HUNDRED COMMUNITY/ AREA CALL SIGN	DSE DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED ELEOMMUNITY/ AREA CALL SIGN otal DSEs
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LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:	_			S	YSTEM ID# 007412	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCF	RIBER GROUP		
ONE HUNDRED THIS	RTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED FOU	RTEENTH	SUBSCRIBER GROU	IP	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
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		-						Partially
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						<u> </u>		Stations
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Total DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gi	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FI	FTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED S	IXTEENTH	I SUBSCRIBER GROU	IP	
COMMUNITY/ AREA		O		COMMUNITY/ AREA			0	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
se Rate Fee: Add th er here and in block			riber group	as shown in the boxes	above.	\$		

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		IBER GROUP SUBSCRIBER GROUP		TE FEES FOR EACH				BL ONE HUNDRED SEVE
9	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computat of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			otal DSEs
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	0.00	<u> </u>	a Group	Cross recorpts occorr	0.00		очр	ross rescipts i list of
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	ase Rate Fee First Gr
	IP	SUBSCRIBER GROU	/ENTIETH	ONE HUNDRED TV	JP	SUBSCRIBER GROU	TEENTH	ONE HUNDRED NIN
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		S			0.00	\$		otal DSEs ross Receipts Third G

LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABL	E SYSTEM:	•			SY	STEM ID# 007412	Name
BL	OCK A: C	COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCF	RIBER GROUP		
ONE HUNDRED TWEN	TY-FIRST	SUBSCRIBER GROUP				SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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Total DSEs			0.00	Total DSEs	·		0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWEN	TY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		+						
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourtl	h Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	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 OWN CABLE ONE, INC		LE SYSTEM:				S	007412	Name
E	SLOCK A: 0	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED TWE	NTY-FIFTH	SUBSCRIBER GROU	P	ONE HUNDRED TW	VENTY-SIXTH	I SUBSCRIBER GROUF		0
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Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
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NE HUNDRED TWENT	Y-SEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRED TWE	NTY-EIGHTH	I SUBSCRIBER GROUP)	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
	-r- 	i.	2.34		- · F	L'		
Base Rate Fee: Add t Enter here and in bloo			criber group	as shown in the boxe	s above.			

			SYSTEM:	₹ OF CABLE	GAL NAME OF OWNER ABLE ONE, INC.
ON OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP					
		iii	UBSCRIBER GROUF	ry-ninth s	NE HUNDRED TWENT
O COMMUNITY/ AREA	COMMUNITY/ AREA		annunnunnunnunnunnunnunnunnun		MMUNITY/ AREA
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0.00 Total DSEs	0.00 Total DSEs	0.00 T		<u> </u>	al DSEs
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0.00 Base Rate Fee Second Group \$	0.00 Base Rate Fee Second Gro	0.00 E	3	oup <u>:</u>	se Rate Fee First Gro
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GROUP ONE HUNDRED THIRTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA	ONE HUNDRED THIRTY-SECONDUCTOR COMMUNITY/ AREA	P 0 C	UBSCRIBER GROUF	TY-FIRST S	ONE HUNDRED THIR
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