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.

## 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			
3/1/2023	\$			
	ALLOCATION NUMBER			

## SA3E Long Form

Return completed workbook by email to:

coplicsoa@copyright.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:						
Accounting Period	2022/2						
B	Instructions:  Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation.  List any other name or names under which the owner conducts the busines of the owner different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account of the country of the covering the entire account of the cable system of the cable system. If the owner is a single statement of account and royalty fee payment covering the entire account of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation.  List any other name or names under which the owner conducts the business and the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation.  List any other name or names under which the owner conducts the business are single statement of account and royalty fee payment covering the entire account and royalty fee payment covering the e	ss of the cable syste on the last day of th unting period.	em. he accounting period should su				
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM						
	Cogeco US, LLC Cogeco US (OH), LLC						
				04088720222			
				040887 2022/2			
	2 Batterymarch Park, Suite 205 Quincy, MA 02169						
С	INSTRUCTIONS: In line 1, give any business or trade names used to	•	•				
System	names already appear in space B. In line 2, give the mailing address of a line 1 line 2 in the mailing address of 1 line 2 in the mailine 2 line 2 in the ma	or the system, if d	interent from the address gi	ven in space B.			
	MAILING ADDRESS OF CABLE SYSTEM:						
	(Number, street, rural route, apartment, or suite number)						
	(City, town, state, zip code)						
D	Instructions: For complete space D instructions, see page 1b. Identify	y only the frst con	nmunity served below and r	elist on page 1b			
Area	with all communities.	STATE					
Served	Columbus						
First Community	Columbus  Below is a sample for reporting communities if you report multiple channel line-ups in Space G.						
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#			
Sample	Alda	MD	Α	1			
Janiple	Alliance	MD	В	2			
	Gering	MD	В	3			

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office'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.

**ACCOUNTING PERIOD: 2022/2** FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 040887 Cogeco US, LLC Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. **CH LINE UP** SUB GRP# CITY OR TOWN STATE OH Columbus **First** OH CITY OF UPPER ARLINGTON Community OH CITY OF COLUMBUS CITY OF WORTHINGTON OH OH CITY OF HILLIARD CITY OF GRANDVIEW HEIGHTS OH See instructions for OH additional information VILLAGE OF MINERVA PARK on alphabetization. TOWNSHIP OF PERRY OH OH TOWNSHIP OF BLENDON OH TOWNSHIP OF MIFFLIN OH TOWNSHIP OF SHARON Add rows as necessary. OH VILLAGE OF RIVERLEA OH CITY OF WESTERVILLE OH VILLAGE OF MARBLE CLIFF TOWNSHIP OF NORWICH OH OH CITY OF DUBLIN OH CITY OF GAHANNA TOWNSHIP OF ORANGE/FRANKLIN COUNTY OH OH TOWNSHIP OF ORANGE/DELAWARE COUNTY OH TOWNSHIP OF GENOA OH CITY OF DELAWARE OH TOWNSHIP OF DELAWARE OH TOWNSHIP OF LIBERTY OH TOWNSHIP OF BERLIN OH CITY OF MARYSVILLE OH TOWNSHIP OF PARIS OH TOWNSHIP OF DOVER OH TOWNSHIP OF TRURO OH TOWNSHIP OF JEFFERSON OH CITY OF REYNOLDSBURG OH CITY OF WHITEHALL OH CITY OF BEXLEY OH TOWNSHIP OF CLINTON OH TOWNSHIP OF FRANKLIN OH VILLAGE OF VALLEYVIEW OH TOWNSHIP OF MADISON TOWNSHIP OF JACKSON OH TOWNSHIP OF PRAIRIE OH OH VILLAGE OF BRICE

OH

CITY OF GROVE

VILLAGE OF URBANCREST	ОН	
CITY OF CANAL WINCHESTER	OH	
VILLAGE OF OBETZ	ОН	
CITY OF PICKERINGTON	ОН	
TOWNSHIP OF VIOLET	ОН	
		<u> </u>

Name Legal Name of Owner of Cable SYSTEM:

Cogeco US, LLC

SYSTEM ID#

040887

## 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.

BLO	OCK 1			BLOCK 2					
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE		
Residential:	40.204	_	22.22	Desidential Former ded	4.400	_	0.000.00		
<ul> <li>Service to first set</li> </ul>	18,324	\$	39.99	Residential Expanded	4,169	\$	6,999.00		
<ul> <li>Service to additional set(s)</li> </ul>		<u> </u>		Digital Plus	152	\$	122.97		
<ul> <li>FM radio (if separate rate)</li> </ul>				Digital Value	-	\$	69.98		
Motel, hotel									
Commercial	470	\$	39.99						
Converter									
<ul> <li>Residential</li> </ul>		4.	99-14.99				•••••••••••••••••••••••••••••••••••••••		
<ul> <li>Non-residential</li> </ul>		<b></b>							
		T				I			

## F

Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 040887 Cogeco US, LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. **Transmitters:** Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program **Television** basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 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) **WBNS** 21 Ν No Columbus, OH WBNS-2 21 N-M No Columbus, OH See instructions for additional information WBNS-3 21 N-M No Columbus, OH on alphabetization. **WBNS-simulcast** 21 Ν No Columbus, OH **WCMH** 14 Ν No Columbus, OH WCMH-2 14 N-M No Columbus, OH WCMH-simulcast 14 Ν No Columbus, OH WOSU Ε 16 No Columbus, OH WOSU-2 16 E-M No Columbus, OH No WOSU-simulcast Ε Columbus, OH 16 No **WSFJ** 19 ı No London, OH **WSYX** 48 N No Columbus, OH WSYX-2 48 N-M Columbus, OH No WSYX-3 48 Ν No Columbus, OH Ν Columbus, OH WSYX-3-simulcas 48 No WSYX-4 48 N-M No Columbus, OH No

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 040887 Cogeco US, LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. **Transmitters:** Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program **Television** basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 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) WTTE 27 No Columbus, OH WTTE-2 27 I-M No Columbus, OH See instructions for additional information **WWHO** 23 Ν No Chillicothe, OH on alphabetization. WWHO-2 23 N-M Chillicothe, OH No WWHO-3 23 N-M Chillicothe, OH No WWHO-simulcas 23 Ν No Chillicothe, OH **WBNS CBS True** 21.4 ı Columbus, OH No WCMH NBC Ion ı 14.5 No Columbus, OH

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 4.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 040887 Cogeco US, LLC PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary 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). LOCATION OF STATION **CALL SIGN** AM or FM S/D **CALL SIGN** AM or FM S/D LOCATION OF STATION

FORM SA3E. PAGE 5. ACCOUNTING PERIOD: 2022/2

SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space 1, identify every nomework television program broadcast by a distant station that your cable system carried on a substitute based unique the accounting period, under specific present and former FCC utiles, regulations, or authorizations. For a further explanation of the programming that must be included in this log, are page (r) of the general instructions located in the paper SAS control of the programming that must be included in this log, are page (r) of the general instructions located in the paper SAS control of the programming that must be included in this log, are page (r) of the general instructions located in the paper SAS control of the page bank. If your answer is "Yes," you must complete the program to roadcast by a distant station?  Note: If your arework is "No". I sear the rest of this page blank. If your answer is "Yes," you must complete the program to gin block 2.  2. LOG OF SUBSTITUTE PROGRAMS In General: Use teach substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages.  Column 1: Give the site of of very nometwork television program (substitute for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions located in the paper produce with the page and the paper program and the paper program and the paper program cannot be substituted for the programming of another station and that your cable systems under the substitute program. Use numerals, with the month for Eccanity of the distributions and the your cable system. List the times accurately to the nease of the form of Calland and C	LEGAL NAME OF OWNER OF Cogeco US, LLC	CABLE SYS	ТЕМ:				S	YSTEM ID# 040887	Name
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.  1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE  1. During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?  Note: If you ranswer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.  2. LOG OF SUBSTITUTE PROGRAMS  In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages.  Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions located in the paper SA3 form for further information. Do not use general categories like "movies", or "basketball". List specific program ittles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."  Column 3: Give the call sign of the station broadcasting the substitute program. Use numerals, with the month first. Example: for May 7 give "57."  Column 4: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57."  Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried the substitute programming that your system was required to delete	SUBSTITUTE CARRIAG	E: SPECI	AL STATEME	ENT AND PROGRAM I	OG				
Special Statement CONCERNING SUBSTITUTE CARRIAGE  **Pouring the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?  **No**, leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.  **LOG OF SUBSTITUTE PROGRAMS**  In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages.  **Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."  **Column 2: Give the call sign of the station broadcasting the substitute program.  **Column 3: Give the call sign of the station or socation (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community to which the station is identified).  **Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7."  **Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00-6:30 p.m."  **Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was subs	In General: In space I, ident substitute basis during the a explanation of the programm	tify every no	nnetwork televi eriod, under sp	sion program broadcast by ecific present and former F0	a distant stati CC rules, regu	ulations, or aut	horizations.	. For a further	Substitute
* During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?  Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.  2. LOG OF SUBSTITUTE PROGRAMS  In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages.  Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."  Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No."  Column 3: Give the call sign of the station broadcasting the substitute program.  Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community to which the station is identified).  Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m."  Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect during the a	1. SPECIAL STATEMEN	T CONCEI	RNING SUBS	TITUTE CARRIAGE					•
Log of Substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages.  Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."  Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No."  Column 3: Give the call sign of the station broadcasting the substitute program.  Column 4: Give the broadcast station's location (the community to which the station is identified).  Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7."  Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00-6:30 p.m."  Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976.  SUBSTITUTE PROGRAM  2. LIVE? 3. STATIONS  STATIONS  SUBSTITUTE PROGRAM  2. LIVE? 3. STATIONS	During the accounting per	riod, did yo			asis, any non				Statement and
In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages.  Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."  Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No."  Column 3: Give the call sign of the station broadcasting the substitute program.  Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community to which the station is identified).  Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7."  Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m."  Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in	The state of the s	o", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you	must complet	e the progr	ram	
SUBSTITUTE PROGRAM  1. TITLE OF PROGRAM  2. LIVE? 3. STATION'S  CARRIAGE OCCURRED  FOR DELETION	In General: List each subsclear. If you need more space Column 1: Give the title period, was broadcast by a under certain FCC rules, respectively. SA3 form for futher informatitles, for example, "I Love Column 2: If the program Column 3: Give the call Column 4: Give the broad the case of Mexican or Car Column 5: Give the monfirst. Example: for May 7 gires. Example: for May 7 gire	stitute prograce, please of every not distant stategulations, of ation. Do not be adcast stategulation statement and day be "5/7." The when the complement of the adcast statement and the statement and the statement and the statement and the statement and regulater of the stateme	ram on a sepail attach addition onnetwork televition and that your authorization of use general BA Basketball adcast live, enterestation broaddion's location (fons, if any, they when your syone substitute play a program care listed programions in effect of	roll pages. Evision program (substitute vour cable system substitute roll categories like "movies", Ter "Yes." Otherwise enter casting the substitute program to which the community to which the community with which the stem carried the substitute rogram was carried by your ried by a system from 6:0 m was substituted for programing the accounting periods.	e program) the ted for the preneral instruction "basketba" "No." ram. he station is lee program. Unit cable system 1:15 p.m. to pramming the pot; enter the	at, during the rogramming of tions located all". List specificensed by the dentified). Use numerals, em. List the time 6:28:30 p.m. set your system letter "P" if the	accounting f another s in the pape fic program  e FCC or, i  with the m  mes accura should be i was requi e listed pro	tation er n in nonth ately	
1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES DELETION	9	I IRSTITI IT		л					
		2. LIVE?	3. STATION'S		5. MONTH	6. TIN	/IES		
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ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 6.

**SYSTEM ID#** LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Cogeco US, LLC 040887 PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-J time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give · State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.– 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.-12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS HOURS** DATE **FROM** DATE **FROM** TO TO

	L NAME OF OWNER OF CABLE SYSTEM:				EM ID# 040887	Name		
GR Inst all a (as	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount you mounts (gross receipts) paid to your cable system by subscribers for the system's second identified in space E) during the accounting period. For a further explanation of how to come (vii) of the general instructions.	dary tra	nsmissic	e total of		K Gross Receipts		
	Gross receipts from subscribers for secondary transmission service(s) during the accounting period.  ORTANT: You must complete a statement in space P concerning gross receipts.		\$ (Amount o	<b>6,018,48</b> f gross receipts)	5.00			
<ul><li>Cor</li><li>Cor</li><li>If you</li><li>If you</li></ul>	TRIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. For block 3 blank. Enter the amount from block 1 on line 1 of block 4, and calculate the total royalty fee. For system did carry any distant television stations, you must complete the applicable parts of block 5 brown and attach the schedule to your statement of account.					L Copyright Royalty Fee		
	ort 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be end a below.	entered	on line 1	l of				
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be ente llow.	tered o	n line 2 i	n block				
	ort 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should block 4 below.	d be ent	tered on	line				
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more at least the minimum fee, regardless of whether they carried any distant stations. This fee is system's gross receipts for the accounting period.		percent	of the	.F. 00			
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064  Enter the result here.		\$	6,018,48	55.00			
	This is your minimum fee.	\$		64,03	6.68			
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the inspace G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period?  — Yes—Complete the DSE schedule.  x No—Leave block 3 below blank and co	4, you !?	must che	eck				
Block 3	Line 1. <b>BASE RATE FEE:</b> Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero		\$					
	Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero				0.00			
	Line 3. Add lines 1 and 2 and enter here	\$			-			
Block 4	Line 1. <b>BASE RATE FEE/3.75 FEE or MINIMUM FEE:</b> 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		\$	64,03	6.68	Cable systems		
	Line 2. <b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.				0.00	submitting additional deposits under		
	Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9  (Interest Worksheet)				0.00	Section 111(d)(7) should contact the Licensing		
	Line 4. FILING FEE		\$	72	5.00	additional fees. Division for the appropriate		
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.  Add Lines 1, 2 and 3 of block 4 and enter total here							
	EFT Trace # or TRANSACTION ID #							
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (Segeneral instructions located in the paper SA3 form and the Excel instructions tab							

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 8.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#								
Name	Cogeco US, LLC	040887								
<b>M</b> Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.									
	1. Enter the total number of channels on which the cable system carried television broadcast stations									
	Enter the total number of activated channels     on which the cable system carried television broadcast stations									
	and nonbroadcast services									
N Individual to Be Contacted	we can contact about this statement of account.)  ual to tacted  Ther Name Patrick Bratton  Telephone 617-786-8800									
for Further Information										
	Address 2 Batterymarch Park, Suite 205 (Number, street, rural route, apartment, or suite number)									
	Quincy, MA 02169 (City, town, state, zip)									
	Email pbratton@breezeline.com Fax (optional)									
0	CERTIFICATION (This statement of account must be certifed and signed in accordance 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 identifed in line 1 of space B; or									
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or									
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of the cable system in line 1 of space B.	m								
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.  [18 U.S.C., Section 1001(1986)]									
	X /s/ Craig Martin									
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement.  (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	"F2"								
	Typed or printed name: Patrick Bratton									
	Title: Chief Financial Officer  (Title of official position held in corporation or partnership)	•••••								
	Date: March 1, 2023									

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nome
Cogeco US, LLC	040887	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act lowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system scribers and amounts collected from subscribers receiving secondary transmissions pursual For more information on when to exclude these amounts, see the note on page (vii) of the general paper SA3 form.  During the accounting period did the cable system exclude any amounts of gross receipts for secondary by satellite carriers to satellite dish owners?	stem for the basic shall not include sub- nt to section 119."	Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address  Name Mailing Address  Name Mailing Address  Name Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment For an explanation of interest assessment, see page (viii) of the general instructions in the paper S.		Q
Line 1 Enter the amount of late payment or underpayment	·	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here		
Line 3 Multiply line 2 by the number of days late and enter the sum here	xdaysx 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	(interest charge)	
* To view the interest rate chart click on <a href="www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a> . For furth contact the Licensing Division at (202) 707-8150 or licensing@copyright.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 Copplease list below the owner, address, first community served, accounting period, and ID number as filing.	-	
Owner		
Address		
First community served		
Accounting period		
ID number		

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

# INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerical 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 account (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 a station also depends on its basis of carriage. If, as shown in space G 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 particular 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 a 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, in whole or in part, over the cable system that would have been subject to the FCC's syndicated exclusivity rules in effect on June 24, 1981.

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

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

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

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

Substitution of Grandfathered Stations. Under section 76.65 of the former FCC rules, a cable system was not required to delete any station 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 Syndicated 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 pursuant to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/or 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 in
  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.

#### DSE SCHEDULE. PAGE 11.

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

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.

#### 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.

- 5. Calculate a separate base rate fee for each subscriber group, using (1) 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:

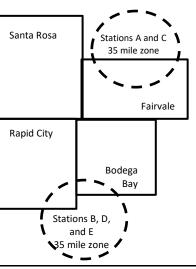
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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	1	Identification	Identification of Subscriber Groups					
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS				
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)	<u>0.25</u>	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
 \$6.384.00

			\$6,384.00				
l	First Subscriber Group		Second Subscriber Group		Third Subscriber Group		
	(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)		
J	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: 2022/2** 

DSE SCHEDULE. PAGE 11. (CONTINUED)

1	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			S	STEM ID#			
1	Cogeco US, LLC					040887			
	SUM OF DSEs OF CATEGOR  • Add the DSEs of each station Enter the sum here and in line	۱.			0.00				
2	Instructions: In the column headed "Call Sof space G (page 3).	n the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5							
Computation of DSEs for	In the column headed "DSE" mercial educational station, giv	: for each indep re the DSE as ""	endent station, give the DSI 25."	∟ as "1.0"; tor ∈	each network or noncom-				
Category "O"			CATEGORY "O" STATION	NS: DSEs					
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
Add rows as									
necessary.									
Remember to copy									
all formula into new									
rows.									
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						

	 	=	 	<b></b>
1				

Name	Cogeco US,	OWNER OF CABLE SYSTEM:							S	040887
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 Column 4 be carried ou Column 5 give the type-	CAPACITY st the call sign of all dista 2: For each station, give t correspond with the infor 3: For each station, give t 4: Divide the figure in colu t at least to the third decir 5: For each independent to the station of the stati	the number of rmation given the total numb umn 2 by the mal point. This station, give the olumn 4 by the	hours yo in space per of hou figure in cost is the "bhe "type-ver figure in	ur cable syster J. Calculate or rs that the stat olumn 3, and o asis of carriag ralue" as "1.0." column 5, and	m carried the state of the state of the state of the result in the state of the sta	ion during the seach station. For the air during decimals in column 6. Roll column 6. Roll	g the accou umn 4. This ercial educ und to no le	unting period. s figure must ational station, ess than the	
Capacity		(	CATEGOR'	Y LAC S	STATIONS:	COMPUTATION	ON OF DSE	s		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	ER JRS ED BY	3. NUN	MBER HOURS TION	4. BASIS OF CARRIAG VALUE	: ;	5. TYPE VALUE	6. DS	3E
			÷			=	x		=	
			÷			=	×		=	
			÷			=	x		=	
			÷			=	x x		=	
			÷				x		=	
			÷			=	X		=	
	Add the DSEs	S OF CATEGORY LAC S of each station. um here and in line 2 of p		chedule,				0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in effections in effections in effective Broadcast of space I).     Column 2: at your option.     Column 3: Column 4:	re the call sign of each stated by your system in substact on October 19, 1976 (one or more live, nonnetwork). For each station give the This figure should correct the number of days Divide the figure in column This is the station's DSE	titution for a p (as shown by ork programs a number of liv spond with the s in the calend nn 2 by the fig	rogram the the letter during that we, nonneded information dar year:	at your system "P" in column at optional carri twork program tion in space I. 365, except in umn 3, and giv	n was permitted to 7 of space I); and age (as shown by s carried in subst a leap year. we the result in co	o delete under the word "Yes" i titution for prog	FCC rules n column 2 rams that v	of vere deleted than the third	rm).
		SU	JBSTITUTE	E-BASIS	STATION	S: COMPUTA	TION OF D	SEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUME OF DA IN YEA	YS	4. DSE	1. CALL SIGN	2. NUMB OF PROG	ER RAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
			<b>-</b>	=				÷		=
			-	=				÷		
			<del>-</del>	=				÷		=
			÷ ÷	=				÷ ÷		=
	Add the DSEs	s OF SUBSTITUTE-BAS of each station. ım here and in line 3 of p						0.00		
<b>5</b> Total Number of DSEs	number of DSE  1. Number of 2. Number of 2.	ER OF DSEs: Give the ams applicable to your system of DSEs from part 2 • of DSEs from part 3 • of DSEs from part 4 •		e boxes in	parts 2, 3, and	4 of this schedule	e and add them	to provide t	0.00 0.00 0.00	
	TOTAL NUMBE	ER OF DSEs						<u> </u>		0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2022/2

LEGAL NAME OF C Cogeco US, LI	OWNER OF CABLE	SYSTEM:						S'	4987 YSTEM ID# 040887	Name
	ck A must be comp	oleted.								
	"Yes," leave the re	emainder of p	art 6 and part	7 of the DSE sche	edule blank ar	nd co	omplete pa	rt 8, (page 16) of	the	6
schedule. • If your answer if "No," complete blocks B and C below.										
				TELEVISION M						Computation of 3.75 Fee
s the cable syster ffect on June 24,	m located wholly o 1981?	utside of all r	najor and sma	ller markets as def	fined under se	ectio	on 76.5 of F	CC rules and reg	ulations in	
Yes—Com	plete part 8 of the	schedule—[	OO NOT COM	PLETE THE REMA	AINDER OF I	PAR	T 6 AND 7			
X No—Comp	olete blocks B and	C below.								
		BLOC	CK B: CARR	IAGE OF PERI	MITTED DS	SEs	;			
Column 1: CALL SIGN	under FCC rules	and regulations  Be DSE Sche	ons prior to Jui dule. (Note: Tl	part 2, 3, and 4 of ne 25, 1981. For fu he letter M below r Act of 2010.)	urther explana	ation	of permitte	ed stations, see th	ne	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfathered instructions for E Carried pursua *F A station pre	ed pursuant to as defined al educational station (76.0) or DSE schedant to individuation wiously carries and the station wiously carries the station wield and the station wield	lations cited be to the FCC many din 76.5(kk) (7 al station [76.565) (see paragule).  Lual waiver of Fed on a part-ting grade-Book of the total waiver of the total	ne or substitute ba contour, [76.59(d)(	rse in effect of 6.57, 76.59(b) (e)(1), 76.63(a) (e)(3) (e)(4) (e)(5) (e)(5) (e)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)	n Julio), 76 a) refig to grand	ne 24, 198 6.61(b)(c), ferring to 76,661(d)] dfathered so	76.63(a) referring 6.61(e)(1) tations in the		
Column 3:		e stations ide determine the	ntified by the I	n parts 2, 3, and 4 etter "F" in column	2, you must	com	plete the w	orksheet on page	<b>.</b>	
SIGN	BASIS	J. DJL	SIGN	BASIS	J. DJL	<u> </u>	SIGN	BASIS	3. DSL	
									0.00	
		В	LOCK C: CC	MPUTATION O	F 3.75 FEE					
ine 1: Enter the	total number of	DSEs from	part 5 of this	schedule						
ine 2: Enter the	sum of permitte	d DSEs fro	m block P ab	OVE						
	•									
	line 2 from line 1 eave lines 4–7 b			•		5 rat			0.00	
ine 4: Enter gro	oss receipts from	space K (p	age 7)							Do any of the DSEs represe
								x 0.03	375	partially permited/
ne 5: Multiply l	ine 4 by 0.0375 a	and enter s	um here							partially
ine 6: Enter tota	al number of DSI	Es from line	3					X		nonpermitted carriage? If yes, see par 9 instructions
in a 7. Multiply I	ina 6 by lina 5 ar	nd enter her	e and on line	e 2, block 3, spac	rel (nage 7	·\			0.00	

Name	Cogeco US, LL		SYSTEM:						S	YSTEM ID# 040887
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule.  Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981.  Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1).  Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters:									
		PERMITTE	D DSE FOR STA	TIONS CARRIE	DC	ON A PART-TIME ANI	O SUBSTIT	UTE BASIS		
	1. CALL SIGN	2. PRIO DSE		COUNTING ERIOD		4. BASIS OF CARRIAGE		RESENT DSE	6. P	ERMITTED DSE
<b>7</b> Computation of the Syndicated	-	"Yes," complet	te blocks B and C, ocks B and C blank	c and complete բ		: 8 of the DSE schedul				
Exclusivity										
Surcharge	<ul> <li>Is any portion of the of the complete</li> </ul>	•		or television mark	cet a	as defned by section 7		rules in effect J	June 24,	1981?
	BLOCK B: Ca	arriage of VHF	/Grade B Contour	Stations		BLOCK	C: Compu	tation of Exem	pt DSEs	
	Is any station listed in commercial VHF station or in part, over the cal	on that places	•		BLOCK C: Computation of Exempt DSEs  Was any station listed in block B of part 7 carried in any community served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159)					
	Yes—List each st  X No—Enter zero a		n its appropriate perr art 8.	nitted DSE		Yes—List each sta  X No—Enter zero an			ate permit	ted DSE
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	SN	DSE
			TOTAL DSEs	0.00				TOTAL DS	SFs.	0.00
		L	IOINE DOES	0.00	Ш			TOTAL DS	,_0	0.00

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:  Cogeco US, LLC	SYSTEM ID# 040887	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	6,018,485.00	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. <b>If zero, proceed to part 8.</b>	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC?  X Yes—Complete section 3 below.  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.  X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) \$		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?  Tyes—Complete part 9 of this schedule.  No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.  A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2)  and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		

ACCOUNTING PERIOD: 2022/2

DSE SCHEDULE PAGE 16

Name		ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID# 040887
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Cogeco US, LLC	U+U00 <i>1</i>
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	
		Syndicated Exclusivity Caronal general control of the control of t	
	Instru	ctions:	
8		nust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part of the total number of DSEs from part 5.	rt
		checked "Yes," use the total number of DSEs from part 5.  ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation	_	ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	
of Base Rate Fee	• If you blank	ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belo	)W
Dage Nate 1 cc		is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "loca	ıl
	service	e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		Yes—Complete part 9 of this schedule.   X 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) ▶ _ \$ 6,018,485.0	00_
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	
	2	(If block A of part 6 was checked "Yes,"	00
			00
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts	
		(the amount in section 1)	
		B. Enter 0.00701 of gross receipts	
		(the amount in section 1) ▶ _ <b>\$</b> 42,189.58	
		C. Subtract 1 000 from total DSEs	
		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	<u> </u>

U.S. Copyright Office

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2022/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID	
Cogeco US, LLC 04088	7 Name
Section If the figure in section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.	
4 A Enter 0.01064 of gross receipts	8
A. Enter 0.01064 of gross receipts  (the amount in section 1)  ▶ \$	
B. Enter 0.00701 of gross receipts	Computation
(the amount in section 1) \$	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 <b>&gt;</b>	_
G. Add lines A, C, and F. This is your base rate fee.	ı İ
Enter here and in block 3, line 1, space L (page 7)  Base Rate Fee	
	1
<b>IMPORTANT:</b> It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-	
ups in Space G.	9
<b>In General:</b> If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of	Computation
this exclusion, you must:	of Base Rate Fee
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	and Syndicated
station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.	Exclusivity
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge for
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below.	Partially Distant
However, if your cable system is wholly located outside all major television markets, complete block A only.	Stations, and
How to Identify a Subscriber Group for Partially Distant Stations	for Partially Permitted
<b>Step 1</b> : For each community served, determine the local service area of each wholly distant and each partially distant station you carried to that community.	Stations
<b>Step 2:</b> For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by the same token, the station is distant to the subscriber.)	,
<b>Step 3:</b> Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable system will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's	
subscriber groups. 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 to all of the subscribers in the group.	
• If:  1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3.	
1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, and 4 of this schedule; or,	
2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, part 6 of this schedule.	
Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
• Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions in the paper SA3 form.	
• Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your actual calculations on the form.	ıl

**ACCOUNTING PERIOD: 2022/2** 

DSE SCHEDULE. PAGE 18.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	STEM ID#
Name	Cogeco US, LLC	040887
	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 distan	t
	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	1
	a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Ra	
	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.	
I		
		l

LEGAL NAME OF OWNE	R OF CABL	.E SYSTEM:				SY:	040887	Name
В	LOCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
	FIRST	SUBSCRIBER GROU	Р	<u> </u>	SECOND	SUBSCRIBER GROUP	)	^
COMMUNITY/ AREA	Columb	ous		COMMUNITY/ AREA	Reynold	lsburg		<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 4,892	766.00	Gross Receipts Secon	d Group	\$ 1,12	5,719.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	Р		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 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	
<b>Base Rate Fee:</b> Add th Enter here and in block			iber group	as shown in the boxes al	oove.	\$	0.00	

## **Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNE Cogeco US, LLC	R OF CABL	E SYSTEM:	-			S	O40887	Name
BI	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCF	RIBER GROUP		
		SUBSCRIBER GROU	JP			SUBSCRIBER GROU	IP	0
COMMUNITY/ AREA	Columb	DUS		COMMUNITY/ AREA	Reynol	dsburg		<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
			<u> </u>					
Total DSEs			0.00	Total DSEs		Ш	0.00	
Cross Bassints First C		A 902			d Cravia	. 11	05 740 00	
Gross Receipts First G	roup	\$ 4,892,	766.00	Gross Receipts Secor	ia Group	\$ 1,12	25,719.00	
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			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	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.		0.00	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  Cogeco US, LLC	SYSTEM ID 04088
	<u> </u>	
9	If your cable system is located within a top 100 television market an Syndicated Exclusivity Surcharge. Indicate which major television m by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	First 50 major television market  INSTRUCTIONS:  Step 1: In line 1, give the total DSEs by subscriber group for community this schedule.  Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none exempt DSEs in block C, part 7 of this schedule. If none exempt DSEs in block C, part 7 of this schedule. In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts a your actual calculations on this form.	up for the VHF Grade B contour stations that were classified as enter zero. er of DSEs used to compute the surcharge.
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page)	or each subscriber group as shown ge 7)