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

Return completed workbook by email to:

### 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          |                      |  |  |  |  |  |  |
| 2-26-24                       | \$ ALLOCATION NUMBER |  |  |  |  |  |  |

### coplicsoa@loc.gov

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

| Α          | ACCOUNTING PERIOD COVERED BY THIS STATEMENT:  |  |                                     |                  |
|------------|---|--|-------------------------------------|------------------|
| Accounting | 2023/2  |  |                                     |                  |
| Period     |   |  |                                     |                  |
| Bowner     | Instructions:  Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation.  List any other name or names under which the owner conducts the busines If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire accounting the control of the control of the system's first filing. If not, enter the system's ID. | es of the cable system<br>on the last day of the<br>unting period. | m.<br>e accounting period should su |                  |
|            | LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM   |  |                                     |                  |
|            | CABLE ONE, INC.   |  |                                     |                  |
|            |   |  |                                     | 00741720232      |
|            |   |  |                                     | 00741720232      |
|            |   |  |                                     | 007417 2023/2    |
|            | 210 E. EARLL DRIVE<br>PHOENIX, AZ 85012-2626  |  |                                     |                  |
| С          | INSTRUCTIONS: In line 1, give any business or trade names used to it  | •  |                                     |                  |
| C          | names already appear in space B. In line 2, give the mailing address of   | f the system, if dif   | ferent from the address giv         | en in space B.   |
| System     | 1 IDENTIFICATION OF CABLE SYSTEM: SPARKLIGHT  |  |                                     |                  |
|            | MAILING ADDRESS OF CABLE SYSTEM: 19201 Pineville Rd - 786 Martin Luther King Blvd   | 5400 M   | nambalah Bd BO Dva                  |                  |
|            | (Number, street, rural route, apartment, or suite number)   |  | acphelah Rd., PO Dra                | wer ioio         |
|            | LONG BEACH, MS 39560 - BILOXI, MS 39530 - PA (City, town, state, zip code)  | SCAGOULA, N  | AS 39568                            |                  |
| D          | Instructions: For complete space D instructions, see page 1b. Identify  | only the frst com  | munity served below and re          | elist on page 1b |
| Area       | with all communities.   |  |                                     |                  |
| Served     | CITY OR TOWN  | STATE  |                                     |                  |
| First      | GULFPORT  | MS   |                                     |                  |
| Community  | Below is a sample for reporting communities if you report multiple cha  | annel line-ups in S  | pace G.                             |                  |
|            | CITY OR TOWN (SAMPLE)   | STATE  | CH LINE UP                          | SUB GRP#         |
| Sample     | Alliance  | MD   | A<br>B                              | 2                |
|            | Alliance<br>Gering  | MD<br>MD   | В                                   | 3                |
|            | - Conning   | HID  |                                     | ,                |

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 sufficiency of the fling, a determination that would be made by a court of law.

| JEGAL NAME OF OMNIED OF CARLE OVOTEM   |                                |  | SYSTEM ID#       |                        |  |  |  |  |  |  |
|--|--------------------------------|--|------------------|------------------------|--|--|--|--|--|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:   |                                |  |                  |                        |  |  |  |  |  |  |
| CABLE ONE, INC.  |                                |  | 007417           |                        |  |  |  |  |  |  |
| Instructions: List each separate community served by the cable system. A "community" in FCC rules: "a separate and distinct community or municipal entity (including unincorpo areas 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 | rated communitie               | es within unincorpo<br>you list will serve a | orated           | D<br>Area<br>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 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 releasing attempt (based on your reporting from Part 9).                                  | column blank. If column blank. | you report any sta<br>with a subscriber      | ations<br>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 a (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#         |                        |  |  |  |  |  |  |
| GULFPORT   | MS                             | AD   | 4                | First                  |  |  |  |  |  |  |
| BILOXI   | MS                             | AA   | 3                | Community              |  |  |  |  |  |  |
| D'IBERVILLE  | MS                             | AA   | 3                |                        |  |  |  |  |  |  |
| ESCATAWPA  | MS                             | AE   | 2                |                        |  |  |  |  |  |  |
| GAUTIER  | MS                             | AE   | 2                |                        |  |  |  |  |  |  |
| HARRISON COUNTY  | MS                             | AD   | 3                | See instructions for   |  |  |  |  |  |  |
| HANCOCK CO-DIAMONDHEAD   | MS                             | AC   | 5                | additional information |  |  |  |  |  |  |
| HARRISON COUNTY-DIAMONDHEAD  | MS                             | AD   | 4                | on alphabetization.    |  |  |  |  |  |  |
| KEESLER AFB  | MS                             | AA   | 3                |                        |  |  |  |  |  |  |
| LONG BEACH   | MS                             | AD   | 4                |                        |  |  |  |  |  |  |
| MOSS POINT   | MS                             | AE   | 2                |                        |  |  |  |  |  |  |
| NORTH BILOXI (HARRISON COUNTY)   | MS                             | AA   | 3                | Add rows as necessary. |  |  |  |  |  |  |
|  | MS                             | AB   | 1                |                        |  |  |  |  |  |  |
| NORTH BILOXI (JACKSON COUNTY)  |                                |  |                  |                        |  |  |  |  |  |  |
| OCEAN SPRINGS  | MS                             | AB   | 1                |                        |  |  |  |  |  |  |
| PASCAGOULA   | MS                             | AE   | 2                |                        |  |  |  |  |  |  |
| PASS CHRISTIAN   | MS                             | AD   | 4                |                        |  |  |  |  |  |  |
| VANCLEAVE  | MS                             | AB   | 11               |                        |  |  |  |  |  |  |
| SAUCIER  | MS                             | AD   | 4                |                        |  |  |  |  |  |  |
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|   |                        |   |   | 1 |

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

007417

## 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   |                                |    |    |       |
|--|-------------|----|-----------|--------------------------------|----|----|-------|
|  | NO. OF      |    |           | NO. OF                         |    |    |       |
| CATEGORY OF SERVICE                              | SUBSCRIBERS |    | RATE      | CATEGORY OF SERVICE SUBSCRIBER | RS | F  | RATE  |
| Residential:                                     |             |    |           |                                |    |    |       |
| <ul> <li>Service to first set</li> </ul>         | 7,714       | \$ | 42.00     | IPTV 1,9                       | 11 | \$ | 54.00 |
| <ul> <li>Service to additional set(s)</li> </ul> |             |    |           |                                |    |    |       |
| <ul> <li>FM radio (if separate rate)</li> </ul>  |             |    |           |                                |    |    |       |
| Motel, hotel                                     |             |    |           |                                |    |    |       |
| Commercial                                       | 531         | \$ | 42.00     | IPTV                           | 51 | \$ | 79.95 |
| Converter  |             |    |           |                                |    |    |       |
| <ul> <li>Residential</li> </ul>                  | 7,714       | 2  | .75-15.00 |                                |    |    |       |
| Non-residential                                  | 531         | 2  | .75-21.00 |                                |    |    |       |

## F

### Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

|   | BLOCK 2     |                               |          |                     |          |
|---|-------------|-------------------------------|----------|---------------------|----------|
| CATEGORY OF SERVICE                             | RATE        | CATEGORY OF SERVICE           | RATE     | CATEGORY OF SERVICE | RATE     |
| Continuing Services:                            |             | Installation: Non-residential |          |                     |          |
| • Pay cable                                     | 10.99-19.00 | Motel, hotel                  |          | Standard Cable      | \$ 67.75 |
| <ul> <li>Pay cable—add'l channel</li> </ul>     |             | Commercial                    |          | Standard IPTV       | \$ 67.75 |
| Fire protection                                 |             | • Pay cable                   |          | Digital Value Pack  | \$ 16.00 |
| •Burglar protection                             |             | Pay cable-add'l channel       |          | Hispanic Tier       | \$ 6.00  |
| Installation: Residential                       |             | Fire protection               |          |                     |          |
| First set                                       | 0-90.00     | Burglar protection            |          |                     |          |
| <ul> <li>Additional set(s)</li> </ul>           |             | Other services:               |          |                     |          |
| <ul> <li>FM radio (if separate rate)</li> </ul> |             | Reconnect                     | 0-90.00  |                     |          |
| Converter                                       |             | Disconnect                    |          |                     |          |
|   |             | Outlet relocation             | \$ 90.00 |                     |          |
|   |             | Move to new address           | \$ 90.00 |                     |          |
|   |             |                               |          |                     |          |

| FORM SA3E. PAGE 3.   |  |   |  |  | OVOTEM ID  | .1                                     |
|--|--|---|--|--|--|--|
| LEGAL NAME OF OWN  |  | STEM:   |  |  | SYSTEM ID#<br>007417   | Name                                   |
| CABLE ONE, IN  |  |   |  |  | 007417   |  |
| PRIMARY TRANSMITTE   |  |   |  |  |  |  |
| In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servi Column 5: If you ha cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th | G, identify every ystem during the one in effect on .61(e)(2) and (.6sis, as explaine stations: With a CC rules, regular here in space only on a subsum and also in spatformation concern.  In station's call associated with2". Simulcast echannel numbers of the constant static in each case where the constant static in on a partial in entered into on a primary transsimulcasts, alsuree categories | y television standard accounting in June 24, 194), or 76.63 (I) did in the next respect to any ations, or authors, or authors, or authors, or authors, or authors, in the state of the station account in a station account in a station account in a station. Whether the station. Whether the station. Whether the station. Whether the station account in column on during the me basis been in column on during the me basis better in or before Jumitter or an account in the column or during the me the station or during the station or | g period, except 81, permitting the referring to 76.6 paragraph. It is in space I (the referring to 76.6 paragraph. It it in space I (the referring to report origination cording to its own to be reported in the referring to its own to annel 4 in Wash tation is a network of the reported in the reported | (1) stations carried to 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 er-the-air designate column 1 (list each the television state in the television state in the television of "E-M" (for noncontrolled in the television of "E-M" (for noncontrolled in the television of the television state of the television of the television of the television of the television of the televisions located in the televisions located in the television of television of the television of | es". If not, enter "No". For an ex-<br>e paper SA3 form.<br>stating the basis on which your<br>tering "LAC" if your cable system | Primary<br>Transmitters:<br>Television |
| FCC. For Mexican or C  | Canadian statio  | ns, if any, giv   | e the name of the  | ne community with  | n which the station is identifed.  |  |
| Note: If you are utilizin  | g multiple char  | nnel line-ups,  | use a separate   | space G for each   | channel line-up.   |  |
|  |  | CHANN   | EL LINE-UP   | AA   |  |  |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION  | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |  |
| WLOX-2   | 32   | N-M   | No   |  | BILOXI, MS   |  |
| WLOX   | 32   | N   | No   |  | BILOXI, MS   | See instructions for                   |
| WMAH-SIMUL   | 16   | E   | No   |  | BILOXI, MS   | additional information                 |
| WXXV-2-SIMUL   | 25   | N-M   | No   |  | GULFPORT, MS   | on alphabetization.                    |
| WXXV-3   | 25   | I-M   | No   |  | GULFPORT, MS   |  |
| WLOX-3   | 32   | I-M   | No   |  | BILOXI, MS   | ]                                      |
| WLOX-2-SIMUL   | 32   | N-M   | No   |  | BILOXI, MS   | ]                                      |
| WWL  | 36   | N   | No   |  | NEW ORLEANS, LA  |  |
| wxxv   | 25   | I-M   | No   |  | GULFPORT, MS   | ]                                      |
| WXXV-SIMUL   | 25   | I-M   | No   |  | GULFPORT, MS   | 1                                      |
| WXXV-2   | 25   | N-M   | No   |  | GULFPORT, MS   |  |
| WYES   | 11   | E   | Yes  | 0  | NEW ORLEANS, LA  |  |
|  |  |   |  |  |  |  |
| WLOX-6   | 32   | I-M   | No   |  | BILOXI, MS   | •                                      |
|  | 25   | I-IVI<br>I-M  | No   |  |  | 1                                      |
| WXXV-3-SIMUL   |  |   |  |  | GULFPORT, MS   | 1                                      |
| WWL-2  | 36   | I-M   | No   |  | NEW ORLEANS, LA  | <u> </u>                               |

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007417 CABLE ONE. INC. 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 Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AB 2. B'CAST 4. DISTANT? 5. BASIS OF 1. CALL 3. TYPE 6. LOCATION OF STATION OF SIGN CHANNEL CARRIAGE (Yes or No) NUMBER STATION (If Distant) **WLOX** 32 Ν No **BILOXI, MS** WMAH-SIMUL 16 Ε No **BILOXI, MS** WXXV-2-SIMUL 25 N-M No GULFPORT, MS WXXV-3-SIMUL 25 I-M No **GULFPORT, MS** WLOX-3 32 I-M No **BILOXI, MS** WLOX-6 32 I-M No **BILOXI, MS WXXV** 25 I-M No GULFPORT, MS WXXV-2 25 N-M No **GULFPORT, MS WYES** 11 Ε Yes 0 **NEW ORLEANS, LA** WXVO-LD 13 ı No PASCAGOULA, MS WTBL-LD 31 ı No **BILOXI, MS** WXXV-SIMUL 25 I-M No **GULFPORT, MS** WLOX-SIMUL 32 N-M No BILOXI, MS WLOX-2 32 N-M No **BILOXI, MS** 

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007417 CABLE ONE. INC. 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 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 AC 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 1. CALL 6. LOCATION OF STATION SIGN CHANNEL CARRIAGE OF (Yes or No) NUMBER STATION (If Distant) **WDSU** 19 Ν No **NEW ORLEANS, LA WGNO** N **NEW ORLEANS, LA** 26 No WMAH-SIMUL 16 Ε No **BILOXI, MS WLOX** 32 Ν No BILOXI, MS WLOX-2 32 N-M No **BILOXI, MS** WUPL 17 ı No SLIDELL, LA WVUE 29 Τ No **NEW ORLEANS, LA** WWL 36 Ν No **NEW ORLEANS, LA** WXXV-3 25 I-M No **GULFPORT, MS WYES** 11 Ε No **NEW ORLEANS, LA** WDSU-SIMUL N 19 No **NEW ORLEANS, LA** WLOX-2-SIMUL 32 N-M No **BILOXI, MS** WPXL-SIMUL 50 Ī No **NEW ORLEANS, LA** WVUE-2 29 ı No **NEW ORLEANS, LA** WGNO-SIMUL 26 N No **NEW ORLEANS, LA** ı **NEW ORLEANS, LA** WNOL-2 15 No WLOX-SIMUL 32 N-M **BILOXI, MS** No WUPL-2 17 SLIDELL, LA I-M No

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007417 CABLE ONE. INC. 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 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 AC CONT 2. B'CAST 3. TYPE 1. CALL 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CARRIAGE CHANNEL (Yes or No) SIGN OF STATION NUMBER (If Distant) WWL-SIMUL 36 N-M No **NEW ORLEANS, LA** WUPL-3 17 I-M No SLIDELL, LA WHNO 21 No **NEW ORLEANS, LA** ı WVUE-4 29 I-M No **NEW ORLEANS, LA** WVUE-SIMUL 29 I-M No **NEW ORLEANS, LA** WVUE-3 29 I-M No **NEW ORLEANS, LA** WWL-2 36 I-M No **NEW ORLEANS, LA WPXL** 50 No **NEW ORLEANS, LA** I WVUE-5 29 I-M No **NEW ORLEANS, LA** 

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007417 CABLE ONE. INC. 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 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 AD 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 1. CALL 6. LOCATION OF STATION OF SIGN CHANNEL CARRIAGE (Yes or No) NUMBER STATION (If Distant) WMAH-SIMUL 16 Ε No BILOXI, MS WXXV-2-SIMUL 25 N-M No GULFPORT, MS WXXV-3 25 I-M No **GULFPORT, MS** WLOX 32 Ν No **BILOXI, MS** WLOX-SIMUL 32 N-M No **BILOXI, MS** WLOX-2 32 N-M No BILOXI, MS WLOX-2-SIMUL 32 N-M No **BILOXI, MS** WLOX-3 32 I-M No **BILOXI, MS** WLOX-4 32 I-M No BILOXI, MS WWL 36 N **NEW ORLEANS, LA** No **WXXV** 25 I-M No **GULFPORT, MS** 25 WXXV-SIMUL I-M No GULFPORT, MS WXXV-2 25 N-M No **GULFPORT, MS WYES NEW ORLEANS, LA** 11 Ε Yes 0 WLOX-6 32 I-M **BILOXI, MS** No

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007417 CABLE ONE. INC. 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 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 AE 2. B'CAST 4. DISTANT? 5. BASIS OF 1. CALL 3. TYPE 6. LOCATION OF STATION CHANNEL CARRIAGE SIGN OF (Yes or No) NUMBER STATION (If Distant) WTBL-LD 31 ı No BILOXI, MS WMAH-SIMUL 16 Ε No BILOXI, MS WXXV-3 25 I-M No **GULFPORT, MS** WLOX-SIMUL 32 N-M No **BILOXI, MS** WLOX-2 32 N-M No **BILOXI, MS** WLOX-2-SIMUL 32 N-M No BILOXI, MS WLOX-3 32 I-M No BILOXI, MS **WMAH** 16 Ε No **BILOXI, MS WLOX** 32 N No **BILOXI, MS WXXV** 25 I-M No **GULFPORT, MS** 25 WXXV-SIMUL I-M No GULFPORT, MS WXXV-2 25 N-M No **GULFPORT, MS** N-M WXXV-2-SIMUL 25 No **GULFPORT, MS** WXVO-LD 13 ı PASCAGOULA, MS No

| R OF CABLE SY  | STEM:  |  |  | SYSTEM ID#   |  |
|--|--|--|--|--|--|
| C.   |  |  |  | 007417   | Name   |
| S: TELEVISIO   | N  |  |  |  |  |
| stem during the<br>ns in effect on<br>31(e)(2) and (4<br>s, as explaine  | ne accounting<br>n June 24, 19<br>4), or 76.63 (r<br>d in the next   | g period, except<br>181, permitting th<br>referring to 76.61<br>paragraph.   | (1) stations carrience carriage of certal (4))]; and (4))]; and  | d only on a part-time basis under<br>ain network programs [sections<br>nd (2) certain stations carried on a  | G<br>Primary<br>Transmitters:  |
| C rules, regular are in space only on a substant also in space or mation concern. Station's call associated with 2". Simulcast acchannel number. For example tem carried then each case we entering the least), "E" (for not e terms, see pair on a part-time on of a distant station of a distant entered into or primary transmulcasts, also ee categories, location of each anadian station of a station of each anadian station of each anadian station of each anadian station of a station of each anadian each each each each | ations, or authorized to the station actions are station actions. The station actions are station actions as the station actions are station. The station are station are station are station. The station are station are station. The station are station. The station are station. The station are station are station are station are station. The station are st | norizations: at it in space I (the ation was carried tute basis station report origination report origination recording to its own to be reported in the assigned to hamel 4 in Wash tation is a network at its and the ation is a network area, (i.e. "to general instruction accounting period ause of lack of a eam that is not some 30, 2009, be association representation of the general in the ation of the general in the ation. It is a stations, we the name of the ation was attained to the ation in the ation | de Special Statement of both on a substitute, see page (v) of the program service of the television statement of the television of television of the tel | ent and Program Log)—if the  cute 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  con for broadcasting over-the-air in imay be different from the channel expendent station, or a noncommercial east), "I" (for independent), "I-M" immercial educational multicast). The paper SA3 form. The paper SA3 form. The stating the basis on which your reapacity. The paper SA3 form is the subject term or an association representing The paper SA3 form. The paper SA3 form for paper SA3 form for paper SA3 form. The paper SA3 form for paper SA3 form f | Television   |
|  | CHANN  | EL LINE-UP   | AF   |  |  |
| 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |  |
|  |  |  |  |  |  |
| Caron so catronical caronical a  | S: TELEVISIO identify every stem during the sin effect or of (e)(2) and (e), as explaine ations: With record of the control of | s: TELEVISION  identify every television statem during the accounting in sin effect on June 24, 19 of (e)(2) and (4), or 76.63 (is, as explained in the next attions: With respect to any crules, regulations, or authors on a substitute basis. Individual i | S: TELEVISION  identify every television station (including stem during the accounting period, except as in effect on June 24, 1981, permitting the stem during the accounting period, except as in effect on June 24, 1981, permitting the stations in effect on June 24, 1981, permitting the stations. The stations with respect to any distant stations are in space G—but do list it in space I (the station according to a substitute basis. The station was carried a station of a substitute basis station according to its own as station's call sign. Do not report origination associated with a station according to its own. Station's call sign. Do not report origination associated with a station according to its own. Station's call sign. Do not report origination associated with a station according to its own. For example, WRC is Channel 4 in Wash term carried the station.  The channel number the FCC has assigned to according to its own. For example, WRC is Channel 4 in Wash term carried the station.  The example the letter "N" (for network), "N-M" (st), "E" (for noncommercial educational), or each case whether the station is a network of the general instruction is outside the local service area, (i.e. "or example, whether the station is a network of the general instruction of a substant station during the accounting perion on a part-time basis because of lack of an of a distant multicast stream that is not some and a station of the general instruction of a distant multicast stream that is not some and a station of the general instruction of a distant multicast stream that is not some account of the station of the general instruction of a distant multicast stream that is not some account of the station. The station is a second the second of the station. The station is a second of the general instruction of the station is a second of the general instruction of the station. The station is a second of the general instruction of the station is a second of the general instruction of the general instruction of the general instruct | S: TELEVISION  identify every television station (including translator stations stem during the accounting period, except (1) stations carried as in effect on June 24, 1981, permitting the carriage of certain (e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; as, as explained in the next paragraph.  ations: With respect to any distant stations carried by your or carries. With respect to any distant stations carried by your or carries in space G—but do list it in space I (the Special Statements) on a substitute basis.  Indialso in space I, if the station was carried both on a substitute basis or station's call sign. Do not report origination program service sesociated with a station according to its over-the-air designator. 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In each case whether the station is a network station, an indemensing the letter "N" (for network), "N-M" (for network multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational), or "E-M" (for noncommercial educational), or "G-M" | S: TELEVISION  identify every television station (including translator stations and low power television stations) stem during the accounting period, except (1) stations carried only on a part-time basis under ns in effect on June 24, 1981, permitting the carriage of certain network programs [sections 11(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (2)); and (2) certain stations carried on a save seplained in the next paragraph.  stions: With respect to any distant stations carried by your cable system on a substitute program in the space G—but do list it in space I (the Special Statement and Program Log)—if the hygon a substitute basis.  In a substitute basis.  In a substitute basis.  In a substitute basis station was carried both on a substitute basis and also on some other rimation concerning substitute basis stations, see page (v) of the general instructions located in station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify sesociated with a station according to its over-the-air designation. For example, report multi-27. Simulcast streams must be reported in column 1 (list each stream separately; for example channel number the FCC has assigned to the television station for broadcasting over-the-air in For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel term carried the station.  For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel entern carried the station.  For example, with the station is a network station, an independent station, or a noncommercial entering the letter 'N' (for network), "N-M" (for network multicast), "" (for independent), "I-M" st), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). The entern of the station |

| ER OF CABLE SY  | STEM:   |  |  | SYSTEM ID#   |  |
|---|---|--|--|--|--|
|   | o   |  |  | 007417   | Name   |
| RS: TELEVISIO   | N   |  |  |  |  |
| ystem during the<br>ons in effect or  | ne accounting<br>n June 24, 19  | g period, except<br>81, permitting th  | (1) stations carried<br>ne carriage of certa   | d only on a part-time basis under ´ain network programs [sections  | <b>G</b><br>Primary  |
| sis, as explaine  | d in the next   | paragraph.   |  | • •  | Transmitters:<br>Television  |
| here in space   | G—but do lis  |  | e Special Stateme  | ent and Program Log)—if the  |  |
| and also in spa<br>formation cond   | ice I, if the sta   |  |  |  |  |
| associated witl   | n a station ac  | cording to its ov  | er-the-air designa   | tion. For example, report multi-   |  |
| e. For example  | e, WRC is Ch  |  |  |  |  |
| in each case we entering the letast), "E" (for no se terms, see pation is outside ce area, see pation entered "Year edistant static for on a part-tirion of a distant entered into on a primary transismulcasts, also aree categories elocation of each anadian station g multiple char | whether the stree "N" (for noncommercial page (v) of the the local servage (v) of the local servage (v) of the ses in column on during the me basis becommulticast streen or before Jumitter or an a center "E". If a see page (v ch station. For the streen servage (v ch station. For the servage (v ch station.) | etwork), "N-M" (il educational), ce general instructivice area, (i.e. "or general instructivice area, (i.e. "or general instructivice area (i.e. "or accounting perioduse of lack of a geam that is not some 30, 2009, be ssociation repreyou carried the of the general or U.S. stations, re the name of the use a separate   | for network multica<br>or "E-M" (for nonco-<br>ctions located in the<br>distant"), enter "Ye-<br>tions located in the<br>inplete column 5, so<br>and. Indicate by ent<br>activated channel of<br>subject to a royalty<br>tween a cable sys-<br>senting the primar<br>channel on any ott<br>instructions locate<br>list the community<br>are community with<br>space G for each   | ast), "I" (for independent), "I-M" mmercial educational multicast). The paper SA3 form. The paper SA3 form |  |
| 2. B'CAST<br>CHANNEL  | 3. TYPE OF  | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |  |
|   |   |  |  |  |  |
|   | RS: TELEVISIO 6, identify every ystem during the ons in effect or .61(e)(2) and (a sis, as explaine stations: With r CC rules, regula here in space only on a subsi and also in spa formation conc rm. h station's call associated with -2". Simulcast e channel numb e. For example stem carried the in each case v entering the le cast), "E" (for no se terms, see p pation is outside ce area, see p pation of a distant entered into or a primary transi simulcasts, also ree categories, location of ea canadian statio g multiple char   | RS: TELEVISION  G, identify every television stream during the accounting ons in effect on June 24, 19.61(e)(2) and (4), or 76.63 (isis, as explained in the next actions: With respect to any CC rules, regulations, or authories in space G—but do lisonly on a substitute basis. and also in space I, if the stream of the stream | RS: TELEVISION  6, identify every television station (including ystem during the accounting period, except ons in effect on June 24, 1981, permitting the .61(e)(2) and (4), or 76.63 (referring to 76.6 is, as explained in the next paragraph. Itations: With respect to any distant stations: Crules, regulations, or authorizations: here in space G—but do list it in space I (thouly on a substitute basis. and also in space I, if the station was carried formation concerning substitute basis station rm. In station's call sign. Do not report origination associated with a station according to its overall experience. For example, WRC is Channel 4 in Wash stem carried the station. In each case whether the station is a network entering the letter "N" (for network), "N-M" (for each, "E" (for noncommercial educational), es terms, see page (v) of the general instruct and entered "Yes" in column 4, you must contend the station during the accounting perion on a part-time basis because of lack of a sion of a distant multicast stream that is not sentered into on or before June 30, 2009, be a primary transmitter or an association repressimulcasts, also enter "E". If you carried the electation of each station. For U.S. stations, canadian stations, if any, give the name of the gmultiple channel line-ups, use a separate CHANNEL LINE-UP  2. B'CAST CHANNEL OF (Yes or No) | RS: TELEVISION  G, identify every television station (including translator stations system during the accounting period, except (1) stations carried ons in effect on June 24, 1981, permitting the carriage of certa .61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; a sis, as explained in the next paragraph.  Itations: With respect to any distant stations carried by your carried system only on a substitute basis.  Are also in space G—but do list it in space I (the Special Stateme only on a substitute basis.  And also in space I, if the station was carried both on a substitute formation concerning substitute basis stations, see page (v) or m.  A station's call sign. Do not report origination program service: associated with a station according to its over-the-air designal -2". Simulcast streams must be reported in column 1 (list each exchannel number the FCC has assigned to the television static exchannel number the FCC has assigned to the television static exchannel helter "N" (for network), "N-M" (for network multicates), "E" (for noncommercial educational), or "E-M" (for noncommercial educational), or "E-M" (for noncommercial educations) coated in the action is outside the local service area, (i.e. "distant"), enter "Yeac earea, see page (v) of the general instructions located in the action is outside the local service area, (i.e. "distant"), enter "Yeac earea, see page (v) of the general instructions located in the action is outside the local service area, (i.e. "distant"), enter "Yeac earea, see page (v) of the general instructions located in the action is outside the local service area, (i.e. "distant"), enter "Yeac earea, see page (v) of the general instructions located in the action is outside the local service area, (i.e. "distant"), enter "Yeac earea, see page (v) of the general instructions located in the action of a distant multicast stream that is not subject to a royalty entered into on or before June 30, 2009, between a cable system of a primary transmitter or an association representi | RS: TELEVISION 6, identify every television station (including translator stations and low power television stations) ystem during the accounting period, except (1) stations carried only on a part-time basis under ons in effect on June 24, 1981, permitting the carriage of certain network programs [sections .6.1(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a sis, as explained in the next paragraph.  **tations**: With respect to any distant stations carried by your cable system on a substitute program Lot rules, regulations, or authorizations:  here in space 6—but do list it in space I (the Special Statement and Program Log)—if the only on a substitute basis.  and also in space I, if the station was carried both on a substitute basis and also on some other formation concerning substitute basis stations, see page (v) of the general instructions located m.  In station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify associated with a station according to its over-the-air designation. For example, report multi-2-2". Simulcast streams must be reported in column 1 (list each stream separately; for example exhannel number the FCC has assigned to the television station for broadcasting over-the-air in exhannel number the FCC has assigned to the television station for broadcasting over-the-air in exhannel number the station. In an exhannel stem carried the station.  The continuation of the station is a network station, an independent station, or a noncommercial entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (asst), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), see terms, see page (v) of the general instructions located in the paper SA3 form.  **Set terms** see page (v) of the general instructions located in the paper SA3 form.  **Set terms** see page (v) of the general instructions located in the paper SA3 form.  **Set terms** see page ( |

| IER OF CARLE SY  | /STEM:  |  |  | SYSTEM ID#  |   |
|--|---|--|--|---|---|
|  | OTENI.  |  |  | 007417  | Name  |
|  | DN .  |  |  |   |   |
| G, identify every<br>system during the<br>lons in effect or<br>6.61(e)(2) and (<br>6.6s, as explaine   | y television st<br>he accounting<br>n June 24, 19<br>4), or 76.63 (r<br>d in the next   | g period, except<br>81, permitting the<br>referring to 76.60<br>paragraph.   | (1) stations carrie<br>ne carriage of cert<br>1(e)(2) and (4))]; a   | d only on a part-time basis under<br>ain network programs [sections<br>and (2) certain stations carried on a  | Primary<br>Transmitters:  |
| CC rules, regular here in space only on a subs and also in spatformation concern. The station's call associated with the concern cannot be channel numbers of the concern cannot be concerned to the concern cannot be concerned to the concerned conc | ations, or auth G—but do listitute basis. ace I, if the state that is sign. Do not a station ac streams must ber the FCC has, WRC is Charles that is station. Whether the station. Whether the station apage (v) of the the local senage (v) of the the local senage (v) of the the local senage in column on during the me basis becate multicast stream or before Jumitter or an accenter "E". If , see page (v) ch station. Foons, if any, given   | norizations:  at it in space I (the ation was carried tute basis station report origination according to its over the reported in the assigned to annel 4 in Wash tation is a network), "N-M" (the all educational), or e general instruct 4, you must correct accounting period ause of lack of a seam that is not a seam th | de Special Statemed both on a substins, see page (v) of a program service er-the-air designate column 1 (list each the television statington, D.C. This limit of the television statington, D.C. This limit of the television, an indefer network multicur "E-M" (for nonce tions located in the televisions located in the te | 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 stion. For example, report multi- th stream separately; for example cion for broadcasting over-the-air in may be different from the channel espendent station, or a noncommercial east), "I" (for independent), "I-M" commercial educational multicast). The paper SA3 form. Ess." If not, enter "No". For an ex- espaper SA3 form. Estating the basis on which your tering "LAC" if your cable system capacity. The your presenting The system of the subject testem or an association representing The system of the station is licensed by the The which the station is identified.  | Television  |
|  | • •   | •  |  |   |   |
| 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION  |   |
|  |   |  |  |   |   |
|  | RS: TELEVISIO G, identify even system during to ions in effect of 6.61(e)(2) and ( sis, as explaine Stations: With CC rules, regula in here in space only on a subs and also in spa iformation cond form. It is station's call associated with A-2". Simulcast the channel numl se. For example ystem carried the in each case to or entering the le cast), "E" (for n see terms, see ation is outside ice area, see p have entered "Y the distant static ion on a part-tin ision of a distant it entered into o a primary trans simulcasts, also irree categories e location of ea Canadian statio ing multiple chai | GRS: TELEVISION  G, identify every television stages and uring the accounting ions in effect on June 24, 19, 6,61(e)(2) and (4), or 76,63 (isis, as explained in the next stations: With respect to any CC rules, regulations, or auth there in space G—but do lisonly on a substitute basis. and also in space I, if the stationmation concerning substitute. The station's call sign. Do not associated with a station active. Simulcast streams must be channel number the FCC hase. For example, WRC is Chaystem carried the station. In each case whether the same active area whether the same active area as page (v) of the active active in column the distant station during the interest of a distant multicast streams mistrated into on a part-time basis becaused in the color of a distant multicast streams in the categories, see page (v) of the active area of a distant multicast streams in the categories, see page (v) of the active active of a distant multicast streams in the categories, see page (v) of the active active of a distant multicast streams in the categories, see page (v) of the active active of a distant multicast streams as mulcasts, also enter "E". If the categories, see page (v) of the active active of each station. For canadian stations, if any, giving multiple channel line-ups, CHANNEL OF   | RS: TELEVISION  G, identify every television station (including system during the accounting period, except ions in effect on June 24, 1981, permitting the 3.61(e)(2) and (4), or 76.63 (referring to 76.6) sis, as explained in the next paragraph.  Stations: With respect to any distant stations: Or rules, regulations, or authorizations: On here in space G—but do list it in space I (the only on a substitute basis.  and also in space I, if the station was carried information concerning substitute basis station associated with a station according to its oward. Simulcast streams must be reported in the echannel number the FCC has assigned to be echannel number the FCC has assigned to be echannel number the station.  The in each case whether the station is a network of entering the letter "N" (for network), "N-M" (to cast), "E" (for noncommercial educational), este terms, see page (v) of the general instruct action is outside the local service area, (i.e. "cast), "E" (for noncommercial educational), to see terms, see page (v) of the general instruct action is outside the local service area, (i.e. "cast), "E" (for noncommercial educational), to see terms, see page (v) of the general instruct action of a distant multicast stream that is not see tendered "Yes" in column 4, you must contain a part-time basis because of lack of a second of a distant multicast stream that is not see tendered into on or before June 30, 2009, be a primary transmitter or an association repressimulcasts, also enter "E". If you carried the entered categories, see page (v) of the general incree categories, see page (v) of the gener | ERS: TELEVISION  G, identify every television station (including translator stations system during the accounting period, except (1) stations carrier ions in effect on June 24, 1981, permitting the carriage of cert 6.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; a sis, as explained in the next paragraph.  Stations: With respect to any distant stations carried by your of CC rules, regulations, or authorizations: In here in space G—but do list it in space I (the Special Statem only on a substitute basis.  and also in space I, if the station was carried both on a substitute of the station's call sign. Do not report origination program service associated with a station according to its over-the-air designal-Y-2". 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This cast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational), or | RS: TELEVISION  G, identify every television station (including translator stations and low power television stations) system during the accounting period, except (1) stations carried only on a part-time basis under ions in effect on June 24, 1981, permitting the carriage of certain network programs [sections ions] ions in effect on June 24, 1981, permitting the carriage of certain network programs [sections ions] ions in effect on June 24, 1981, permitting the carriage of certain network programs [sections ions] ions ions with respect to any distant stations carried by your cable system on a substitute program in the rein space G—but do list it in space I (the Special Statement and Program Log)—if the only on a substitute basis.  and also in space I, if the station was carried both on a substitute basis and also on some other information concerning substitute basis stations, see page (v) of the general instructions located in the station is carried by station and instructions located in the station in space I, if the station program services such as HBO, ESPN, etc. Identify associated with a station according to its over-the-air designation. 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| R OF CABLE SY  | STEM:  |  |  | SYSTEM ID#   |  |
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| C.   |  |  |  | 007417   | Name   |
| RS: TELEVISIO  | N  |  |  |  |  |
| ystem during the<br>ons in effect or<br>61(e)(2) and (4<br>is, as explained  | ne accounting<br>n June 24, 19<br>4), or 76.63 (r<br>d in the next p   | g period, except<br>981, permitting th<br>referring to 76.61<br>paragraph.   | (1) stations carrience carriage of certal (4))]; and (4))]; and  | d only on a part-time basis under<br>ain network programs [sections<br>nd (2) certain stations carried on a  | <b>G</b> Primary Transmitters:   |
| C rules, regula here in space only on a substand also in space or matter and also in space or matter and also in space or matter and associated with 2". Simulcast schannel number and associated with in each case wentering the least), "E" (for no se terms, see pattern and a see paye entered "Ye e distant station on on a part-timon of a distant tentered into or primary transrimulcasts, also see categories, location of each anadian station and station and station of each anadian station and stati | ations, or auth G—but do listitute basis. In the state of the station across treams must be the FCC has whether the station. Whether the station across treams must be the station. Whether the station and the local service of the station of the local service of the basis became the station of the local service of the station. The local service of the local service of the station of the local service of the | norizations: at it in space I (the ation was carried itute basis station report origination coording to its own to be reported in or mass assigned to hannel 4 in Wash tation is a network (i.e. "carried the accounting period acco | de Special Statement of both on a substitute, see page (v) on program service er-the-air designation column 1 (list each the television statington, D.C. This bork station, an indefor network multicute for "E-M" (for noncontions located in the distant"), enter "Ye ions located in the mplete column 5, so d. Indicate by entactivated channel of subject to a royalty steween a cable system a cable system and the primary channel on any of instructions located list the community with   | ent and Program Log)—if the  cute 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  con for broadcasting over-the-air in imay be different from the channel  dependent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). The paper SA3 form. The paper SA3 form. The stating the basis on which your dering "LAC" if your cable system capacity. The paper SA3 form. Th | Television   |
|  | CHANN  | EL LINE-UP   | Al   |  |  |
| 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |  |
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|  | RS: TELEVISIO , identify every stem during the consin effect or 61(e)(2) and (4 is, as explaine teations: With race rules, regulations in space only on a substand also in space only on a substand also in space on the consideration of a station's call associated with 2". Simulcast schannel number of the cast, "E" (for no entering the least), "E" (for no entering the least), "E" (for no of a distant static on on a part-time of a distant static on on a part-time on on a | RS: TELEVISION , identify every television statem during the accounting one in effect on June 24, 1961(e)(2) and (4), or 76.63 (is, as explained in the next tations: With respect to any C rules, regulations, or authorie in space G—but do lister of the station of a substitute basis. In a station of the station. In station's call sign. Do not associated with a station action of the station. In a station of the station of the station. In each case whether the station of a distant multicast station. 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In each case whether the station is a network entering the letter "N" (for network), "N-M" (ast), "E" (for noncommercial educational), the eterms, see page (v) of the general instruction is outside the local service area, (i.e. "Carried area, see page (v) of the general instructive entered "Yes" in column 4, you must come distant station during the accounting perion on a part-time basis because of lack of a conformation on the formal substitution is an extended into on or before June 30, 2009, be primary transmitter or an association representation of each station. For U.S. stations, anadian stations, if any, give the name of the multiple channel line-ups, use a separate CHANNEL LINE-UP  2. B'CAST 3. TYPE 4. DISTANT? (Yes or No) | Rs: TELEVISION , identify every television station (including translator stations stem during the accounting period, except (1) stations carried ons in effect on June 24, 1981, permitting the carriage of certa (61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; a sis, as explained in the next paragraph.  Intations: With respect to any distant stations carried by your concording to the special statement of the station of the special statement of the station of the special statement of the station of the  | RS: TELEVISION  I, identify every television station (including translator stations and low power television stations) stations and furing the accounting period, except (1) stations carried only on a part-time basis under ones in effect on June 24, 1981, permitting the carriage of certain network programs [sections of (le)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program cartions. With respect to any distant stations carried by your cable system on a substitute program C rules, regulations, or authorizations:  here in space G—but do list it in space I (the Special Statement and Program Log)—if the only on a substitute basis.  Indialso in space I, if the station was carried both on a substitute basis and also on some other ormation concerning substitute basis stations, see page (v) of the general instructions located m.  In station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify associated with a station according to its over-the-air designation. For example, report multi-27. Simulcast streams must be reported in column 1 (list each stream separately, for example channel number the FCC has assigned to the television station for broadcasting over-the-air in a For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel stem carried the station. In each case whether the station is a network station, an independent station, or a noncommercial entering the letter 'N' (for network), 'N-M" (for network multicast), 'I' (for independent), 'I'-M" esterms, see page (v) of the general instructions located in the paper SA3 form.  The search of the search of the general instructions located in the paper SA3 form.  The account of the search of the search of the search of the paper SA3 form.  The search of the general instructions located in the paper SA3 form.  The electric of the general instructions located in the paper SA3 form.  The electric of the general instructions located in the paper |

| LEGAL NAME OF OWN  | ER OF CABLE SY   | STEM:  |  |   | SYSTEM ID#  |  |
|--|--|--|--|---|---|--|
| CABLE ONE, IN  |  |  |  |   | 007417  | Name                                   |
| PRIMARY TRANSMITTE   | RS: TELEVISIO  | N  |  |   |   |  |
| carried by your cable s  | ystem during the<br>ons in effect or   | ne accounting<br>n June 24, 19   | g period, except<br>81, permitting th  | (1) stations carried<br>ne carriage of certa  | and low power television stations) d only on a part-time basis under hin network programs [sections and (2) certain stations carried on a | G                                      |
| substitute program bas   | sis, as explaine   | d in the next  | paragraph.   |   | able system on a substitute program   | Primary<br>Transmitters:<br>Television |
| basis under specifc FC  • Do not list the station station was carried  | here in space  | G—but do lis   |  | ie Special Stateme  | ent and Program Log)—if the   |  |
| List the station here,   | and also in spa<br>formation cond  | ice I, if the sta  |  |   | ute basis and also on some other<br>f the general instructions located  |  |
| each multicast stream  | associated witl  | n a station ac   | cording to its ov  | er-the-air designa  | s such as HBO, ESPN, etc. Identify<br>tion. For example, report multi-<br>n stream separately; for example                                |  |
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| Column 3: Indicate educational station, by (for independent multion For the meaning of the Column 4: If the state planation of local service Column 5: If you had cable system carried the distant state For the retransmiss of a written agreement the cable system and a | in each case we entering the lessest), "E" (for no ese terms, see pation is outside ce area, see pation entered "Year edistant staticion on a part-tirion of a distant entered into or a primary transit | whether the stree "N" (for noncommercial page (v) of the the local services in column on during the me basis becommulticast street or an a | etwork), "N-M" (in educational), of e general instructivities area, (i.e. "of general instructivities area (i.e. "of accounting period ause of lack of a earn that is not sure 30, 2009, be ssociation repressed in education and in the sure area (i.e. "Not sure ar | for network multica<br>or "E-M" (for nonco<br>ctions located in the<br>distant"), enter "Ye<br>ions located in the<br>mplete column 5, s<br>od. Indicate by ent<br>activated channel of<br>subject to a royalty<br>stween a cable sys<br>senting the primar | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>stating the basis on which your<br>ering "LAC" if your cable system              |  |
| explanation of these the   | ree categories<br>e location of ea<br>Canadian statio  | , see page (v<br>ch station. Fo<br>ns, if any, giv   | ) of the general in or U.S. stations, we the name of the content o | instructions locate<br>list the community<br>ne community with  | d in the paper SA3 form.  to which the station is licensed by the which the station is identifed.   |  |
|  | 1  | CHANN  | EL LINE-UP   | AJ  |   |  |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION  |  |
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| IER OF CARLE SY  | /STEM·   |  |  | SYSTEM ID#   |  |
|--|--|--|--|--|--|
|  | OTEM.  |  |  | 007417   | Name   |
|  | DN   |  |  |  |  |
| G, identify every<br>system during the<br>lons in effect or<br>6.61(e)(2) and (<br>6.6s, as explaine   | television st<br>ne accounting<br>n June 24, 19<br>4), or 76.63 (r<br>d in the next  | g period, except<br>81, permitting the<br>referring to 76.60<br>paragraph.   | (1) stations carrie<br>ne carriage of cert<br>1(e)(2) and (4))]; a   | ed only on a part-time basis under and an and and and and and and (2) certain stations carried on a  | Primary<br>Transmitters:   |
| CC rules, regular here in space only on a subs and also in spatformation concern. The station's call associated with the concern cannot be channel numbers of the concern cannot be concerned to the concern cannot be concerned to the concerned conc | ations, or auth G—but do listitute basis. ace I, if the staterning substitute basis. It is sign. Do not a station ac streams must be the FCC has accommended by the station. It is signed by the local sendage (v) of the local sendage (v) of the basis becard in column on during the me basis becard multicast stream or before Jumitter or an accommended by the station. For the local sendage is multicast stream or before Jumitter or an accommended by the station. For the local sendage is the local sendage is stream or before Jumitter or an accommended by the station. For the local sendage is the local sendage is stream or before Jumitter or an accommended by the local sendage is sendage in the local sendage in the local sendage is sendage in the local sendage in the local sendage is sendage in the local sendage in the local sendage is sendage in the local sendage in the local sendage is sendage in the local sendage in the local sendage is sendage in the local sendage in the loc | norizations:  at it in space I (the ation was carried tute basis station report origination according to its over the reported in the assigned to annel 4 in Wash tation is a network), "N-M" (the all educational), or e general instruct 4, you must correct accounting period ause of lack of a seam that is not a seam th | de Special Statemed both on a substins, see page (v) on program service er-the-air designate column 1 (list each the television standington, D.C. This limit of the television of the television, an indefer network multiple for network multip | ent and Program Log)—if the  tute basis and also on some other of the general instructions located  es such as HBO, ESPN, etc. Identify ation. For example, report multi- the stream separately; for example ction for broadcasting over-the-air in may be different from the channel espendent station, or a noncommercial east), "I" (for independent), "I-M" commercial educational multicast). The paper SA3 form. The paper SA3 form. The paper SA3 form. The paper SA3 form which your tering "LAC" if your cable system capacity. The y payment because it is the subject testem or an association representing the paper SA3 form. The paper SA3 form. The paper SA3 form which your tering "LAC" if your cable system tering the basis, enter "O." For a further the basis, enter "O." For a further the the paper SA3 form. The paper SA3 form which the station is identified.  | Television   |
| 3  | • •  | •  | •  |  |  |
| 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |  |
|  |  |  |  |  |  |
|  | RS: TELEVISIO G, identify every system during the ions in effect or 6.61(e)(2) and (isis, as explaine Stations: With in CC rules, regular in here in space only on a subs and also in space offormation concluder in station's call associated with a-2". Simulcast is channel numbers in each case in in each | GRS: TELEVISION  G, identify every television stages and uring the accounting ions in effect on June 24, 19, 6,61(e)(2) and (4), or 76,63 (isis, as explained in the next stations: With respect to any CC rules, regulations, or auth there in space G—but do lisonly on a substitute basis. and also in space I, if the stationmation concerning substitute. The station's call sign. Do not associated with a station active. Simulcast streams must be channel number the FCC hase. For example, WRC is Chaystem carried the station. In each case whether the same active area whether the same active area as page (v) of the active active in column the distant station during the interest of a distant multicast streams mistrated into on a part-time basis becaused in the color of a distant multicast streams in the categories, see page (v) of the active area of a distant multicast streams in the categories, see page (v) of the active active of a distant multicast streams in the categories, see page (v) of the active active of a distant multicast streams in the categories, see page (v) of the active active of a distant multicast streams as mulcasts, also enter "E". If the categories, see page (v) of the active active of each station. For canadian stations, if any, giving multiple channel line-ups, CHANNEL OF   | RS: TELEVISION  G, identify every television station (including system during the accounting period, except ions in effect on June 24, 1981, permitting the 3.61(e)(2) and (4), or 76.63 (referring to 76.6) sis, as explained in the next paragraph.  Stations: With respect to any distant stations: Or rules, regulations, or authorizations: On here in space G—but do list it in space I (the only on a substitute basis.  and also in space I, if the station was carried information concerning substitute basis station associated with a station according to its oward. Simulcast streams must be reported in the echannel number the FCC has assigned to be echannel number the FCC has assigned to be echannel number the station.  The in each case whether the station is a network of entering the letter "N" (for network), "N-M" (to cast), "E" (for noncommercial educational), este terms, see page (v) of the general instruct action is outside the local service area, (i.e. "cast), "E" (for noncommercial educational), to see terms, see page (v) of the general instruct action is outside the local service area, (i.e. "cast), "E" (for noncommercial educational), to see terms, see page (v) of the general instruct action of a distant multicast stream that is not see tendered "Yes" in column 4, you must contain a part-time basis because of lack of a second of a distant multicast stream that is not see tendered into on or before June 30, 2009, be a primary transmitter or an association repressimulcasts, also enter "E". If you carried the entered categories, see page (v) of the general incree categories, see page (v) of the gener | ERS: TELEVISION  G, identify every television station (including translator stations system during the accounting period, except (1) stations carrier ions in effect on June 24, 1981, permitting the carriage of cert 6.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; as is, as explained in the next paragraph.  Stations: With respect to any distant stations carried by your of CC rules, regulations, or authorizations: In here in space G—but do list it in space I (the Special Statem only on a substitute basis.  and also in space I, if the station was carried both on a substitute of information concerning substitute basis stations, see page (v) of information concerning substitute basis stations, see page (v) of information concerning substitute basis stations, see page (v) of information according to its over-the-air designal A-2". Simulcast streams must be reported in column 1 (list each exchannel number the FCC has assigned to the television stations are channel number the FCC has assigned to the television stations are example, WRC is Channel 4 in Washington, D.C. This is in each case whether the station is a network station, an indicate in each case whether the station is a network station, an indicate in each case whether the station is a network station, an indicate in each case whether the station is a network station, an indicate in the indicate in t | RS: TELEVISION  G, identify every television station (including translator stations and low power television stations) system during the accounting period, except (1) stations carried only on a part-time basis under ions in effect on June 24, 1981, permitting the carriage of certain network programs [sections ions] ions in effect on June 24, 1981, permitting the carriage of certain network programs [sections ions] ions in effect on June 24, 1981, permitting the carriage of certain network programs [sections ions] ions ions with respect to any distant stations carried by your cable system on a substitute program in the rein space G—but do list it in space I (the Special Statement and Program Log)—if the only on a substitute basis.  and also in space I, if the station was carried both on a substitute basis and also on some other information concerning substitute basis stations, see page (v) of the general instructions located in the station is carried by station and instructions located in the station in space I, if the station program services such as HBO, ESPN, etc. Identify associated with a station according to its over-the-air designation. For example, report multi-v2." Simulcast streams must be reported in column 1 (list each stream separately; for example exhample, WRC is Channel 4 in Washington, D.C. This may be different from the channel stem carried the station.  The channel is a network station, an independent station, or a noncommercial eventering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" cast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), see terms, see page (v) of the general instructions located in the paper SA3 form.  attenting the letter "N" (for network), "N-M" (for network multicast), set the paper SA3 form.  attention a part-time basis because of lack of activated channel capacity. Since of a distant multicast stream that is not subject to a royally payment because it is the subject to entered into on o |

| LEGAL NAME OF OWN  | ER OF CABLE SY  | STEM:  |  |  | SYSTEM ID#   |  |
|--|---|--|--|--|--|--|
| CABLE ONE, IN  |   |  |  |  | 007417   | Name                                   |
| PRIMARY TRANSMITTE   | RS: TELEVISIO   | N  |  |  |  |  |
| carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas   | ystem during the ons in effect or .61(e)(2) and (4 sis, as explaine   | ne accounting<br>n June 24, 19<br>4), or 76.63 (r<br>d in the next   | period, except<br>81, permitting the<br>eferring to 76.6°<br>paragraph.  | (1) stations carried<br>ne carriage of certa<br>1(e)(2) and (4))]; and   | and low power television stations) I only on a part-time basis under in network programs [sections nd (2) certain stations carried on a  | Primary<br>Transmitters:<br>Television |
| 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 eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servic Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the | C rules, regular here in space only on a substand also in spatformation concern.  In station's call associated with associated with associated with associated with a channel number. For example stem carried the in each case wentering the least), "E" (for not see terms, see pation is outside to a carea, see pation of a distant entered "Year entered into or a part-tirion of a distant entered into or a primary transistimulcasts, also a canadian statio carea categories, a location of eacandian statio | ations, or auth G—but do listitute basis. Ince I, if the state erning substitute basis. In a station active and station active and station. In a station active and station active and station. In a see page (v) of station. For and, if any, given a station. In a station. It also active and station. It also active and station. It also active ac | tit in space I (the ation was carried tute basis station report origination cording to its over the reported in the ation was assigned to the annel 4 in Wash tation is a network), "N-M" (the I educational), one general instructivice area, (i.e. "to general instructivity of lack of a seam that is not some the sociation repression of the general in the control of the general in the con | e Special Statemed both on a substitute, see page (v) of a program services er-the-air designat column 1 (list each the television stationington, D.C. This of the television socated in the distant"), enter "Ye ions located in the inplete column 5, so the television of television of the tel | ant and Program Log)—if the  Late basis and also on some other  If the general instructions located  It is such as HBO, ESPN, etc. Identify  It is stream separately; for example  It is stream separately; for example  It is on for broadcasting over-the-air in  It may be different from the channel  It is pendent station, or a noncommercial  It is it, "I" (for independent), "I-M"  It is married educational multicast).  It is paper SA3 form.  It is if not, enter "No". For an ex-  It paper SA3 form.  It is the basis on which your  It is the subject  It is the sub | Television                             |
|  | 9   |  | EL LINE-UP   | •  |  |  |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |  |
|  |   |  |  |  |  |  |

| LEGAL NAME OF OWN  | ER OF CABLE SY  | STEM:  |  |  | SYSTEM ID#   |                                    |
|--|---|--|--|--|--|------------------------------------|
| CABLE ONE, IN  |   |  |  |  | 007417   | Name                               |
| PRIMARY TRANSMITTE   | RS: TELEVISIO   | N  |  |  |  |                                    |
| carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas   | ystem during the<br>ons in effect or<br>.61(e)(2) and (4<br>iis, as explaine  | ne accounting<br>n June 24, 19<br>4), or 76.63 (r<br>d in the next   | period, except<br>81, permitting the<br>eferring to 76.6°<br>paragraph.  | (1) stations carried<br>ne carriage of certa<br>1(e)(2) and (4))]; and   | and low power television stations) d only on a part-time basis under hin network programs [sections hd (2) certain stations carried on a hable system on a substitute program  | G Primary Transmitters: Television |
| 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 eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servic Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C | C rules, regular here in space only on a substand also in spatformation concern. In station's call associated with associated with -2". Simulcast the channel number of the cast, "E" (for not see terms, see patterns, see patterns on a part-tirion of a distant entered "Ye are distant static on on a part-tirion of a distant entered into or a primary transistimulcasts, also ree categories, a location of ea canadian statio | ations, or auth G—but do listitute basis. Ince I, if the state erning substitute basis. In a station active and station active and station. In a station active and station active and station. In a see page (v) of station. For and, if any, given a station. In a station. It also active and station. It also active and station. It also active ac | tit in space I (the ation was carried tute basis station report origination cording to its over the reported in the ation was assigned to the annel 4 in Wash tation is a network), "N-M" (the I educational), one general instructivice area, (i.e. "to general instructivity of lack of a seam that is not some the sociation repression of the general in the control of the general in the con | e Special Statemed both on a substitute, see page (v) of a program services er-the-air designat column 1 (list each the television stationington, D.C. This of the television socated in the distant"), enter "Ye ions located in the inplete column 5, so the television of television of the tel | ent and Program Log)—if the  ute basis and also on some other if the general instructions located  is such as HBO, ESPN, etc. Identify ion. For example, report multi- instream separately; for example  on for broadcasting over-the-air in imay be different from the channel  pendent station, or a noncommercial ist), "I" (for independent), "I-M" immercial educational multicast). ie paper SA3 form. is". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your reing "LAC" if your cable system is papacity. payment because it is the subject tem or an association representing y transmitter, enter the designa- iner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. | Television                         |
| Note: If you are utilizin  | y muluple chai  |  | EL LINE-UP   | •  | Statiller ille-up.   | •                                  |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |                                    |
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| LEGAL NAME OF OWN   | ER OF CABLE SY   | STEM:   |  |   | SYSTEM ID#  |  |  |  |
|---|--|---|--|---|---|--|--|--|
| CABLE ONE, IN   |  |   |  |   | 007417  | Name                                   |  |  |
| PRIMARY TRANSMITTE  | RS: TELEVISIO  | N   |  |   |   |  |  |  |
| carried by your cable s<br>FCC rules and regulati   | ystem during the   | ne accounting<br>n June 24, 19  | g period, except<br>81, permitting th  | (1) stations carried<br>ne carriage of certa  | and low power television stations) d only on a part-time basis under ain network programs [sections nd (2) certain stations carried on a              | G                                      |  |  |
| substitute program bas  | sis, as explaine   | d in the next   | paragraph.   |   | able system on a substitute program   | Primary<br>Transmitters:<br>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 spa<br>formation cond  | ice I, if the sta   |  |   | ute basis and also on some other<br>f the general instructions located  |  |  |  |
| each multicast stream   | associated witl  | n a station ac  | cording to its ov  | er-the-air designa  | s such as HBO, ESPN, etc. Identify<br>tion. For example, report multi-<br>n stream separately; for example  |  |  |  |
|   | e. For example   | e, WRC is Ch  |  |   | on for broadcasting over-the-air in<br>may be different from the channel  |  |  |  |
| Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the state planation of local servi Column 5: If you had cable system carried the carried the distant static For the retransmiss of a written agreement | in each case we entering the letersty, "E" (for no ese terms, see pation is outside ce area, see pation entered "Ye entered edistant staticion on a part-tirion of a distant entered into ou | whether the sitter "N" (for noncommercial page (v) of the the local sendage (v) of the es" in column on during the me basis becamulticast stranor before Ju | etwork), "N-M" (in educational), of e general instructivities area, (i.e. "of general instructivities area (i.e. "of general instructivities area (i.e. "of accounting period ause of lack of a geam that is not sune 30, 2009, be   | for network multica<br>or "E-M" (for nonco<br>ctions located in the<br>distant"), enter "Ye<br>ions located in the<br>mplete column 5, s<br>od. Indicate by ent<br>activated channel of<br>subject to a royalty<br>stween a cable sys | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>stating the basis on which your<br>ering "LAC" if your cable system                          |  |  |  |
| explanation of these the  | ree categories<br>e location of ea<br>Canadian statio  | , see page (victor)<br>ch station. Fo<br>ns, if any, giv  | ) of the general in or U.S. stations, we the name of the content o | instructions locate<br>list the community<br>ne community with  | ner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up. |  |  |  |
|   |  | CHANN   | EL LINE-UP   | AN  |   |  |  |  |
| 1. CALL<br>SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION  | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION  |  |  |  |
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| LEGAL NAME OF OWN  | ER OF CABLE SY  | STEM:   |  |  | SYSTEM ID#   |  |  |  |
|--|---|---|--|--|--|--|--|--|
| CABLE ONE, IN  |   |   |  |  | 007417   | Name                                   |  |  |
| PRIMARY TRANSMITTE   | RS: TELEVISIO   | N   |  |  |  |  |  |  |
| carried by your cable s<br>FCC rules and regulati  | ystem during the  | ne accounting<br>n June 24, 19  | g period, except<br>81, permitting th  | (1) stations carried<br>ne carriage of certa   | and low power television stations) d only on a part-time basis under ain network programs [sections  | G                                      |  |  |
| substitute program bas   | sis, as explaine  | d in the next   | paragraph.   |  | nd (2) certain stations carried on a able system on a substitute program   | Primary<br>Transmitters:<br>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 spa<br>formation conc   | ce I, if the sta  |  |  | ute basis and also on some other<br>f the general instructions located   |  |  |  |
| each multicast stream  | associated with   | n a station ac  | cording to its ov  | er-the-air designa   | s such as HBO, ESPN, etc. Identify<br>tion. For example, report multi-<br>n stream separately; for example   |  |  |  |
|  | e. For example  | , WRC is Ch   |  |  | on for broadcasting over-the-air in<br>may be different from the channel   |  |  |  |
| Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the state planation of local servi Column 5: If you ha  | in each case vertering the lecast), "E" (for no see terms, see pation is outside ce area, see paave entered "Ye | whether the sitter "N" (for noncommercial page (v) of the the local sende (v) of the sende | etwork), "N-M" (i<br>il educational), o<br>e general instruc<br>vice area, (i.e. "o<br>general instruct<br>4, you must cor | for network multica<br>or "E-M" (for nonco<br>ctions located in the<br>distant"), enter "Ye<br>ions located in the<br>mplete column 5, s | s". If not, enter "No". For an ex-   |  |  |  |
| of a written agreement<br>the cable system and a<br>tion "E" (exempt). For s<br>explanation of these th  | ion of a distant<br>entered into or<br>a primary transi<br>simulcasts, also<br>ree categories                   | multicast strong or before Jumitter or an action enter "E". If see page (v)   | eam that is not s<br>une 30, 2009, be<br>ssociation repre<br>you carried the<br>) of the general i                         | subject to a royalty tween a cable sys senting the primar channel on any otl instructions locate   | capacity.  payment because it is the subject tem or an association representing y transmitter, enter the designaner basis, enter "O." For a further d in the paper SA3 form. |  |  |  |
|  | Canadian statio   | ns, if any, giv   | e the name of th   | ne community with  | which the station is identifed.  |  |  |  |
|  | ı   | CHANN   | EL LINE-UP   | AO   |  |  |  |  |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION  | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |  |  |  |
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| IER OF CABLE SY  | STEM:  |   |  | SYSTEM ID#   |  |
|--|--|---|--|--|--|
|  |  |   |  | 007417   | Name   |
| RS: TELEVISIO  | )N   |   |  |  |  |
| system during the system during the system during the system of the syst | ne accounting<br>n June 24, 19<br>4), or 76.63 (i<br>d in the next   | g period, except<br>181, permitting the<br>referring to 76.6°<br>paragraph.   | (1) stations carrience carriage of certal (4))]; and (4))]; and  | d only on a part-time basis under ain network programs [sections nd (2) certain stations carried on a  | G<br>Primary<br>Transmitters:  |
| CC rules, regular here in space only on a substand also in spatioformation concurrs. The station's call associated with a case of the station's call associated with a case of the station's call associated with a case of the station and the station is outside a case of the distant station on a part-time is on a part-t | ations, or auth G—but do listitute basis. ace I, if the staterning substitute basis. Sign. Do not he a station ace streams must be the FCC he whether the station. Whether the station. Whether the station accommercial page (v) of the local series in column on during the me basis becard multicast stream or before Jumitter or an accommercial page (v) of the series in column on during the me basis becard multicast stream or before Jumitter or an accommercial page (v) of the station. For see page (v) ch station. For see page (v) ch station. For see page (v) ch station.   | norizations: at it in space I (the ation was carried tute basis station report origination according to its over the reported in the assigned to annel 4 in Wash tation is a network), "N-M" (the all educational), or e general instructivice area, (i.e. "or general instructivice area, (i.e. "or general instructivice area, (i.e. "or general instructivice area, or accounting period ause of lack of a earn that is not some 30, 2009, be ssociation repreyou carried the or U.S. stations, we the name of the   | d both on a substitute of the television station, D.C. This of the television station, an indeference of the television station, D.C. This or the television station, D.C. This or the television station, an indeference of the television, and the television of television of the television of the television of the television  | ent and Program Log)—if the  sute 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 east), "I" (for independent), "I-M" immercial educational multicast). The paper SA3 form. The paper SA3 form. The stating the basis on which your reapacity. The paper SA3 form is the subject term or an association representing The paper SA3 form. The paper SA3 form for  | Television   |
|  | CHANN  | IEL LINE-UP   | AP   |  |  |
| 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |  |
|  |  |   |  |  |  |
|  | RS: TELEVISIO G, identify every system during the ions in effect or 6.61(e)(2) and (isis, as explaine Stations: With in CC rules, regular in here in space only on a subs and also in space offormation concord offormation concord in the station's call associated with a-2". Simulcast is channel numbers in each case in i | GRS: TELEVISION  G, identify every television stages and uring the accounting ions in effect on June 24, 19, 6,61(e)(2) and (4), or 76,63 (isis, as explained in the next stations: With respect to an CC rules, regulations, or auth there in space G—but do lisonly on a substitute basis. and also in space I, if the stationmation concerning substitute. The station's call sign. Do not associated with a station acceptate of the station. See channel number the FCC is see. For example, WRC is Charles are reached the station. In the station is outside the local ser in each case whether the service area, see page (v) of the action is outside the local service area, see page (v) of the action of a distant multicast strict entered into on or before Julia primary transmitter or an assimulcasts, also enter "E". If the categories, see page (v) canadian stations, if any, giving multiple channel line-ups, CHANNEL  2. B'CAST  CHANNEL  CHANNEL  3. TYPE  CHANNEL | GRS: TELEVISION  G, identify every television station (including system during the accounting period, except ions in effect on June 24, 1981, permitting the 3.61(e)(2) and (4), or 76.63 (referring to 76.6) sis, as explained in the next paragraph.  Stations: With respect to any distant stations: Or rules, regulations, or authorizations: In here in space G—but do list it in space I (the only on a substitute basis.  and also in space I, if the station was carried formation concerning substitute basis station according to its own.  In the station's call sign. Do not report origination associated with a station according to its own.  In each case whether the FCC has assigned to be expected in the e | GRS: TELEVISION  G, identify every television station (including translator stations system during the accounting period, except (1) stations carrierions in effect on June 24, 1981, permitting the carriage of certa 6.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; a sis, as explained in the next paragraph.  Stations: With respect to any distant stations carried by your concording to report of the special statement only on a substitute basis.  In here in space G—but do list it in space I (the Special Statement only on a substitute basis.  In here in space I, if the station was carried both on a substitute only on a substitute basis stations, see page (v) on the station's call sign. Do not report origination program service associated with a station according to its over-the-air designa N-2". Simulcast streams must be reported in column 1 (list each explain the station) are channel number the FCC has assigned to the television stations are channel number the station.  For example, WRC is Channel 4 in Washington, D.C. This stem carried the station.  For example, WRC is Channel 4 in Washington, D.C. This explain the letter "N" (for network), "N-M" (for network multicates), "E" (for noncommercial educational), or "E-M" (for noncommercial educational), or "E-M | RS: TELEVISION G, identify every television station (including translator stations and low power television stations) system during the accounting period, except (1) stations carried only on a part-time basis under ions in effect on June 24, 1981, permitting the carriage of certain network programs [sections io.81(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a sis, as explained in the next paragraph.  Stations: With respect to any distant stations carried by your cable system on a substitute program Corules, regulations, or authorizations:  There in space G—but do list it in space I (the Special Statement and Program Log)—if the only on a substitute basis:  and also in space I, if the station was carried both on a substitute basis and also on some other formation concerning substitute basis stations, see page (v) of the general instructions located drm.  The station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify associated with a station according to its over-the-air designation. For example, report multi-v2". Simulcast streams must be reported in column 1 (list each stream separately; for example example. WRC is Channel 4 in Washington, D.C. This may be different from the channel stem carried the station.  The channel of the test of the station is a network station, an independent station, or a noncommercial eventering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "-M" (cast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), see terms, see page (v) of the general instructions located in the paper SA3 form.  The station of a distant multicast stream that is not subject to a royalty payment because it is the subject tentered into on or before June 30, 2009, between a cable system or an association representing a primary transmitter or an association representing the primary transmitter, enter the designation of a distant multicast stream that i |

| IER OF CABLE SY   | STEM:  |   |   | SYSTEM ID#   |  |
|---|--|---|---|--|--|
|   |  |   |   | 007417   | Name   |
| RS: TELEVISIO   | N  |   |   |  |  |
| system during the cons in effect or 5.61(e)(2) and (6.5); as explained  | ne accounting<br>n June 24, 19<br>4), or 76.63 (r<br>d in the next   | g period, except<br>981, permitting the<br>referring to 76.60<br>paragraph.   | (1) stations carrience carriage of certal (4))]; and (4))]; and   | d only on a part-time basis under<br>ain network programs [sections<br>nd (2) certain stations carried on a  | <b>G</b><br>Primary<br>Transmitters:   |
| CC rules, regular here in space only on a substand also in spatformation concern. The station's call associated with a case of the station's call associated with a case of the station of a case of the station of a distant entered into of a primary transistence categories a canadian station of each case, also a canadian station of a case of the station of the | ations, or auth G—but do listitute basis. In the state of the station acts at the station acts at the station acts at the station. In the station acts at the station. In the local series in column acts at the station acts at the station. In the local series in column acts at the station acts at the station acts at the local series in column acts at the local serie | norizations: at it in space I (the ation was carried tute basis station report origination according to its over the reported in the assigned to annel 4 in Wash tation is a network), "N-M" (the all educational), or e general instructivice area, (i.e. "or general instructivice area, (i.e. "or general instructivice area, (i.e. "or general instructivice area, or accounting period ause of lack of a earn that is not some 30, 2009, be ssociation repreyou carried the or U.S. stations, we the name of the   | de Special Statement of both on a substitute, see page (v) on program service er-the-air designation column 1 (list each the television statington, D.C. This bork station, an indefor network multicute for "E-M" (for noncontrollogical programment of the subject to a royalty state of the primary senting the primary channel on any of instructions located in the graph of the primary senting the primary channel on any of instructions located list the community with  | ent and Program Log)—if the  ute basis and also on some other f the general instructions located  is 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  upendent station, or a noncommercial ast), "i" (for independent), "i-M" immercial educational multicast), ie paper SA3 form. is if not, enter "No". For an ex- ipaper SA3 form. stating the basis on which your cering "LAC" if your cable system capacity. In payment because it is the subject item or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. It to which the station is licensed by the which the station is identifed.  | Television   |
|   | CHANN  | IEL LINE-UP   | AR  | ·  |  |
| 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION   |  |
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The channel number the FCC I is the station and case whether the second carried the station.  The entering the letter "N" (for not east), "E" (for noncommercial see terms, see page (v) of the station is outside the local service area, see page (v) of the station of a distant station during the ion on a part-time basis because of a distant station during the ion on a part-time basis because of a distant station during the ion on a part-time basis because of a distant station during the ion on a part-time basis because of a distant station during the ion on a part-time basis because of a distant station during the ion on a part-time basis because of a distant station during the ion on a part-time basis because of a distant station during the ion on a part-time basis because of a distant station during the ion on a part-time basis because of a distant station during the ion on a part-time basis because of a distant multicast strentered into on or before Julia primary transmitter or an a simulcasts, also enter "E". If the categories, see page (v) of the station, For Canadian stations, if any, giving multiple channel line-ups, CHANNEL OF | RS: TELEVISION  G, identify every television station (including system during the accounting period, except ions in effect on June 24, 1981, permitting the acfact of June 26, and also in space I, if the station was carried formation concerning substitute basis station according to its owner. Simulcast streams must be reported in a channel number the FCC has assigned to be channel number the FCC has assigned to be channel number the station. In each case whether the station is a network entering the letter "N" (for network), "N-M" (for each, "E" (for noncommercial educational), concerning the letter "N" (for network), "N-M" (for earea, see page (v) of the general instruct accernate of the station during the accounting period of a distant station during the accounting period on a part-time basis because of lack of a sion of a distant multicast stream that is not sentered into on or before June 30, 2009, be a primary transmitter or an association repressimulcasts, also enter "E". If you carried the acceptation of each station. For U.S. stations, canadian stations, if any, give the name of the gmultiple channel line-ups, use a separate CHANNEL LINE-UP  2. B'CAST CHANNEL OF (Yes or No) | RS: TELEVISION  G, identify every television station (including translator stations system during the accounting period, except (1) stations carried ons in effect on June 24, 1981, permitting the carriage of certa 6.6((e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; a sis, as explained in the next paragraph.  Stations: With respect to any distant stations carried by your concording to remain the remaining of the policy of the special Stateme only on a substitute basis.  In here in space G—but do list it in space I (the Special Stateme only on a substitute basis.  In here in space I, if the station was carried both on a substitute formation concerning substitute basis stations, see page (v) or m.  In the station's call sign. Do not report origination program service associated with a station according to its over-the-air designangle.  Period of the station according to its over-the-air designangle.  Period of the station is a network station, an independent of the station.  In each case whether the station is a network station, an independent of the station.  In each case whether the station is a network station, an independent of the station.  In each case whether the station is a network station, an independent of the station.  In each case whether the station is a network station, an independent of the station.  In each case whether the station is a network station, an independent of the station is outside the local service area, (i.e. "distant"), enter "Yes carea, see page (v) of the general instructions located in the accounting the accounting period. Indicate by entering the station during the accounting period. Indicate by entering the station of a distant multicast stream that is not subject to a royalty entered into on or before June 30, 2009, between a cable system period and stations, if any, give the name of the community with grandian stations, if any, give the name of the community with grandian stations, if any, give the name of the community with grandian stations, if any, give the n | RS: TELEVISION  G, identify every television station (including translator stations and low power television stations) system during the accounting period, except (1) stations carried only on a part-time basis under ones in effect on June 24, 1981, permitting the carriage of certain network programs [sections .61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a sis, as explained in the next paragraph.  Stations: With respect to any distant stations carried by your cable system on a substitute program LC rules, regulations, or authorizations:  There in space G—but do list it in space I (the Special Statement and Program Log)—if the only on a substitute basis.  and also in space I, if the station was carried both on a substitute basis and also on some other formation concerning substitute basis stations, see page (v) of the general instructions located m.  In station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify associated with a station according to its over-the-air designation. For example, report multi-v2". Simulcast streams must be reported in column 1 (list each stream separately; for example exhample, WRC is Channel 4 in Washington, D.C. This may be different from the channel stem carried the station.  The continuous program services are an interest of the station, an independent station, or a noncommercial entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" asst), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), see terms, see page (v) of the general instructions located in the paper SA3 form.  See terms, see page (v) of the general instructions located in the paper SA3 form.  See terms, see page (v) of the general instructions located in the paper SA3 form.  See terms, see page (v) of the general instructions located in the paper SA3 form.  See terms, see page (v) of the general instructions located in the paper SA3 form.  See t |

| LEGAL NAME OF OWN  | ER OF CABLE SY  | STEM:   |  |   | SYSTEM ID#   |  |  |  |
|--|---|---|--|---|--|--|--|--|
| CABLE ONE, IN  |   |   |  |   | 007417   | Name                                   |  |  |
| PRIMARY TRANSMITTE   | RS: TELEVISIO   | N   |  |   |  |  |  |  |
| carried by your cable s<br>FCC rules and regulati  | ystem during the  | ne accounting<br>n June 24, 19  | g period, except<br>81, permitting th  | (1) stations carried<br>ne carriage of certa  | and low power television stations) d only on a part-time basis under ain network programs [sections        | G                                      |  |  |
| substitute program bas   | sis, as explaine  | d in the next   | paragraph.   | . , , , , , , , , , , , ,   | nd (2) certain stations carried on a able system on a substitute program                                   | Primary<br>Transmitters:<br>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 spa<br>formation conc   | ce I, if the sta  |  |   | ute basis and also on some other<br>f the general instructions located                                     |  |  |  |
| each multicast stream  | associated with   | n a station ac  | cording to its ov  | er-the-air designat   | s such as HBO, ESPN, etc. Identify<br>tion. For example, report multi-<br>n stream separately; for example |  |  |  |
| Column 2: Give the   | e. For example  | , WRC is Ch   |  |   | on for broadcasting over-the-air in<br>may be different from the channel                                   |  |  |  |
| educational station, by<br>(for independent multion<br>For the meaning of the<br>Column 4: If the state<br>planation of local servi<br>Column 5: If you ha   | entering the le<br>cast), "E" (for no<br>see terms, see p<br>ation is outside<br>ce area, see pa<br>ave entered "Ye | tter "N" (for noncommercial page (v) of the the local senage (v) of the es" in column | etwork), "N-M" (i<br>il educational), o<br>e general instruc<br>vice area, (i.e. "o<br>general instruct<br>4, you must cor | for network multica<br>or "E-M" (for nonco<br>ctions located in th<br>distant"), enter "Ye<br>ions located in the<br>nplete column 5, s | s". If not, enter "No". For an ex-   |  |  |  |
| carried the distant stati<br>For the retransmiss<br>of a written agreement<br>the cable system and a<br>tion "E" (exempt). For s   | ion on a part-tir<br>ion of a distant<br>entered into or<br>a primary transi<br>simulcasts, also                    | ne basis beca<br>multicast stron<br>or before Ju<br>mitter or an a<br>o enter "E". If | ause of lack of a<br>eam that is not s<br>une 30, 2009, be<br>ssociation repre<br>you carried the                          | activated channel of<br>subject to a royalty<br>tween a cable sys<br>senting the primar<br>channel on any oth                           |  |  |  |  |
|  | Canadian statio   | ns, if any, giv   | e the name of th   | ne community with   | to which the station is licensed by the which the station is identifed. channel line-up.                   |  |  |  |
|  | ı   | CHANN   | EL LINE-UP   | AS  |  |  |  |  |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION  | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION   |  |  |  |
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| LEGAL NAME OF OWN  | ER OF CABLE SY   | STEM:   |   |   | SYSTEM ID#   |                             |  |  |
|--|--|---|---|---|--|-----------------------------|--|--|
| CABLE ONE, IN  |  | 0.2   |   |   | 007417   | Name                        |  |  |
| PRIMARY TRANSMITTE   | RS: TELEVISIO  | N   |   |   |  |                             |  |  |
| carried by your cable s<br>FCC rules and regulati  | ystem during the   | ne accounting<br>n June 24, 19  | g period, except<br>81, permitting th   | (1) stations carried<br>ne carriage of certa  | and low power television stations) d only on a part-time basis under ain network programs [sections nd (2) certain stations carried on a                               | <b>G</b><br>Primary         |  |  |
| substitute program bas   | sis, as explaine   | d in the next   | paragraph.  |   | able system on a substitute program  | Transmitters:<br>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 spa<br>formation cond  | ice I, if the sta   |   |   | ute basis and also on some other<br>f the general instructions located   |                             |  |  |
| each multicast stream  | associated witl  | n a station ac  | cording to its ov   | er-the-air designa  | s such as HBO, ESPN, etc. Identify<br>tion. For example, report multi-<br>n stream separately; for example   |                             |  |  |
| Column 2: Give the   | e. For example   | e, WRC is Ch  |   |   | on for broadcasting over-the-air in<br>may be different from the channel   |                             |  |  |
| Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the state planation of local servi Column 5: If you had cable system carried the distant station.                           | in each case we entering the leterast), "E" (for no ese terms, see pation is outside ce area, see paave entered "Ye entered edistant station on a part-time. | whether the sitter "N" (for noncommercial page (v) of the the local sendage (v) of the local sendage local because the local sendage local because the local sendage | etwork), "N-M" (i<br>il educational), c<br>e general instruc<br>vice area, (i.e. "c<br>general instruct<br>4, you must cor<br>accounting perio<br>ause of lack of a | for network multica<br>or "E-M" (for nonco<br>ctions located in the<br>distant"), enter "Ye<br>ions located in the<br>mplete column 5, s<br>od. Indicate by entactivated channel of | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>stating the basis on which your<br>ering "LAC" if your cable system   |                             |  |  |
| of a written agreement<br>the cable system and a<br>tion "E" (exempt). For s<br>explanation of these th<br><b>Column 6</b> : Give the  | entered into or<br>a primary transi<br>simulcasts, also<br>aree categories<br>e location of ea   | n or before Ju<br>mitter or an a<br>o enter "E". If<br>, see page (v<br>ch station. Fo  | une 30, 2009, be<br>ssociation repre<br>you carried the<br>) of the general in<br>or U.S. stations,   | etween a cable sys<br>senting the primar<br>channel on any otl<br>instructions locate<br>list the community   | y transmitter, enter the designa- ner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. |                             |  |  |
| Note: If you are utilizin  |  | nnel line-ups,  | use a separate  | space G for each  |  |                             |  |  |
|  | 1  | CHANN   | EL LINE-UP  | AT  |  |                             |  |  |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION  | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION   |                             |  |  |
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ACCOUNTING PERIOD: 2023/2 FORM SA3E. PAGE 4.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 007417 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). CALL SIGN AM or FM LOCATION OF STATION CALL SIGN AM or FM LOCATION OF STATION S/D S/D

| FORM SA3E. PAGE 5.  |  |  |  |  |  | ACCOUNTING    | PERIOD: 2023/2 |  |  |
|---|--|--|--|--|--|---------------|----------------|--|--|
| LEGAL NAME OF OWNER OF  | CABLE SYST   | EM:  |  |  | S  | YSTEM ID#     | Name           |  |  |
| CABLE ONE, INC.   |  |  |  |  |  | 007417        | Numb           |  |  |
| SUBSTITUTE CARRIAGE   | : SPECIA   | L STATEMEN   | IT AND PROGRAM LOG   | i  |  |               |                |  |  |
| In General: In space I, identi<br>substitute basis during the ac<br>explanation of the programm   | counting pe  | eriod, under spe   | cific present and former FC  | C rules, regul   | ations, or authorizations.   | For a further | Substitute     |  |  |
| explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.   |  |  |  |  |  |               |                |  |  |
| SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE     During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program  |  |  |  |  |  |               |                |  |  |
| broadcast by a distant station?  Yes XNo  Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program   |  |  |  |  |  |               |                |  |  |
| period, was broadcast by a under certain FCC rules, res SA3 form for futher informatitles, for example, "I Love L Column 2: If the program Column 3: Give the call s Column 4: Give the broat the case of Mexican or Can Column 5: Give the mon first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m." | itute progra ce, please a of every nor distant stati gulations, o tion. Do no ucy" or "NB n was broad sign of the s dcast statio adian statio atian day re "5/7." se when the Example: a er "R" if the and regulatio ogramming | m on a separa attach additional attach additional anetwork televiton and that your authorizations truse general class live, enter station broadca in socation (the instant of any, the country of a program carried isted program carried isted program ons in effect du | al pages. sion program (substitute pur cable system substitute s. See page (vi) of the generategories like "movies", or 76ers vs. Bulls." ""Yes." Otherwise enter "Nating the substitute programe community with which the community with which the gram was carried by your ged by a system from 6:01: was substituted for programing the accounting period | rogram) that, d for the progeral instruction "basketball".  o." m. station is lice station is ider program. Use table system. 5 p.m. to 6:2 mming that y; enter the le | during the accounting tramming of another state on located in the paper. List specific program ensed by the FCC or, in nitified).  List the times accurated the state of the second process of the sec | th<br>y       |                |  |  |
|   | UDCTITUT   | T DDOCDAM  |  |  | EN SUBSTITUTE  | 7. REASON     |                |  |  |
| 1. TITLE OF PROGRAM   | 2. LIVE?   | E PROGRAM  3. STATION'S  |  | 5. MONTH 6. TIMES  |  | FOR DELETION  |                |  |  |
|   | Yes or No  | CALL SIGN  | 4. STATION'S LOCATION  | AND DAY  | FROM — TO  |               |                |  |  |
|   |  |  |  |  |  |               |                |  |  |
|   |  |  |  |  | _  |               |                |  |  |
|   |  |  |  |  | _  |               |                |  |  |
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|   |  |  | <br>   |  | <u> </u>   |               |                |  |  |
|   |  |  |  |  |  |               |                |  |  |
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|   |  |  |  |  |  | ļ             |                |  |  |

ACCOUNTING PERIOD: 2023/2 FORM SA3E. PAGE 6.

|  | LEGAL NAME OF C   | OWNER OF CABLE | SYSTEM:         |             |      |               |       |               | SYSTEM ID# |  |
|--|---|----------------|-----------------|-------------|------|---------------|-------|---------------|------------|--|
| Name                                     | CABLE ONE   | , INC.         |                 |             |      |               |       |               | 007417     |  |
| <b>J</b><br>Part-Time<br>Carriage<br>Log | ge Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc- |                |                 |             |      |               |       |               |            |  |
|  |   |                | DATE            | S AND HOURS | OF F | PART-TIME CAR | RIAGE |               |            |  |
|  |   | WHEN           | N CARRIAGE OCCI | IRRED       |      |               | WHE   | N CARRIAGE OC | CURRED     |  |
|  | CALL SIGN   |                | HOU             |             |      | CALL SIGN     |       |               | URS        |  |
|  |   | DATE           | FROM            | ТО          |      |               | DATE  | FROM          | ТО         |  |
|  |   |                |                 |             |      |               |       |               | _          |  |
|  |   |                |                 |             |      |               |       |               | <b>–</b>   |  |
|  |   |                |                 |             |      |               |       |               | _          |  |
|  |   |                |                 |             |      |               |       |               | _          |  |
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|  |   |                |                 |             | •    |               |       |               |            |  |
|  |   |                |                 |             |      |               |       |               |            |  |
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|  |   |                | _               |             |      |               |       |               | _          |  |
|  |   |                | _               |             |      |               |       |               | _          |  |
|  |   |                | _               |             |      |               |       |               | _          |  |
|  |   |                | _               |             |      |               |       |               |            |  |
|  |   |                | _               |             |      |               |       |               |            |  |
|  |   |                | _               |             |      |               |       |               | _          |  |
|  |   |                | _               |             |      |               |       |               | _          |  |
|  | 1   |                | ı               |             | 1    | 1             | ı     | 1             |            |  |

| LEGA   | L NAME OF OWNER OF CABLE SYSTEM:   |                    | SYSTEM ID#                                 | Name  |  |  |  |  |  |
|--|--|--------------------|--|---|--|--|--|--|--|
| CA   | BLE ONE, INC.  |                    | 007417                                     | Name  |  |  |  |  |  |
| Inst<br>all a<br>(as   | DSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount y mounts (gross receipts) paid to your cable system by subscribers for the system's second dentifed in space E) during the accounting period. For a further explanation of how to co e (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)  | dary transm        | ission service                             | K<br>Gross Receipts   |  |  |  |  |  |
| IMP  | during the accounting period.  ORTANT: You must complete a statement in space P concerning gross receipts.   | \$<br>(Amo         | <b>4,224,406.50</b> unt of gross receipts) |   |  |  |  |  |  |
| <ul> <li>COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe:</li> <li>Complete block 1, showing your minimum fee.</li> <li>Complete block 2, showing whether your system carried any distant television stations.</li> <li>If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee.</li> <li>If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.</li> </ul> |  |                    |  |   |  |  |  |  |  |
|  | rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be k 3 below.   | entered on I       | ine 1 of                                   |   |  |  |  |  |  |
|  | rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be er low.  | ntered on line     | e 2 in block                               |   |  |  |  |  |  |
|  | rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoulblock 4 below.   | d be entered       | d on line                                  |   |  |  |  |  |  |
| Block<br>1   | <b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.  | is 1.064 per       | cent of the                                |   |  |  |  |  |  |
|  | Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064   | \$                 | 4,224,406.50                               |   |  |  |  |  |  |
|  | Enter the result here. This is your minimum fee.   | \$                 | 44,947.69                                  |   |  |  |  |  |  |
| Block<br>2   | DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the ispace G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period X Yes—Complete the DSE schedule.  No—Leave block 3 below blank and continued to the property of the pr | n 4, you mus<br>d? | t check                                    |   |  |  |  |  |  |
| Block  | 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  | _\$                | 8,417.92                                   |   |  |  |  |  |  |
| 3  | Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero   |                    | 0.00                                       |   |  |  |  |  |  |
|  | Line 3. Add lines 1 and 2 and enter here   | \$                 | 8,417.92                                   |   |  |  |  |  |  |
| Block<br>4   | Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger  | <u>\$</u>          | 44,947.69                                  | 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<br>additional<br>deposits under                  |  |  |  |  |  |
|  | Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)  |                    | 0.00                                       | Section 111(d)(7)<br>should contact                         |  |  |  |  |  |
|  | Line 4. FILING FEE   | \$                 | 725.00                                     | the Licensing 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   | \$                 | 45,672.69                                  | form for submitting the                                     |  |  |  |  |  |
|  | Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (S general instructions located in the paper SA3 form for more information.)  | ee page (i) o      | of the                                     | additional fees.  |  |  |  |  |  |

ACCOUNTING PERIOD: 2023/2
FORM SA3E, PAGE 8.

| Name                                       | LEGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.   | SYSTEM ID#<br>007417 |  |  |  |  |  |  |  |  |
|--|---|----------------------|--|--|--|--|--|--|--|--|
| M  | CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcas to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.   | st stations          |  |  |  |  |  |  |  |  |
| Channels                                   | 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  | 275                  |  |  |  |  |  |  |  |  |
| N<br>Individual to                         | INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)   |                      |  |  |  |  |  |  |  |  |
| Be Contacted<br>for Further<br>Information | Name JENAE HECK Telephone   | 602-364-6092         |  |  |  |  |  |  |  |  |
|  | 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  CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office reg  |                      |  |  |  |  |  |  |  |  |
| O<br>Certifcation                          | I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)  | uiauoris.)           |  |  |  |  |  |  |  |  |
|  | (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 in line 1 of space B and that the owner is not a corporation or partnership; or   | system as identified |  |  |  |  |  |  |  |  |
|  | <ul> <li>(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ow in line 1 of space B.</li> <li>I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained.</li> </ul>             | •                    |  |  |  |  |  |  |  |  |
|  | 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)]  | a nerem              |  |  |  |  |  |  |  |  |
|  | X /s/ Quynh Tran  |                      |  |  |  |  |  |  |  |  |
|  | 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 button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compa |                      |  |  |  |  |  |  |  |  |
|  | Typed or printed name: QUYNH TRAN   |                      |  |  |  |  |  |  |  |  |
|  | Title: VICE PRESIDENT & TREASURER  (Title of official position held in corporation or partnership)  |                      |  |  |  |  |  |  |  |  |
|  | Date: February 26, 2024   |                      |  |  |  |  |  |  |  |  |

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.

| LEGAL NAME OF OWNER OF CABLE SYSTEM:   | SYSTEM ID#   | Name  |
|--|--|---|
| CABLE ONE, INC.  | 007417   |   |
| 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 lowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system service of providing secondary transmissions of primary broadcast transmitters, the system shall scribers and amounts collected from subscribers receiving secondary transmissions pursuant to For more information on when to exclude these amounts, see the note on page (vii) of the general instrupaper SA3 form. | for the basic<br>not include sub-<br>section 119." | Special<br>Statement<br>Concerning<br>Gross Receipts<br>Exclusion |
| During the accounting period did the cable system exclude any amounts of gross receipts for secondary made by satellite carriers to satellite dish owners?   | transmissions                                      |   |
| X NO YES. Enter the total here and list the satellite carrier(s) below\$   |  |   |
|  |  |   |
| 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 of For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 for   |  | Q   |
| Line 1 Enter the amount of late payment or underpayment  |  | Interest<br>Assessment  |
| Line 2 Multiply line 1 by the interest rate* and enter the sum here  |  |   |
| xLine 3 Multiply line 2 by the number of days late and enter the sum here  | days<br>-  |   |
| <u></u>  | x 0.00274  |   |
| Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,   |  |   |
| space L, (page 7)  | (interest charge)                                  |   |
| * To view the interest rate chart click on <a href="www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a> . For further as 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 Copyrig please list below the owner, address, first community served, accounting period, and ID number as give 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 suffciency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2023/2

DSE SCHEDULE. PAGE 10.

# 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 |
| N  |      |

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.

# 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.

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
   (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:

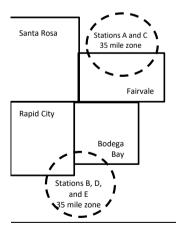
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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 Carri | ed    | 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)            | 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

 \$6.324.00

|                              |              | \$6,384.00                  |              |                             |              |
|------------------------------|--------------|-----------------------------|--------------|-----------------------------|--------------|
| 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: 2023/2** 

| DSE SCHEDULE. PAGE   | 1   |                     |                                 |                  | -                        | YSTEM ID# |  |  |  |  |
|----------------------|---|---------------------|---------------------------------|------------------|--------------------------|-----------|--|--|--|--|
| 1                    | LEGAL NAME OF OWNER OF CABLE SYSTEM:  |                     |                                 |                  |                          |           |  |  |  |  |
| •                    | CABLE ONE, INC. 007417  |                     |                                 |                  |                          |           |  |  |  |  |
|                      | SUM OF DSEs OF CATEGOR  |                     |                                 |                  |                          |           |  |  |  |  |
|                      | Add the DSEs of each station.   |                     |                                 |                  |                          |           |  |  |  |  |
|                      | Enter the sum here and in line  | 1 of part 5 of this | schedule.                       |                  | 0.25                     |           |  |  |  |  |
|                      | Instructions:   |                     |                                 |                  |                          | _         |  |  |  |  |
| 2                    | In the column headed "Call S  | ign": list the call | signs of all distant stations i | dentified by the | e letter "O" in column 5 |           |  |  |  |  |
|                      | of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom- |                     |                                 |                  |                          |           |  |  |  |  |
|                      | mercial educational station, give   |                     |                                 | as 1.0 , 101 ea  | ach network of noncom-   |           |  |  |  |  |
| Category "O"         | moroidi oddodiloridi otdilori, give   | o the Boll do .2    | CATEGORY "O" STATION            | S: DSFs          |                          |           |  |  |  |  |
| Stations             | CALL SIGN   | DSE                 | CALL SIGN                       | DSE              | CALL SIGN                | DSE       |  |  |  |  |
|                      | WYES  | 0.250               |                                 |                  |                          |           |  |  |  |  |
|                      |   | 0.200               |                                 |                  |                          |           |  |  |  |  |
|                      |   |                     |                                 |                  |                          |           |  |  |  |  |
|                      |   |                     |                                 |                  |                          |           |  |  |  |  |
|                      |   |                     |                                 |                  |                          |           |  |  |  |  |
| Add rows as          |   |                     |                                 | <b></b>          |                          |           |  |  |  |  |
| necessary.           |   |                     |                                 |                  |                          |           |  |  |  |  |
| Remember to copy all |   |                     |                                 |                  |                          |           |  |  |  |  |
| formula into new     |   |                     |                                 |                  |                          |           |  |  |  |  |
| rows.                |   |                     |                                 |                  |                          |           |  |  |  |  |
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| P | <br> | , | · · · · · · · · · · · · · · · · · · · | , |
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|   |      |   |                                       |   |
|   |      |   |                                       |   |

| Name   | CABLE ONE  | OWNER OF CABLE SYSTEM:   |  |  |   |  |   | S   | 007417 |
|--|--|--|--|--|---|--|---|---|--------|
| Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity | Column 2 figure should Column 3 Column 4 be carried ou Column 5 give the type- Column 6  | CAPACITY st the call sign of all dista le: For each station, give the correspond with the inform le: For each station, give the content of th | he number of I<br>mation given i<br>he total numbe<br>umn 2 by the fi<br>mal point. This<br>station, give th | nours your cable system space J. Calculate or or of hours that the statigure in column 3, and g is the "basis of carriage "type-value" as "1.0." | m carried the state of the state of the control of | tion during the sach station.  If the air during the air during decimals in contation.  If or noncomment of column 6. Ro | g the accoun<br>lumn 4. This<br>nercial educa | nting period. figure must tional station, ss than the |        |
| Supusity   |  | (  | CATEGORY   | LAC STATIONS:  | COMPUTAT  | ION OF DS  | Es  |   |        |
|  | 1. CALL<br>SIGN  | 2. NUMBE<br>OF HOU<br>CARRIE<br>SYSTE  | JRS<br>ED BY<br>M  | 3. NUMBER<br>OF HOURS<br>STATION<br>ON AIR   | 4. BASIS OF<br>CARRIAG<br>VALUE   | GE .   | 5. TYPE<br>VALUE                              |   | ;E<br> |
|  |  |  | ÷  |  | =   | X  |   | =   |        |
|  |  |  | ÷  |  |   | x<br>x   |   |   |        |
|  |  |  | ÷  |  | =   | x  |   | =   |        |
|  |  |  | ÷  |  | =   | х  |   | =   |        |
|  |  |  | ÷  |  | =   | x<br>x   |   | =   |        |
|  |  |  | ÷  |  | =   | x  |   |   |        |
| Computation of DSEs for Substitute-Basis Stations  | tions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and  Computation of DSEs for Substitute-  The description of System in Substitution of a programs during that optional carriage (as shown by the word "Yes" in column 2 of space I).  Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted to the station of the statio |  |  |  |   | f<br>ere deleted<br>han the third  | n).   |   |        |
|  |  |  |  | -BASIS STATION   |   |  |   |   | 1      |
|  | 1. CALL<br>SIGN  | 2. NUMBER<br>OF<br>PROGRAMS  | 3. NUMBI<br>OF DA'<br>IN YEA   | YS   | 1. CALL<br>SIGN   | 2. NUM<br>OF<br>PRO  | BER<br>GRAMS                                  | 3. NUMBER<br>OF DAYS<br>IN YEAR                       | 4. DSE |
|  |  | -  | :  | =  |   |  | ÷   |   | =      |
|  |  |  | <del>:</del><br><del>:</del>   |  |   |  | ÷   |   |        |
|  |  |  | :  | =  |   |  | ÷   |   |        |
|  |  | +  | :  | =  |   |  | ÷   |   | =      |
|  |  | ;  | ÷  | =  |   |  | ÷   |   | =      |
|  | Add the DSEs   | s OF SUBSTITUTE-BASI<br>of each station.<br>um here and in line 3 of pa  |  |  |   |  | 0.00  |   |        |
| 5  |  | ER OF DSEs: Give the ams applicable to your system   |  | boxes in parts 2, 3, and   | 4 of this schedule  | e and add them   | to provide th                                 | e total   |        |
| Total Number   | 1. Number  | of DSEs from part 2 ●  |  |  |   | <b>-</b>   |   | 0.25  |        |
| of DSEs  | 2. Number  | of DSEs from part 3 ●  |  |  |   | <u></u>  |   | 0.00  |        |
|  | 3. Number  | of DSEs from part 4 ●  |  |  |   | <b>-</b>   |   | 0.00  |        |
|  | TOTAL NUMBE  | ER OF DSEs   |  |  |   |  | <u> </u>                                      |   | 0.25   |

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2023/2

| LEGAL NAME OF O   |  | SYSTEM:                                    |   |   |  |   | S                     | YSTEM ID#<br>007417        | Name  |
|---|--|--|---|---|--|---|-----------------------|----------------------------|---|
| Instructions: Block A must be completed. In block A:  • If your answer if "Yes," leave the remainder of part 6 and part 7 of the DSE schedule blank and complete part 8, (page 16) of the schedule.  • If your answer if "No," complete blocks B and C below.  BLOCK A: TELEVISION MARKETS  |  |  |   |   |  |   |                       |                            |   |
| Is the cable system located wholly outside of all major and smaller markets as defined under section 76.5 of FCC rules and regulations in   |  |  |   |   |  |   |                       | Computation of<br>3.75 Fee |   |
| effect on June 24, Yes—Com  | 1981?  | schedule—D0                                | •   | LETE THE REMAIN   |  |   | o ruies and regula    | IIIOHS III                 |   |
|   |  | BLO  | CK B: CARR  | NAGE OF PERM  | MITTED DS  | Es  |                       |                            |   |
| Column 1:<br>CALL SIGN  | FCC rules and re   | egulations pric<br>ne DSE Sched            | or to June 25, 1<br>dule. (Note: The                | part 2, 3, and 4 of the<br>981. For further ex<br>e letter M below ref<br>Act of 2010.)     | planation of pe  | ermitted statior  | ns, see the           | •                          |   |
| Column 2:<br>BASIS OF<br>PERMITTED<br>CARRIAGE  | (Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty statio | lles and reguled pursuant to on as defined | ations cited bel<br>the FCC mark<br>in 76.5(kk) (76 | is on which you cal<br>low pertain to those<br>ket quota rules [76.<br>5.59(d)(1), 76.61(e) | e in effect on J<br>.57, 76.59(b),<br>o(1), 76.63(a) r | June 24, 1981.)<br>76.61(b)(c), 76<br>referring to 76.6 | 6.63(a) referring to  | ,                          |   |
| C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)]  D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule).  E Carried pursuant to individual waiver of FCC rules (76.7)  *F A station previously carried on a part-time or substitute basis prior to June 25, 1981  G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)]  M Retransmission of a distant multicast stream. |  |  |   |   |  |   |                       |                            |   |
| Column 3:   |  | e stations ider                            | ntified by the let                                  | parts 2, 3, and 4 of<br>tter "F" in column 2  |  |   | rksheet on page 1     | 4 of                       |   |
| 1. CALL<br>SIGN   | 2. PERMITTED BASIS   | 3. DSE                                     | 1. CALL<br>SIGN                                     | 2. PERMITTED<br>BASIS   | 3. DSE   | 1. CALL<br>SIGN   | 2. PERMITTED<br>BASIS | 3. DSE                     |   |
| WYES  | С  | 0.25                                       |   |   |  |   |                       |                            |   |
|   |  |  |   |   |  |   |                       |                            |   |
|   |  |  |   |   |  |   |                       |                            |   |
|   |  |  |   |   |  |   |                       |                            |   |
|   |  |  |   |   |  |   |                       |                            |   |
|   |  |  |   |   |  |   |                       | 0.25                       |   |
|   |  | F  | BLOCK C: CC   | MPUTATION OF  |  |   |                       | <u></u>                    |   |
|   |  |  | <u> </u>  | NII OTATION OF  | 0.701 LL   |   |                       |                            |   |
| Line 1: Enter the   |  | ·  |   |   |  |   |                       |                            |   |
| Line 2: Enter the   | sum of permitted   | d DSEs from                                | ı block B abov                                      | /e  |  |   |                       |                            |   |
|   |  |  |   | of DSEs subject to of this schedule   |  | ate.  |                       |                            |   |
| Line 4: Enter gro   | ss receipts from   | space K (pa                                | ige 7)  |   |  |   | x 0.0                 | 375                        | Do any of the DSEs represent                        |
| Line 5: Multiply li   | ne 4 by 0.0375 <i>a</i>  | and enter sui                              | m here  |   |  |   | x                     |                            | partially<br>permited/<br>partially<br>nonpermitted |
| Line 6: Enter tota  | al number of DSE   | Es from line                               | 3   |   |  |   |                       |                            | carriage? If yes, see part 9 instructions.          |
| Line 7: Multiply li   | ne 6 by line 5 an  | ıd enter here                              | and on line 2                                       | 2, block 3, space   | L (page 7)   |   |                       | 0.00                       |   |

| ABLE ONE,       | OWNER OF CABLE S      | OTOTEW. |                 |                       |          |                 |                       | YSTEM ID#<br>007417 | Name          |
|-----------------|-----------------------|---------|-----------------|-----------------------|----------|-----------------|-----------------------|---------------------|---------------|
|                 | _                     | BLOCK   | ( A: TELEVI     | SION MARKETS          | (CONTIN  | UED)            |                       |                     |               |
| 1. CALL<br>SIGN | 2. PERMITTED<br>BASIS | 3. DSE  | 1. CALL<br>SIGN | 2. PERMITTED<br>BASIS | 3. DSE   | 1. CALL<br>SIGN | 2. PERMITTED<br>BASIS | 3. DSE              | 6             |
|                 |                       |         |                 |                       |          |                 |                       |                     | Computation 6 |
|                 |                       |         |                 |                       |          |                 |                       |                     | 3.75 Fee      |
|                 |                       |         |                 |                       |          |                 |                       |                     |               |
|                 |                       |         |                 |                       |          |                 |                       |                     |               |
|                 |                       |         |                 |                       |          |                 |                       |                     |               |
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|                 |                       | [       |                 |                       | <u> </u> |                 |                       |                     |               |

**ACCOUNTING PERIOD: 2023/2** 

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. 007417 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 Worksheet for 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. Computating the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 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. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. 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 Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. of the If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. **Syndicated BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? No—Proceed to part 8 X Yes—Complete blocks B and C. BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159) or in part, over the cable system? Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN CALL SIGN DSE CALL SIGN DSE DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

| LEGAL NA      | ME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID#  007417   | Name                      |
|---------------|---|---------------------------|
|               | BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE  |                           |
| Section 1     | Enter the amount of gross receipts from space K (page 7)  | 7                         |
| Section<br>2  | A. Enter the total DSEs from block B of part 7  | Computation of the        |
|               | B. Enter the total number of exempt DSEs from block C of part 7   | Syndicated<br>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  | Surcharge                 |
| • Is an       | y portion of the cable system within a top 50 television market as defned by the FCC?  Yes—Complete section 3 below.  |                           |
|               | SECTION 3: TOP 50 TELEVISION MARKET   |                           |
| Section<br>3a | Did your cable system retransmit the signals of any partially distant television stations during the accounting period?      \( \text{\text{X}} \) 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 DSE |                           |
|               | 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)  |                           |
|               | 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<br>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  |                           |
| Cooti         | Did your cable system retransmit the signals of any partially distant television stations during the accounting period?   |                           |
| Section<br>4a | Yes—Complete part 9 of this schedule.  X No—Complete the applicable section below.  |                           |
|               | If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSE 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                     | LEGAL NAM         | ME OF OWNER OF CABLE SYSTEM:   | SYSTEM ID# |
|--------------------------|-------------------|--|------------|
| Name                     | (                 | CABLE ONE, INC.  | 007417     |
| 7                        | Section<br>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<br>Syndicated     |                   | B. Enter 0.00189 of gross receipts (the amount in section 1)   |            |
| Exclusivity<br>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> .  |
|                          | Instru            | ctions:  |            |
| 8                        |                   | ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block B is the part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block B is the part of the DSE schedule for the | t          |
|                          |                   | 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              |                   | ır answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.   |            |
| of<br>Base Rate Fee      | • If you<br>blank | ır answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belo  | W          |
| Dase Nate i ee           |                   | 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 "local  | I          |
|                          | 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?   |            |
|                          | [.                | 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<br>1      | Enter the amount of gross receipts from space K (page 7) ▶\$   |            |
|                          | Section           | Enter the total number of permitted DSEs from block B, part 6 of this schedule.  |            |
|                          | 2                 | (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)  |            |
|                          | Section           |  |            |
|                          | 3                 | If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.   |            |
|                          |                   | A. Enter 0.01064 of gross receipts  (the amount in section 1)  |            |
|                          |                   | B. Enter 0.00701 of gross receipts  (the amount in section 1) ▶  |            |
|                          |                   | C. Subtract 1.000 from total DSEs  (the figure in section 2) and enter here  |            |
|                          |                   | D. Multiply line B by line C and enter here  |            |
|                          |                   | E. Add lines A, and D. This is your base rate fee. Enter here  |            |
|                          |                   | and in block 3, line 1, space L (page 7)   | 0.00       |
|                          |                   | Base Rate Fee  | 3.00       |

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2023/2

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  | SYSTEM ID#           |                          |
|---|----------------------|--------------------------|
| CABLE ONE, INC.   | 007417               | Name                     |
| Section If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.   |                      |                          |
| 4   |                      | 8                        |
| A. Enter 0.01064 of gross receipts (the amount in section 1)  ▶\$   |                      | _                        |
|   |                      |                          |
| B. Enter 0.00701 of gross receipts  (the amount in section 1)  * \$   |                      | Computation of           |
|   |                      | Base Rate Fee            |
| C. Multiply line B by 3.000 and enter here  |                      |                          |
| 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                 |                          |
| Base Rate Fee   | 0.00                 |                          |
| IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broads   | cast signals shall   |                          |
| instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple chant<br>Space G.   | nel line-ups in      | 9                        |
| In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fe   | ne to evolude        |                          |
| receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take   |                      | Computation of           |
| exclusion, you must:  |                      | Base Rate Fee            |
| First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant  |                      | and<br>Syndicated        |
| station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determin DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for  |                      | Exclusivity              |
| Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.   | n odon group.        | Surcharge<br>for         |
| NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in  |                      | Partially                |
| also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B by your cable system is wholly located outside all major television markets, complete block A only.  | elow. However, if    | Distant<br>Stations, and |
| How to Identify a Subscriber Group for Partially Distant Stations   |                      | for Partially            |
| Step 1: For each community served, determine the local service area of each wholly distant and each partially distant st  | ation vou            | Permitted<br>Stations    |
| carried to that community.  |                      |                          |
| Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were outside the station's local service area. A subscriber located outside the local service area of a station is distant to that s 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 distant  |                      |                          |
| subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.   | hat a cable system   |                          |
| Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your sy groups.  | stem'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 to a subscribers in the group.   | all of the           |                          |
| • If:   |                      |                          |
| 1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it of this schedule; or,   | in parts 2, 3, and 4 |                          |
| 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 part 6 of this schedule.   | 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 general in the paper SA3 form.   | instructions         |                          |
| Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the  | e preceding          |                          |
| page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (t DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not no actual calculations on the form.                              |                      |                          |

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007417 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.

| LEGAL NAME OF OWNER CABLE ONE, INC. | R OF CABLE | SYSTEM:        |                |                         |          | S               | 007417     | Name               |
|-------------------------------------|------------|----------------|----------------|-------------------------|----------|-----------------|------------|--------------------|
| E                                   | BLOCK A:   | COMPUTATION C  | F BASE RA      | TE FEES FOR EACH        | SUBSCRIE | BER GROUP       |            |                    |
|                                     | FIRST      | SUBSCRIBER GRO | UP             |                         |          | SUBSCRIBER GROU |            | 0                  |
| COMMUNITY/ AREA                     | OCEAN      | SPRINGS, POR   | TIONS OF       | COMMUNITY/ AREA         | PASCAG   | OULA, ESCATAV   | VPA, PORT  | 9<br>Computati     |
| CALL SIGN                           | DSE        | CALL SIGN      | DSE            | CALL SIGN               | DSE      | CALL SIGN       | DSE        | of                 |
| WYES                                | 0.25       |                |                |                         |          |                 |            | Base Rate F<br>and |
|                                     |            |                |                |                         |          | -               |            | Syndicate          |
|                                     |            |                |                |                         |          |                 |            | Exclusivit         |
|                                     |            |                |                |                         |          |                 |            | Surcharge<br>for   |
|                                     | ···        |                | ····           |                         |          |                 |            | Partially          |
|                                     |            |                |                |                         |          |                 |            | Distant            |
|                                     |            |                |                |                         |          |                 |            | Stations           |
|                                     |            |                |                |                         |          |                 |            |                    |
|                                     |            |                |                |                         |          |                 |            |                    |
|                                     |            |                |                |                         |          |                 |            |                    |
|                                     | <u></u>    |                |                |                         |          |                 |            |                    |
|                                     |            |                |                |                         |          |                 |            |                    |
| otal DSEs                           |            | <del>'</del>   | 0.25           | Total DSEs              | 1        | !               | 0.00       |                    |
|                                     |            |                |                |                         |          |                 |            |                    |
| Gross Receipts First Gr             | oup        | \$ 64          | 6,519.11       | Gross Receipts Secon    | d Group  | \$ 9            | 21,504.42  |                    |
| ase Rate Fee First Gr               | oup        | \$             | 1,719.74       | Base Rate Fee Second    | d Group  | \$              | 0.00       |                    |
|                                     | THIRD      | SUBSCRIBER GRO | UP             |                         | FOURTH   | SUBSCRIBER GROU | IP         |                    |
| COMMUNITY/ AREA                     | BILOXI     | , HARRISON CO  | UNTY           | COMMUNITY/ AREA         | HARRIS   | ON CO (DIAMONI  | OHEAD), GI |                    |
| CALL SIGN                           | DSE        | CALL SIGN      | DSE            | CALL SIGN               | DSE      | CALL SIGN       | DSE        |                    |
| VYES                                | 0.25       |                |                | WYES                    | 0.25     |                 |            |                    |
|                                     |            |                |                |                         |          |                 |            |                    |
|                                     |            |                |                | -                       |          |                 |            |                    |
|                                     |            |                |                |                         |          |                 |            |                    |
|                                     |            |                |                |                         |          |                 |            |                    |
|                                     |            |                |                |                         |          |                 |            |                    |
|                                     |            |                |                |                         |          |                 |            |                    |
|                                     |            |                |                |                         |          |                 |            |                    |
|                                     |            |                |                | -                       |          |                 |            |                    |
|                                     |            |                |                |                         |          |                 |            |                    |
|                                     |            |                |                |                         |          |                 |            |                    |
|                                     |            |                |                |                         |          |                 |            |                    |
|                                     |            |                |                |                         |          |                 |            |                    |
| otal DSEs                           |            |                | 0.25           | Total DSEs              |          |                 | 0.25       |                    |
| Fross Receipts Third G              | iroup      | \$ 92          | 1,919.03       | Gross Receipts Fourth   | Group    | <u>\$</u> 1,5   | 96,193.24  |                    |
| Base Rate Fee Third G               | roup       | \$             | 2,452.30       | Base Rate Fee Fourth    | Group    | \$              | 4,245.87   |                    |
| ase Rate Fee: Add th                |            |                | criber group a | s shown in the boxes ab | ove.     | \$              | 8,417.92   |                    |

| CABLE ONE, INC.         | R OF CABLE                | E SYSTEM:       |              |                          |               | S               | YSTEM ID#<br>007417 | Name                 |
|-------------------------|---------------------------|-----------------|--------------|--------------------------|---------------|-----------------|---------------------|----------------------|
| E                       | BLOCK A:                  | COMPUTATION OF  | BASE RA      | ATE FEES FOR EACH        | SUBSCRI       | BER GROUP       |                     |                      |
|                         |                           | SUBSCRIBER GROU |              |                          |               | SUBSCRIBER GROU | Р                   | _                    |
| COMMUNITY/ AREA         | HANCO                     | OCK COUNTY (DIA | AMONDI       | COMMUNITY/ AREA          |               |                 | 0                   | <b>9</b> Computation |
| CALL SIGN               | DSE                       | CALL SIGN       | DSE          | CALL SIGN                | DSE           | CALL SIGN       | DSE                 | of                   |
|                         |                           |                 |              |                          |               |                 |                     | Base Rate Fee        |
|                         |                           |                 |              |                          |               |                 |                     | and                  |
|                         |                           |                 |              |                          |               |                 |                     | Syndicated           |
|                         |                           |                 |              |                          |               |                 |                     | Exclusivity          |
|                         | ••••                      |                 |              |                          | ••••          |                 |                     | Surcharge            |
|                         | ••••                      |                 |              |                          | •••••••••••   | -               |                     | for                  |
|                         |                           |                 |              |                          | •••           |                 | ····                | Partially            |
|                         | ••••                      |                 |              |                          | •••••••••••   | -               |                     | Distant              |
|                         | ···                       |                 |              |                          | ···           |                 |                     | Stations             |
|                         | ···                       |                 |              |                          | ····          | -               |                     |                      |
|                         |                           |                 |              |                          |               | H               |                     |                      |
|                         |                           |                 | <b> </b>     |                          |               | H               |                     |                      |
|                         |                           |                 |              |                          |               | -               |                     |                      |
|                         |                           |                 | <u> </u>     |                          | <del> </del>  |                 |                     |                      |
|                         |                           |                 | <b> </b>     |                          |               |                 |                     |                      |
|                         |                           |                 | ļ            |                          |               |                 |                     |                      |
| Total DSEs              |                           |                 | 0.00         | Total DSEs               |               |                 | 0.00                |                      |
| Gross Receipts First G  | roup                      | <b>\$</b> 138   | ,270.70      | Gross Receipts Secon     | nd Group      | \$              | 0.00                |                      |
|                         |                           |                 |              |                          |               |                 |                     |                      |
| Base Rate Fee First G   | roup                      | \$              | 0.00         | Base Rate Fee Secon      | ıd Group      | \$              | 0.00                |                      |
|                         | SEVENTH                   | SUBSCRIBER GROU | JP           |                          | EIGHTH        | SUBSCRIBER GROU | Р                   |                      |
| COMMUNITY/ AREA         |                           |                 | 0            | COMMUNITY/ AREA          |               |                 | 0                   |                      |
| CALL SIGN               | DSE                       | CALL SIGN       | DSE          | CALL SIGN                | DSE           | CALL SIGN       | DSE                 |                      |
|                         |                           |                 |              |                          |               |                 | <del></del>         |                      |
|                         |                           |                 |              |                          |               |                 | <del></del>         |                      |
|                         |                           |                 |              |                          |               |                 | <del></del>         |                      |
|                         |                           |                 | <b></b>      |                          |               |                 |                     |                      |
|                         |                           |                 | <b></b>      |                          | <mark></mark> |                 |                     |                      |
|                         |                           |                 | <b></b>      |                          | <mark></mark> |                 |                     |                      |
|                         |                           |                 | <b></b>      |                          |               |                 |                     |                      |
|                         |                           |                 | <u></u>      |                          | <mark></mark> |                 |                     |                      |
|                         | <u></u>                   |                 | <u> </u>     |                          | <del></del>   |                 |                     |                      |
|                         |                           |                 | <b></b>      |                          |               |                 |                     |                      |
|                         |                           |                 | <b></b>      |                          |               |                 |                     |                      |
|                         |                           |                 | <b></b>      |                          |               |                 |                     |                      |
|                         |                           |                 | <b> </b>     |                          | <u></u>       |                 |                     |                      |
|                         |                           |                 | <b></b>      |                          |               |                 |                     |                      |
|                         |                           |                 |              |                          |               |                 |                     |                      |
| Total DSEs              |                           |                 | 0.00         | Total DSEs               |               |                 | 0.00                |                      |
| Gross Receipts Third G  | coup                      | •               | 0.00         | Gross Passints Espert    | Group         | •               | 0.00                |                      |
| Gross Receipts Triifd G | лоир                      | \$              | 0.00         | Gross Receipts Fourth    | і Отоир       | \$              | 0.00                |                      |
| Base Rate Fee Third G   | Group                     | \$              | 0.00         | Base Rate Fee Fourth     | n Group       | \$              | 0.00                |                      |
|                         |                           |                 |              | Ш                        |               |                 |                     |                      |
|                         |                           |                 | iber group a | as shown in the boxes al | oove.         |                 |                     |                      |
| Enter here and in block | 3, line 1, s <sub>l</sub> | pace L (page 7) |              |                          |               | \$              |                     |                      |

| DI COL                                  | A. COMPUTATION                  | OF DAGE 5. | ATE EEE0 E00 E : 0             | I CHECOE: | DED ODOLID                |      |           |
|---|---------------------------------|------------|--------------------------------|-----------|---------------------------|------|-----------|
|   | A: COMPUTATION TH SUBSCRIBER GR |            | TE FEES FOR EAC                |           | BER GROUP SUBSCRIBER GROU | ID   |           |
| OMMUNITY/ AREA                          | TH SUBSCRIBER GIV               | 0          | COMMUNITY/ AREA                |           | 30B3CNBER GRO             | 0    | 9         |
|   |                                 |            | COMMONT 1774 CE                |           |                           |      | Computa   |
| CALL SIGN DSE                           | CALL SIGN                       | DSE        | CALL SIGN                      | DSE       | CALL SIGN                 | DSE  | of        |
|   |                                 |            |                                |           |                           |      | Base Rate |
|   |                                 |            |                                |           |                           |      | and       |
|   |                                 |            |                                |           |                           |      | Syndicat  |
|   |                                 |            |                                |           |                           |      | Exclusiv  |
|   |                                 |            |                                |           |                           |      | Surchar   |
|   |                                 |            |                                |           |                           |      | for       |
|   |                                 |            |                                |           |                           |      | Partiall  |
|   |                                 |            |                                |           |                           |      | Distan    |
|   |                                 |            |                                |           |                           |      | Station   |
|   |                                 |            |                                |           |                           |      |           |
|   |                                 |            |                                |           | H                         |      |           |
|   |                                 |            |                                |           | H                         |      |           |
|   |                                 |            |                                |           |                           |      |           |
|   |                                 |            |                                |           |                           |      |           |
| otal DSEs                               | **                              | 0.00       | Total DSEs                     |           | • •                       | 0.00 |           |
|   |                                 |            |                                |           |                           |      |           |
| ross Receipts First Group               | \$                              | 0.00       | Gross Receipts Seco            | ond Group | \$                        | 0.00 |           |
|   |                                 |            |                                |           |                           |      |           |
| ase Rate Fee First Group                | \$                              | 0.00       | Base Rate Fee Seco             | ond Group | \$                        | 0.00 |           |
|   |                                 |            |                                |           |                           |      |           |
|   | TH SUBSCRIBER GR                |            |                                |           | SUBSCRIBER GROU           |      |           |
| OMMUNITY/ AREA                          |                                 | 0          | COMMUNITY/ AREA                | ١         |                           | 0    |           |
|   |                                 |            |                                |           |                           |      |           |
|   | . II                            |            |                                |           | П                         |      |           |
| CALL SIGN DSE                           | CALL SIGN                       | DSE        | CALL SIGN                      | DSE       | CALL SIGN                 | DSE  |           |
| CALL SIGN DSE                           | CALL SIGN                       | DSE        | CALL SIGN                      | DSE       | CALL SIGN                 | DSE  |           |
| CALL SIGN DSE                           | CALL SIGN                       | DSE        | CALL SIGN                      | DSE       | CALL SIGN                 | DSE  |           |
| CALL SIGN DSE                           | CALL SIGN                       | DSE        | CALL SIGN                      | DSE       | CALL SIGN                 | DSE  |           |
| CALL SIGN DSE                           | CALL SIGN                       | DSE        | CALL SIGN                      | DSE       | CALL SIGN                 | DSE  |           |
| CALL SIGN DSE                           | CALL SIGN                       | DSE        | CALL SIGN                      | DSE       | CALL SIGN                 | DSE  |           |
| CALL SIGN DSE                           | CALL SIGN                       | DSE        | CALL SIGN                      | DSE       | CALL SIGN                 | DSE  |           |
| CALL SIGN DSE                           | CALL SIGN                       | DSE        | CALL SIGN                      | DSE       | CALL SIGN                 | DSE  |           |
| CALL SIGN DSE                           | CALL SIGN                       | DSE        | CALL SIGN                      | DSE       | CALL SIGN                 | DSE  |           |
| CALL SIGN DSE                           | CALL SIGN                       | DSE        | CALL SIGN                      | DSE       | CALL SIGN                 | DSE  |           |
| CALL SIGN DSE                           | CALL SIGN                       | DSE        | CALL SIGN                      | DSE       | CALL SIGN                 | DSE  |           |
| CALL SIGN DSE                           | CALL SIGN                       | DSE        | CALL SIGN                      | DSE       | CALL SIGN                 | DSE  |           |
| CALL SIGN DSE                           | CALL SIGN                       | DSE        | CALL SIGN                      | DSE       | CALL SIGN                 | DSE  |           |
| CALL SIGN DSE                           | CALL SIGN                       | DSE        | CALL SIGN                      | DSE       | CALL SIGN                 | DSE  |           |
| CALL SIGN DSE                           | CALL SIGN                       | DSE        | CALL SIGN                      | DSE       | CALL SIGN                 | DSE  |           |
|   | CALL SIGN                       | DSE        | Total DSEs                     | DSE       | CALL SIGN                 | DSE  |           |
| otal DSEs                               | CALL SIGN                       |            |                                |           | CALL SIGN                 |      |           |
| CALL SIGN DSE                           | CALL SIGN                       | 0.00       | Total DSEs                     |           |                           | 0.00 |           |
| otal DSEs<br>Gross Receipts Third Group | \$                              | 0.00       | Total DSEs Gross Receipts Four | th Group  | \$                        | 0.00 |           |
| otal DSEs                               | \$                              | 0.00       | Total DSEs                     | th Group  |                           | 0.00 |           |

| CABLE ONE, INC.         | R OF CABLE   | E SYSTEM:                         |              |                         |           | S                            | YSTEM ID#<br>007417 | Name                 |
|-------------------------|--------------|-----------------------------------|--------------|-------------------------|-----------|------------------------------|---------------------|----------------------|
|                         |              | COMPUTATION OF<br>SUBSCRIBER GROU |              | ATE FEES FOR EACH       |           | BER GROUP<br>SUBSCRIBER GROU | P                   | 0                    |
| COMMUNITY/ AREA         |              |                                   | 0            | COMMUNITY/ AREA         |           |                              | 0                   | <b>9</b> Computation |
| CALL SIGN               | DSE          | CALL SIGN                         | DSE          | CALL SIGN               | DSE       | CALL SIGN                    | DSE                 | of                   |
|                         |              |                                   |              |                         |           |                              |                     | Base Rate Fee        |
|                         | ···          |                                   |              |                         |           |                              |                     | and<br>Syndicated    |
|                         |              |                                   |              |                         |           |                              |                     | Exclusivity          |
|                         |              |                                   |              |                         |           |                              |                     | Surcharge            |
|                         |              |                                   |              |                         |           |                              |                     | for<br>Partially     |
|                         | ···          |                                   |              |                         |           |                              | ·····               | Distant              |
|                         |              |                                   |              |                         |           |                              |                     | Stations             |
|                         |              |                                   |              |                         |           |                              |                     |                      |
|                         |              |                                   |              |                         |           |                              |                     |                      |
|                         |              |                                   |              |                         |           |                              |                     |                      |
|                         |              |                                   |              |                         |           |                              |                     |                      |
|                         |              |                                   |              |                         |           |                              | 2.22                |                      |
| Total DSEs              |              |                                   | 0.00         | Total DSEs              |           |                              | 0.00                |                      |
| Gross Receipts First G  | roup         | \$                                | 0.00         | Gross Receipts Secon    | nd Group  | \$                           | 0.00                |                      |
| Base Rate Fee First G   | roup         | \$                                | 0.00         | Base Rate Fee Secon     | nd Group  | \$                           | 0.00                |                      |
|                         | IFTEENTH     | SUBSCRIBER GROU                   |              | #                       | SIXTEENTH | SUBSCRIBER GROU              | _                   |                      |
| COMMUNITY/ AREA         |              |                                   | 0            | COMMUNITY/ AREA         |           |                              | 0                   |                      |
| CALL SIGN               | DSE          | CALL SIGN                         | DSE          | CALL SIGN               | DSE       | CALL SIGN                    | DSE                 |                      |
|                         |              |                                   |              |                         |           |                              |                     |                      |
|                         |              |                                   |              |                         |           |                              |                     |                      |
|                         |              |                                   |              |                         |           |                              |                     |                      |
|                         | <u></u>      |                                   |              |                         |           |                              |                     |                      |
|                         |              |                                   |              |                         |           |                              | ····                |                      |
|                         |              |                                   |              |                         |           |                              |                     |                      |
|                         |              |                                   | ļ            |                         |           |                              |                     |                      |
|                         |              |                                   |              |                         |           |                              |                     |                      |
|                         |              |                                   |              |                         |           |                              |                     |                      |
|                         |              |                                   |              |                         |           |                              |                     |                      |
|                         |              |                                   |              |                         |           |                              |                     |                      |
| Total DSEs              |              |                                   | 0.00         | Total DSEs              | 1         |                              | 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                |                      |
| Rasa Rata Fan: Add th   | ie haso rate | a foos for each subcor            | iher group   | as shown in the boxes a | hove      |                              |                     |                      |
| Enter here and in block |              |                                   | ibei gioup i | as shown in the boxes a | JUVG.     | \$                           |                     |                      |
|                         |              |                                   |              |                         |           |                              |                     |                      |

| LEGAL NAME OF OWNER CABLE ONE, INC. | OF CABLE     | SYSTEM:                 |             |                          |          | SYS              | STEM ID#<br>007417 | Name             |
|-------------------------------------|--------------|-------------------------|-------------|--------------------------|----------|------------------|--------------------|------------------|
| В                                   | LOCK A:      | COMPUTATION OF          | BASE RA     | TE FEES FOR EACH         | SUBSCRI  | BER GROUP        |                    |                  |
| SEVEN                               | ITEENTH      | SUBSCRIBER GROU         | Р           | EIG                      | HTEENTH  | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA                     |              |                         | 0           | COMMUNITY/ AREA          |          |                  | 0                  | 9<br>Computation |
| CALL SIGN                           | DSE          | CALL SIGN               | DSE         | CALL SIGN                | DSE      | CALL SIGN        | DSE                | of               |
|                                     |              |                         |             |                          |          |                  |                    | Base Rate Fee    |
|                                     |              |                         |             |                          |          |                  |                    | and              |
|                                     |              |                         |             |                          |          |                  |                    | Syndicated       |
|                                     | <b></b>      |                         |             |                          |          |                  |                    | Exclusivity      |
|                                     | †····        |                         |             |                          |          |                  |                    | Surcharge        |
|                                     | <del></del>  |                         |             |                          |          |                  |                    | for              |
|                                     | <del> </del> |                         |             |                          |          |                  |                    | Partially        |
|                                     | <del> </del> |                         |             |                          |          |                  |                    | Distant          |
|                                     | <b></b>      |                         |             |                          | <b></b>  |                  |                    | Stations         |
|                                     | <b></b>      |                         |             |                          | <b></b>  |                  |                    | Stations         |
|                                     | ł            |                         |             |                          |          |                  |                    |                  |
|                                     | <b></b>      |                         |             |                          | <b></b>  |                  | ļ                  |                  |
|                                     | <b></b>      |                         |             |                          | <b></b>  |                  |                    |                  |
|                                     | <b></b>      |                         |             |                          | <b></b>  |                  |                    |                  |
|                                     |              |                         |             |                          |          |                  |                    |                  |
|                                     |              |                         |             |                          |          |                  |                    |                  |
| Total DSEs                          |              | -                       | 0.00        | Total DSEs               |          |                  | 0.00               |                  |
| Gross Receipts First Gro            | oup          | \$                      | 0.00        | Gross Receipts Second    | d Group  | \$               | 0.00               |                  |
| Base Rate Fee First Gro             | oup          | \$                      | 0.00        | Base Rate Fee Second     | d Group  | \$               | 0.00               |                  |
| NIN                                 | ITEENTH      | SUBSCRIBER GROU         | Р           | TV                       | VENTIETH | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA                     |              |                         | 0           | COMMUNITY/ AREA          |          |                  | 0                  |                  |
| CALL SIGN                           | DSE          | CALL SIGN               | DSE         | CALL SIGN                | DSE      | CALL SIGN        | DSE                |                  |
|                                     |              |                         |             |                          |          |                  |                    |                  |
|                                     |              |                         |             |                          |          |                  |                    |                  |
|                                     |              |                         |             |                          |          |                  |                    |                  |
|                                     |              |                         |             |                          |          |                  |                    |                  |
|                                     |              |                         |             |                          |          |                  |                    |                  |
|                                     |              |                         |             |                          |          |                  |                    |                  |
|                                     |              |                         |             |                          |          |                  |                    |                  |
|                                     | <b>†</b>     |                         |             |                          |          |                  |                    |                  |
|                                     | 1            |                         |             |                          |          |                  |                    |                  |
|                                     | <b>[</b>     |                         |             |                          |          |                  |                    |                  |
|                                     | <b>†</b>     |                         |             |                          |          |                  |                    |                  |
|                                     | <b>†</b>     |                         |             |                          |          |                  |                    |                  |
|                                     | †            |                         |             |                          |          |                  |                    |                  |
|                                     | †·····       |                         |             |                          |          |                  |                    |                  |
|                                     |              |                         |             |                          |          |                  |                    |                  |
| Total DSEs                          |              |                         | 0.00        | Total DSEs               |          |                  | 0.00               |                  |
| Gross Receipts Third Gr             | OUD          | <u></u> -               | 0.00        | Gross Receipts Fourth    | Group    | <u> </u>         | 0.00               |                  |
| TOTOS NECEIPIS TIIIU GI             | oup          | <u>\$</u>               | <u> </u>    | Oross Necelpts Foultil   | Эгоар    | \$               | 3.00               |                  |
| Base Rate Fee Third Gr              | oup          | \$                      | 0.00        | Base Rate Fee Fourth     | Group    | \$               | 0.00               |                  |
| Base Rate Fee: Add the              | base rate    | e fees for each subscri | ber group a | as shown in the boxes ab | ove.     |                  |                    |                  |
| Enter here and in block 3           |              |                         | - •         |                          |          | \$               |                    |                  |

| LEGAL NAME OF OWNER CABLE ONE, INC. | R OF CABLE  | E SYSTEM:       |             |                          |             | S               | YSTEM ID#<br>007417 | Name             |
|-------------------------------------|-------------|-----------------|-------------|--------------------------|-------------|-----------------|---------------------|------------------|
|                                     |             |                 |             | ATE FEES FOR EACH        |             |                 |                     |                  |
| TWEN                                | ITY-FIRST   | SUBSCRIBER GROU | IP <b>0</b> | COMMUNITY/ AREA          | Y-SECOND    | SUBSCRIBER GROU | P <b>0</b>          | 9                |
| CALL SIGN                           | DSE         | CALL SIGN       | DSE         | CALL SIGN                | DSE         | CALL SIGN       | DSE                 | Computation of   |
| GALL GIGIN                          | DOL         | CALL GIGIN      | DOL         | CALL GIOIN               | DOL         | CALL SIGIV      | DOL                 | Base Rate Fee    |
|                                     |             |                 |             |                          |             |                 |                     | and              |
|                                     |             |                 |             |                          |             |                 |                     | Syndicated       |
|                                     |             |                 |             |                          |             |                 |                     | Exclusivity      |
|                                     |             |                 |             |                          |             |                 |                     | Surcharge<br>for |
|                                     |             |                 |             |                          | ···         |                 |                     | Partially        |
|                                     |             |                 |             |                          |             |                 |                     | Distant          |
|                                     |             |                 |             |                          |             |                 |                     | Stations         |
|                                     |             |                 | <u> </u>    |                          |             |                 |                     |                  |
|                                     |             |                 | <b></b>     |                          |             |                 |                     |                  |
|                                     |             |                 |             |                          |             | H               |                     |                  |
|                                     |             |                 |             |                          |             |                 |                     |                  |
|                                     |             |                 |             |                          |             |                 |                     |                  |
| Total DSEs                          |             |                 | 0.00        | Total DSEs               |             |                 | 0.00                |                  |
| Gross Receipts First Gr             | oup         | \$              | 0.00        | Gross Receipts Secon     | nd Group    | \$              | 0.00                |                  |
| •                                   | ·           |                 |             | •                        | ·           |                 |                     |                  |
| Base Rate Fee First Gr              | oup         | \$              | 0.00        | Base Rate Fee Secon      | nd Group    | \$              | 0.00                |                  |
| TWEN                                | TY-THIRD    | SUBSCRIBER GROU | IP          | TWENT                    | Y-FOURTH    | SUBSCRIBER GROU | Р                   |                  |
| COMMUNITY/ AREA                     |             |                 | 0           | COMMUNITY/ AREA          |             |                 | 0                   |                  |
| CALL SIGN                           | DSE         | CALL SIGN       | DSE         | CALL SIGN                | DSE         | CALL SIGN       | DSE                 |                  |
|                                     |             |                 |             |                          |             |                 |                     |                  |
|                                     |             |                 |             |                          | ····        |                 |                     |                  |
|                                     |             |                 |             |                          | ···         |                 |                     |                  |
|                                     |             |                 |             |                          |             |                 |                     |                  |
|                                     |             |                 |             |                          |             |                 |                     |                  |
|                                     |             |                 |             |                          |             |                 |                     |                  |
|                                     |             |                 | <b></b>     |                          |             | H               |                     |                  |
|                                     | <b>-</b>    |                 |             |                          |             | H               |                     |                  |
|                                     |             |                 |             |                          |             |                 |                     |                  |
|                                     |             |                 |             |                          |             |                 |                     |                  |
|                                     |             |                 | ļ           |                          |             |                 |                     |                  |
|                                     |             |                 |             |                          | <del></del> |                 |                     |                  |
| Total DSEs                          |             |                 | 0.00        | Total DSEs               |             |                 | 0.00                |                  |
| Gross Receipts Third G              | roup        | \$              | 0.00        | Gross Receipts Fourth    | n Group     | \$              | 0.00                |                  |
| ,                                   | •           |                 |             |                          | •           |                 |                     |                  |
| Base Rate Fee Third G               | roup        | \$              | 0.00        | Base Rate Fee Fourth     | n Group     | \$              | 0.00                |                  |
| Paca Pata Fac: Add th               | o basa rata | for each subser | ibor group  | as shown in the boxes al | hove        |                 |                     |                  |
| Enter here and in block             |             |                 | inei Aionb  | as shown in the boxes al | JUVE.       | \$              |                     |                  |
|                                     |             |                 |             |                          |             |                 |                     |                  |

| LEGAL NAME OF OWNER CABLE ONE, INC.              | OF CABLE | SYSTEM:         |             |                          |           | SY               | STEM ID#<br>007417 | Name             |
|--|----------|-----------------|-------------|--------------------------|-----------|------------------|--------------------|------------------|
| В  | LOCK A:  | COMPUTATION OF  | BASE RA     | TE FEES FOR EACH         | SUBSCRI   | BER GROUP        |                    |                  |
| TWEN   | TY-FIFTH | SUBSCRIBER GROU | Р           | TWEN                     | NTY-SIXTH | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA                                  |          |                 | 0           | COMMUNITY/ AREA          |           |                  | 0                  | 9<br>Computation |
| CALL SIGN  | DSE      | CALL SIGN       | DSE         | CALL SIGN                | DSE       | CALL SIGN        | DSE                | of               |
|  |          |                 |             |                          |           |                  |                    | Base Rate Fee    |
|  |          |                 |             |                          |           |                  |                    | and              |
|  |          |                 |             |                          |           |                  |                    | Syndicated       |
|  |          |                 |             |                          |           |                  |                    | Exclusivity      |
|  |          |                 |             |                          |           |                  |                    | Surcharge        |
|  |          |                 |             |                          |           |                  |                    | for              |
|  |          |                 |             |                          |           | L                |                    | Partially        |
|  |          |                 |             |                          |           |                  |                    | Distant          |
|  |          |                 |             |                          | <b></b>   |                  |                    | Stations         |
|  |          |                 |             |                          | <b></b>   |                  |                    | Stations         |
|  |          |                 |             |                          |           |                  |                    |                  |
|  | <b></b>  |                 |             |                          | <b></b>   |                  |                    |                  |
|  | <b></b>  |                 |             |                          |           |                  |                    |                  |
|  | <b> </b> |                 | ļ           |                          |           |                  |                    |                  |
|  |          |                 |             |                          |           |                  |                    |                  |
|  |          |                 |             |                          |           |                  |                    |                  |
| Total DSEs                                       |          |                 | 0.00        | Total DSEs               |           | _                | 0.00               |                  |
| Gross Receipts First Gro                         | oup      | \$              | 0.00        | Gross Receipts Second    | d Group   | \$               | 0.00               |                  |
| Base Rate Fee First Gro                          | oup      | \$              | 0.00        | Base Rate Fee Second     | d Group   | \$               | 0.00               |                  |
| TWENTY-S   | EVENTH   | SUBSCRIBER GROU | Р           | TWENT                    | Y-EIGHTH  | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA                                  |          |                 | 0           | COMMUNITY/ AREA          |           |                  | 0                  |                  |
| CALL SIGN  | DSE      | CALL SIGN       | DSE         | CALL SIGN                | DSE       | CALL SIGN        | DSE                |                  |
|  |          |                 |             |                          |           |                  |                    |                  |
|  |          |                 |             |                          |           |                  |                    |                  |
|  |          |                 |             |                          |           |                  |                    |                  |
|  |          |                 |             |                          |           |                  |                    |                  |
|  |          |                 |             |                          |           |                  |                    |                  |
|  |          |                 |             |                          |           |                  |                    |                  |
|  |          |                 |             |                          |           |                  |                    |                  |
|  |          |                 |             |                          |           |                  |                    |                  |
|  |          |                 |             |                          |           |                  |                    |                  |
|  |          |                 |             |                          |           |                  |                    |                  |
|  | T        |                 |             |                          |           |                  |                    |                  |
|  |          |                 |             |                          |           |                  |                    |                  |
|  |          |                 |             |                          |           |                  |                    |                  |
|  | [        |                 |             |                          |           |                  |                    |                  |
|  |          |                 |             |                          |           |                  |                    |                  |
| 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               |                  |
| Page Bate Face Add II                            | hace === | food for each   | hor ere     | on about in the barrens. | 010       |                  |                    |                  |
| Base Rate Fee: Add the Enter here and in block 3 |          |                 | nei group a | as Shown in the doxes ad | ove.      | \$               |                    |                  |

|                    |              |                 | A. I.E :             |   |              |                 |           |   |
|--------------------|--------------|-----------------|----------------------|---|--------------|-----------------|-----------|---|
|                    | ID           |                 |                      | TE FEES FOR EACH                              |              |                 |           |   |
| 9                  | )P<br>0      | SUBSCRIBER GROU | INKIEIH              | COMMUNITY/ AREA                               | <u>0</u>     | SUBSCRIBER GROU | NIY-NINIH | I WEN                                       |
| Computa            |              |                 |                      | COMMONTI I/ AREA                              | <u> </u>     |                 |           | COMMUNITY AREA                              |
| of                 | DSE          | CALL SIGN       | DSE                  | CALL SIGN                                     | DSE          | CALL SIGN       | DSE       | CALL SIGN                                   |
| Base Rate          |              |                 |                      |   |              |                 |           |   |
| and                |              |                 |                      |   |              |                 |           |   |
| Syndica            |              |                 |                      |   |              |                 |           |   |
| Exclusiv           |              |                 |                      |   |              |                 |           |   |
| Surchar            |              |                 |                      |   |              |                 |           |   |
| for                |              |                 |                      |   |              |                 |           |   |
| Partiali<br>Distan |              |                 | <u></u>              |   | <del></del>  |                 |           |   |
| Station            |              |                 |                      |   | ····         |                 |           |   |
|                    |              |                 |                      |   | ••••         |                 |           |   |
|                    |              |                 |                      |   |              |                 |           |   |
|                    |              |                 |                      |   |              |                 |           |   |
|                    |              |                 | <b>_</b>             |   |              |                 |           |   |
|                    |              |                 | <b></b>              |   |              |                 |           |   |
|                    |              | Ш               | <b>L</b>             |   |              |                 |           |   |
|                    | 0.00         |                 |                      | Total DSEs                                    | 0.00         |                 |           | otal DSEs                                   |
|                    | 0.00         | \$              | d Group              | Gross Receipts Secon                          | 0.00         | \$              | Group     | ross Receipts First G                       |
|                    |              |                 |                      |   |              |                 |           |   |
|                    | 0.00         | \$              |                      |   | 0.00         |                 |           |   |
|                    | 0.00         | Ψ               | d Group              | Base Rate Fee Secon                           | 0.00         | \$              | Group     | ase Rate Fee First G                        |
|                    |              |                 |                      |   | '            | \$              |           |   |
|                    | JP           | SUBSCRIBER GROU |                      | THIRT   | UP           | SUBSCRIBER GROU |           | THIE  |
|                    |              |                 |                      |   | '            | -               |           | THIE  |
|                    | JP <b>0</b>  | SUBSCRIBER GROU | /-SECOND             | THIRT'  | UP <b>0</b>  | SUBSCRIBER GROU | RTY-FIRST | THIF  |
|                    | JP           |                 |                      | THIRT   | UP           | -               |           | THIF<br>OMMUNITY/ AREA                      |
|                    | JP <b>0</b>  | SUBSCRIBER GROU | /-SECOND             | THIRT'  | UP <b>0</b>  | SUBSCRIBER GROU | RTY-FIRST | THIF<br>OMMUNITY/ AREA                      |
|                    | JP <b>0</b>  | SUBSCRIBER GROU | /-SECOND             | THIRT'  | UP <b>0</b>  | SUBSCRIBER GROU | RTY-FIRST | THIF<br>OMMUNITY/ AREA                      |
|                    | JP <b>0</b>  | SUBSCRIBER GROU | /-SECOND             | THIRT'  | UP <b>0</b>  | SUBSCRIBER GROU | RTY-FIRST | THIF<br>OMMUNITY/ AREA                      |
|                    | JP <b>0</b>  | SUBSCRIBER GROU | /-SECOND             | THIRT'  | UP <b>0</b>  | SUBSCRIBER GROU | RTY-FIRST | THIF<br>OMMUNITY/ AREA                      |
|                    | JP <b>0</b>  | SUBSCRIBER GROU | /-SECOND             | THIRT'  | UP <b>0</b>  | SUBSCRIBER GROU | RTY-FIRST | THIF<br>OMMUNITY/ AREA                      |
|                    | JP <b>0</b>  | SUBSCRIBER GROU | /-SECOND             | THIRT'  | UP <b>0</b>  | SUBSCRIBER GROU | RTY-FIRST | THIF<br>OMMUNITY/ AREA                      |
|                    | JP <b>0</b>  | SUBSCRIBER GROU | /-SECOND             | THIRT'  | UP <b>0</b>  | SUBSCRIBER GROU | RTY-FIRST | THIF  |
|                    | JP <b>0</b>  | SUBSCRIBER GROU | /-SECOND             | THIRT'  | UP <b>0</b>  | SUBSCRIBER GROU | RTY-FIRST | THIF<br>OMMUNITY/ AREA                      |
|                    | JP <b>0</b>  | SUBSCRIBER GROU | /-SECOND             | THIRT'  | UP <b>0</b>  | SUBSCRIBER GROU | RTY-FIRST | THIF  |
|                    | JP <b>0</b>  | SUBSCRIBER GROU | /-SECOND             | THIRT'  | UP <b>0</b>  | SUBSCRIBER GROU | RTY-FIRST | THIE  |
|                    | JP <b>0</b>  | SUBSCRIBER GROU | /-SECOND             | THIRT'  | UP <b>0</b>  | SUBSCRIBER GROU | RTY-FIRST | THIF<br>COMMUNITY/ AREA                     |
|                    | JP <b>0</b>  | SUBSCRIBER GROU | /-SECOND             | THIRT'  | UP <b>0</b>  | SUBSCRIBER GROU | RTY-FIRST | THIF  |
|                    | JP <b>0</b>  | SUBSCRIBER GROU | /-SECOND             | THIRT'  | UP <b>0</b>  | SUBSCRIBER GROU | RTY-FIRST | THIF<br>OMMUNITY/ AREA                      |
|                    | JP <b>0</b>  | SUBSCRIBER GROU | /-SECOND             | THIRT'  | UP <b>0</b>  | SUBSCRIBER GROU | RTY-FIRST | THIE<br>COMMUNITY/ AREA<br>CALL SIGN        |
|                    | DSE          | SUBSCRIBER GROU | DSE                  | THIRT' COMMUNITY/ AREA  CALL SIGN  Total DSEs | DSE          | SUBSCRIBER GROU | DSE DSE   | THIF OMMUNITY/ AREA  CALL SIGN  otal DSEs   |
|                    | DSE DSE D.00 | SUBSCRIBER GROU | DSE                  | THIRT' COMMUNITY/ AREA  CALL SIGN             | DSE DSE O.00 | SUBSCRIBER GROU | DSE DSE   | THIE COMMUNITY/ AREA  CALL SIGN  Fotal DSEs |
|                    | DSE DSE D.00 | SUBSCRIBER GROU | /-SECOND  DSE  Group | THIRT' COMMUNITY/ AREA  CALL SIGN  Total DSEs | DSE DSE O.00 | SUBSCRIBER GROU | BTY-FIRST | COMMUNITY/ AREA                             |

|                         |         |                |      | ATE FEES FOR EACH SUBSCRIBER GROUP  THIRTY-FOURTH SUBSCRIBER GROUP |             |                 |          |                 |
|-------------------------|---------|----------------|------|--|-------------|-----------------|----------|-----------------|
|                         | Y-THIRD | SUBSCRIBER GRO |      |  | UP <b>0</b> | 9               |          |                 |
| COMMUNITY/ AREA         |         |                | 0    | COMMUNITY/ AREA  |             |                 | U        | Computa         |
| CALL SIGN               | DSE     | CALL SIGN      | DSE  | CALL SIGN  | DSE         | CALL SIGN       | DSE      | of              |
|                         |         |                |      |  |             |                 |          | Base Rate       |
|                         |         |                |      |  |             |                 |          | and             |
|                         |         |                |      |  |             |                 |          | Syndicat        |
|                         |         |                |      |  |             |                 |          | Exclusiv        |
|                         |         |                |      |  |             |                 |          | Surchar         |
|                         |         |                |      | -  |             |                 |          | for<br>Partiall |
|                         |         |                |      | -  |             |                 |          | Distan          |
|                         |         |                |      |  |             |                 |          | Station         |
|                         |         |                | •••• |  |             | -               |          |                 |
|                         |         |                |      |  |             |                 |          |                 |
|                         |         |                |      |  |             |                 |          |                 |
|                         |         |                |      |  |             |                 |          |                 |
|                         |         |                |      |  |             |                 |          |                 |
|                         |         |                |      |  |             | Ш               |          |                 |
| otal DSEs               |         |                | 0.00 | Total DSEs   |             |                 | 0.00     |                 |
| ross Receipts First Gro | up      | \$             | 0.00 | Gross Receipts Seco  | nd Group    | \$              | 0.00     |                 |
|                         |         |                |      |  |             |                 |          |                 |
| ase Rate Fee First Gro  | aL      | \$             | 0.00 | Base Rate Fee Seco   | nd Group    | \$              | 0.00     |                 |
|                         |         |                |      |  |             | 1               | <u>'</u> |                 |
| THIRT                   | Y-FIFTH | SUBSCRIBER GRO | UP   | Th   | HIRTY-SIXTH | SUBSCRIBER GROU | UP       |                 |
| OMMUNITY/ AREA          |         |                | 0    | COMMUNITY/ AREA  |             |                 | 0        |                 |
|                         |         |                |      |  |             |                 |          |                 |
|                         |         |                |      |  |             |                 |          |                 |
| CALL SIGN               | DSE     | CALL SIGN      | DSE  | CALL SIGN  | DSE         | CALL SIGN       | DSE      |                 |
| CALL SIGN               | DSE     | CALL SIGN      | DSE  | CALL SIGN  |             | CALL SIGN       |          |                 |
| CALL SIGN               | DSE     | CALL SIGN      | DSE  | CALL SIGN  |             | CALL SIGN       |          |                 |
| CALL SIGN               | DSE     | CALL SIGN      | DSE  | CALL SIGN  |             | CALL SIGN       |          |                 |
| CALL SIGN               | DSE     | CALL SIGN      | DSE  | CALL SIGN  |             | CALL SIGN       |          |                 |
| CALL SIGN               | DSE     | CALL SIGN      | DSE  | CALL SIGN  |             | CALL SIGN       |          |                 |
| CALL SIGN               | DSE     | CALL SIGN      | DSE  | CALL SIGN  |             | CALL SIGN       |          |                 |
| CALL SIGN               | DSE     | CALL SIGN      | DSE  | CALL SIGN  |             | CALL SIGN       |          |                 |
| CALL SIGN               | DSE     | CALL SIGN      | DSE  | CALL SIGN  |             | CALL SIGN       |          |                 |
| CALL SIGN               | DSE     | CALL SIGN      | DSE  | CALL SIGN  |             | CALL SIGN       |          |                 |
| CALL SIGN               | DSE     | CALL SIGN      | DSE  | CALL SIGN  |             | CALL SIGN       |          |                 |
| CALL SIGN               | DSE     | CALL SIGN      | DSE  | CALL SIGN  |             | CALL SIGN       |          |                 |
| CALL SIGN               | DSE     | CALL SIGN      | DSE  | CALL SIGN  |             | CALL SIGN       |          |                 |
| CALL SIGN               | DSE     | CALL SIGN      | DSE  | CALL SIGN  |             | CALL SIGN       |          |                 |
|                         | DSE     | CALL SIGN      |      |  |             | CALL SIGN       | DSE      |                 |
| otal DSEs               |         | CALL SIGN      | 0.00 | Total DSEs   | DSE         |                 | DSE      |                 |
| otal DSEs               |         | CALL SIGN      |      |  | DSE         | CALL SIGN       | DSE      |                 |
| CALL SIGN               |         | CALL SIGN      | 0.00 | Total DSEs   | DSE         |                 | DSE      |                 |
| Fotal DSEs              | pup     | CALL SIGN      | 0.00 | Total DSEs   | DSE         |                 | DSE      |                 |
| otal DSEs               | pup     | \$             | 0.00 | Total DSEs Gross Receipts Four                                     | DSE         | \$              | DSE      |                 |

| CABLE ONE, INC.                                | R OF CABLE | SYSTEM:         |  |                         |          | S               | 007417 | Name                 |
|--|------------|-----------------|--|-------------------------|----------|-----------------|--------|----------------------|
|  | BLOCK A:   | COMPUTATION OF  | BASE RA                                | ATE FEES FOR EACH       | H SUBSCR | BER GROUP       |        |                      |
|  | SEVENTH    | SUBSCRIBER GROU | JP                                     | ii e                    |          | SUBSCRIBER GROU | IP     | Ω                    |
| COMMUNITY/ AREA                                |            |                 | 0                                      | COMMUNITY/ AREA         |          |                 | 0      | <b>9</b> Computation |
| CALL SIGN                                      | DSE        | CALL SIGN       | DSE                                    | CALL SIGN               | DSE      | CALL SIGN       | DSE    | of                   |
|  |            |                 |  |                         |          |                 |        | Base Rate Fee        |
|  |            |                 |  |                         |          |                 |        | and                  |
|  |            |                 |  |                         |          |                 |        | Syndicated           |
|  |            |                 |  |                         |          |                 |        | Exclusivity          |
|  |            |                 |  |                         |          |                 |        | Surcharge            |
|  |            |                 |  |                         |          |                 |        | for                  |
|  | ····       |                 | ······································ |                         |          |                 |        | Partially<br>Distant |
|  |            |                 |  |                         |          |                 |        | Stations             |
|  |            |                 |  |                         |          |                 |        |                      |
|  |            |                 |  |                         |          |                 |        |                      |
|  |            |                 |  |                         |          |                 |        |                      |
|  |            |                 |  |                         |          |                 |        |                      |
|  |            |                 |  |                         |          |                 |        |                      |
|  |            |                 | <u> </u>                               |                         |          |                 |        |                      |
| Total DSEs                                     |            |                 | 0.00                                   | Total DSEs              |          |                 | 0.00   |                      |
| Gross Receipts First G                         | roup       | \$              | 0.00                                   | Gross Receipts Seco     | nd Group | \$              | 0.00   |                      |
|  |            |                 |  |                         |          |                 |        |                      |
| Base Rate Fee First G                          | roup       | \$              | 0.00                                   | Base Rate Fee Seco      | nd Group | \$              | 0.00   |                      |
| THIR   | RTY-NINTH  | SUBSCRIBER GROU | JP                                     |                         | FORTIETH | SUBSCRIBER GROU | IP     |                      |
| COMMUNITY/ AREA                                |            |                 | 0                                      | COMMUNITY/ AREA         |          |                 | 0      |                      |
| CALL SIGN                                      | DSE        | CALL SIGN       | DSE                                    | CALL SIGN               | DSE      | CALL SIGN       | DSE    |                      |
|  |            |                 |  |                         |          |                 |        |                      |
|  |            |                 |  |                         |          |                 |        |                      |
|  |            |                 |  |                         |          |                 |        |                      |
|  |            |                 |  |                         |          |                 |        |                      |
|  |            |                 |  |                         |          |                 |        |                      |
|  |            |                 |  |                         |          |                 |        |                      |
|  |            |                 |  |                         |          |                 |        |                      |
|  |            |                 |  |                         |          |                 |        |                      |
|  |            |                 |  |                         |          |                 |        |                      |
|  | <u> </u>   |                 |  |                         |          |                 |        |                      |
|  |            |                 | ·                                      |                         |          | -               |        |                      |
|  |            |                 | ·                                      |                         |          |                 |        |                      |
|  |            |                 | 1                                      |                         |          |                 |        |                      |
| Total DSEs                                     |            |                 | 0.00                                   | Total DSEs              |          |                 | 0.00   |                      |
| Gross Receipts Third G                         | Group      | \$              | 0.00                                   | Gross Receipts Fourt    | h Group  | \$              | 0.00   |                      |
|  |            |                 |  |                         | •        |                 |        |                      |
| Base Rate Fee Third G                          | Group      | \$              | 0.00                                   | Base Rate Fee Fourt     | h Group  | \$              | 0.00   |                      |
|  |            |                 |  | Ш                       |          |                 |        |                      |
| Base Rate Fee: Add the Enter here and in block |            |                 | riber group                            | as shown in the boxes a | bove.    | s               |        |                      |
|  | . J, I, J  | L (page 1)      |  |                         |          | 7               |        |                      |

| CABLE ONE, INC.                                  | OF CABLE | SYSTEM:         |             |   |          | SY               | STEM ID#<br>007417 | Name             |
|--|----------|-----------------|-------------|---|----------|------------------|--------------------|------------------|
| В  | LOCK A:  | COMPUTATION OF  | BASE RA     | TE FEES FOR EACH  | SUBSCRI  | BER GROUP        |                    |                  |
|  |          | SUBSCRIBER GROU |             | TI CONTRACTOR OF THE PROPERTY |          | SUBSCRIBER GROUP |                    | _                |
| COMMUNITY/ AREA                                  |          |                 | 0           | COMMUNITY/ AREA   |          |                  | 0                  | 9<br>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         |
|  |          |                 |             |   |          | =                |                    |                  |
|  |          |                 |             |   |          |                  |                    |                  |
|  |          |                 |             |   |          |                  |                    |                  |
|  | <b>†</b> |                 | ļ           |   |          |                  |                    |                  |
|  |          |                 |             |   |          |                  |                    |                  |
|  |          |                 |             |   |          |                  |                    |                  |
| Total DSEs                                       | <u> </u> | !               | 0.00        | Total DSEs  | ļ        |                  | 0.00               |                  |
| Gross Receipts First Gro                         | oup      | \$              | 0.00        | Gross Receipts Second   | d Group  | \$               | 0.00               |                  |
|  |          |                 |             |   |          |                  |                    |                  |
| Base Rate Fee First Gro                          |          | \$              | 0.00        | Base Rate Fee Second  |          | \$               | 0.00               |                  |
| FORT   | Y-THIRD  | SUBSCRIBER GROU | Р           | FORT  | Y-FOURTH | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA                                  |          |                 | 0           | COMMUNITY/ AREA   |          |                  | 0                  |                  |
| CALL SIGN  | DSE      | CALL SIGN       | DSE         | CALL SIGN   | DSE      | CALL SIGN        | DSE                |                  |
|  |          |                 |             |   |          |                  |                    |                  |
|  |          |                 |             |   |          |                  |                    |                  |
|  |          |                 |             |   |          |                  |                    |                  |
|  |          |                 |             |   |          |                  |                    |                  |
|  |          |                 |             |   |          |                  |                    |                  |
|  |          |                 |             |   |          |                  |                    |                  |
|  |          |                 |             |   |          |                  |                    |                  |
| -  | [        |                 |             |   |          |                  |                    |                  |
|  | ļ        |                 |             |   |          |                  |                    |                  |
|  | <u> </u> |                 |             |   |          |                  |                    |                  |
|  | <u> </u> |                 | <b></b>     |   |          |                  |                    |                  |
|  | <u> </u> |                 |             |   |          |                  |                    |                  |
|  | <u> </u> |                 |             |   |          |                  |                    |                  |
|  | <b></b>  |                 |             |   | <u> </u> |                  |                    |                  |
|  |          |                 |             |   |          |                  |                    |                  |
| 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               |                  |
|  |          |                 |             | II  |          |                  |                    |                  |
| Base Rate Fee: Add the Enter here and in block 3 |          |                 | ber group a | as shown in the boxes ab  | ove.     | s                |                    |                  |
|  |          | ,               |             |   |          |                  |                    |                  |

| LEGAL NAME OF OWNER CABLE ONE, INC. | OF CABLE  | SYSTEM:                 |             |                           |           | SYS              | STEM ID#<br>007417 | Name             |
|-------------------------------------|-----------|-------------------------|-------------|---------------------------|-----------|------------------|--------------------|------------------|
| В                                   | LOCK A:   | COMPUTATION OF          | BASE RA     | TE FEES FOR EACH          | SUBSCRI   | BER GROUP        |                    | ·                |
| FOR                                 | TY-FIFTH  | SUBSCRIBER GROU         | Р           | FOF                       | RTY-SIXTH | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA                     |           |                         | 0           | COMMUNITY/ AREA           |           |                  | 0                  | 9<br>Computation |
| CALL SIGN                           | DSE       | CALL SIGN               | DSE         | CALL SIGN                 | DSE       | CALL SIGN        | DSE                | of               |
|                                     |           |                         |             |                           |           |                  |                    | Base Rate Fee    |
|                                     |           |                         |             |                           |           |                  |                    | and              |
|                                     |           |                         |             |                           |           |                  |                    | Syndicated       |
|                                     |           |                         |             |                           |           | <del> </del>     |                    | Exclusivity      |
|                                     |           |                         |             |                           |           |                  |                    | Surcharge        |
|                                     |           |                         |             |                           |           |                  |                    | for              |
|                                     |           |                         |             |                           |           |                  |                    | Partially        |
|                                     |           |                         |             |                           | <b></b>   |                  |                    | -                |
|                                     |           |                         |             |                           |           |                  |                    | Distant          |
|                                     |           |                         |             |                           |           |                  |                    | Stations         |
|                                     |           |                         |             |                           | <b></b>   |                  |                    |                  |
|                                     | <b> </b>  |                         |             |                           | ļ         |                  |                    |                  |
|                                     | <b> </b>  |                         |             |                           |           |                  |                    |                  |
|                                     | <b> </b>  |                         |             |                           |           |                  |                    |                  |
|                                     |           |                         |             |                           |           |                  |                    |                  |
|                                     |           |                         |             |                           |           |                  |                    |                  |
| Total DSEs                          |           |                         | 0.00        | Total DSEs                |           |                  | 0.00               |                  |
| Gross Receipts First Gro            | oup       | \$                      | 0.00        | Gross Receipts Second     | d Group   | \$               | 0.00               |                  |
| Base Rate Fee First Gro             | oup       | \$                      | 0.00        | Base Rate Fee Second      | d Group   | \$               | 0.00               |                  |
| FORTY-S                             | EVENTH    | SUBSCRIBER GROU         | Р           | FORT                      | Y-EIGHTH  | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA                     |           |                         | 0           | COMMUNITY/ AREA           |           |                  | 0                  |                  |
| CALL SIGN                           | DSE       | CALL SIGN               | DSE         | CALL SIGN                 | DSE       | CALL SIGN        | DSE                |                  |
|                                     |           |                         |             |                           |           |                  |                    |                  |
|                                     |           |                         |             |                           |           |                  |                    |                  |
|                                     |           |                         |             |                           |           |                  |                    |                  |
|                                     |           |                         |             |                           |           |                  |                    |                  |
|                                     |           |                         |             |                           |           |                  |                    |                  |
|                                     |           |                         |             |                           |           |                  |                    |                  |
|                                     |           |                         |             |                           |           |                  |                    |                  |
|                                     |           |                         |             |                           |           |                  |                    |                  |
|                                     |           |                         |             |                           |           |                  |                    |                  |
|                                     |           |                         |             |                           |           |                  |                    |                  |
|                                     | <b>†</b>  |                         |             |                           |           |                  |                    |                  |
|                                     |           |                         |             |                           |           |                  |                    |                  |
|                                     | <b> </b>  |                         |             |                           |           |                  |                    |                  |
|                                     | †         |                         |             |                           |           |                  |                    |                  |
|                                     |           |                         |             |                           |           |                  |                    |                  |
| Total DSEs                          |           |                         | 0.00        | Total DSEs                | 1         |                  | 0.00               |                  |
| Gross Receipts Third Gr             | oun       | <u></u> -               | 0.00        | Gross Receipts Fourth     | Group     | \$               | 0.00               |                  |
| TOTOSS NECEIPIS THIII GI            | oup       | <u>\$</u>               |             | O.033 Neocipis i ouitii   | Огоир     | •                |                    |                  |
| Base Rate Fee Third Gr              | oup       | \$                      | 0.00        | Base Rate Fee Fourth      | Group     | \$               | 0.00               |                  |
| Base Rate Fee: Add the              | base rate | e fees for each subscri | ber aroup s | as shown in the boxes abo | ove.      |                  |                    |                  |
| Enter here and in block 3           |           |                         | gup t       |                           |           | \$               |                    |                  |

| Base Rate and Syndica Exclusive Surchar for Partial Distar Station  0.00 Total DSEs 0.00 Gross Receipts Second Group  0.00 Base Rate Fee Second Group \$ 0.00  CCRIBER GROUP FIFTY-SECOND SUBSCRIBER GROUP 0 COMMUNITY/ AREA 0   |           | 1    |                  |                |                                  |                 |                 |                 |                                      |
|--|-----------|------|------------------|----------------|----------------------------------|-----------------|-----------------|-----------------|--------------------------------------|
| COMMUNITY/AREA   |           | D    | II               |                |                                  |                 |                 |                 |                                      |
| Compute of Base Rate Fee Second Group  O.00  O.00  Base Rate Fee Second Group  COMMUNITY/ AREA  O  COMMUNITY/ AREA  Compute  Comp | 9         |      | SUBSURIBER GROUP | COMMUNITY/AREA |                                  | SUBSURIBER GROU | I Y-ININ I H    | COMMUNITY/ AREA |                                      |
| of Base Rate    CALL SIGN   DSE   CALL SIGN   DSE  | _         |      |                  |                | COMMONT IT AIRLA                 |                 |                 |                 | JOMMONT IT AREA                      |
| and Syndical Exclusive Surchart for Partial Distant Station  O.00 Total DSES O.00  Gross Receipts Second Group \$ 0.00  O.00 Base Rate Fee Second Group \$ 0.00  COMMUNITY/ AREA O  COMMUNITY/ AREA O  LL SIGN DSE CALL SIGN DSE CALL SIGN DSE  LL SIGN DSE CALL SIGN DSE CALL SIGN DSE  |           | DSE  | CALL SIGN        | DSE            | CALL SIGN                        | DSE             | CALL SIGN       | DSE             | CALL SIGN                            |
| Syndical Exclusion Surchar for Partial Distant Station   | Base Rate |      |                  |                |                                  |                 |                 |                 |                                      |
| D.00  O.00  O.00  D.00   | and       |      |                  |                |                                  |                 |                 |                 |                                      |
| Surchar for Partiall Distan Station  0.00  | Syndicat  |      | _                |                |                                  |                 |                 |                 |                                      |
| Total DSEs  O.00  O.00  Base Rate Fee Second Group  O.00  COMMUNITY/ AREA  O  CALL SIGN  DSE   | Exclusiv  |      | _                |                |                                  |                 |                 |                 |                                      |
| Double Community Area Occurrence of Call Sign Described  |           |      |                  |                |                                  |                 |                 |                 |                                      |
| Distant Station  0.00  Total DSEs  0.00  Gross Receipts Second Group  0.00  Base Rate Fee Second Group  FIFTY-SECOND SUBSCRIBER GROUP  COMMUNITY/ AREA  0  LL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  |           |      |                  |                |                                  |                 |                 |                 |                                      |
| O.00 O.00 O.00 O.00 Base Rate Fee Second Group OCRIBER GROUP COMMUNITY/ AREA OCCUMUNITY/ AR |           |      |                  |                |                                  |                 |                 |                 |                                      |
| 0.00   |           | ···· |                  |                |                                  |                 | <del> </del>    |                 |                                      |
| 0.00 Base Rate Fee Second Group FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE  |           |      |                  |                |                                  |                 | <b>+</b>        |                 |                                      |
| 0.00 Base Rate Fee Second Group FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE  |           |      |                  |                |                                  |                 |                 |                 |                                      |
| 0.00 Base Rate Fee Second Group FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE  |           |      |                  |                |                                  |                 |                 |                 |                                      |
| 0.00 Base Rate Fee Second Group FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE  |           |      |                  |                |                                  | <u></u>         |                 |                 |                                      |
| 0.00 Base Rate Fee Second Group FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE  |           |      |                  |                |                                  | <b></b>         |                 |                 |                                      |
| O.00 Gross Receipts Second Group \$ 0.00  Base Rate Fee Second Group \$ 0.00  CCRIBER GROUP FIFTY-SECOND SUBSCRIBER GROUP  COMMUNITY/ AREA 0  LL SIGN DSE CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE   |           |      |                  | <u> </u>       |                                  |                 |                 |                 |                                      |
| O.00 Base Rate Fee Second Group \$ 0.00  CRIBER GROUP FIFTY-SECOND SUBSCRIBER GROUP  COMMUNITY/ AREA 0  LL SIGN DSE CALL SIGN DSE CALL SIGN DSE  |           | 0.00 |                  |                | Total DSEs                       | 0.00            |                 |                 | otal DSEs                            |
| CRIBER GROUP  FIFTY-SECOND SUBSCRIBER GROUP  COMMUNITY/ AREA  O  LL SIGN  DSE  CALL SIGN  DSE  |           | 0.00 | \$               | d Group        | Gross Receipts Second            | 0.00            | \$              | roup            | ross Receipts First Gr               |
| CRIBER GROUP  FIFTY-SECOND SUBSCRIBER GROUP  COMMUNITY/ AREA  0  LL SIGN  DSE  CALL SIGN  DSE  |           |      |                  |                |                                  |                 |                 |                 |                                      |
| CRIBER GROUP  FIFTY-SECOND SUBSCRIBER GROUP  COMMUNITY/ AREA  0  LL SIGN  DSE  CALL SIGN  DSE  |           | 0.00 | e                | l Group        | Base Rate Fee Second             | 0.00            | e               | roun            | ase Rate Fee First Gr                |
| O COMMUNITY/ AREA O  LL SIGN DSE CALL SIGN DSE CALL SIGN DSE   |           | 0.00 | Ψ                | . Стоир        | Bass rate 1 00 second            | 0.00            | \$              | ОСБ             | add Italo I dd I mat di              |
| LL SIGN DSE CALL SIGN DSE CALL SIGN DSE  |           | Р    | SUBSCRIBER GROUP | '-SECOND       | FIFTY                            | JP              | SUBSCRIBER GROU | TY-FIRST        | FIF                                  |
|  |           | 0    |                  |                | COMMUNITY/ AREA                  | 0               |                 |                 | OMMUNITY/ AREA                       |
|  |           |      |                  |                |                                  |                 |                 |                 |                                      |
| 0.00 Total DSEs 0.00   |           | DSE  | CALL SIGN        | DSE            | CALL SIGN                        | DSE             | CALL SIGN       | DSE             | CALL SIGN                            |
| 0.00 Total DSEs 0.00   |           |      |                  |                |                                  |                 |                 |                 |                                      |
| 0.00 Total DSEs  |           |      |                  |                |                                  |                 |                 |                 |                                      |
| 0.00 Total DSEs  |           |      |                  |                |                                  |                 | <b> </b>        |                 |                                      |
| 0.00 Total DSEs  |           |      |                  |                |                                  |                 |                 |                 |                                      |
|  |           |      |                  |                |                                  |                 |                 |                 |                                      |
|  |           |      |                  |                |                                  |                 |                 |                 |                                      |
|  |           |      |                  |                |                                  | ļ               |                 |                 |                                      |
|  |           |      |                  |                |                                  | ļ               | -               | <u> </u>        |                                      |
|  |           |      |                  |                |                                  |                 |                 |                 |                                      |
|  |           |      |                  |                |                                  |                 |                 |                 |                                      |
|  |           |      |                  |                |                                  |                 | <b> </b>        | -               |                                      |
|  |           |      |                  |                |                                  |                 | <b> </b>        |                 |                                      |
| 0.00 Total DSEs 0.00   |           |      | 11               | 1              |                                  |                 |                 |                 |                                      |
|  |           |      |                  |                |                                  |                 |                 |                 |                                      |
| 0.00   |           | 0.00 |                  |                | Total DSEs                       | 0.00            |                 |                 | otal DSEs                            |
| Gross Receipts Fourth Group \$ 0.00  |           |      |                  | Crour          |                                  |                 | •               | 'roup           |                                      |
|  |           | 0.00 | \$               | Group          | Total DSEs Gross Receipts Fourth | 0.00            | \$              | Group           |                                      |
| 0.00 Base Rate Fee Fourth Group \$ 0.00  |           |      | \$               | Group          |                                  |                 | \$              | Group           | Total DSEs<br>Gross Receipts Third G |

| CABLE ONE, INC.                                |           | E SYSTEM:       |                |                                    |            | S               | 007417      | Name             |
|--|-----------|-----------------|----------------|------------------------------------|------------|-----------------|-------------|------------------|
|  |           |                 |                | ATE FEES FOR EACH SUBSCRIBER GROUP |            |                 |             |                  |
| FIF<br>COMMUNITY/ AREA                         | TY-THIRD  | SUBSCRIBER GROU | JP<br><b>0</b> | COMMUNITY/ AREA                    | ry-fourth  | SUBSCRIBER GROU | JP <b>0</b> | 9                |
| CALL SIGN                                      | DSE       | CALL SIGN       | DSE            | CALL SIGN                          | DSE        | CALL SIGN       | DSE         | Computation of   |
| OALE GIGIT                                     | DOL       | OALL SIGIV      | DOL            | CALL GIGIN                         | DOL        | CALL GIOIN      | DOL         | Base Rate Fee    |
|  |           |                 |                |                                    |            |                 |             | and              |
|  |           |                 |                |                                    |            |                 |             | Syndicated       |
|  |           |                 |                |                                    |            |                 |             | Exclusivity      |
|  | ····      |                 |                |                                    |            |                 |             | Surcharge<br>for |
|  |           |                 |                |                                    | ····       | -               |             | Partially        |
|  |           |                 |                |                                    |            |                 |             | Distant          |
|  |           |                 |                |                                    |            |                 |             | Stations         |
|  |           |                 |                |                                    |            | H               |             |                  |
|  |           |                 |                |                                    |            | -               |             |                  |
|  |           |                 |                |                                    |            |                 |             |                  |
|  |           |                 |                |                                    |            |                 |             |                  |
|  |           |                 |                |                                    |            |                 |             |                  |
| Total DSEs                                     |           |                 | 0.00           | Total DSEs                         |            |                 | 0.00        |                  |
| Gross Receipts First G                         | roup      | \$              | 0.00           | Gross Receipts Secon               | nd Group   | \$              | 0.00        |                  |
| Cross recorpts i list C                        | гоар      |                 | 0.00           | Cross Receipts occor               | ій Огойр   |                 | 0.00        |                  |
| Base Rate Fee First G                          | roup      | \$              | 0.00           | Base Rate Fee Secon                | nd Group   | \$              | 0.00        |                  |
|  | FTY-FIFTH | SUBSCRIBER GROU |                | ii .                               | IFTY-SIXTH | SUBSCRIBER GROU | _           |                  |
| COMMUNITY/ AREA                                |           |                 | 0              | COMMUNITY/ AREA                    |            |                 | 0           |                  |
| CALL SIGN                                      | DSE       | CALL SIGN       | DSE            | CALL SIGN                          | DSE        | CALL SIGN       | DSE         |                  |
|  |           |                 |                |                                    |            |                 |             |                  |
|  |           |                 |                |                                    |            |                 |             |                  |
|  |           |                 |                |                                    | ···        |                 | ·····       |                  |
|  |           |                 |                |                                    |            |                 |             |                  |
|  |           |                 |                |                                    |            |                 |             |                  |
|  |           |                 |                |                                    |            |                 |             |                  |
|  | ····      |                 | <u> </u>       |                                    |            |                 |             |                  |
|  |           |                 |                |                                    |            | H               |             |                  |
|  |           |                 |                |                                    |            |                 |             |                  |
|  |           |                 |                |                                    |            |                 |             |                  |
|  |           |                 | <u> </u>       |                                    |            |                 |             |                  |
|  |           |                 |                |                                    |            |                 |             |                  |
| Total DSEs                                     |           |                 | 0.00           | Total DSEs                         |            |                 | 0.00        |                  |
|  | Proup     | <u> </u>        | 0.00           |                                    | h Group    | <u> </u>        | 0.00        |                  |
| Gross Receipts Third 0                         | σιυυρ     | \$              | 0.00           | Gross Receipts Fourt               | п отоир    | \$              | 0.00        |                  |
| Base Rate Fee Third G                          | Group     | \$              | 0.00           | Base Rate Fee Fourti               | h Group    | \$              | 0.00        |                  |
|  |           |                 |                | ш                                  |            |                 |             |                  |
| Base Rate Fee: Add the Enter here and in block |           |                 | iber group     | as shown in the boxes a            | bove.      | s               |             |                  |
| or nore and in block                           | , 1, 5    |                 |                |                                    |            | 7               |             |                  |

| LEGAL NAME OF OWNER CABLE ONE, INC. | OF CABLE  | SYSTEM:               |             |                          |          | SY               | STEM ID#<br>007417 | Name             |
|-------------------------------------|-----------|-----------------------|-------------|--------------------------|----------|------------------|--------------------|------------------|
| В                                   | LOCK A:   | COMPUTATION OF        | BASE RA     | TE FEES FOR EACH         | SUBSCRI  | BER GROUP        |                    |                  |
|                                     |           | SUBSCRIBER GROU       |             | III                      |          | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA                     |           |                       | 0           | COMMUNITY/ AREA          |          |                  | 0                  | 9<br>Computation |
| CALL SIGN                           | DSE       | CALL SIGN             | DSE         | CALL SIGN                | DSE      | CALL SIGN        | DSE                | of               |
| 07.122 0.0.1                        | 302       | 07.22 0.0.1           |             | 0,122 0.011              | 202      | 0,122 0.011      | 302                | Base Rate Fee    |
|                                     |           |                       |             |                          |          |                  |                    | and              |
|                                     |           |                       |             |                          |          | <b>-</b>         |                    | Syndicated       |
|                                     |           |                       |             |                          |          | H                |                    | Exclusivity      |
|                                     |           |                       |             |                          |          |                  |                    | Surcharge        |
|                                     |           |                       |             |                          |          |                  |                    | for              |
|                                     |           |                       |             |                          |          | H                |                    | Partially        |
|                                     |           |                       |             |                          |          |                  |                    | -                |
|                                     |           |                       |             |                          |          |                  |                    | Distant          |
|                                     |           |                       |             |                          |          |                  |                    | Stations         |
|                                     |           |                       |             |                          |          |                  |                    |                  |
|                                     | <b> </b>  |                       |             |                          | <b> </b> | -                |                    |                  |
|                                     | <b></b>   |                       |             |                          | <b></b>  |                  |                    |                  |
|                                     | ļ         |                       |             |                          | <b></b>  |                  | <b> </b>           |                  |
|                                     |           |                       |             |                          |          |                  |                    |                  |
|                                     |           |                       |             |                          |          |                  |                    |                  |
| Total DSEs                          |           | -                     | 0.00        | Total DSEs               |          |                  | 0.00               |                  |
| Gross Receipts First Gro            | oup       | \$                    | 0.00        | Gross Receipts Second    | d Group  | \$               | 0.00               |                  |
| Base Rate Fee First Gro             | oup       | \$                    | 0.00        | Base Rate Fee Second     | d Group  | \$               | 0.00               |                  |
| FIFT                                | Y-NINTH   | SUBSCRIBER GROU       | Р           |                          | SIXTIETH | 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              | haco rota | foos for each subseri | her group s | as shown in the bayes ab | OVE      |                  |                    |                  |
| Enter here and in block 3           |           |                       | oei gioup a | as shown in the boxes ab | OVE.     | \$               |                    |                  |

| CABLE ONE, INC.           | OF CABLE  | SYSTEM:               |             |                          |          | SY               | STEM ID#<br>007417 | Name             |
|---------------------------|-----------|-----------------------|-------------|--------------------------|----------|------------------|--------------------|------------------|
| В                         | LOCK A:   | COMPUTATION OF        | BASE RA     | TE FEES FOR EACH         | SUBSCRI  | BER GROUP        |                    |                  |
| SIX                       | TY-FIRST  | SUBSCRIBER GROU       | Р           | SIXTY                    | -SECOND  | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA           |           |                       | 0           | COMMUNITY/ AREA          |          |                  | 0                  | 9<br>Computation |
| CALL SIGN                 | DSE       | CALL SIGN             | DSE         | CALL SIGN                | DSE      | CALL SIGN        | DSE                | of               |
|                           |           | 0.122.010             |             |                          |          |                  |                    | Base Rate Fee    |
|                           |           |                       |             |                          |          |                  |                    | and              |
|                           |           |                       |             |                          |          |                  |                    | Syndicated       |
|                           |           |                       |             |                          |          | H                |                    | Exclusivity      |
|                           |           |                       |             |                          |          |                  |                    | Surcharge        |
|                           |           |                       |             |                          |          |                  |                    | for              |
|                           |           |                       |             |                          |          | H                |                    | Partially        |
|                           |           |                       |             |                          |          |                  |                    | -                |
|                           |           |                       |             |                          |          |                  |                    | Distant          |
|                           |           |                       |             |                          |          |                  |                    | Stations         |
|                           |           |                       |             |                          |          |                  |                    |                  |
|                           |           |                       |             |                          |          |                  |                    |                  |
|                           | ļ         |                       |             |                          | <u> </u> |                  |                    |                  |
|                           | ļ         |                       |             |                          | <b>.</b> |                  |                    |                  |
|                           |           |                       |             |                          |          |                  |                    |                  |
|                           |           |                       |             |                          |          |                  |                    |                  |
| Total DSEs                |           |                       | 0.00        | Total DSEs               |          |                  | 0.00               |                  |
| Gross Receipts First Gro  | oup       | \$                    | 0.00        | Gross Receipts Second    | d Group  | \$               | 0.00               |                  |
| Base Rate Fee First Gro   | oup       | \$                    | 0.00        | Base Rate Fee Second     | d Group  | \$               | 0.00               |                  |
| SIXT                      | Y-THIRD   | SUBSCRIBER GROU       | Р           | SIXTY                    | /-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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|                           |           |                       |             |                          |          |                  |                    |                  |
|                           | [         |                       |             |                          |          |                  |                    |                  |
|                           |           |                       |             |                          |          |                  |                    |                  |
|                           | [         |                       |             |                          |          |                  |                    |                  |
|                           | <u> </u>  |                       |             |                          |          |                  |                    |                  |
|                           |           |                       |             |                          |          |                  |                    |                  |
| 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    | haso rata | foos for each subseri | her aroup a | es shown in the boxes ab | ove      |                  |                    |                  |
| Enter here and in block 3 |           |                       | bei gioup a | 2 SHOWH III THE DOKES AD | OVE.     | \$               |                    |                  |

| LEGAL NAME OF OWNER CABLE ONE, INC.            | R OF CABLE   | SYSTEM:         |              |                          |              | S                | YSTEM ID#<br>007417 | Name                 |
|--|--------------|-----------------|--------------|--------------------------|--------------|------------------|---------------------|----------------------|
| В  | LOCK A:      | COMPUTATION OF  | BASE RA      | ATE FEES FOR EACH        | SUBSCRI      | BER GROUP        |                     |                      |
| SIX  | TY-FIFTH     | SUBSCRIBER GROU | IP           | S                        | XTY-SIXTH    | SUBSCRIBER GROUP | Р                   | 0                    |
| COMMUNITY/ AREA                                |              |                 | 0            | COMMUNITY/ AREA          |              |                  | 0                   | <b>9</b> Computation |
| CALL SIGN                                      | DSE          | CALL SIGN       | DSE          | CALL SIGN                | DSE          | CALL SIGN        | DSE                 | of                   |
|  |              |                 |              |                          |              |                  |                     | Base Rate Fee        |
|  |              |                 |              |                          |              |                  |                     | and                  |
|  |              |                 |              |                          |              |                  |                     | Syndicated           |
|  |              |                 |              |                          |              |                  |                     | Exclusivity          |
|  |              |                 |              |                          |              |                  |                     | Surcharge            |
|  |              |                 |              |                          |              |                  |                     | for                  |
|  |              |                 |              |                          |              |                  |                     | Partially            |
|  |              |                 |              |                          |              |                  |                     | Distant              |
|  | <del> </del> |                 | ļ            |                          |              |                  |                     | Stations             |
|  | <del>-</del> |                 |              |                          |              |                  |                     |                      |
|  | <del> </del> |                 | ļ            |                          | <u></u>      |                  | <mark></mark>       |                      |
|  | <b></b>      |                 |              |                          |              |                  |                     |                      |
|  | <del>-</del> |                 |              |                          | <del></del>  |                  | <del></del>         |                      |
|  | <del> </del> |                 | ļ            |                          | <del> </del> |                  | <del></del>         |                      |
|  | 1            | l .             |              |                          |              | H                |                     |                      |
| Total DSEs                                     |              |                 | 0.00         | Total DSEs               |              |                  | 0.00                |                      |
| Gross Receipts First Gro                       | oup          | \$              | 0.00         | Gross Receipts Secon     | d Group      | \$               | 0.00                |                      |
| Base Rate Fee First Gro                        | oup          | \$              | 0.00         | Base Rate Fee Secon      | d Group      | \$               | 0.00                |                      |
| SIXTY-S  | SEVENTH      | SUBSCRIBER GROU | IP           | SIX                      | TY-EIGHTH    | SUBSCRIBER GROUP | Р                   |                      |
| COMMUNITY/ AREA                                |              |                 | 0            | COMMUNITY/ AREA          |              |                  | 0                   |                      |
| CALL SIGN                                      | DSE          | CALL SIGN       | DSE          | CALL SIGN                | DSE          | CALL SIGN        | DSE                 |                      |
|  |              |                 |              |                          |              |                  |                     |                      |
|  | <u>.</u>     |                 |              |                          |              |                  |                     |                      |
|  |              |                 |              |                          |              |                  |                     |                      |
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|  |              |                 |              |                          |              |                  |                     |                      |
|  |              |                 |              |                          |              |                  |                     |                      |
|  | <u> </u>     |                 |              |                          |              |                  |                     |                      |
|  | <b></b>      |                 | ļ            |                          |              |                  |                     |                      |
|  |              |                 | <u> </u>     |                          |              |                  |                     |                      |
| Total DSEs                                     |              |                 | 0.00         | Total DSEs               |              |                  | 0.00                |                      |
| Gross Receipts Third G                         | roup         | \$              | 0.00         | Gross Receipts Fourth    | Group        | \$               | 0.00                |                      |
| Base Rate Fee Third G                          | roup         | \$              | 0.00         | Base Rate Fee Fourth     | ı Group      | \$               | 0.00                |                      |
|  |              |                 |              | <u>II</u>                |              |                  |                     |                      |
| Base Rate Fee: Add the Enter here and in block |              |                 | iber group a | as shown in the boxes at | oove.        | \$               |                     |                      |
|  |              |                 |              |                          |              |                  |                     |                      |

| LEGAL NAME OF OWNER CABLE ONE, INC.               | R OF CABLE     | SYSTEM:         |              |                         |           | S               | YSTEM ID#<br>007417 | Name                 |
|---|----------------|-----------------|--------------|-------------------------|-----------|-----------------|---------------------|----------------------|
| В   | BLOCK A:       | COMPUTATION OF  | BASE RA      | ATE FEES FOR EACH       | I SUBSCRI | BER GROUP       |                     |                      |
| SIX   | TY-NINTH       | SUBSCRIBER GROU | IP           | SI                      | EVENTIETH | SUBSCRIBER GROU | Р                   | 0                    |
| COMMUNITY/ AREA                                   |                |                 | 0            | COMMUNITY/ AREA         |           |                 | 0                   | <b>9</b> Computation |
| CALL SIGN   | DSE            | CALL SIGN       | DSE          | CALL SIGN               | DSE       | CALL SIGN       | DSE                 | of                   |
|   |                |                 |              |                         |           |                 |                     | Base Rate Fee        |
|   |                |                 |              |                         |           |                 |                     | and                  |
|   |                |                 |              |                         |           |                 |                     | Syndicated           |
|   |                |                 |              |                         |           |                 |                     | Exclusivity          |
|   |                |                 |              |                         |           |                 |                     | Surcharge            |
|   |                |                 |              |                         |           |                 |                     | for                  |
|   |                |                 |              |                         |           |                 |                     | Partially            |
|   |                |                 |              |                         |           |                 |                     | Distant              |
|   |                |                 |              |                         |           |                 |                     | Stations             |
|   |                |                 |              |                         |           |                 |                     |                      |
|   | <del>.  </del> |                 | ļ            |                         |           | -               |                     |                      |
|   | <b></b>        |                 |              |                         |           |                 |                     |                      |
|   | <b></b>        |                 |              |                         |           |                 |                     |                      |
|   | +              |                 | ······       |                         |           |                 | ····                |                      |
| T   | -              | II.             |              | T                       |           | <u> </u>        | 0.00                |                      |
| Total DSEs  |                |                 | 0.00         | Total DSEs              |           |                 | 0.00                |                      |
| Gross Receipts First Gr                           | oup            | \$              | 0.00         | Gross Receipts Secon    | nd Group  | \$              | 0.00                |                      |
| Base Rate Fee First Gr                            | oup            | \$              | 0.00         | Base Rate Fee Secon     | nd Group  | \$              | 0.00                |                      |
| SEVEN   | TY-FIRST       | SUBSCRIBER GROU | IP           | SEVENT                  | Y-SECOND  | SUBSCRIBER GROU | Р                   |                      |
| COMMUNITY/ AREA                                   |                |                 | 0            | COMMUNITY/ AREA         |           |                 | 0                   |                      |
| CALL SIGN   | DSE            | CALL SIGN       | DSE          | CALL SIGN               | DSE       | CALL SIGN       | DSE                 |                      |
|   |                |                 |              |                         |           |                 |                     |                      |
|   |                |                 |              |                         |           |                 |                     |                      |
|   |                |                 |              |                         |           |                 |                     |                      |
|   | <del> </del>   |                 |              |                         |           |                 |                     |                      |
|   | <del></del>    |                 |              |                         | ····      |                 |                     |                      |
|   | <u></u>        |                 |              |                         |           |                 | ·····               |                      |
|   | 1              |                 | <b>†</b>     |                         |           |                 |                     |                      |
|   |                |                 |              |                         |           |                 |                     |                      |
|   |                |                 |              |                         |           |                 |                     |                      |
|   |                |                 |              |                         |           |                 |                     |                      |
|   | <u>_</u>       |                 | ļ            |                         |           |                 |                     |                      |
|   | <u>_</u>       |                 |              |                         |           |                 |                     |                      |
|   | <b></b>        |                 | ļ            |                         |           |                 |                     |                      |
|   |                |                 |              |                         |           |                 |                     |                      |
| Total DSEs  |                |                 | 0.00         | Total DSEs              |           |                 | 0.00                |                      |
| Gross Receipts Third G                            | roup           | \$              | 0.00         | Gross Receipts Fourth   | n Group   | \$              | 0.00                |                      |
| Base Rate Fee Third G                             | roup           | \$              | 0.00         | Base Rate Fee Fourth    | n Group   | \$              | 0.00                |                      |
|   |                |                 |              | Ш                       |           |                 |                     |                      |
| Base Rate Fee: Add the<br>Enter here and in block |                |                 | iber group a | as shown in the boxes a | bove.     | \$              |                     |                      |
| i   |                | • •             |              |                         |           |                 |                     |                      |

| LEGAL NAME OF OWNER CABLE ONE, INC.               | R OF CABLE | SYSTEM:                           |              |                          |             | S'                            | YSTEM ID#<br>007417 | Name              |
|---|------------|-----------------------------------|--------------|--------------------------|-------------|-------------------------------|---------------------|-------------------|
| SEVEN   |            | COMPUTATION OF<br>SUBSCRIBER GROU |              | ll .                     |             | BER GROUP<br>SUBSCRIBER GROUI | P                   | 0                 |
| COMMUNITY/ AREA                                   |            |                                   | 0            | COMMUNITY/ AREA          |             |                               | 0                   | 9<br>Computation  |
| CALL SIGN   | DSE        | CALL SIGN                         | DSE          | CALL SIGN                | DSE         | CALL SIGN                     | DSE                 | of                |
|   |            |                                   |              |                          |             |                               |                     | Base Rate Fee     |
|   |            |                                   |              |                          | <del></del> |                               | <del></del>         | and<br>Syndicated |
|   |            |                                   |              |                          |             |                               |                     | Exclusivity       |
|   |            |                                   |              |                          |             |                               |                     | Surcharge         |
|   |            |                                   |              |                          |             |                               |                     | for<br>Partially  |
|   |            |                                   |              |                          | ···         |                               | ···                 | Distant           |
|   |            |                                   |              |                          |             |                               |                     | Stations          |
|   |            |                                   |              |                          |             |                               |                     |                   |
|   | <b></b>    |                                   |              |                          |             |                               |                     |                   |
|   |            |                                   |              |                          |             |                               |                     |                   |
|   |            |                                   |              |                          |             |                               | <mark></mark>       |                   |
|   |            |                                   |              |                          |             |                               | 2.00                |                   |
| 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                           |            | \$                                | 0.00         | Base Rate Fee Secon      |             | \$                            | 0.00                |                   |
|   | TY-FIFTH   | SUBSCRIBER GROU                   |              | ii e                     | NTY-SIXTH   | SUBSCRIBER GROUI              | _                   |                   |
| COMMUNITY/ AREA                                   |            |                                   | 0            | COMMUNITY/ AREA          |             |                               | 0                   |                   |
| CALL SIGN   | DSE        | CALL SIGN                         | DSE          | CALL SIGN                | DSE         | CALL SIGN                     | DSE                 |                   |
|   |            |                                   |              |                          | <u></u>     |                               | <del></del>         |                   |
|   |            |                                   |              |                          | <del></del> |                               |                     |                   |
|   |            |                                   |              |                          |             |                               |                     |                   |
|   |            |                                   |              |                          |             |                               |                     |                   |
|   |            |                                   |              |                          |             |                               |                     |                   |
|   |            |                                   |              |                          |             |                               |                     |                   |
|   | <u> </u>   |                                   |              |                          |             |                               |                     |                   |
|   | <u></u>    |                                   |              |                          | <u>-</u>    |                               |                     |                   |
|   |            |                                   |              |                          |             |                               |                     |                   |
|   | <u> </u>   |                                   |              |                          |             |                               |                     |                   |
|   |            |                                   | ļ            |                          |             |                               |                     |                   |
| Total DSEs  |            |                                   | 0.00         | Total DSEs               |             |                               | 0.00                |                   |
| Gross Receipts Third G                            | oup        | \$                                | 0.00         | Gross Receipts Fourth    | Group       | \$                            | 0.00                |                   |
| Base Rate Fee Third G                             | oup        | \$                                | 0.00         | Base Rate Fee Fourth     | Group       | \$                            | 0.00                |                   |
|   |            |                                   |              | Ш                        |             |                               |                     |                   |
| Base Rate Fee: Add the<br>Enter here and in block |            |                                   | iber group a | as shown in the boxes ab | oove.       | \$                            |                     |                   |

| LEGAL NAME OF OWNER CABLE ONE, INC. | OF CABLE      | SYSTEM:         |              |                          |             | S                | YSTEM ID#<br>007417 | Name                |
|-------------------------------------|---------------|-----------------|--------------|--------------------------|-------------|------------------|---------------------|---------------------|
| В                                   | LOCK A:       | COMPUTATION OF  | BASE RA      | ATE FEES FOR EACH        | I SUBSCRI   | BER GROUP        |                     |                     |
| SEVENTY-S                           | SEVENTH       | SUBSCRIBER GROU | IP           | SEVEN                    | TY-EIGHTH   | SUBSCRIBER GROUI | Р                   | 0                   |
| COMMUNITY/ AREA                     |               |                 | 0            | COMMUNITY/ AREA          |             |                  | 0                   | 9<br>Computation    |
| CALL SIGN                           | DSE           | CALL SIGN       | DSE          | CALL SIGN                | DSE         | CALL SIGN        | DSE                 | of                  |
|                                     |               |                 |              |                          |             |                  |                     | Base Rate Fee       |
|                                     |               |                 |              |                          |             |                  |                     | and                 |
|                                     |               |                 |              |                          |             |                  |                     | Syndicated          |
|                                     |               |                 |              |                          |             |                  |                     | Exclusivity         |
|                                     |               |                 |              |                          |             |                  |                     | Surcharge           |
|                                     |               |                 |              |                          |             |                  |                     | for                 |
|                                     |               |                 |              |                          | <del></del> |                  |                     | Partially           |
|                                     |               |                 |              |                          |             | -                |                     | Distant<br>Stations |
|                                     |               |                 |              |                          |             |                  |                     | Otations            |
|                                     | <b> </b>      |                 |              |                          |             |                  |                     |                     |
|                                     | <u> </u>      |                 |              |                          |             |                  |                     |                     |
|                                     |               |                 |              |                          |             |                  |                     |                     |
|                                     |               |                 |              |                          |             |                  |                     |                     |
|                                     | <u> </u>      |                 | <u> </u>     |                          |             |                  |                     |                     |
| Total DSEs                          |               |                 | 0.00         | Total DSEs               |             |                  | 0.00                |                     |
| Gross Receipts First Gro            | ดเมต          | \$              | 0.00         | Gross Receipts Secon     | nd Group    | \$               | 0.00                |                     |
| Cross resempts river en             | Sup           |                 |              | Cross resemple coser     | ia Group    |                  |                     |                     |
| Base Rate Fee First Gro             | oup           | \$              | 0.00         | Base Rate Fee Secon      | nd Group    | \$               | 0.00                |                     |
| SEVEN <sup>-</sup>                  | ΓΥ-NINTH      | SUBSCRIBER GROU | IP           |                          | EIGHTIETH   | SUBSCRIBER GROUI | Р                   |                     |
| COMMUNITY/ AREA                     |               |                 | 0            | COMMUNITY/ AREA          |             |                  | 0                   |                     |
| CALL SIGN                           | DSE           | CALL SIGN       | DSE          | CALL SIGN                | DSE         | CALL SIGN        | DSE                 |                     |
|                                     |               |                 |              |                          |             |                  |                     |                     |
|                                     |               |                 |              |                          | <del></del> |                  |                     |                     |
|                                     |               |                 |              |                          | <del></del> |                  |                     |                     |
|                                     |               |                 |              |                          | <del></del> | -                |                     |                     |
|                                     |               |                 |              |                          |             |                  |                     |                     |
|                                     |               |                 |              |                          |             |                  |                     |                     |
|                                     | <b>.</b>      |                 |              |                          |             |                  |                     |                     |
|                                     | ļ             |                 |              |                          |             |                  |                     |                     |
|                                     | <b></b>       |                 | ļ            |                          |             |                  |                     |                     |
|                                     |               |                 |              |                          |             |                  |                     |                     |
|                                     | <del>-</del>  |                 |              |                          |             |                  |                     |                     |
|                                     | -             |                 |              |                          |             |                  |                     |                     |
|                                     |               |                 |              |                          |             |                  |                     |                     |
| 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                |                     |
|                                     |               |                 |              | П                        |             |                  |                     |                     |
| Base Rate Fee: Add the              |               |                 | iber group a | as shown in the boxes al | bove.       | ¢.               |                     |                     |
| Enter here and in block             | s, iine 1, sp | pace ∟ (page 7) |              |                          |             | \$               |                     |                     |

| CABLE ONE, INC.           | OF CABLE     | SYSTEM:               |             |                          |          | SY               | STEM ID#<br>007417 | Name             |
|---------------------------|--------------|-----------------------|-------------|--------------------------|----------|------------------|--------------------|------------------|
| В                         | LOCK A:      | COMPUTATION OF        | BASE RA     | TE FEES FOR EACH         | SUBSCRI  | BER GROUP        |                    |                  |
| EIGH <sup>-</sup>         | TY-FIRST     | SUBSCRIBER GROU       | Р           | EIGHT                    | /-SECOND | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA           |              |                       | 0           | COMMUNITY/ AREA          |          |                  | 0                  | 9<br>Computation |
| CALL SIGN                 | DSE          | CALL SIGN             | DSE         | CALL SIGN                | DSE      | CALL SIGN        | DSE                | of               |
|                           |              |                       |             |                          |          |                  |                    | Base Rate Fee    |
|                           |              |                       |             |                          |          |                  |                    | and              |
|                           |              |                       |             |                          |          |                  |                    | Syndicated       |
|                           |              |                       |             |                          |          |                  |                    | Exclusivity      |
|                           |              |                       |             |                          |          |                  |                    | Surcharge        |
|                           |              |                       |             |                          |          | -                |                    | for              |
|                           |              |                       |             |                          |          | H                |                    | Partially        |
|                           |              |                       |             |                          |          |                  |                    | Distant          |
|                           |              |                       |             |                          |          |                  |                    | Stations         |
|                           |              |                       |             |                          |          |                  |                    | Stations         |
|                           |              |                       |             |                          |          |                  |                    |                  |
|                           | <del> </del> |                       | ļ           |                          | <b> </b> | H                | .                  |                  |
|                           | <b> </b>     |                       |             |                          | <b></b>  |                  |                    |                  |
|                           | <b> </b>     |                       | ļ           |                          | <b></b>  |                  | <u> </u>           |                  |
|                           |              |                       |             |                          |          |                  |                    |                  |
|                           |              |                       |             |                          |          |                  | <u> </u>           |                  |
| Total DSEs                |              |                       | 0.00        | Total DSEs               |          |                  | 0.00               |                  |
| Gross Receipts First Gro  | oup          | \$                    | 0.00        | Gross Receipts Second    | d Group  | \$               | 0.00               |                  |
| Base Rate Fee First Gro   | oup          | \$                    | 0.00        | Base Rate Fee Second     | d Group  | \$               | 0.00               |                  |
| EIGHT                     | Y-THIRD      | SUBSCRIBER GROU       | Р           | EIGHT                    | 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               |                  |
| Base Rate Fee: Add the    | hase ret     | foos for each subseri | hor group s | as shown in the haves at | 01/0     |                  |                    |                  |
| Enter here and in block 3 |              |                       | pei gioup a | as shown in the boxes ab | OVE.     | \$               |                    |                  |

| LEGAL NAME OF OWNER CABLE ONE, INC.              | OF CABLE | SYSTEM:         |             |                          |          | SY               | STEM ID#<br>007417 | Name             |
|--|----------|-----------------|-------------|--------------------------|----------|------------------|--------------------|------------------|
| BI   | LOCK A:  | COMPUTATION OF  | BASE RA     | TE FEES FOR EACH         | SUBSCRI  | BER GROUP        |                    |                  |
| EIGH <sup>-</sup>                                | TY-FIFTH | SUBSCRIBER GROU | Р           | EIGH                     | TY-SIXTH | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA                                  |          |                 | 0           | COMMUNITY/ AREA          |          |                  | 0                  | 9<br>Computation |
| CALL SIGN  | DSE      | CALL SIGN       | DSE         | CALL SIGN                | DSE      | CALL SIGN        | DSE                | of               |
|  |          |                 |             |                          |          |                  |                    | Base Rate Fee    |
|  |          |                 |             |                          |          |                  |                    | and              |
|  |          |                 |             |                          |          |                  |                    | Syndicated       |
|  |          |                 |             |                          |          | <del> </del>     |                    | Exclusivity      |
|  |          |                 |             |                          |          |                  |                    | Surcharge        |
|  |          |                 |             |                          |          |                  |                    | for              |
|  |          |                 |             |                          |          | L                |                    | Partially        |
|  |          |                 |             |                          |          |                  |                    | Distant          |
|  |          |                 |             |                          |          |                  |                    | Stations         |
|  |          |                 |             |                          | <b></b>  |                  |                    | Stations         |
|  |          |                 |             |                          |          |                  |                    |                  |
|  | <b></b>  |                 |             |                          | <b></b>  |                  |                    |                  |
|  | <b></b>  |                 |             |                          |          |                  |                    |                  |
|  | <b> </b> |                 |             |                          |          |                  |                    |                  |
|  |          |                 |             |                          |          |                  |                    |                  |
|  |          |                 |             |                          |          |                  |                    |                  |
| Total DSEs                                       |          |                 | 0.00        | Total DSEs               |          | _                | 0.00               |                  |
| Gross Receipts First Gro                         | oup      | \$              | 0.00        | Gross Receipts Second    | d Group  | \$               | 0.00               |                  |
| Base Rate Fee First Gro                          | oup      | \$              | 0.00        | Base Rate Fee Second     | d Group  | \$               | 0.00               |                  |
| EIGHTY-S   | EVENTH   | SUBSCRIBER GROU | Р           | EIGHT                    | Y-EIGHTH | 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               |                  |
| Page Bate Fee: Add #                             | hace === | food for each   | hor gra     | on about in the barrens. | 010      |                  |                    |                  |
| Base Rate Fee: Add the Enter here and in block 3 |          |                 | uei group a | as shown in the doxes ad | ove.     | \$               |                    |                  |

| LEGAL NAME OF OWNER CABLE ONE, INC.            | R OF CABLE  | E SYSTEM:       |            |                         |           | S               | 007417 | Name             |
|--|-------------|-----------------|------------|-------------------------|-----------|-----------------|--------|------------------|
| E  | BLOCK A:    | COMPUTATION OF  | BASE RA    | ATE FEES FOR EACH       | H SUBSCR  | BER GROUP       |        |                  |
|  | TY-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      |
|  | <u></u>     |                 |            |                         |           | H               |        | Surcharge<br>for |
|  |             |                 |            |                         |           | -               |        | Partially        |
|  |             |                 |            |                         |           |                 |        | Distant          |
|  |             |                 |            |                         |           |                 |        | Stations         |
|  |             |                 |            |                         |           |                 |        |                  |
|  |             |                 |            |                         |           |                 |        |                  |
|  | <u>_</u>    |                 |            |                         |           | -               |        |                  |
|  |             |                 |            |                         |           |                 |        |                  |
|  | •           |                 |            |                         | ••••      |                 |        |                  |
| Total DSEs                                     | -           |                 | 0.00       | Total DSEs              | •         | ••              | 0.00   |                  |
|  |             |                 |            |                         |           |                 |        |                  |
| Gross Receipts First Gr                        | oup         | \$              | 0.00       | Gross Receipts Seco     | na Group  | \$              | 0.00   |                  |
| Base Rate Fee First Gr                         | oup         | \$              | 0.00       | Base Rate Fee Seco      | nd Group  | \$              | 0.00   |                  |
| NINE   | TY-FIRST    | SUBSCRIBER GROU | JP         | NINE                    | TY-SECOND | SUBSCRIBER GROU | JP     |                  |
| COMMUNITY/ AREA                                |             |                 | 0          | COMMUNITY/ AREA         |           |                 | 0      |                  |
| CALL SIGN                                      | DSE         | CALL SIGN       | DSE        | CALL SIGN               | DSE       | CALL SIGN       | DSE    |                  |
|  |             |                 |            |                         |           |                 |        |                  |
|  | <u></u>     |                 |            |                         |           | H               |        |                  |
|  | <u></u>     |                 |            |                         | ••••      |                 |        |                  |
|  |             |                 |            |                         |           |                 |        |                  |
|  |             |                 |            |                         |           |                 |        |                  |
|  |             |                 |            |                         |           |                 |        |                  |
|  |             |                 |            |                         |           |                 |        |                  |
|  | <del></del> |                 |            |                         |           |                 |        |                  |
|  |             |                 |            |                         |           |                 |        |                  |
|  |             |                 |            |                         |           |                 |        |                  |
|  | <u>_</u>    |                 |            |                         |           |                 |        |                  |
|  | <u></u>     |                 |            |                         |           |                 |        |                  |
| Total DSEs                                     |             |                 | 0.00       | Total DSEs              |           |                 | 0.00   |                  |
| 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   |                  |
|  |             |                 |            | 11                      |           |                 |        |                  |
| Base Rate Fee: Add the Enter here and in block |             |                 | iber group | as shown in the boxes a | above.    | \$              |        |                  |
|  | -,5 1, 5    |                 |            |                         |           | Ť               |        |                  |

| CABLE ONE, INC.           | OF CABLE  | SYSTEM:               |             |                          |           | SY               | STEM ID#<br>007417 | Name             |
|---------------------------|-----------|-----------------------|-------------|--------------------------|-----------|------------------|--------------------|------------------|
| В                         | LOCK A:   | COMPUTATION OF        | BASE RA     | TE FEES FOR EACH         | SUBSCRI   | BER GROUP        |                    |                  |
|                           |           | SUBSCRIBER GROU       |             | III                      |           | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA           |           |                       | 0           | COMMUNITY/ AREA          |           |                  | 0                  | 9<br>Computation |
| CALL SIGN                 | DSE       | CALL SIGN             | DSE         | CALL SIGN                | DSE       | CALL SIGN        | DSE                | of               |
| 07.122 0.0.1              | 302       | 07.22 0.0.1           |             | 0,122 0.011              |           | 07.122 0.011     | 302                | Base Rate Fee    |
|                           |           |                       |             |                          |           |                  |                    | and              |
|                           |           |                       |             |                          |           |                  |                    | Syndicated       |
|                           |           |                       |             |                          |           |                  |                    | Exclusivity      |
|                           |           |                       |             |                          |           |                  |                    | Surcharge        |
|                           |           |                       |             |                          |           |                  |                    | for              |
|                           |           |                       |             |                          |           |                  |                    | Partially        |
|                           |           |                       |             |                          |           | H                |                    | -                |
|                           |           |                       |             |                          |           |                  |                    | Distant          |
|                           |           |                       |             |                          |           |                  |                    | Stations         |
|                           |           |                       |             |                          | <b></b>   |                  |                    |                  |
|                           |           |                       |             |                          |           |                  |                    |                  |
|                           | <b></b>   |                       |             |                          | <u> </u>  |                  |                    |                  |
|                           | ļ         |                       |             |                          | <b>.</b>  |                  | <b> </b>           |                  |
|                           |           |                       |             |                          |           |                  |                    |                  |
|                           |           |                       |             |                          |           |                  |                    |                  |
| Total DSEs                |           | -                     | 0.00        | Total DSEs               |           |                  | 0.00               |                  |
| Gross Receipts First Gro  | oup       | \$                    | 0.00        | Gross Receipts Second    | d Group   | \$               | 0.00               |                  |
| Base Rate Fee First Gro   | oup       | \$                    | 0.00        | Base Rate Fee Second     | d Group   | \$               | 0.00               |                  |
| NINE                      | TY-FIFTH  | SUBSCRIBER GROU       | Р           | NINE                     | ETY-SIXTH | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA           |           |                       | 0           | COMMUNITY/ AREA          |           |                  | 0                  |                  |
| CALL SIGN                 | DSE       | CALL SIGN             | DSE         | CALL SIGN                | DSE       | CALL SIGN        | DSE                |                  |
|                           |           |                       |             |                          |           |                  |                    |                  |
|                           |           |                       |             |                          |           |                  |                    |                  |
|                           |           |                       |             |                          |           |                  |                    |                  |
|                           |           |                       |             |                          |           |                  |                    |                  |
|                           |           |                       |             |                          |           |                  |                    |                  |
|                           |           |                       |             |                          |           |                  |                    |                  |
|                           |           |                       |             |                          |           |                  |                    |                  |
|                           | T         |                       |             |                          |           |                  |                    |                  |
|                           |           |                       |             |                          |           |                  |                    |                  |
|                           |           |                       |             |                          |           |                  |                    |                  |
|                           | T         |                       |             |                          |           |                  |                    |                  |
|                           |           |                       |             |                          |           |                  |                    |                  |
|                           | [         |                       |             |                          |           |                  |                    |                  |
|                           |           |                       |             |                          |           |                  |                    |                  |
|                           |           |                       |             |                          |           |                  |                    |                  |
| 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    | haec rote | foos for each subseri | hor group a | as shown in the haves sh | 01/0      |                  |                    |                  |
| Enter here and in block 3 |           |                       | bei gioup a | 2 SHOWH III THE DOKES AD | OVE.      | \$               |                    |                  |

| LEGAL NAME OF OWNER CABLE ONE, INC.               | R OF CABLE | SYSTEM:         |            |                         |                                     | S               | YSTEM ID#<br>007417 | Name                 |
|---|------------|-----------------|------------|-------------------------|-------------------------------------|-----------------|---------------------|----------------------|
| E   | BLOCK A:   | COMPUTATION OF  | BASE RA    | ATE FEES FOR EACH       | SUBSCRI                             | BER GROUP       |                     |                      |
|   | SEVENTH    | SUBSCRIBER GROU | IP         | TI .                    | TY-EIGHTH                           | SUBSCRIBER GROU | Р                   | 0                    |
| COMMUNITY/ AREA                                   |            |                 | 0          | COMMUNITY/ AREA         |                                     |                 | 0                   | <b>9</b> Computation |
| CALL SIGN   | DSE        | CALL SIGN       | DSE        | CALL SIGN               | DSE                                 | CALL SIGN       | DSE                 | of                   |
| OF REE GIGIT                                      | 562        | O/ILE GIGIT     | 562        | OF REE GIGIT            | DOL                                 | O/ LEE OIGIT    | 562                 | Base Rate Fee        |
|   |            |                 |            |                         |                                     |                 |                     | and                  |
|   |            |                 |            |                         |                                     |                 |                     | Syndicated           |
|   |            |                 |            |                         |                                     |                 |                     | Exclusivity          |
|   |            |                 |            |                         |                                     |                 |                     | Surcharge            |
|   |            |                 |            |                         |                                     |                 |                     | for                  |
|   |            |                 |            |                         |                                     |                 |                     | Partially            |
|   |            |                 |            |                         |                                     |                 |                     | Distant<br>Stations  |
|   |            |                 |            |                         |                                     |                 |                     | Otations             |
|   | <u> </u>   |                 |            |                         |                                     |                 |                     |                      |
|   |            |                 |            |                         |                                     |                 |                     |                      |
|   |            |                 |            |                         |                                     |                 |                     |                      |
|   |            |                 |            |                         |                                     |                 |                     |                      |
|   |            |                 |            |                         |                                     |                 |                     |                      |
| Total DSEs  |            |                 | 0.00       | Total DSEs              |                                     |                 | 0.00                |                      |
| Gross Receipts First Gr                           | OUD        | \$              | 0.00       | Gross Receipts Secon    | Gross Receipts Second Group \$ 0.00 |                 |                     |                      |
| о. 1000 г. 1000 град г. 1101 о.                   | -up        | · ·             |            |                         | . а О. о ар                         |                 |                     |                      |
| Base Rate Fee First Gr                            | oup        | \$              | 0.00       | Base Rate Fee Secon     | nd Group                            | \$              | 0.00                |                      |
| NINE  | TY-NINTH   | SUBSCRIBER GROU | IP         | ONE H                   | UNDREDTH                            | SUBSCRIBER GROU | Р                   |                      |
| COMMUNITY/ AREA                                   |            |                 | 0          | COMMUNITY/ AREA         |                                     |                 | 0                   |                      |
| CALL SIGN   | DSE        | CALL SIGN       | DSE        | CALL SIGN               | DSE                                 | CALL SIGN       | DSE                 |                      |
|   |            |                 |            |                         |                                     |                 |                     |                      |
|   |            |                 |            |                         |                                     |                 |                     |                      |
|   |            |                 |            |                         |                                     |                 |                     |                      |
|   |            |                 |            |                         |                                     |                 |                     |                      |
|   |            |                 |            |                         |                                     |                 |                     |                      |
|   |            |                 |            |                         |                                     |                 |                     |                      |
|   |            |                 |            |                         |                                     |                 |                     |                      |
|   |            |                 |            |                         |                                     |                 |                     |                      |
|   |            |                 | ļ          |                         |                                     |                 |                     |                      |
|   | <u> </u>   |                 |            |                         |                                     |                 |                     |                      |
|   |            |                 | <b></b>    |                         |                                     |                 |                     |                      |
|   |            |                 |            |                         |                                     |                 |                     |                      |
|   |            |                 |            |                         |                                     |                 |                     |                      |
| Total DSEs  | •          |                 | 0.00       | Total DSEs              | •                                   |                 | 0.00                |                      |
| Gross Receipts Third G                            | roup       | \$              | 0.00       | Gross Receipts Fourth   | n Group                             | \$              | 0.00                |                      |
| <b>Base Rate Fee</b> Third G                      | roup       | \$              | 0.00       | Base Rate Fee Fourth    | n Group                             | \$              | 0.00                |                      |
|   |            |                 |            |                         |                                     |                 |                     |                      |
| Base Rate Fee: Add the<br>Enter here and in block |            |                 | iber group | as shown in the boxes a | bove.                               | \$              |                     |                      |
|   |            |                 |            |                         |                                     | T               |                     |                      |

| LEGAL NAME OF OWNER CABLE ONE, INC.                 | OF CABLE | SYSTEM:                           |             |                                     |          | S                             | O07417 | Name                 |
|---|----------|-----------------------------------|-------------|-------------------------------------|----------|-------------------------------|--------|----------------------|
| ONE HUNDRI  |          | COMPUTATION OF<br>SUBSCRIBER GROU | Р           | ii e                                |          | BER GROUP<br>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<br>Syndicated    |
|   |          |                                   |             |                                     | <u> </u> |                               |        | Exclusivity          |
|   |          |                                   |             |                                     |          |                               |        | Surcharge            |
|   |          |                                   |             |                                     |          |                               |        | for                  |
|   |          |                                   |             |                                     |          |                               |        | Partially<br>Distant |
|   |          |                                   |             |                                     |          |                               |        | Stations             |
|   |          |                                   |             |                                     |          |                               |        |                      |
|   |          |                                   |             |                                     |          |                               |        |                      |
|   |          |                                   |             |                                     |          |                               |        |                      |
|   | <u></u>  |                                   | <b></b>     |                                     |          |                               |        |                      |
|   |          |                                   |             |                                     |          |                               |        |                      |
| Total DSEs  | _        |                                   | 0.00        | Total DSEs                          |          |                               | 0.00   |                      |
| Gross Receipts First Gro                            | oup      | \$                                | 0.00        | Gross Receipts Second Group \$ 0.00 |          |                               |        |                      |
| •   | •        | ·                                 |             |                                     |          | · ·                           |        |                      |
| Base Rate Fee First Gro                             |          | \$                                | 0.00        | Base Rate Fee Secon                 |          | \$                            | 0.00   |                      |
|   | D THIRD  | SUBSCRIBER GROU                   |             | ii .                                | D FOURTH | SUBSCRIBER GROUP              | •      |                      |
| COMMUNITY/ AREA                                     |          |                                   | 0           | COMMUNITY/ AREA                     |          |                               | 0      |                      |
| CALL SIGN   | DSE      | CALL SIGN                         | DSE         | CALL SIGN                           | DSE      | CALL SIGN                     | DSE    |                      |
|   |          |                                   |             |                                     |          |                               |        |                      |
|   |          |                                   |             |                                     |          |                               |        |                      |
|   |          |                                   |             |                                     |          |                               |        |                      |
|   |          |                                   |             |                                     |          |                               |        |                      |
|   |          |                                   |             |                                     |          |                               |        |                      |
|   |          |                                   |             |                                     |          | H                             | ···    |                      |
|   |          |                                   |             |                                     |          |                               |        |                      |
|   |          |                                   |             |                                     |          |                               |        |                      |
|   | <u> </u> |                                   |             |                                     |          | H                             |        |                      |
|   |          |                                   |             |                                     |          | H                             |        |                      |
|   |          |                                   |             |                                     |          |                               |        |                      |
|   |          |                                   |             |                                     |          |                               |        |                      |
| 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   |                      |
| B B. (  | h        |                                   |             |                                     |          |                               |        |                      |
| Base Rate Fee: Add the<br>Enter here and in block : |          |                                   | per group a | as snown in the boxes ab            | oove.    | \$                            |        |                      |

| LEGAL NAME OF OWNER CABLE ONE, INC. | OF CABLE     | SYSTEM:                 |             |                         |          | SY               | STEM ID#<br>007417 | Name             |
|-------------------------------------|--------------|-------------------------|-------------|-------------------------|----------|------------------|--------------------|------------------|
| В                                   | LOCK A:      | COMPUTATION OF          | BASE RA     | TE FEES FOR EACH        | SUBSCRI  | BER GROUP        |                    |                  |
|                                     |              | SUBSCRIBER GROU         |             |                         |          | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA                     |              |                         | 0           | COMMUNITY/ AREA         |          |                  | 0                  | 9<br>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         |
|                                     |              |                         |             |                         |          |                  |                    |                  |
|                                     |              |                         |             |                         |          |                  |                    |                  |
|                                     | <b> </b>     |                         |             |                         |          |                  |                    |                  |
|                                     |              |                         |             |                         |          |                  |                    |                  |
|                                     |              |                         |             |                         |          |                  |                    |                  |
|                                     |              |                         |             |                         |          |                  |                    |                  |
| Total DSEs                          |              |                         | 0.00        | Total DSEs              |          |                  | 0.00               |                  |
| Gross Receipts First Gro            | oup          | \$                      | 0.00        | Gross Receipts Second   | d Group  | \$               | 0.00               |                  |
| Base Rate Fee First Gro             | oup          | \$                      | 0.00        | Base Rate Fee Second    | d Group  | \$               | 0.00               |                  |
| ONE HUNDRED S                       | EVENTH       | SUBSCRIBER GROU         | Р           | ONE HUNDRE              | D EIGHTH | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA                     |              |                         | 0           | COMMUNITY/ AREA         |          |                  | 0                  |                  |
| CALL SIGN                           | DSE          | CALL SIGN               | DSE         | CALL SIGN               | DSE      | CALL SIGN        | DSE                |                  |
|                                     |              |                         |             |                         |          |                  |                    |                  |
|                                     |              |                         |             |                         |          |                  |                    |                  |
|                                     |              |                         |             |                         |          |                  |                    |                  |
|                                     |              |                         |             |                         |          |                  |                    |                  |
|                                     |              |                         |             |                         |          |                  |                    |                  |
|                                     |              |                         |             |                         |          |                  |                    |                  |
|                                     |              |                         |             |                         |          |                  |                    |                  |
|                                     | <b></b>      |                         |             |                         |          |                  |                    |                  |
|                                     | <b> </b>     |                         | ļ           |                         |          |                  |                    |                  |
|                                     | <b> </b>     |                         | ļ           |                         | <b></b>  |                  |                    |                  |
|                                     | <b></b>      |                         |             |                         | <b></b>  |                  |                    |                  |
|                                     | <b></b>      |                         |             |                         | <b></b>  |                  |                    |                  |
|                                     | <b> </b>     |                         |             |                         | <b></b>  |                  |                    |                  |
|                                     | <del> </del> |                         |             |                         |          |                  |                    |                  |
| 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              | base rate    | e fees for each subscri | ber group s | s shown in the hoxes ah | ove.     |                  |                    |                  |
| Enter here and in block 3           |              |                         | -: 3.54P    |                         |          | \$               |                    |                  |

| LEGAL NAME OF OWNER CABLE ONE, INC. | OF CABLE     | SYSTEM:                 |             |                           |         | SYS              | STEM ID#<br>007417 | Name             |
|-------------------------------------|--------------|-------------------------|-------------|---------------------------|---------|------------------|--------------------|------------------|
| BI                                  | LOCK A:      | COMPUTATION OF          | BASE RA     | TE FEES FOR EACH          | SUBSCRI | BER GROUP        |                    |                  |
|                                     |              | SUBSCRIBER GROU         |             | (1)                       |         | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA                     |              |                         | 0           | COMMUNITY/ AREA           |         |                  | 0                  | 9<br>Computation |
| CALL SIGN                           | DSE          | CALL SIGN               | DSE         | CALL SIGN                 | DSE     | CALL SIGN        | DSE                | of               |
| 07.122 0.011                        | 202          | 07.22 0.0.1             |             | 07122 01011               | 302     | S/ILL SIGIT      | 332                | Base Rate Fee    |
|                                     |              |                         |             |                           |         |                  |                    | and              |
|                                     |              |                         |             |                           |         |                  |                    | Syndicated       |
|                                     |              |                         |             |                           |         |                  |                    | Exclusivity      |
|                                     |              |                         |             | -                         |         |                  |                    | Surcharge        |
|                                     | <del> </del> |                         |             |                           |         |                  |                    | for              |
|                                     | <b></b>      |                         |             |                           |         |                  |                    | Partially        |
|                                     | <b></b>      |                         |             |                           | <b></b> |                  |                    | -                |
|                                     | <del> </del> |                         |             |                           |         |                  |                    | Distant          |
|                                     | ł            |                         |             |                           |         |                  |                    | Stations         |
|                                     | <b></b>      |                         |             |                           | <b></b> |                  |                    |                  |
|                                     | <b></b>      |                         |             |                           |         |                  |                    |                  |
|                                     | <b></b>      |                         |             |                           |         |                  |                    |                  |
|                                     | <b></b>      |                         |             |                           | <b></b> |                  |                    |                  |
|                                     |              |                         |             |                           |         |                  |                    |                  |
|                                     |              |                         |             |                           |         |                  |                    |                  |
| Total DSEs                          |              | -                       | 0.00        | Total DSEs                |         |                  | 0.00               |                  |
| Gross Receipts First Gro            | oup          | \$                      | 0.00        | Gross Receipts Second     | d Group | \$               | 0.00               |                  |
| Base Rate Fee First Gro             | oup          | \$                      | 0.00        | Base Rate Fee Second      | d Group | \$               | 0.00               |                  |
| ONE HUNDRED EL                      | EVENTH       | SUBSCRIBER GROU         | Р           | ONE HUNDRED               | TWELVTH | SUBSCRIBER GROUP |                    |                  |
| 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 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              | hase rate    | a foos for each subseri | her group o | as shown in the haves sh  | ove     |                  |                    |                  |
| Enter here and in block 3           |              |                         | oei gioup a | as shown in the boxes abo | OVG.    | \$               |                    |                  |

| LEGAL NAME OF OWNER CABLE ONE, INC.            | R OF CABLE | E SYSTEM:                |                      |                          |             | S                            | YSTEM ID#<br>007417 | Name              |
|--|------------|--------------------------|----------------------|--------------------------|-------------|------------------------------|---------------------|-------------------|
| B ONE HUNDRED THIR COMMUNITY/ AREA             |            |                          |                      | ONE HUNDRED FO           |             | BER GROUP<br>SUBSCRIBER GROU | P 0                 | 9                 |
|  |            |                          |                      |                          |             |                              |                     | Computation       |
| CALL SIGN                                      | DSE        | CALL SIGN                | DSE                  | CALL SIGN                | DSE         | CALL SIGN                    | DSE                 | of                |
|  |            |                          |                      |                          |             |                              |                     | Base Rate Fee     |
|  |            |                          |                      |                          |             |                              |                     | and<br>Syndicated |
|  |            |                          |                      |                          |             |                              |                     | Exclusivity       |
|  |            |                          |                      |                          |             |                              |                     | Surcharge         |
|  |            |                          |                      |                          |             |                              |                     | for               |
|  |            |                          |                      |                          |             |                              |                     | Partially         |
|  | <b>_</b>   |                          | ļ                    |                          |             |                              |                     | Distant           |
|  | <b> </b>   |                          | ļ                    |                          |             |                              |                     | Stations          |
|  | <b>-</b>   |                          |                      |                          |             |                              |                     |                   |
|  |            |                          |                      |                          |             |                              |                     |                   |
|  | ļ          |                          |                      |                          |             |                              |                     |                   |
|  | ļ          |                          |                      |                          |             |                              |                     |                   |
|  |            |                          |                      |                          |             |                              |                     |                   |
| Total DSEs                                     |            |                          | 0.00                 | Total DSEs               |             |                              | 0.00                |                   |
| Gross Receipts First Group \$ 0.00             |            | 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 FIR                                | TEENTH     | SUBSCRIBER GROU          | Р                    | ONE HUNDRED              | SIXTEENTH   | SUBSCRIBER GROU              | Р                   |                   |
| COMMUNITY/ AREA                                |            |                          | 0                    | COMMUNITY/ AREA          |             |                              | 0                   |                   |
| CALL SIGN                                      | DSE        | CALL SIGN                | DSE                  | CALL SIGN                | DSE         | CALL SIGN                    | DSE                 |                   |
|  |            |                          |                      |                          |             |                              |                     |                   |
|  |            |                          |                      |                          |             |                              |                     |                   |
|  |            |                          |                      |                          |             |                              |                     |                   |
|  |            |                          |                      |                          | ••••••••••• |                              |                     |                   |
|  |            |                          |                      |                          |             |                              |                     |                   |
|  | ļ          |                          |                      |                          |             |                              |                     |                   |
|  |            |                          |                      |                          | <del></del> |                              |                     |                   |
|  |            |                          | ļ                    |                          |             | H                            |                     |                   |
|  | <b>†</b>   |                          |                      |                          |             |                              |                     |                   |
|  |            |                          |                      |                          |             |                              |                     |                   |
|  | <b>.</b>   |                          |                      |                          |             |                              |                     |                   |
|  | ļ          |                          | <u> </u>             |                          |             |                              |                     |                   |
| Total DSEs                                     |            |                          | 0.00                 | Total DSEs               |             |                              | 0.00                |                   |
|  |            | •                        |                      |                          |             | •                            | -                   |                   |
| Gross Receipts Third Gr                        | oup        | \$                       | 0.00                 | Gross Receipts Fourth    | ı Group     | \$                           | 0.00                |                   |
| Base Rate Fee Third Gr                         | oup        | \$                       | 0.00                 | Base Rate Fee Fourth     | n Group     | \$                           | 0.00                |                   |
| Raco Dato Ecc. Add 41-                         | hace ==*   | face for each subsection | hor grows            | as shown in the bayes -  | hove        |                              |                     |                   |
| Base Rate Fee: Add the Enter here and in block |            |                          | bei group a          | as shown in the doxes al | JUVE.       | \$                           |                     |                   |

| CABLE ONE, INC.                     | OF CABLE      | SYSTEM:         |             |                          |                                     | S                             | YSTEM ID#<br>007417 | Name                |
|-------------------------------------|---------------|-----------------|-------------|--------------------------|-------------------------------------|-------------------------------|---------------------|---------------------|
| B ONE HUNDRED SEVEN COMMUNITY/ AREA |               |                 |             | ONE HUNDRED EIG          |                                     | BER GROUP<br>SUBSCRIBER GROUP | 0                   | 9                   |
|                                     |               |                 |             |                          |                                     |                               |                     | Computation         |
| CALL SIGN                           | DSE           | CALL SIGN       | DSE         | CALL SIGN                | DSE                                 | CALL SIGN                     | DSE                 | of<br>Base Rate Fee |
|                                     |               |                 |             |                          |                                     |                               |                     | and                 |
|                                     |               |                 |             |                          |                                     |                               |                     | Syndicated          |
|                                     | <b></b>       |                 |             |                          |                                     | -                             |                     | Exclusivity         |
|                                     |               |                 |             |                          |                                     |                               |                     | Surcharge           |
|                                     |               |                 |             |                          |                                     |                               |                     | for                 |
|                                     | <u> </u>      |                 |             |                          |                                     |                               |                     | Partially           |
|                                     |               |                 | <u> </u>    |                          |                                     | -                             |                     | Distant             |
|                                     | <u></u>       |                 |             |                          |                                     | -                             |                     | Stations            |
|                                     | <b>1</b>      |                 | l           |                          | <del></del>                         |                               | <u></u>             |                     |
|                                     | <b>+</b>      |                 | l           |                          | <u> </u>                            |                               |                     |                     |
|                                     |               |                 |             |                          |                                     |                               |                     |                     |
|                                     |               |                 |             |                          |                                     |                               |                     |                     |
|                                     |               |                 |             |                          |                                     |                               |                     |                     |
| Total DSEs                          |               |                 | 0.00        | Total DSEs               |                                     |                               | 0.00                |                     |
| Gross Receipts First Gro            | מווס          | \$              | 0.00        | Gross Receipts Secon     | Gross Receipts Second Group \$ 0.00 |                               |                     |                     |
| Oross rescipts i list ore           | Jup           |                 | 0.00        | Cross receipts occorn    | и Огоир                             | •                             | 0.00                |                     |
| Base Rate Fee First Gro             | oup           | \$              | 0.00        | Base Rate Fee Secon      | d Group                             | \$                            | 0.00                |                     |
| ONE HUNDRED NIN                     | NTEENTH       | SUBSCRIBER GROU | Р           | ONE HUNDRED T            | WENTIETH                            | SUBSCRIBER GROUP              | )                   |                     |
| COMMUNITY/ AREA                     |               |                 | 0           | COMMUNITY/ AREA          |                                     |                               | 0                   |                     |
| CALL SIGN                           | DSE           | CALL SIGN       | DSE         | CALL SIGN                | DSE                                 | CALL SIGN                     | DSE                 |                     |
|                                     |               |                 |             |                          |                                     |                               |                     |                     |
|                                     |               |                 |             |                          |                                     |                               |                     |                     |
|                                     |               |                 |             |                          |                                     |                               |                     |                     |
|                                     | <b></b>       |                 |             |                          |                                     | -                             |                     |                     |
|                                     |               |                 |             |                          | <u> </u>                            |                               | ···                 |                     |
|                                     |               |                 |             |                          |                                     |                               |                     |                     |
|                                     |               |                 |             |                          |                                     |                               |                     |                     |
|                                     | ļ             |                 |             |                          |                                     |                               |                     |                     |
|                                     | ļ             |                 |             |                          |                                     |                               |                     |                     |
|                                     |               |                 |             |                          |                                     |                               |                     |                     |
|                                     | <u></u>       |                 |             |                          |                                     | -                             |                     |                     |
|                                     | <u> </u>      |                 | l           |                          | <del></del>                         |                               | ···                 |                     |
|                                     |               |                 |             |                          |                                     |                               |                     |                     |
| 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     | ı Group                             | \$                            | 0.00                |                     |
| Base Rate Fee: Add the              |               |                 | ber group a | as shown in the boxes at | oove.                               |                               |                     |                     |
| Enter here and in block             | 3, line 1, sp | pace L (page 7) |             |                          |                                     | \$                            |                     |                     |

| LEGAL NAME OF OWNER CABLE ONE, INC.               | R OF CABLE    | ESYSTEM:         |             |                         |            | S                | YSTEM ID#<br>007417 | Name                |
|---|---------------|------------------|-------------|-------------------------|------------|------------------|---------------------|---------------------|
| В   | LOCK A:       | COMPUTATION OF   | BASE RA     | ATE FEES FOR EACH       | I SUBSCRI  | BER GROUP        |                     |                     |
| ONE HUNDRED TWEI                                  | NTY-FIRST     | SUBSCRIBER GROU  | Р           | ii -                    | ITY-SECOND | SUBSCRIBER GROUP |                     | Ω                   |
| COMMUNITY/ AREA                                   |               |                  | 0           | COMMUNITY/ AREA         |            |                  | 0                   | 9<br>Computation    |
| CALL SIGN   | DSE           | CALL SIGN        | DSE         | CALL SIGN               | DSE        | CALL SIGN        | DSE                 | Computation of      |
| 07.22 070.1                                       | 202           | 07.122.01011     | 302         | 0,122 01011             | 332        | 07.22 0.0.1      | 332                 | Base Rate Fee       |
|   |               |                  |             |                         |            |                  |                     | and                 |
|   |               |                  |             |                         |            |                  |                     | Syndicated          |
|   |               |                  |             |                         |            |                  |                     | Exclusivity         |
|   |               |                  |             |                         |            |                  |                     | Surcharge           |
|   |               |                  |             |                         |            |                  |                     | for                 |
|   |               |                  |             |                         |            |                  |                     | Partially           |
|   |               |                  |             |                         |            |                  |                     | Distant<br>Stations |
|   |               |                  |             |                         |            |                  |                     | Gtations            |
|   | <b>†</b>      |                  |             |                         |            |                  |                     |                     |
|   |               |                  |             |                         |            |                  |                     |                     |
|   |               |                  |             |                         |            |                  |                     |                     |
|   |               |                  |             |                         |            |                  |                     |                     |
|   |               |                  |             |                         |            |                  |                     |                     |
| Total DSEs  |               |                  | 0.00        | Total DSEs              |            |                  | 0.00                |                     |
| Gross Receipts First Gr                           | oup           | \$               | 0.00        | Gross Receipts Secon    | nd Group   | \$               | 0.00                |                     |
|   |               |                  |             |                         |            | _                |                     |                     |
| Base Rate Fee First Gr                            | oup           | \$               | 0.00        | Base Rate Fee Secon     | nd Group   | \$               | 0.00                |                     |
| ONE HUNDRED TWEN                                  | NTY-THIRD     | SUBSCRIBER GROUP |             | ONE HUNDRED TWEN        | NTY-FOURTH | SUBSCRIBER GROUP |                     |                     |
| COMMUNITY/ AREA                                   |               |                  | 0           | COMMUNITY/ AREA         |            |                  | 0                   |                     |
| CALL SIGN   | DSE           | CALL SIGN        | DSE         | CALL SIGN               | DSE        | CALL SIGN        | DSE                 |                     |
|   |               |                  |             |                         |            |                  |                     |                     |
|   |               |                  |             |                         |            |                  |                     |                     |
|   |               |                  |             |                         |            |                  |                     |                     |
|   | ·             |                  |             |                         |            | -                | ·····               |                     |
|   |               |                  |             |                         |            |                  |                     |                     |
|   |               |                  |             |                         |            |                  |                     |                     |
|   |               |                  |             |                         |            |                  |                     |                     |
|   |               |                  |             |                         |            |                  |                     |                     |
|   |               |                  |             |                         |            |                  |                     |                     |
|   | <b></b>       |                  |             |                         |            |                  |                     |                     |
|   | <b>+</b>      |                  |             |                         |            |                  |                     |                     |
|   | +             |                  |             |                         |            |                  |                     |                     |
|   |               |                  | ļ           |                         |            |                  |                     |                     |
| Total DSEs  | •             |                  | 0.00        | Total DSEs              |            |                  | 0.00                |                     |
| Gross Receipts Third G                            | roup          | \$               | 0.00        | Gross Receipts Fourth   | n Group    | \$               | 0.00                |                     |
| ,   | •             |                  |             |                         | •          |                  |                     |                     |
| Base Rate Fee Third G                             | roup          | \$               | 0.00        | Base Rate Fee Fourth    | n Group    | \$               | 0.00                |                     |
|   |               |                  |             | Н                       |            |                  |                     |                     |
| Base Rate Fee: Add the<br>Enter here and in block |               |                  | ber group a | as shown in the boxes a | bove.      | s                |                     |                     |
| Lines here and in block                           | o, iii o i, o | cass E (page 1)  |             |                         |            | <u> </u>         |                     |                     |

| LEGAL NAME OF OWNER CABLE ONE, INC. | R OF CABLE   | SYSTEM:                         |   |                          |            | S                | YSTEM ID#<br>007417 | Name              |
|-------------------------------------|--------------|---------------------------------|---|--------------------------|------------|------------------|---------------------|-------------------|
|                                     |              | COMPUTATION OF SUBSCRIBER GROUP | PUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP  ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP  COMMUNITY/ AREA  0 |                          |            |                  |                     |                   |
|                                     |              |                                 |   |                          |            |                  |                     | Computation       |
| CALL SIGN                           | DSE          | CALL SIGN                       | DSE   | CALL SIGN                | DSE        | CALL SIGN        | DSE                 | of                |
|                                     |              |                                 |   |                          |            |                  |                     | Base Rate Fee     |
|                                     |              |                                 |   |                          |            |                  |                     | and<br>Syndicated |
|                                     |              |                                 |   |                          |            |                  |                     | Exclusivity       |
|                                     |              |                                 |   |                          |            |                  |                     | Surcharge         |
|                                     |              |                                 |   |                          |            |                  |                     | for               |
|                                     |              |                                 |   |                          |            |                  |                     | Partially         |
|                                     | ļ            |                                 | <br>  |                          |            |                  |                     | Distant           |
|                                     | <del> </del> |                                 |   |                          |            |                  |                     | Stations          |
|                                     | <b>-</b>     |                                 | l   |                          | <u> </u>   |                  | <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 Secon      | d Group    | \$               | 0.00                |                   |
| ONE HUNDRED TWENTY                  | -SEVENTH     | SUBSCRIBER GROUP                |   | ONE HUNDRED TWEN         | NTY-EIGHTH | SUBSCRIBER GROUP |                     |                   |
| COMMUNITY/ AREA                     |              |                                 | 0   | COMMUNITY/ AREA          |            |                  | 0                   |                   |
| CALL SIGN                           | DSE          | CALL SIGN                       | DSE   | CALL SIGN                | DSE        | CALL SIGN        | DSE                 |                   |
|                                     |              |                                 |   |                          |            |                  |                     |                   |
|                                     |              |                                 |   |                          |            |                  |                     |                   |
|                                     |              |                                 |   |                          |            |                  |                     |                   |
|                                     |              |                                 |   |                          |            |                  |                     |                   |
|                                     |              |                                 |   |                          |            |                  |                     |                   |
|                                     | ļ            |                                 |   |                          |            |                  |                     |                   |
|                                     | ļ            |                                 | <br>  |                          |            |                  |                     |                   |
|                                     | <b>-</b>     |                                 |   |                          |            |                  | ···                 |                   |
|                                     | <b>-</b>     |                                 |   |                          |            | H                |                     |                   |
|                                     |              |                                 |   |                          |            |                  |                     |                   |
|                                     | ļ            |                                 |   |                          |            |                  |                     |                   |
|                                     | ļ            |                                 |   |                          |            |                  |                     |                   |
|                                     |              |                                 |   |                          |            |                  |                     |                   |
| Total DSEs                          |              |                                 | 0.00  | Total DSEs               |            |                  | 0.00                |                   |
| Gross Receipts Third G              | roup         | \$                              | 0.00  | Gross Receipts Fourth    | Group      | \$               | 0.00                |                   |
| Base Rate Fee Third G               | roup         | \$                              | 0.00  | Base Rate Fee Fourth     | Group      | \$               | 0.00                |                   |
| Page Pate Face Add II               | hace ==4:    | food for each subsection        | hor ere   | on about in the barrer   | 2010       |                  |                     |                   |
| Enter here and in block             |              |                                 | nei group i   | as shown in the boxes ab | oove.      | \$               |                     |                   |

| CABLE ONE, INC.                                   | OF CABLE  | SYSTEM:                            |  |                          |                | S                | YSTEM ID#<br>007417 | Name                |
|---|-----------|------------------------------------|--|--------------------------|----------------|------------------|---------------------|---------------------|
|   |           | COMPUTATION OF<br>SUBSCRIBER GROUP | MPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP  SCRIBER GROUP  ONE HUNDRED THIRTIETH SUBSCRIBER GROUP  COMMUNITY/ AREA  O |                          |                |                  |                     |                     |
| COMMONT I/ AILA                                   |           |                                    |  | COMMONT IT AREA          |                |                  |                     | 9<br>Computation    |
| CALL SIGN   | DSE       | CALL SIGN                          | DSE  | CALL SIGN                | DSE            | CALL SIGN        | DSE                 | of                  |
|   |           |                                    |  |                          |                |                  |                     | Base Rate Fee       |
|   |           |                                    |  |                          |                |                  |                     | and<br>Syndicated   |
|   | <b></b>   |                                    |  |                          | <u> </u>       | -                |                     | Exclusivity         |
|   |           |                                    |  |                          |                |                  |                     | Surcharge           |
|   |           |                                    |  |                          |                |                  |                     | for                 |
|   |           |                                    |  |                          |                |                  |                     | Partially           |
|   | <b>_</b>  |                                    |  |                          | <del>.  </del> |                  |                     | Distant<br>Stations |
|   |           |                                    | l  |                          |                |                  |                     | SIGUOUS             |
|   | <b>-</b>  |                                    | l  |                          | <u> </u>       |                  |                     |                     |
|   |           |                                    |  |                          |                |                  |                     |                     |
|   | ļ         |                                    |  |                          |                |                  |                     |                     |
|   |           |                                    |  |                          |                |                  |                     |                     |
|   |           |                                    |  |                          |                |                  |                     |                     |
| Total DSEs  |           |                                    | 0.00   | Total DSEs               |                |                  | 0.00                |                     |
| Gross Receipts First Gro                          | oup       | \$                                 | 0.00   | Gross Receipts Secon     | d Group        | \$               | 0.00                |                     |
| Base Rate Fee First Gro                           | oup       | \$                                 | 0.00   | Base Rate Fee Secon      | d Group        | \$               | 0.00                |                     |
| ONE HUNDRED THIS                                  | RTY-FIRST | SUBSCRIBER GROUP                   |  | ONE HUNDRED THIR         | TY-SECOND      | SUBSCRIBER GROUP |                     |                     |
| COMMUNITY/ AREA                                   |           |                                    | 0  | COMMUNITY/ AREA          |                |                  | 0                   |                     |
| CALL SIGN   | DSE       | CALL SIGN                          | DSE  | CALL SIGN                | DSE            | CALL SIGN        | DSE                 |                     |
|   |           |                                    |  |                          |                |                  |                     |                     |
|   |           |                                    |  |                          |                |                  |                     |                     |
|   |           |                                    |  |                          |                |                  |                     |                     |
|   |           |                                    |  |                          |                |                  |                     |                     |
|   |           |                                    |  |                          |                |                  |                     |                     |
|   |           |                                    |  |                          |                |                  |                     |                     |
|   | <b>_</b>  |                                    | l  |                          | <del></del>    |                  |                     |                     |
|   |           |                                    |  |                          |                | H                |                     |                     |
|   |           |                                    |  |                          |                |                  |                     |                     |
|   | ļ         |                                    |  |                          |                |                  |                     |                     |
|   | <b>_</b>  |                                    |  |                          |                |                  |                     |                     |
|   |           |                                    | <u></u>  |                          |                |                  |                     |                     |
| Total DSEs  |           |                                    | 0.00   | Total DSEs               |                |                  | 0.00                |                     |
| Gross Receipts Third G                            | oup       | \$                                 | 0.00   | Gross Receipts Fourth    | Group          | \$               | 0.00                |                     |
| <b>Base Rate Fee</b> Third G                      | oup       | \$                                 | 0.00   | Base Rate Fee Fourth     | ı Group        | \$               | 0.00                |                     |
| Para Pata Face Addition                           | harri     |                                    | <b>L</b>   |                          |                |                  |                     |                     |
| Base Rate Fee: Add the<br>Enter here and in block |           |                                    | per group a  | as shown in the boxes at | ove.           | \$               |                     |                     |

| LEGAL NAME OF OWNER CABLE ONE, INC.                 | OF CABLE  | SYSTEM:          |             |                           |           | SY               | STEM ID#<br>007417 | Name             |
|---|-----------|------------------|-------------|---------------------------|-----------|------------------|--------------------|------------------|
| В   | LOCK A:   | COMPUTATION OF   | BASE RA     | TE FEES FOR EACH          | SUBSCRI   | BER GROUP        |                    |                  |
|   |           | SUBSCRIBER GROUP |             | III                       |           | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA                                     |           |                  | 0           | COMMUNITY/ AREA           |           |                  | 0                  | 9<br>Computation |
| CALL SIGN   | DSE       | CALL SIGN        | DSE         | CALL SIGN                 | DSE       | CALL SIGN        | DSE                | of               |
| 07.122 0.0.1  | 202       | 07.22 0.0.1      |             | 07122 01011               | 332       | 5/122 5/5/1      | 302                | Base Rate Fee    |
|   |           |                  |             |                           |           |                  |                    | and              |
|   |           |                  |             |                           |           |                  |                    | Syndicated       |
|   |           |                  |             |                           |           | H                |                    | Exclusivity      |
|   |           |                  |             | -                         |           |                  |                    | Surcharge        |
|   |           |                  |             |                           |           |                  |                    | for              |
|   |           |                  |             |                           |           |                  |                    | Partially        |
|   |           |                  |             | -                         |           |                  |                    | Distant          |
|   |           |                  |             |                           |           |                  |                    | Stations         |
|   |           |                  |             |                           |           |                  |                    | Stations         |
|   |           |                  |             |                           |           |                  |                    |                  |
|   |           |                  |             |                           |           | H                |                    |                  |
|   |           |                  |             |                           |           |                  |                    |                  |
|   |           |                  |             |                           |           |                  |                    |                  |
|   |           |                  |             | -                         |           |                  |                    |                  |
| Total DCCs  | <u> </u>  |                  | 0.00        | Total DCCa                |           |                  | 0.00               |                  |
| Total DSEs  |           | •                | 0.00        | Total DSEs                | l Craun   | •                | 0.00               |                  |
| Gross Receipts First Gro                            | oup       | <u>\$</u>        | 0.00        | Gross Receipts Second     | i Group   | \$               | 0.00               |                  |
| Base Rate Fee First Gro                             | oup       | \$               | 0.00        | Base Rate Fee Second      | l Group   | \$               | 0.00               |                  |
| ONE HUNDRED THIS                                    | RTY-FIFTH | SUBSCRIBER GROUP |             | ONE HUNDRED THI           | RTY-SIXTH | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA                                     |           |                  | 0           | COMMUNITY/ AREA           |           |                  | 0                  |                  |
| CALL SIGN   | DSE       | CALL SIGN        | DSE         | CALL SIGN                 | DSE       | CALL SIGN        | DSE                |                  |
|   |           |                  |             |                           |           |                  |                    |                  |
|   |           |                  |             |                           |           |                  |                    |                  |
|   |           |                  |             |                           |           |                  |                    |                  |
|   |           |                  |             |                           |           |                  |                    |                  |
|   |           |                  |             |                           |           |                  |                    |                  |
|   |           |                  |             |                           |           |                  |                    |                  |
|   |           |                  |             |                           |           |                  |                    |                  |
|   | <b>.</b>  |                  |             |                           |           |                  |                    |                  |
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|   |           |                  |             |                           |           |                  |                    |                  |
| 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               |                  |
|   |           |                  |             | Ш                         |           |                  |                    |                  |
| Base Rate Fee: Add the<br>Enter here and in block 3 |           |                  | ber group a | as shown in the boxes abo | ove.      | \$               |                    |                  |
|   |           | ,                |             |                           |           |                  |                    |                  |

| CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base  Syn Exc Sur  |                      |
|--|----------------------|
| CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base  CALL SIGN DSE CALL SIGN  | 9                    |
| Base Rate Fee First Group  Save Sur State Fee First Group  Save Sur  | mputation            |
| Syn Exc Sur  Pa Di St  Total DSEs  0.00 Gross Receipts First Group Sase Rate Fee First Group Sase Rate Fee First Group Sase Rate Fee First Group ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O O  Syn Exc Sur  Di St  Di S | of                   |
| Syn Exc Sur  Pa Di St  Total DSEs O.00 Gross Receipts First Group Sase Rate Fee Second Group ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O   | se Rate Fee<br>and   |
| Sur  | yndicated            |
| Page 1   | xclusivity           |
| Page 1   | urcharge             |
| Steeling Ste | for                  |
| St.  St.  St.  St.  St.  St.  St.  St.   | Partially<br>Distant |
| Gross Receipts First Group  Base Rate Fee First Group  ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP  COMMUNITY/ AREA  OGROSS Receipts Second Group  Base Rate Fee Second Group  ONE HUNDRED FORTIETH SUBSCRIBER GROUP  COMMUNITY/ AREA  OGROSS Receipts Second Group  ONE HUNDRED FORTIETH SUBSCRIBER GROUP  COMMUNITY/ AREA  OGROSS Receipts Second Group  SOME HUNDRED FORTIETH SUBSCRIBER GROUP  COMMUNITY/ AREA  OGROSS Receipts Second Group  SOME HUNDRED FORTIETH SUBSCRIBER GROUP  COMMUNITY/ AREA  OGROSS Receipts Second Group  SOME HUNDRED FORTIETH SUBSCRIBER GROUP  | Stations             |
| Gross Receipts First Group \$ 0.00  Base Rate Fee First Group \$ 0.00  ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP  COMMUNITY/ AREA 0 COMMUNITY/ AREA 0  |                      |
| Gross Receipts First Group \$ 0.00  Base Rate Fee First Group \$ 0.00  ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP  COMMUNITY/ AREA 0 COMMUNITY/ AREA 0  |                      |
| Gross Receipts First Group \$ 0.00  Base Rate Fee First Group \$ 0.00  ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP  COMMUNITY/ AREA 0 COMMUNITY/ AREA 0  |                      |
| Gross Receipts First Group \$ 0.00  Base Rate Fee First Group \$ 0.00  ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP  COMMUNITY/ AREA 0 COMMUNITY/ AREA 0  |                      |
| Gross Receipts First Group \$ 0.00  Base Rate Fee First Group \$ 0.00  ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP  COMMUNITY/ AREA 0 COMMUNITY/ AREA 0  |                      |
| Gross Receipts First Group \$ 0.00  Base Rate Fee First Group \$ 0.00  ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP  COMMUNITY/ AREA 0 COMMUNITY/ AREA 0  |                      |
| Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00  ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP  COMMUNITY/ AREA 0 COMMUNITY/ AREA 0   |                      |
| ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O  |                      |
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| CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  CALL SIGN D |                      |
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| Total DSEs   |                      |
| Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00   |                      |
| Sissing Country Countr |                      |
| Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00   |                      |
|  |                      |
| Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.  Enter here and in block 3, line 1, space L (page 7)  \$  |                      |

| LEGAL NAME OF OWNER CABLE ONE, INC. | OF CABLE     | SYSTEM:               |               |                          |           | SY               | STEM ID#<br>007417 | Name             |
|-------------------------------------|--------------|-----------------------|---------------|--------------------------|-----------|------------------|--------------------|------------------|
| BI                                  | LOCK A:      | COMPUTATION OF        | BASE RA       | TE FEES FOR EACH         | SUBSCRI   | BER GROUP        |                    |                  |
|                                     |              | SUBSCRIBER GROUP      |               | III                      |           | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA                     |              |                       | 0             | COMMUNITY/ AREA          |           |                  | 0                  | 9<br>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 Second    | d Group   | \$               | 0.00               |                  |
| Base Rate Fee First Gro             | oup          | \$                    | 0.00          | Base Rate Fee Second     | d Group   | \$               | 0.00               |                  |
| ONE HUNDRED FOR                     | TY-THIRD     | SUBSCRIBER GROUP      |               | ONE HUNDRED FORT         | 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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|                                     |              |                       |               |                          |           |                  |                    |                  |
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|                                     |              |                       |               |                          |           |                  |                    |                  |
| Total DSEs                          |              |                       | 0.00          | Total DSEs               |           |                  | 0.00               |                  |
| Gross Receipts Third Gr             | OUD          | <u> </u>              | 0.00          | Gross Receipts Fourth    | Group     | \$               | 0.00               |                  |
| TOTOSS NECEIPIS THIII OF            | oup          | <u>\$</u>             | <u> </u>      | O.033 Necelpts i outti   | Cloup     | •                | 0.00               |                  |
| Base Rate Fee Third Gr              | oup          | \$                    | 0.00          | Base Rate Fee Fourth     | Group     | \$               | 0.00               |                  |
| Base Rate Fee: Add the              | hase rate    | fees for each subscri | ner aroun s   | as shown in the hoves ab | ove       |                  |                    |                  |
| Enter here and in block 3           |              |                       | - 5. g. oap c |                          | •.        | \$               |                    |                  |

| CABLE ONE, INC.                                     | OF CABLE | SYSTEM:          |             |                           |           | SY               | STEM ID#<br>007417 | Name             |
|---|----------|------------------|-------------|---------------------------|-----------|------------------|--------------------|------------------|
| В   | LOCK A:  | COMPUTATION OF   | BASE RA     | TE FEES FOR EACH          | SUBSCRI   | BER GROUP        | -                  |                  |
|   |          | SUBSCRIBER GROUP |             |                           |           | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA                                     |          |                  | 0           | COMMUNITY/ AREA           |           |                  | 0                  | 9<br>Computation |
| CALL SIGN   | DSE      | CALL SIGN        | DSE         | CALL SIGN                 | DSE       | CALL SIGN        | DSE                | of               |
| 07.122 0.0.1  | 202      | 07.122.07.07.1   |             | 0,122 0.0.1               | 332       | 07.122 0.011     | 302                | Base Rate Fee    |
|   |          |                  |             |                           |           |                  |                    | and              |
|   |          |                  |             |                           |           | <b>-</b>         |                    | Syndicated       |
|   |          |                  |             |                           |           | H                |                    | Exclusivity      |
|   |          |                  |             |                           |           |                  | ·                  | Surcharge        |
|   |          |                  |             |                           |           |                  |                    | for              |
|   |          |                  |             |                           |           |                  |                    | Partially        |
|   |          |                  |             |                           |           |                  | ·                  | Distant          |
|   |          |                  |             |                           |           |                  |                    | Stations         |
|   |          |                  |             |                           |           |                  |                    | Stations         |
|   |          |                  |             |                           |           |                  |                    |                  |
|   |          |                  |             |                           |           |                  |                    |                  |
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|   |          |                  |             |                           |           |                  |                    |                  |
|   |          |                  | 0.00        |                           |           | Ш                |                    |                  |
| Total DSEs  |          |                  | 0.00        | Total DSEs                |           |                  | 0.00               |                  |
| Gross Receipts First Gro                            | oup      | \$               | 0.00        | Gross Receipts Second     | d Group   | \$               | 0.00               |                  |
| Base Rate Fee First Gro                             | oup      | \$               | 0.00        | Base Rate Fee Second      | d Group   | \$               | 0.00               |                  |
| ONE HUNDRED FORTY-                                  | SEVENTH  | SUBSCRIBER GROUP |             | ONE HUNDRED FOR           | TY-EIGHTH | 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 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<br>Enter here and in block 3 |          |                  | ber group a | as shown in the boxes abo | ove.      | \$               |                    |                  |
|   |          |                  |             |                           |           |                  |                    |                  |

| CABLE ONE, INC.         | R OF CABLE  | SYSTEM:                |              |                          |               | S                            | YSTEM ID#<br>007417 | Name                |
|-------------------------|-------------|------------------------|--------------|--------------------------|---------------|------------------------------|---------------------|---------------------|
| ONE HUNDRED FOR         |             |                        |              | ATE FEES FOR EACH        |               | BER GROUP<br>SUBSCRIBER GROU | P <b>0</b>          | 9                   |
| COMMONT IT AREA         |             |                        |              | COMMONT I/ AREA          |               |                              |                     | Computation         |
| CALL SIGN               | DSE         | CALL SIGN              | DSE          | CALL SIGN                | DSE           | CALL SIGN                    | DSE                 | of                  |
|                         |             |                        |              |                          |               |                              |                     | Base Rate Fee       |
|                         |             |                        |              |                          |               |                              |                     | and<br>Syndicated   |
|                         |             |                        |              |                          |               |                              |                     | Exclusivity         |
|                         |             |                        |              |                          |               |                              |                     | Surcharge           |
|                         |             |                        |              |                          |               | <br>                         |                     | for                 |
|                         |             |                        |              |                          |               |                              |                     | Partially           |
|                         |             |                        |              |                          |               | -                            |                     | Distant<br>Stations |
|                         |             |                        |              |                          |               |                              |                     | -                   |
|                         |             |                        |              |                          |               |                              |                     |                     |
|                         |             |                        |              |                          |               |                              |                     |                     |
|                         |             |                        |              |                          |               |                              |                     |                     |
|                         |             |                        |              |                          |               |                              |                     |                     |
| Total DSEs              | ·           | .,                     | 0.00         | Total DSEs               |               | .,                           | 0.00                |                     |
| Gross Receipts First Gr | roup        | •                      | 0.00         | Gross Receipts Secon     | nd Group      | •                            | 0.00                |                     |
| Gross Receipts First Gr | oup         | \$                     | 0.00         | Gloss Receipts Secon     | ia Group      | \$                           | 0.00                |                     |
| Base Rate Fee First Gr  | roup        | \$                     | 0.00         | Base Rate Fee Secon      | nd Group      | \$                           | 0.00                |                     |
| ONE HUNDRED FIF         | TY-FIRST    | SUBSCRIBER GROU        |              | ti -                     | Y-SECOND      | SUBSCRIBER GROU              | Р                   |                     |
| COMMUNITY/ AREA         |             |                        | 0            | COMMUNITY/ AREA          |               |                              | 0                   |                     |
| CALL SIGN               | DSE         | CALL SIGN              | DSE          | CALL SIGN                | DSE           | CALL SIGN                    | DSE                 |                     |
|                         |             |                        |              |                          |               |                              |                     |                     |
|                         | ••••••      |                        |              |                          | ···           |                              |                     |                     |
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|                         |             |                        |              |                          |               |                              |                     |                     |
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|                         |             |                        |              |                          |               | -                            |                     |                     |
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|                         |             |                        |              |                          |               |                              |                     |                     |
|                         |             |                        |              |                          |               |                              |                     |                     |
| Total DSEs              |             |                        | 0.00         | Total DSEs               |               |                              | 0.00                |                     |
| Gross Receipts Third G  | iroup       | \$                     | 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 th   | e base rate | e fees for each subser | iber aroun : | as shown in the boxes al | bove.         |                              |                     |                     |
| Enter here and in block |             |                        | <b>5</b> F   |                          |               | \$                           |                     |                     |

| CABLE ONE, INC.          | R OF CABLE    | SYSTEM:                           |             |  |             | S                             | YSTEM ID#<br>007417 | Name                |
|--------------------------|---------------|-----------------------------------|-------------|--|-------------|-------------------------------|---------------------|---------------------|
|                          |               | COMPUTATION OF<br>SUBSCRIBER GROU |             | ATE FEES FOR EACH ONE HUNDRED FIFT COMMUNITY/ AREA |             | BER GROUP<br>SUBSCRIBER GROUP | 0                   | 9                   |
|                          |               |                                   |             |  |             |                               |                     | Computation         |
| CALL SIGN                | DSE           | CALL SIGN                         | DSE         | CALL SIGN  | DSE         | CALL SIGN                     | DSE                 | of<br>Base Rate Fee |
|                          |               |                                   |             |  |             |                               |                     | and                 |
|                          | -             |                                   |             |  |             |                               |                     | Syndicated          |
|                          |               |                                   |             |  |             |                               |                     | Exclusivity         |
|                          |               |                                   |             |  |             |                               |                     | Surcharge           |
|                          |               |                                   |             |  |             |                               |                     | for                 |
|                          |               |                                   |             |  |             | -                             |                     | Partially           |
|                          | <u></u>       |                                   |             |  |             |                               |                     | Distant             |
|                          | ļ             |                                   |             |  |             | -                             |                     | Stations            |
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|                          |               |                                   |             |  |             |                               |                     |                     |
|                          |               |                                   |             |  |             |                               |                     |                     |
| Total DSEs               |               |                                   | 0.00        | Total DSEs   |             |                               | 0.00                |                     |
| Gross Receipts First Gro | nun           | \$                                | 0.00        | Gross Receipts Secon                               | ıd Group    | \$                            | 0.00                |                     |
| Gross Receipts First Gro | oup           | <b>4</b>                          | 0.00        | Cross Receipts Gecom                               | и Огоир     | •                             | 0.00                |                     |
| Base Rate Fee First Gro  | oup           | \$                                | 0.00        | Base Rate Fee Secon                                | d Group     | \$                            | 0.00                |                     |
| ONE HUNDRED FIF          | TY-FIFTH      | SUBSCRIBER GROU                   | Р           | ONE HUNDRED F                                      | IFTY-SIXTH  | SUBSCRIBER GROUP              | ס                   |                     |
| COMMUNITY/ AREA          |               |                                   | 0           | COMMUNITY/ AREA                                    |             |                               | 0                   |                     |
| CALL SIGN                | DSE           | CALL SIGN                         | DSE         | CALL SIGN  | DSE         | CALL SIGN                     | DSE                 |                     |
|                          |               |                                   |             |  |             |                               |                     |                     |
|                          |               |                                   |             |  |             |                               |                     |                     |
|                          |               |                                   |             |  |             |                               |                     |                     |
|                          |               |                                   |             |  |             |                               |                     |                     |
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|                          | <b>-</b>      |                                   | l           |  | <u></u>     |                               |                     |                     |
| Total DSEs               |               |                                   | 0.00        | Total DSEs   |             |                               | 0.00                |                     |
| Gross Receipts Third G   | roup          | \$                                | 0.00        | Gross Receipts Fourth                              | Group       | \$                            | 0.00                |                     |
| Base Rate Fee Third Gi   | roup          | \$                                | 0.00        | Base Rate Fee Fourth                               | ı Group     | \$                            | 0.00                |                     |
| Base Rate Fee: Add the   |               |                                   | ber group a | as shown in the boxes at                           | oove.       |                               |                     |                     |
| Enter here and in block  | ع, iine 1, sp | pace ∟ (page /)                   |             |  |             | \$                            |                     |                     |

| CABLE ONE, INC.                                  | OF CABLE     | SYSTEM:          |             |                          |                   | SY               | STEM ID#<br>007417 | Name             |
|--|--------------|------------------|-------------|--------------------------|-------------------|------------------|--------------------|------------------|
| В  | LOCK A:      | COMPUTATION OF   | BASE RA     | TE FEES FOR EACH         | SUBSCRI           | BER GROUP        |                    |                  |
| ONE HUNDRED FIFTY-                               | SEVENTH      | SUBSCRIBER GROUP |             | ONE HUNDRED FIF          | TY-EIGHTH         | SUBSCRIBER GROUP |                    | •                |
| COMMUNITY/ AREA                                  |              |                  | 0           | COMMUNITY/ AREA          |                   |                  | 0                  | 9<br>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         |
|  |              |                  |             |                          |                   |                  |                    |                  |
|  |              |                  |             |                          |                   |                  |                    |                  |
|  | ļ            |                  |             |                          | ļ                 | H                |                    |                  |
|  |              |                  |             |                          |                   |                  |                    |                  |
|  |              |                  |             |                          |                   |                  |                    |                  |
|  |              |                  |             |                          |                   |                  |                    |                  |
| Total DSEs                                       |              |                  | 0.00        | Total DSEs               |                   |                  | 0.00               |                  |
| Gross Receipts First Gro                         | oup          | \$               | 0.00        | Gross Receipts Second    | d Group           | \$               | 0.00               |                  |
| Base Rate Fee First Gro                          | oup          | \$               | 0.00        | Base Rate Fee Second     | d Group           | \$               | 0.00               |                  |
| ONE HUNDRED FIF                                  | TY-NINTH     | SUBSCRIBER GROUP |             | ONE HUNDRE               | D SIXTIETH        | SUBSCRIBER GROUP |                    |                  |
| COMMUNITY/ AREA                                  |              |                  | 0           | COMMUNITY/ AREA          |                   |                  | 0                  |                  |
| CALL SIGN  | DSE          | CALL SIGN        | DSE         | CALL SIGN                | DSE               | CALL SIGN        | DSE                |                  |
|  |              |                  |             |                          |                   |                  |                    |                  |
|  |              |                  |             |                          |                   |                  |                    |                  |
|  |              |                  |             |                          |                   |                  |                    |                  |
|  |              |                  |             |                          |                   |                  |                    |                  |
|  |              |                  |             |                          |                   |                  |                    |                  |
|  |              |                  |             |                          |                   |                  |                    |                  |
|  | <del> </del> |                  | ļ           |                          | ļ                 |                  | <u>-</u>           |                  |
|  | <del> </del> |                  |             |                          |                   |                  | ·                  |                  |
|  | t            |                  | ļ           |                          | <b></b>           | H                | <u> </u>           |                  |
|  |              |                  | ļ           |                          | <b>†</b>          |                  |                    |                  |
|  | †            |                  |             |                          |                   |                  |                    |                  |
|  |              |                  |             |                          | ••••••            |                  |                    |                  |
|  | [            |                  |             |                          |                   |                  |                    |                  |
|  |              |                  |             |                          |                   |                  |                    |                  |
| 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               |                  |
| Page Pate Face Add "                             | hace ==4:    | food for each    | hor gra     | on about in the barrer   | 010               |                  |                    |                  |
| Base Rate Fee: Add the Enter here and in block 3 |              |                  | pei gioup a | as shown in the boxes ab | ∪v <del>c</del> . | \$               |                    |                  |

| CALL SIGN             | DSE      | CALL SIGN      | DSE      | CALL SIGN             | DSE     | CALL SIGN       | DSE        |                    |
|-----------------------|----------|----------------|----------|-----------------------|---------|-----------------|------------|--------------------|
|                       | T _      | II             |          |                       | T _     | II              |            |                    |
| OMMUNITY/ AREA        | BILOXI   | , HARRISON CO  | UNTY     | COMMUNITY/ AREA       | HARRIS  | ON CO (DIAMON   | DHEAD), GI |                    |
|                       | THIRD    | SUBSCRIBER GRO | UP       |                       | FOURTH  | SUBSCRIBER GROU | JP_        |                    |
| ase Rate Fee First G  | oup      | \$             | 0.00     | Base Rate Fee Second  | d Group | \$              | 0.00       |                    |
| F                     | •        |                | ,        |                       | - "F    | <u>·</u>        |            |                    |
| ross Receipts First G | oup      | \$ 64          | 6,519.11 | Gross Receipts Second | d Group | \$ 9            | 0.00       |                    |
| otal DSEs             | 1        | Н              | 0.00     | Total DSEs            | 1       |                 | 0.00       |                    |
|                       |          |                |          |                       |         |                 |            |                    |
|                       |          |                |          |                       |         |                 |            |                    |
|                       |          |                |          |                       |         |                 |            |                    |
|                       | <b>-</b> |                |          |                       |         | H               |            |                    |
|                       |          |                |          |                       |         |                 |            | Stations           |
|                       |          |                |          |                       |         |                 |            | Distant            |
|                       |          |                | ····     |                       |         |                 |            | Partially          |
|                       |          |                |          |                       |         |                 |            | Surcharge<br>for   |
|                       |          |                |          |                       |         |                 |            | Exclusivit         |
|                       |          |                |          |                       |         |                 |            | Syndicate          |
|                       |          |                |          |                       |         |                 |            | Base Rate F<br>and |
| CALL SIGN             | DSE      | CALL SIGN      | DSE      | CALL SIGN             | DSE     | CALL SIGN       | DSE        | of                 |
|                       |          |                |          |                       |         | ,               |            | Computation        |
| OMMUNITY/ AREA        |          | I SPRINGS, POR |          | COMMUNITY/ AREA       |         | OULA, ESCATA    |            | 9                  |
|                       | FIRST    | SUBSCRIBER GRO | IIP      |                       | SECOND  | SUBSCRIBER GROU | IP         |                    |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID#  007417 |         |                                 |               |                       |           |                |      |                          |
|---|---------|---------------------------------|---------------|-----------------------|-----------|----------------|------|--------------------------|
| I   |         | COMPUTATION O<br>SUBSCRIBER GRO |               | TE FEES FOR EAC       |           | IBER GROUP     | UP   |                          |
| COMMUNITY/ AREA   | HANCO   | OCK COUNTY (DI                  | AMONDI        | COMMUNITY/ AREA       | ٩         |                | 0    | 9<br>Computation         |
| CALL SIGN   | DSE     | CALL SIGN                       | DSE           | CALL SIGN             | DSE       | CALL SIGN      | DSE  | of                       |
|   |         |                                 |               |                       |           |                |      | Base Rate Fee and        |
|   |         |                                 |               |                       |           |                |      | Syndicated               |
|   |         |                                 |               |                       |           |                |      | Exclusivity<br>Surcharge |
|   |         |                                 |               |                       |           |                |      | for                      |
|   |         |                                 |               |                       |           |                |      | Partially<br>Distant     |
|   |         |                                 |               |                       |           |                |      | Stations                 |
|   |         |                                 |               |                       |           |                |      |                          |
|   |         |                                 |               |                       |           |                |      |                          |
|   |         |                                 |               |                       |           |                |      |                          |
|   |         |                                 |               |                       |           |                |      |                          |
| Total DSEs  |         |                                 | 0.00          | Total DSEs            |           |                | 0.00 |                          |
| Gross Receipts First G  | roup    | \$ 138                          | 3,270.70      | Gross Receipts Sec    | ond Group | \$             | 0.00 |                          |
| <b>Base Rate Fee</b> First G  | roup    | \$                              | 0.00          | Base Rate Fee Sec     | ond Group | \$             | 0.00 |                          |
|   | SEVENTH | SUBSCRIBER GRO                  | UP            |                       | EIGHTH    | SUBSCRIBER GRO | UP   |                          |
| COMMUNITY/ AREA   |         |                                 | 0             | COMMUNITY/ ARE        | 0         |                |      |                          |
| CALL SIGN   | DSE     | CALL SIGN                       | DSE           | CALL SIGN             | DSE       | CALL SIGN      | DSE  |                          |
|   |         |                                 |               |                       |           |                |      |                          |
|   |         |                                 |               |                       |           |                |      |                          |
|   |         |                                 |               |                       |           |                |      |                          |
|   |         |                                 |               |                       |           |                |      |                          |
|   |         |                                 |               |                       |           |                |      |                          |
|   |         |                                 |               |                       |           |                |      |                          |
|   |         |                                 |               |                       |           |                |      |                          |
|   |         |                                 |               |                       |           |                |      |                          |
|   |         |                                 |               |                       |           |                |      |                          |
|   |         |                                 |               |                       |           |                |      |                          |
| Total DSEs  |         |                                 | 0.00          | Total DSEs            |           |                | 0.00 |                          |
| Gross Receipts Third G  | Group   | \$                              | 0.00          | Gross Receipts Fou    | rth Group | \$             | 0.00 |                          |
| Base Rate Fee Third G   | Group   | \$                              | 0.00          | Base Rate Fee Fou     | rth Group | \$             | 0.00 |                          |
| Base Rate Fee: Add th<br>Enter here and in block                          |         |                                 | riber group a | as shown in the boxes | above.    | \$             |      |                          |

| LEGAL NAME OF OWNER                            | R OF CABLE           | SYSTEM:        |               |  |                                     | S               | SYSTEM ID# | Name                 |
|--|----------------------|----------------|---------------|--|-------------------------------------|-----------------|------------|----------------------|
| CABLE ONE, INC.                                |                      |                |               |  |                                     |                 | 007417     | Name                 |
|  | BLOCK A:             | COMPUTATION O  | F BASE RA     | TE FEES FOR EACH   | SUBSCRI                             | BER GROUP       |            |                      |
|  | NINTH                | SUBSCRIBER GRO | UP            |  | TENTH                               | SUBSCRIBER GROU | JP         | •                    |
| COMMUNITY/ AREA                                |                      |                | 0             | COMMUNITY/ AREA  |                                     |                 | 0          | <b>9</b> Computation |
| CALL SIGN                                      | DSE                  | CALL SIGN      | DSE           | CALL SIGN  | DSE                                 | CALL SIGN       | DSE        | of                   |
|  |                      |                |               |  |                                     |                 |            | Base Rate Fee        |
|  |                      |                |               |  |                                     |                 |            | and                  |
|  |                      |                |               |  |                                     |                 |            | Syndicated           |
|  |                      |                |               |  |                                     |                 |            | Exclusivity          |
|  |                      |                |               |  |                                     |                 |            | Surcharge            |
|  |                      |                |               |  |                                     |                 |            | for                  |
|  |                      |                |               |  |                                     |                 |            | Partially            |
|  |                      |                |               |  |                                     |                 |            | Distant              |
|  |                      |                |               |  |                                     |                 |            | Stations             |
|  | <u> </u>             |                |               |  |                                     |                 |            |                      |
|  | <u></u>              |                |               |  |                                     |                 |            |                      |
|  | <del></del>          |                |               |  | -                                   | -               |            |                      |
|  | <del> </del>         |                |               |  |                                     |                 |            |                      |
|  |                      |                |               |  |                                     |                 |            |                      |
| Total DSEs                                     |                      |                | 0.00          | Total DSEs   |                                     | H .             | 0.00       |                      |
| Gross Receipts First Gr                        | eipts First Group \$ |                | 0.00          | Gross Receipts Secon   | Gross Receipts Second Group \$ 0.00 |                 |            |                      |
|  |                      |                |               |  |                                     |                 |            |                      |
| Base Rate Fee First Gr                         | oup                  | \$             | 0.00          | Base Rate Fee Secon  | d Group                             | \$              | 0.00       |                      |
| E  | LEVENTH              | SUBSCRIBER GRO | UP            |  | TWELVTH                             | SUBSCRIBER GROU | JP         |                      |
| COMMUNITY/ AREA                                |                      |                | 0             | COMMUNITY/ AREA  |                                     |                 | 0          |                      |
| CALL SIGN                                      | DSE                  | CALL SIGN      | DSE           | CALL SIGN  | DSE                                 | CALL SIGN       | DSE        |                      |
| 0.120.000                                      | 202                  | 0,122 0.011    | 202           | 07.22 0.0.1  | 302                                 | 07.122.01011    | 3 5 2      |                      |
|  |                      |                |               |  |                                     |                 |            |                      |
|  |                      |                |               |  |                                     |                 |            |                      |
|  |                      |                |               |  |                                     |                 |            |                      |
|  |                      |                |               |  |                                     | <br>            |            |                      |
|  |                      |                |               |  |                                     |                 |            |                      |
|  | <u></u>              |                |               |  |                                     |                 |            |                      |
|  | <u> </u>             |                |               |  |                                     |                 |            |                      |
|  |                      |                |               |  |                                     |                 |            |                      |
|  | <del> </del>         |                | ····          |  | ···                                 | -               |            |                      |
|  | <u></u>              |                | ••••          |  | ····                                |                 |            |                      |
|  | <u> </u>             |                | ····          |  |                                     |                 |            |                      |
|  |                      |                | ••••          |  |                                     |                 |            |                      |
|  |                      |                |               |  |                                     |                 |            |                      |
| Total DSEs                                     |                      |                | 0.00          | Total DSEs   |                                     |                 | 0.00       |                      |
| Gross Receipts Third G                         | roup                 | \$             | 0.00          | Gross Receipts Fourth  | Group                               | \$              | 0.00       |                      |
|  |                      | ·              |               | l salah sala | <b>~</b> p                          | •               |            |                      |
| Base Rate Fee Third G                          | roup                 | \$             | 0.00          | Base Rate Fee Fourth   | Group                               | \$              | 0.00       |                      |
| Base Rate Fee: Add the Enter here and in block |                      |                | riber group a | as shown in the boxes at   | oove.                               | \$              |            |                      |

| LEGAL NAME OF OWN    |           | E SYSTEM:      |                |                             |           |                | SYSTEM ID#<br>007417 | NI                       |
|----------------------|-----------|----------------|----------------|-----------------------------|-----------|----------------|----------------------|--------------------------|
|                      | BLOCK A:  | COMPUTATION (  | OF BASE RA     | TE FEES FOR EAC             | CH SUBSCR | IBER GROUP     |                      |                          |
|                      |           | SUBSCRIBER GRO |                | ii ee                       |           | SUBSCRIBER GRO |                      | 9                        |
| COMMUNITY/ AREA      |           |                | 0              | COMMUNITY/ ARE              | Α         |                | 0                    | Computation              |
| CALL SIGN            | DSE       | CALL SIGN      | DSE            | CALL SIGN                   | DSE       | CALL SIGN      | DSE                  | of                       |
|                      |           |                |                |                             |           |                |                      | Base Rate F              |
|                      |           |                |                |                             |           |                |                      | and                      |
|                      |           |                |                |                             |           |                |                      | Syndicate                |
|                      |           |                |                |                             |           |                |                      | Exclusivity<br>Surcharge |
|                      |           |                |                |                             |           |                |                      | for                      |
|                      |           |                |                |                             |           |                |                      | Partially                |
|                      |           |                |                |                             |           |                |                      | Distant                  |
|                      |           |                |                |                             |           |                |                      | Stations                 |
|                      |           |                |                |                             |           |                |                      |                          |
|                      |           | -              |                |                             |           |                |                      |                          |
|                      |           |                |                |                             |           |                |                      |                          |
|                      |           |                |                |                             |           |                |                      |                          |
|                      |           |                |                |                             |           |                |                      |                          |
| Γotal 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                 |                          |
|                      | FIFTEENTH | SUBSCRIBER GRO | DUP            |                             | SIXTEENTH | SUBSCRIBER GRO | UP                   |                          |
| COMMUNITY/ AREA      |           |                | 0              | COMMUNITY/ ARE              | Α         |                | 0                    |                          |
| CALL SIGN            | DSE       | CALL SIGN      | DSE            | CALL SIGN                   | DSE       | CALL SIGN      | DSE                  |                          |
| OALL SIGIY           | 552       | O/ILL OIGH     | 552            | O'ALL SIGHT                 | 562       | O/ LEE STOTA   | 552                  |                          |
|                      |           |                |                |                             |           |                |                      |                          |
|                      |           |                |                |                             |           |                |                      |                          |
|                      |           |                |                |                             |           |                |                      |                          |
|                      |           |                |                |                             |           |                |                      |                          |
|                      |           |                |                |                             |           |                |                      |                          |
|                      |           |                |                |                             |           |                |                      |                          |
|                      |           |                |                |                             |           |                |                      |                          |
|                      |           |                |                |                             |           |                |                      |                          |
|                      |           |                |                |                             |           |                |                      |                          |
|                      |           |                |                |                             |           |                |                      |                          |
|                      |           |                |                |                             |           |                |                      |                          |
|                      |           |                |                |                             |           |                |                      |                          |
| Γotal DSEs           |           |                | 0.00           | Total DSEs                  |           | _              | 0.00                 |                          |
| Gross Receipts Third | Group     | \$             | 0.00           | Gross Receipts Fou          | rth Group | \$             | 0.00                 |                          |
|                      | ~ : = m r | •              |                |                             |           |                |                      |                          |
| Base Rate Fee Third  | Group     | \$             | 0.00           | Base Rate Fee Fou           | rth Group | \$             | 0.00                 |                          |
| Base Rate Fee: Add   |           |                | criber group a | II<br>as shown in the boxes | above.    |                |                      |                          |

| CABLE ONE, INC.                                   | R OF CABLE | SYSTEM:         |             |                          |             | S               | YSTEM ID#<br>007417 | Name                 |
|---|------------|-----------------|-------------|--------------------------|-------------|-----------------|---------------------|----------------------|
| B   | LOCK A:    | COMPUTATION OF  | BASE RA     | ATE FEES FOR EACH        | I SUBSCRI   | BER GROUP       |                     |                      |
| SEVE  | NTEENTH    | SUBSCRIBER GROU | Р           | El                       | GHTEENTH    | SUBSCRIBER GROU | Р                   | •                    |
| COMMUNITY/ AREA                                   |            |                 | 0           | COMMUNITY/ AREA          |             |                 | 0                   | 9<br>Computation     |
| CALL SIGN   | DSE        | CALL SIGN       | DSE         | CALL SIGN                | DSE         | CALL SIGN       | DSE                 | of                   |
|   |            |                 |             |                          |             |                 |                     | Base Rate Fee        |
|   |            |                 |             |                          |             |                 |                     | and                  |
|   |            |                 |             |                          |             |                 |                     | Syndicated           |
|   |            |                 |             |                          |             |                 |                     | Exclusivity          |
|   |            |                 |             |                          |             |                 |                     | Surcharge            |
|   |            |                 |             |                          |             | -               |                     | for                  |
|   |            |                 |             |                          | <del></del> |                 |                     | Partially<br>Distant |
|   |            |                 |             |                          |             |                 |                     | Stations             |
|   |            |                 |             |                          |             |                 |                     |                      |
|   |            |                 |             |                          |             |                 |                     |                      |
|   |            |                 |             |                          |             |                 |                     |                      |
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|   |            |                 |             |                          |             |                 |                     |                      |
|   |            |                 | <u> </u>    |                          |             | Щ               |                     |                      |
| Total DSEs  |            |                 | 0.00        | Total DSEs               |             |                 |                     |                      |
| Gross Receipts First Gr                           | oup        | \$              | 0.00        | Gross Receipts Secon     | nd Group    | \$              | 0.00                |                      |
| Base Rate Fee First Gr                            | oup        | \$              | 0.00        | Base Rate Fee Secon      | nd Group    | \$              | 0.00                |                      |
| NII   | NTEENTH    | SUBSCRIBER GROU | P           | T                        | WENTIETH    | SUBSCRIBER GROU | P                   |                      |
| COMMUNITY/ AREA                                   |            |                 | 0           | COMMUNITY/ AREA          |             |                 | JP <b>0</b>         |                      |
| CALL SIGN   | DSE        | CALL SIGN       | DSE         | CALL SIGN                | DSE         | CALL SIGN       | DSE                 |                      |
|   |            |                 |             |                          |             |                 |                     |                      |
|   |            |                 |             |                          |             |                 |                     |                      |
|   | -          |                 |             |                          |             |                 |                     |                      |
|   | ·          |                 |             |                          |             |                 |                     |                      |
|   |            |                 |             |                          |             |                 |                     |                      |
|   |            |                 |             |                          |             |                 |                     |                      |
|   |            |                 |             |                          |             |                 |                     |                      |
|   |            |                 | ļ           |                          |             |                 |                     |                      |
|   |            |                 |             |                          |             |                 |                     |                      |
|   | <b>-</b>   |                 |             |                          |             | -               |                     |                      |
|   |            |                 |             |                          |             |                 |                     |                      |
|   |            |                 |             |                          |             |                 |                     |                      |
|   |            |                 |             |                          |             |                 |                     |                      |
| Total DSEs  |            |                 | 0.00        | Total DSEs               |             |                 | 0.00                |                      |
| Gross Receipts Third G                            | roup       | \$              | 0.00        | Gross Receipts Fourth    | n Group     | \$              | 0.00                |                      |
| Base Rate Fee Third G                             | roup       | \$              | 0.00        | Base Rate Fee Fourth     | n Group     | \$              | 0.00                |                      |
|   |            |                 |             | Ш                        |             |                 |                     |                      |
| Base Rate Fee: Add the<br>Enter here and in block |            |                 | ber group a | as shown in the boxes al | bove.       | \$              |                     |                      |
|   |            |                 |             |                          |             | 1               |                     |                      |

| LEGAL NAME OF OWNE CABLE ONE, INC.             |            | SYSTEM:        |                |                       |           | ;                          | SYSTEM ID#<br>007417 | Name                     |
|--|------------|----------------|----------------|-----------------------|-----------|----------------------------|----------------------|--------------------------|
|  |            | COMPUTATION C  |                | TE FEES FOR EAC       |           | IBER GROUP  SUBSCRIBER GRO | LID                  |                          |
| COMMUNITY/ AREA                                | NI I-FIRSI | SUBSCRIBER GRO | 0              | COMMUNITY/ AREA       |           | J SUBSCRIBER GRO           | 0                    | 9                        |
| CALL SIGN                                      | DSE        | CALL SIGN      | DSE            | CALL SIGN             | DSE       | CALL SIGN                  | DSE                  | Computation of           |
|  |            |                |                |                       |           |                            |                      | Base Rate Fee and        |
|  |            |                |                |                       |           |                            |                      | Syndicated               |
|  |            |                |                |                       |           |                            |                      | Exclusivity<br>Surcharge |
|  |            |                |                |                       |           |                            |                      | for                      |
|  |            |                |                |                       |           |                            |                      | Partially<br>Distant     |
|  |            |                |                |                       |           |                            |                      | Stations                 |
|  |            |                |                |                       |           |                            |                      |                          |
|  |            |                |                |                       |           |                            |                      |                          |
|  |            |                |                |                       |           |                            |                      |                          |
|  |            |                |                |                       |           |                            |                      |                          |
| Total DSEs                                     |            |                | 0.00           | Total DSEs            |           |                            | 0.00                 |                          |
| Gross Receipts First G                         | roup       | \$             | 0.00           | Gross Receipts Sec    | ond Group | \$                         | 0.00                 |                          |
| Base Rate Fee First G                          |            | \$             | 0.00           | Base Rate Fee Sec     | ond Group | \$                         | 0.00                 |                          |
| TWEN COMMUNITY/ AREA                           | NTY-THIRD  | SUBSCRIBER GRO | 0<br>0         | TWEI                  |           | SUBSCRIBER GRO             | UP <b>0</b>          |                          |
| COMMONT IT AREA                                |            |                |                |                       |           |                            |                      |                          |
| CALL SIGN                                      | DSE        | CALL SIGN      | DSE            | CALL SIGN             | DSE       | CALL SIGN                  | DSE                  |                          |
|  |            |                |                |                       |           |                            |                      |                          |
|  |            |                |                |                       |           |                            |                      |                          |
|  |            |                |                |                       |           |                            |                      |                          |
|  |            |                |                |                       |           |                            |                      |                          |
|  |            |                |                |                       |           |                            |                      |                          |
|  |            |                |                |                       |           |                            |                      |                          |
|  |            |                |                |                       |           |                            |                      |                          |
|  |            |                |                |                       |           |                            |                      |                          |
|  |            |                |                |                       |           |                            |                      |                          |
| Total DSEs                                     |            |                | 0.00           | Total DSEs            |           |                            | 0.00                 |                          |
| Gross Receipts Third C                         | Group      | \$             | 0.00           | Gross Receipts Fou    | rth Group | \$                         | 0.00                 |                          |
| Base Rate Fee Third (                          | Group      | \$             | 0.00           | Base Rate Fee Fou     | rth Group | \$                         | 0.00                 |                          |
| Base Rate Fee: Add the Enter here and in block |            |                | criber group a | as shown in the boxes | above.    | \$                         |                      |                          |

| CALL SIGN  CALL SIGN  Total DSEs | ENTY-SIXTH   | BER GROUP  I SUBSCRIBER GROUP  CALL SIGN | JP 0 DSE   | Computation of Base Rate I and Syndicate Exclusivite Surcharg for Partially Distant   |
|----------------------------------|--|--|--|---|
| CALL SIGN                        | 4  |  | 0  | Computation of Base Rate I and Syndicate Exclusivities Surcharg for Partially   |
| CALL SIGN                        |  | CALL SIGN                                |  | Computation of Base Rate I and Syndicate Exclusivities Surcharg for Partially   |
|                                  | DSE  | CALL SIGN                                | DSE  | of<br>Base Rate I<br>and<br>Syndicate<br>Exclusivit<br>Surcharg<br>for<br>Partially   |
| Total DSEs                       |  |  |  | and<br>Syndicate<br>Exclusivit<br>Surcharg<br>for<br>Partially  |
| Total DSEs                       |  |  |  | Syndicate<br>Exclusivit<br>Surcharg<br>for<br>Partially   |
| Total DSEs                       |  |  |  | Exclusivit<br>Surcharg<br>for<br>Partially  |
| Total DSEs                       |  |  |  | Surcharg<br>for<br>Partially  |
| Total DSEs                       |  |  |  | for<br>Partially  |
| Total DSEs                       |  |  |  | Partially   |
| Total DSEs                       |  |  |  | Dietant   |
| Total DSEs                       |  |  |  | Distant   |
| Total DSEs                       |  |  |  | Stations  |
| Total DSEs                       |  |  |  |   |
| Total DSEs                       |  |  |  |   |
| Total DSEs                       |  |  | ·····  |   |
| Total DSEs                       |  |  | <u> </u>   |   |
| Total DSEs                       |  | Ц  |  |   |
|                                  |  |  | 0.00   |   |
| Gross Receipts Seco              | ond Group  | \$                                       | 0.00   |   |
|                                  |  |  |  |   |
|                                  |  | \$                                       | 0.00   |   |
| TWE                              | NTY-EIGHTH   | SUBSCRIBER GROU                          | JP   |   |
| COMMUNITY/ AREA 0                |  |  |  |   |
| CALL SIGN                        | DSE  | CALL SIGN                                | DSE  |   |
|                                  |  |  |  |   |
|                                  |  |  |  |   |
|                                  |  |  |  |   |
|                                  |  |  |  |   |
|                                  |  |  |  |   |
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|                                  |  |  |  |   |
|                                  |  |  |  |   |
|                                  |  |  |  |   |
|                                  |  |  |  |   |
|                                  |  |  |  |   |
|                                  |  |  |  |   |
| Total DSEs                       |  | -  | 0.00   |   |
| Gross Receipts Four              | rth Group  | \$                                       | 0.00   |   |
|                                  |  |  |  |   |
| Base Rate Fee Four               | rth Group  | \$                                       | 0.00   |   |
|                                  |  |  | <u>'</u>   |   |
|                                  | TWE COMMUNITY/ AREA  CALL SIGN  Total DSEs Gross Receipts Four | CALL SIGN DSE                            | TWENTY-EIGHTH SUBSCRIBER GROU  COMMUNITY/ AREA  CALL SIGN DSE CALL SIGN  Total DSEs  Gross Receipts Fourth Group  \$  Base Rate Fee Fourth Group  \$ | TWENTY-EIGHTH SUBSCRIBER GROUP  COMMUNITY/ AREA  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  Total DSEs  Gross Receipts Fourth Group  \$ 0.00 |

| ID#<br>I17 Name          | 007417 | 3               |          |                                  |  | SYSTEM:        | R OF CABLE | CABLE ONE, INC.                      |
|--------------------------|--------|-----------------|----------|----------------------------------|--|----------------|------------|--------------------------------------|
|                          |        | BER GROUP       | SUBSCRII | TE FEES FOR EACH                 | BASE RA                                | COMPUTATION C  | BLOCK A:   |                                      |
| •                        | Р      | SUBSCRIBER GROU |          | TI .                             |  | SUBSCRIBER GRO |            |                                      |
| 9<br>Computatio          | 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<br>Surcharge |        |                 |          |                                  |  |                |            |                                      |
| for                      | ····   |                 |          |                                  | •                                      |                | ···        |                                      |
| Partially                |        |                 |          |                                  | •                                      |                | ••••       |                                      |
| Distant                  |        |                 |          |                                  |  |                |            |                                      |
| Stations                 |        |                 |          |                                  |  |                |            |                                      |
|                          |        |                 |          |                                  |  |                |            |                                      |
|                          |        |                 |          |                                  | ·                                      |                |            |                                      |
|                          |        |                 |          |                                  | -                                      |                |            |                                      |
|                          |        |                 |          |                                  |  |                |            |                                      |
|                          |        |                 |          |                                  |  |                |            |                                      |
|                          | 0.00   |                 |          | Total DSEs                       | 0.00                                   |                |            | Total DSEs                           |
|                          | 0.00   | \$              | l Group  | Gross Receipts Second            | 0.00                                   | \$             | roup       | Gross Receipts First Gr              |
|                          |        |                 |          |                                  |  |                |            |                                      |
|                          | 0.00   | \$              |          | Base Rate Fee Second             | 0.00                                   | \$             |            | Base Rate Fee First Gr               |
|                          | _      | SUBSCRIBER GROU | -SECOND  |                                  |  | SUBSCRIBER GRO | RTY-FIRST  |                                      |
|                          | 0      |                 |          | COMMUNITY/ AREA                  | 0                                      |                |            | COMMUNITY/ AREA                      |
|                          | DSE    | CALL SIGN       | DSE      | CALL SIGN                        | DSE                                    | CALL SIGN      | DSE        | CALL SIGN                            |
|                          |        |                 |          |                                  |  |                |            |                                      |
|                          |        |                 |          |                                  |  |                | <u></u>    |                                      |
|                          |        |                 |          |                                  | ·                                      |                |            |                                      |
|                          |        | =               |          |                                  |  |                |            |                                      |
|                          |        |                 |          |                                  |  |                |            |                                      |
|                          |        |                 |          |                                  |  |                |            |                                      |
|                          |        |                 |          |                                  |  |                |            |                                      |
|                          |        |                 |          |                                  |  |                |            |                                      |
|                          |        | H               | <b></b>  |                                  | ······································ |                |            |                                      |
|                          |        |                 |          |                                  |  |                | 1          |                                      |
|                          |        |                 |          |                                  |  |                |            |                                      |
|                          |        |                 |          |                                  |  |                |            |                                      |
|                          |        |                 |          |                                  |  |                |            |                                      |
|                          | 0.00   |                 |          | Total DSFs                       | 0.00                                   |                |            | Total DSFs                           |
|                          | 0.00   |                 |          | Total DSEs                       | 0.00                                   |                |            |                                      |
|                          | 0.00   | \$              | Group    | Total DSEs Gross Receipts Fourth | 0.00                                   | \$             | Group      | Total DSEs<br>Gross Receipts Third G |

| CABLE ONE, INC   |              | E SYSTEM:            | J          |                    |             |                | SYSTEM ID#<br>007417 | M. Mariana               |
|--|--------------|----------------------|------------|--------------------|-------------|----------------|----------------------|--------------------------|
|  | BLOCK A:     | COMPUTATION (        | OF BASE RA | TE FEES FOR EAC    | CH SUBSCR   | IBER GROUP     |                      |                          |
|  |              | SUBSCRIBER GRO       |            | П                  |             | SUBSCRIBER GRO |                      | 9                        |
| COMMUNITY/ AREA  |              |                      | 0          | COMMUNITY/ ARE     | Α           |                | 0                    | Computation              |
| CALL SIGN  | DSE          | CALL SIGN            | DSE        | CALL SIGN          | DSE         | CALL SIGN      | DSE                  | of                       |
|  |              |                      |            |                    |             |                |                      | Base Rate F              |
|  |              |                      |            |                    |             |                |                      | and                      |
|  |              | -                    |            |                    |             |                |                      | Syndicated               |
|  |              |                      |            | -                  |             |                |                      | Exclusivity<br>Surcharge |
|  |              |                      |            |                    |             |                |                      | for                      |
|  |              |                      |            |                    |             |                |                      | Partially                |
|  |              |                      |            |                    |             |                |                      | Distant                  |
|  |              |                      |            |                    |             |                |                      | Stations                 |
|  |              |                      |            |                    |             |                |                      |                          |
|  |              | -                    |            |                    |             |                |                      |                          |
|  |              | <b> </b>             |            |                    |             |                |                      |                          |
|  |              |                      |            |                    |             |                |                      |                          |
|  |              |                      |            |                    |             |                |                      |                          |
| Γotal 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                 |                          |
| TI   | HIRTY-FIFTH  | SUBSCRIBER GRO       | DUP        | Т                  | HIRTY-SIXTH | SUBSCRIBER GRO | UP                   |                          |
| COMMUNITY/ AREA  |              |                      | 0          | COMMUNITY/ ARE     | Y/ AREA 0   |                | 0                    |                          |
| CALL SIGN  | DSE          | CALL SIGN            | DSE        | CALL SIGN          | DSE         | CALL SIGN      | DSE                  |                          |
|  |              |                      |            |                    |             |                |                      |                          |
|  |              | -                    |            |                    |             |                |                      |                          |
|  |              | -                    |            |                    |             |                |                      |                          |
|  |              | <u> </u>             |            |                    |             |                |                      |                          |
|  |              |                      |            |                    |             |                |                      |                          |
|  |              |                      |            |                    |             |                |                      |                          |
|  |              |                      |            |                    |             |                |                      |                          |
|  |              |                      |            |                    |             |                |                      |                          |
|  |              |                      |            |                    |             |                |                      |                          |
|  |              |                      |            |                    |             |                |                      |                          |
|  |              |                      |            |                    |             |                |                      |                          |
|  |              |                      |            |                    |             |                |                      |                          |
| Total DSEs   |              |                      | 0.00       | Total DSEs         |             |                | 0.00                 |                          |
|  | l Cro        | •                    |            |                    | rth Crou-   | ė.             | _                    |                          |
| Gross Receipts Third   | і Group      | \$                   | 0.00       | Gross Receipts Fou | rui Group   | \$             | 0.00                 |                          |
| Base Rate Fee Third  | l Group      | \$                   | 0.00       | Base Rate Fee Fou  | rth Group   | \$             | 0.00                 |                          |
| Base Rate Fee Third  Base Rate Fee: Add  Enter here and in blo | the base rat | e fees for each subs |            | Base Rate Fee Fou  |             | \$             | 0.00                 |                          |

| LEGAL NAME OF OWNER CABLE ONE, INC. | R OF CABLE | SYSTEM:        |                |                          |           | 5               | 3YSTEM ID#<br>007417 | Mana                |
|-------------------------------------|------------|----------------|----------------|--------------------------|-----------|-----------------|----------------------|---------------------|
|                                     |            |                |                | ATE FEES FOR EACH        | SUBSCR    | BER GROUP       |                      |                     |
| THIRTY-<br>COMMUNITY/ AREA          | SEVENTH    | SUBSCRIBER GRO | 0<br>0         | THIR COMMUNITY/ AREA     | TY-EIGHTH | SUBSCRIBER GROU | JP <b>0</b>          | 9                   |
|                                     |            |                |                |                          |           |                 |                      | Computation         |
| CALL SIGN                           | DSE        | CALL SIGN      | DSE            | CALL SIGN                | DSE       | CALL SIGN       | DSE                  | of<br>Base Rate Fe  |
|                                     |            |                |                |                          | <u></u>   |                 |                      | and                 |
|                                     | ···        |                | ••••           |                          | <u></u>   | -               |                      | Syndicated          |
|                                     |            |                |                |                          |           |                 |                      | Exclusivity         |
|                                     |            |                |                |                          |           |                 |                      | Surcharge           |
|                                     |            |                |                |                          |           |                 |                      | for                 |
|                                     |            |                |                |                          | <u></u>   |                 |                      | Partially           |
|                                     |            |                |                |                          |           |                 |                      | Distant<br>Stations |
|                                     |            |                |                |                          |           |                 |                      |                     |
|                                     |            |                |                |                          |           |                 |                      |                     |
|                                     |            |                |                |                          |           |                 |                      |                     |
|                                     |            |                |                |                          |           |                 |                      |                     |
|                                     |            |                |                |                          |           |                 |                      |                     |
| T DOE                               |            |                | 0.00           | Total DSEs               |           |                 | 0.00                 |                     |
| Total DSEs                          |            |                | 0.00           |                          |           |                 | 0.00                 |                     |
| Gross Receipts First Gr             | oup        | \$             | 0.00           | Gross Receipts Secon     | d Group   | \$              | 0.00                 |                     |
| Base Rate Fee First Gr              | oup        | \$             | 0.00           | Base Rate Fee Secon      | d Group   | \$              | 0.00                 |                     |
| THIR                                | TY-NINTH   | SUBSCRIBER GRO | UP             |                          | FORTIETH  | SUBSCRIBER GROU | JP                   |                     |
| COMMUNITY/ AREA                     |            |                | 0              | COMMUNITY/ AREA          |           |                 | 0                    |                     |
| CALL SIGN                           | DSE        | CALL SIGN      | DSE            | CALL SIGN                | DSE       | CALL SIGN       | DSE                  |                     |
|                                     |            |                |                |                          |           |                 |                      |                     |
|                                     |            |                |                |                          | <u></u>   |                 |                      |                     |
|                                     |            |                |                |                          |           |                 |                      |                     |
|                                     |            |                | ••••           |                          | ···       |                 |                      |                     |
|                                     |            |                |                |                          |           |                 |                      |                     |
|                                     |            |                |                |                          |           |                 |                      |                     |
|                                     |            |                |                |                          |           |                 |                      |                     |
|                                     |            |                |                |                          |           |                 |                      |                     |
|                                     | <b></b>    |                |                | -                        |           | H               |                      |                     |
|                                     |            |                |                |                          |           |                 |                      |                     |
|                                     |            |                |                |                          |           |                 |                      |                     |
|                                     |            |                |                |                          |           |                 |                      |                     |
| Total DSEs                          |            |                | 0.00           | Total DSEs               |           |                 | 0.00                 |                     |
| Gross Receipts Third G              | iroup      | \$             | 0.00           | Gross Receipts Fourth    | Group     | \$              | 0.00                 |                     |
|                                     |            | ·              |                |                          | <b>-</b>  | *               |                      |                     |
| Base Rate Fee Third G               | roup       | \$             | 0.00           | Base Rate Fee Fourth     | Group     | \$              | 0.00                 |                     |
| Rate Fee: Add th                    |            |                | criber group a | as shown in the boxes ab | oove.     | \$              |                      |                     |

| LEGAL NAME OF OWN   |                     | E SYSTEM:            |            |                    |                   |                | SYSTEM ID#<br>007417 | Minima                   |
|---|---------------------|----------------------|------------|--------------------|-------------------|----------------|----------------------|--------------------------|
|   | BLOCK A:            | COMPUTATION (        | OF BASE RA | TE FEES FOR EAC    | CH SUBSCR         | IBER GROUP     |                      |                          |
|   | ORTY-FIRST          | SUBSCRIBER GRO       |            | П                  |                   | SUBSCRIBER GRO |                      | 9                        |
| COMMUNITY/ AREA   |                     |                      | 0          | COMMUNITY/ ARE     | 4                 |                | 0                    | Computation              |
| CALL SIGN   | DSE                 | CALL SIGN            | DSE        | CALL SIGN          | DSE               | CALL SIGN      | DSE                  | of                       |
|   |                     |                      |            |                    |                   |                |                      | Base Rate F              |
|   |                     |                      |            |                    |                   |                |                      | and                      |
|   |                     | -                    |            |                    |                   |                |                      | Syndicated               |
|   |                     |                      |            | -                  |                   |                |                      | Exclusivity<br>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                 |                          |
| FC  | RTY-THIRD           | SUBSCRIBER GRO       | DUP        | FO                 | RTY-FOURTH        | SUBSCRIBER GRO | UP                   |                          |
| COMMUNITY/ AREA   |                     |                      | 0          | COMMUNITY/ ARE     | COMMUNITY/ AREA 0 |                |                      |                          |
| CALL SIGN   | DSE                 | CALL SIGN            | DSE        | CALL SIGN          | DSE               | CALL SIGN      | DSE                  |                          |
|   |                     |                      |            |                    |                   |                |                      |                          |
|   |                     |                      |            |                    |                   |                |                      |                          |
|   |                     |                      |            |                    |                   |                |                      |                          |
|   |                     | -                    |            |                    |                   |                |                      |                          |
|   |                     | <b> </b>             |            |                    |                   |                |                      |                          |
|   |                     |                      |            |                    |                   |                |                      |                          |
|   |                     |                      |            |                    |                   |                |                      |                          |
|   |                     |                      |            |                    |                   |                |                      |                          |
|   |                     |                      |            |                    |                   |                |                      |                          |
|   |                     |                      |            |                    |                   |                |                      |                          |
|   |                     |                      |            |                    |                   |                |                      |                          |
|   |                     |                      |            |                    |                   |                |                      |                          |
|   |                     |                      |            |                    |                   |                |                      |                          |
| Total DSEs  |                     |                      | 0.00       | Total DSEs         |                   |                | 0.00                 |                          |
| Gross Receipts Third  | Group               | \$                   | 0.00       | Gross Receipts Fou | rth Group         | \$             | 0.00                 |                          |
| Base Rate Fee Third   | Group               | \$                   | 0.00       | Base Rate Fee Fou  | rth Group         | \$             | 0.00                 |                          |
| Base Rate Fee Third  Base Rate Fee: Add Enter here and in block | the <b>base rat</b> | e fees for each subs |            |                    |                   | \$             | 0.00                 |                          |

| LEGAL NAME OF OWN                            |            | E SYSTEM:      |                |                             |                   | :              | SYSTEM ID#<br>007417 | NI                       |
|--|------------|----------------|----------------|-----------------------------|-------------------|----------------|----------------------|--------------------------|
|  | BLOCK A:   | COMPUTATION (  | OF BASE RA     | TE FEES FOR EAC             | CH SUBSCR         | IBER GROUP     |                      |                          |
|  | DRTY-FIFTH | SUBSCRIBER GRO |                | ii ee                       |                   | SUBSCRIBER GRO |                      | 9                        |
| COMMUNITY/ AREA                              |            |                | 0              | COMMUNITY/ ARE              | Α                 |                | 0                    | Computation              |
| CALL SIGN                                    | DSE        | CALL SIGN      | DSE            | CALL SIGN                   | DSE               | CALL SIGN      | DSE                  | of                       |
|  |            |                |                |                             |                   |                |                      | Base Rate F              |
|  |            |                |                |                             |                   |                |                      | and                      |
|  |            |                |                |                             |                   |                |                      | Syndicate                |
|  |            |                |                |                             |                   |                |                      | Exclusivity<br>Surcharge |
|  |            |                |                |                             |                   |                |                      | for                      |
|  |            |                |                |                             |                   |                |                      | Partially                |
|  |            |                |                |                             |                   |                |                      | Distant                  |
|  |            |                |                |                             |                   |                |                      | Stations                 |
|  |            |                |                |                             |                   |                |                      |                          |
|  |            |                |                |                             |                   |                |                      |                          |
|  |            | <b> </b>       |                |                             |                   |                |                      |                          |
|  |            |                |                |                             |                   |                |                      |                          |
|  |            |                |                |                             |                   |                |                      |                          |
| 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                 |                          |
| FORT   | Y-SEVENTH  | SUBSCRIBER GRO | DUP            | FC                          | RTY-EIGHTH        | SUBSCRIBER GRO | UP                   |                          |
| COMMUNITY/ AREA                              |            |                | 0              | COMMUNITY/ ARE              | COMMUNITY/ AREA 0 |                |                      |                          |
| CALL SIGN                                    | DSE        | CALL SIGN      | DSE            | CALL SIGN                   | DSE               | CALL SIGN      | DSE                  |                          |
| 0.122.21311                                  |            |                |                |                             |                   | 0.122          |                      |                          |
|  |            |                |                |                             |                   |                |                      |                          |
|  |            |                |                |                             |                   |                |                      |                          |
|  |            |                |                |                             |                   |                |                      |                          |
|  |            |                |                |                             |                   |                |                      |                          |
|  |            | <u> </u>       |                |                             |                   |                |                      |                          |
|  |            |                |                |                             |                   |                |                      |                          |
|  |            |                |                |                             |                   |                |                      |                          |
|  |            |                |                |                             |                   |                |                      |                          |
|  |            |                |                |                             |                   |                |                      |                          |
|  |            |                |                |                             |                   |                |                      |                          |
|  |            | <u> </u>       |                |                             |                   |                |                      |                          |
|  |            |                |                |                             |                   |                |                      |                          |
| Total DSEs                                   |            |                | 0.00           | Total DSEs                  |                   |                | 0.00                 |                          |
| Gross Receipts Third                         | Group      | \$             | 0.00           | Gross Receipts Fou          | rth Group         | \$             | 0.00                 |                          |
| z. 230 i tosoipto Tilliu                     | CIOUP      | *              |                | Cross resorpts rou          | Олоцр             | *              |                      |                          |
| Base Rate Fee Third                          | Group      | \$             | 0.00           | Base Rate Fee Fou           | rth Group         | \$             | 0.00                 |                          |
| Base Rate Fee: Add<br>Enter here and in bloo |            |                | criber group a | II<br>as shown in the boxes | above.            | •              |                      |                          |

| LEGAL NAME OF OWN                            |           | E SYSTEM:      |                |                       |  |                | SYSTEM ID#<br>007417 | Minima               |
|--|-----------|----------------|----------------|-----------------------|--|----------------|----------------------|----------------------|
|  | BLOCK A:  | COMPUTATION (  | OF BASE RA     | TE FEES FOR EAC       | CH SUBSCR                              | IBER GROUP     |                      |                      |
|  | RTY-NINTH | SUBSCRIBER GRO |                | 00144444              |  | SUBSCRIBER GRO |                      | 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         |
|  |           |                |                |                       |  |                |                      | and<br>Syndicated    |
|  |           | <b> </b>       |                |                       |  |                |                      | Exclusivity          |
|  |           |                |                |                       |  |                |                      | Surcharge            |
|  |           | -              |                |                       |  |                |                      | for                  |
|  |           |                |                |                       |  |                |                      | Partially<br>Distant |
|  |           |                |                |                       |  |                |                      | Stations             |
|  |           |                |                |                       |  |                |                      |                      |
|  |           |                |                |                       |  |                |                      |                      |
|  |           |                |                |                       |  |                |                      |                      |
|  |           |                |                |                       |  |                |                      |                      |
|  |           |                |                |                       |  |                |                      |                      |
| Total DSEs                                   |           |                | 0.00           | Total DSEs            |  |                | 0.00                 |                      |
| Gross Receipts First                         | Group     | \$             | 0.00           | Gross Receipts Sec    | ond Group                              | \$             | 0.00                 |                      |
|  |           |                |                |                       |  |                |                      |                      |
| Base Rate Fee First                          |           | \$             | 0.00           | Base Rate Fee Sec     |  | \$             | 0.00                 |                      |
| TOMMUNITY/ AREA                              |           | SUBSCRIBER GRO | )UP            | COMMUNITY/ ARE        |  | SUBSCRIBER GRO | <b>0</b>             |                      |
| SOMMONT I/ AIRLA                             |           |                |                | COMMONT I/ AIRE       | ······································ |                |                      |                      |
| CALL SIGN                                    | DSE       | CALL SIGN      | DSE            | CALL SIGN             | DSE                                    | CALL SIGN      | DSE                  |                      |
|  |           |                |                |                       |  |                |                      |                      |
|  |           |                |                |                       |  |                |                      |                      |
|  |           |                |                |                       |  |                |                      |                      |
|  |           |                |                |                       |  |                |                      |                      |
|  |           |                |                |                       |  |                |                      |                      |
|  |           |                |                |                       |  |                |                      |                      |
|  |           |                |                |                       |  |                |                      |                      |
|  |           |                |                |                       |  |                |                      |                      |
|  |           |                |                |                       |  |                |                      |                      |
|  |           |                |                |                       |  | 1              |                      |                      |
|  |           |                |                |                       |  |                |                      |                      |
| Total DSEs                                   |           |                | 0.00           | Total DSEs            |  |                | 0.00                 |                      |
| Gross Receipts Third                         | Group     | <b>\$</b>      | 0.00           | Gross Receipts Fou    | rth Group                              | \$             | 0.00                 |                      |
|  |           | <u>*</u>       | 3.00           |                       | С. очр                                 |                |                      |                      |
| Base Rate Fee Third                          | Group     | \$             | 0.00           | Base Rate Fee Fou     | rth Group                              | \$             | 0.00                 |                      |
| Base Rate Fee: Add<br>Enter here and in bloo |           |                | criber group a | as shown in the boxes | above.                                 |                |                      |                      |

| Computation of Base Rate F | JP       |                 |               | TE FEES FOR EACH        | F BASE RA | COMPUTATION O   |           |                          |
|----------------------------|----------|-----------------|---------------|-------------------------|-----------|-----------------|-----------|--------------------------|
| Computation of Base Rate F | JP       |                 |               |                         |           |                 | SLUCK A:  | E                        |
| Computation of Base Rate F | l.       | SUBSCRIBER GROU | -FOURTH       | FIFT                    |           | SUBSCRIBER GRO  |           |                          |
| of Base Rate F             | 0        |                 |               | COMMUNITY/ AREA         | 0         |                 |           | COMMUNITY/ AREA          |
|                            | DSE      | CALL SIGN       | DSE           | CALL SIGN               | DSE       | CALL SIGN       | DSE       | CALL SIGN                |
| and                        |          |                 |               |                         |           |                 |           |                          |
| ·····                      |          |                 |               |                         |           |                 |           |                          |
| Syndicate                  |          |                 |               |                         |           |                 |           |                          |
| Exclusivity Surcharge      |          |                 |               |                         |           |                 | <u></u>   |                          |
| for                        |          |                 |               |                         |           |                 |           |                          |
| Partially                  |          |                 |               |                         |           |                 |           |                          |
| Distant                    |          |                 |               |                         |           |                 |           |                          |
| Stations                   |          |                 |               |                         |           |                 |           |                          |
|                            |          |                 |               |                         |           |                 |           |                          |
|                            |          |                 |               |                         |           |                 |           |                          |
|                            |          |                 |               |                         |           |                 |           |                          |
|                            |          |                 |               |                         |           |                 |           |                          |
|                            |          |                 |               |                         |           |                 |           |                          |
|                            | 0.00     |                 |               | Total DSEs              | 0.00      |                 |           | Total DSEs               |
| -                          | 0.00     | \$              | l Group       | Gross Receipts Second   | 0.00      | \$              | roup      | Gross Receipts First Gr  |
|                            | 0.00     | ¢               | l Group       | Base Rate Fee Second    | 0.00      | ¢               | roup      | Base Rate Fee First Gr   |
| <sup>1</sup>               | •        | \$              |               |                         | '         | SUPCODINED ODGI |           |                          |
|                            | 0<br>JP  | SUBSCRIBER GROU | · I Y-SIX I H | COMMUNITY/ AREA         | <u> </u>  | SUBSCRIBER GROI | FIY-FIFIH | COMMUNITY/ AREA          |
|                            |          |                 |               | COMMONITI/ AREA         |           |                 |           | COMMONT IT AIRLA         |
|                            | DSE      | CALL SIGN       | DSE           | CALL SIGN               | DSE       | CALL SIGN       | DSE       | CALL SIGN                |
|                            |          |                 |               |                         |           |                 |           |                          |
|                            |          |                 |               |                         |           |                 |           |                          |
|                            |          |                 |               |                         |           |                 |           |                          |
|                            |          |                 |               |                         |           |                 |           |                          |
|                            |          |                 |               |                         |           |                 |           |                          |
|                            |          |                 |               |                         |           |                 |           |                          |
|                            |          |                 | <u> </u>      |                         |           |                 | <u></u>   |                          |
|                            |          |                 |               |                         |           |                 |           |                          |
|                            |          |                 |               |                         |           |                 |           |                          |
|                            |          |                 |               |                         |           |                 |           |                          |
|                            |          |                 |               |                         |           |                 |           |                          |
|                            |          |                 |               |                         |           |                 |           |                          |
|                            | 0.00     |                 | <u> </u>      | Total DSEs              | 0.00      |                 |           | Total DSEs               |
| -                          | 0.00     | \$              | Group         | Gross Receipts Fourth   | 0.00      | \$              | Group     | Gross Receipts Third G   |
| -  <br>1                   | <u> </u> | ·               | Joup          | Sicos Recoipts i cultil |           |                 | очр       | S. 500 Novoipia Tilliu G |
|                            | 0.00     | \$              | Group         | Base Rate Fee Fourth    | 0.00      | \$              | Group     | Base Rate Fee Third G    |

| LEGAL NAME OF OWN   | ABLE ONE, INC.  SYSTEM ID# 007417 |                      |            |                    |           |                |      |                          |  |  |  |
|---|-----------------------------------|----------------------|------------|--------------------|-----------|----------------|------|--------------------------|--|--|--|
|   | BLOCK A:                          | COMPUTATION (        | OF BASE RA | TE FEES FOR EAC    | CH SUBSCR | IBER GROUP     |      |                          |  |  |  |
|   |                                   | SUBSCRIBER GRO       |            | ii ee              |           | SUBSCRIBER GRO |      | 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<br>Surcharge |  |  |  |
|   |                                   | <u> </u>             |            |                    |           |                |      | for                      |  |  |  |
|   |                                   |                      |            |                    |           |                |      | Partially                |  |  |  |
|   |                                   |                      |            |                    |           |                |      | Distant                  |  |  |  |
|   |                                   |                      |            |                    |           |                |      | Stations                 |  |  |  |
|   |                                   | <u> </u>             |            |                    |           |                |      |                          |  |  |  |
|   |                                   |                      | ····       |                    | ······    |                |      |                          |  |  |  |
|   |                                   |                      |            |                    |           |                |      |                          |  |  |  |
|   |                                   |                      |            |                    |           |                |      |                          |  |  |  |
|   |                                   |                      |            |                    |           |                |      |                          |  |  |  |
| 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 |                          |  |  |  |
| F   | IFTY-NINTH                        | SUBSCRIBER GRO       | DUP        |                    | SIXTIETH  | SUBSCRIBER GRO | UP   |                          |  |  |  |
| 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  | Group                             | \$                   | 0.00       | Gross Receipts Fou | rth Group | \$             | 0.00 |                          |  |  |  |
| Base Rate Fee Third   | Group                             | \$                   | 0.00       | Base Rate Fee Fou  | rth Group | \$             | 0.00 |                          |  |  |  |
| Base Rate Fee Third  Base Rate Fee: Add Enter here and in blo | the base rat                      | e fees for each subs |            |                    |           | \$             | 0.00 |                          |  |  |  |

| CABLE ONE, INC.   | GAL NAME OF OWNER OF CABLE SYSTEM:  ABLE ONE, INC.  SYSTEM ID#  007417 |                |           |                       |          |                 |      |                          |  |  |  |
|---|--|----------------|-----------|-----------------------|----------|-----------------|------|--------------------------|--|--|--|
|   | BLOCK A:   | COMPUTATION O  | F BASE RA | ATE FEES FOR EACH     | SUBSCR   | BER GROUP       |      |                          |  |  |  |
|   |  | SUBSCRIBER GRO |           |                       |          | SUBSCRIBER GROU | JP   | •                        |  |  |  |
| COMMUNITY/ AREA   |  |                | 0         | COMMUNITY/ AREA       |          |                 | 0    | 9<br>Computation         |  |  |  |
| CALL SIGN   | DSE  | CALL SIGN      | DSE       | CALL SIGN             | DSE      | CALL SIGN       | DSE  | of                       |  |  |  |
|   |  |                |           |                       |          |                 |      | Base Rate Fe             |  |  |  |
|   |  |                |           |                       |          | -               |      | and                      |  |  |  |
|   |  |                |           |                       |          |                 |      | Syndicated               |  |  |  |
|   |  |                | <u></u>   |                       |          |                 |      | Exclusivity<br>Surcharge |  |  |  |
|   |  |                | <u></u>   |                       | ···      | -               |      | for                      |  |  |  |
|   |  |                |           |                       |          | -               |      | Partially                |  |  |  |
|   |  |                |           |                       |          |                 |      | Distant                  |  |  |  |
|   |  |                |           |                       |          | -               |      | Stations                 |  |  |  |
|   |  |                |           |                       |          |                 |      |                          |  |  |  |
|   |  |                | <u></u>   | -                     |          | -               |      |                          |  |  |  |
|   |  |                | <u></u>   |                       | <u> </u> |                 |      |                          |  |  |  |
|   |  |                |           |                       |          |                 |      |                          |  |  |  |
|   |  |                |           |                       |          |                 |      |                          |  |  |  |
| Γotal DSEs  |  |                | 0.00      | Total DSEs            |          |                 | 0.00 |                          |  |  |  |
| Gross Receipts First G                                      | iroup  | \$             | 0.00      | Gross Receipts Secon  | d Group  | \$              | 0.00 |                          |  |  |  |
| Base Rate Fee First G                                       | iroup  | \$             | 0.00      | Base Rate Fee Secon   | d Group  | \$              | 0.00 |                          |  |  |  |
| SIX   | XTY-THIRD  | SUBSCRIBER GRO | UP        | SIXT                  | Y-FOURTH | SUBSCRIBER GROU | JP   |                          |  |  |  |
| COMMUNITY/ AREA   |  |                | 0         | COMMUNITY/ AREA       |          |                 | 0    |                          |  |  |  |
| CALL SIGN   | DSE  | CALL SIGN      | DSE       | CALL SIGN             | DSE      | CALL SIGN       | DSE  |                          |  |  |  |
|   |  |                |           |                       |          |                 |      |                          |  |  |  |
|   |  |                |           |                       |          |                 |      |                          |  |  |  |
|   |  |                | <u></u>   |                       |          | -               |      |                          |  |  |  |
|   |  |                |           |                       |          |                 |      |                          |  |  |  |
|   |  |                |           |                       |          |                 |      |                          |  |  |  |
|   |  |                |           |                       |          |                 |      |                          |  |  |  |
|   |  |                | <u></u>   |                       |          |                 |      |                          |  |  |  |
|   |  |                | -         |                       |          |                 |      |                          |  |  |  |
|   |  |                |           |                       |          |                 |      |                          |  |  |  |
|   |  |                |           |                       |          |                 |      |                          |  |  |  |
|   |  |                |           |                       |          |                 |      |                          |  |  |  |
|   |  |                | <u></u>   |                       |          |                 |      |                          |  |  |  |
| Total DSEs  |  |                | 0.00      | Total DSEs            |          |                 | 0.00 |                          |  |  |  |
| Gross Receipts Third Group \$ 0.00                          |  |                | 0.00      | Gross Receipts Fourth | Group    | \$              | 0.00 |                          |  |  |  |
|   |  | _              |           |                       |          |                 |      |                          |  |  |  |
| Base Rate Fee Third (                                       | Group  | \$             | 0.00      | Base Rate Fee Fourth  | Group    | \$              | 0.00 |                          |  |  |  |
| Group \$ ne base rate fees for eac 3, line 1, space L (page | e fees for eac   |                |           |                       |          | \$              | 0.00 |                          |  |  |  |

|                      |      |                  |          |                       |         | EGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID#  007417 |             |                         |  |  |  |  |  |  |  |
|----------------------|------|------------------|----------|-----------------------|---------|--|-------------|-------------------------|--|--|--|--|--|--|--|
|                      |      | BER GROUP        | SUBSCRI  | TE FEES FOR EACH      | BASE RA | COMPUTATION O  | BLOCK A:    | В                       |  |  |  |  |  |  |  |
| _                    | IP   | SUBSCRIBER GROUI |          |                       |         | SUBSCRIBER GROU  |             |                         |  |  |  |  |  |  |  |
| <b>9</b> 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<br>for     |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
| Partially            |      | H                |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
| Distant              |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
| Stations             |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
|                      | 0.00 |                  |          | T 4 4 BOE             | 0.00    |  |             | F 1 1 DOF               |  |  |  |  |  |  |  |
|                      | 0.00 |                  |          | Total DSEs            | 0.00    |  |             | Total DSEs              |  |  |  |  |  |  |  |
|                      | 0.00 | \$               | Group    | Gross Receipts Second | 0.00    | \$   | oup         | Gross Receipts First Gr |  |  |  |  |  |  |  |
|                      | 0.00 | \$               | Group    | Base Rate Fee Second  | 0.00    | \$   | oup         | Base Rate Fee First Gr  |  |  |  |  |  |  |  |
|                      | IP   | SUBSCRIBER GROU  | Y-EIGHTH | SIXT                  | JP      | SUBSCRIBER GROU  | SEVENTH     | SIXTY-S                 |  |  |  |  |  |  |  |
|                      | 0    |                  |          | COMMUNITY/ AREA       | 0       |  |             | COMMUNITY/ AREA         |  |  |  |  |  |  |  |
|                      | DSE  | CALL SIGN        | DSE      | CALL SIGN             | DSE     | CALL SIGN  | DSE         | CALL SIGN               |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  | ···         |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       | <b></b> |  | <del></del> |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  | <del></del> |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  | <del></del> |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |
|                      | 0.00 |                  |          | Total DSEs            | 0.00    |  |             | Total DSEs              |  |  |  |  |  |  |  |
|                      | 0.00 | \$               | Group    | Gross Receipts Fourth | 0.00    | \$   | roup        | Gross Receipts Third G  |  |  |  |  |  |  |  |
|                      | 0.00 |                  |          | li .                  |         |  |             |                         |  |  |  |  |  |  |  |
|                      |      |                  |          |                       |         |  |             |                         |  |  |  |  |  |  |  |

|                        | EGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID#  007417 |                      |            |                       |            |                |      |                  |  |  |  |
|------------------------|--|----------------------|------------|-----------------------|------------|----------------|------|------------------|--|--|--|
|                        | BLOCK A:   | COMPUTATION (        | OF BASE RA | TE FEES FOR EAC       | CH SUBSCR  | IBER GROUP     |      |                  |  |  |  |
|                        |  | SUBSCRIBER GRO       |            | П                     |            | SUBSCRIBER GRO |      | 9                |  |  |  |
| COMMUNITY/ AREA        |  |                      | 0          | COMMUNITY/ ARE        | Α          |                | 0    | Computation      |  |  |  |
| CALL SIGN              | DSE  | CALL SIGN            | DSE        | CALL SIGN             | DSE        | CALL SIGN      | DSE  | of               |  |  |  |
|                        |  |                      |            |                       |            |                |      | Base Rate F      |  |  |  |
|                        |  | <b> </b>             |            |                       |            |                |      | and              |  |  |  |
|                        |  |                      |            |                       |            |                |      | Syndicated       |  |  |  |
|                        |  |                      |            |                       |            |                |      | Exclusivity      |  |  |  |
|                        |  | <u> </u>             |            | -                     |            |                |      | Surcharge<br>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 |                  |  |  |  |
| SEVI                   | ENTY-FIRST   | SUBSCRIBER GRO       | DUP        | SEVE                  | NTY-SECONE | SUBSCRIBER GRO | UP   |                  |  |  |  |
| COMMUNITY/ AREA        |  |                      | 0          | COMMUNITY/ ARE        | Α          |                | 0    |                  |  |  |  |
| CALL SIGN              | DSE  | CALL SIGN            | DSE        | CALL SIGN             | DSE        | CALL SIGN      | DSE  |                  |  |  |  |
|                        |  |                      |            |                       |            |                |      |                  |  |  |  |
|                        |  |                      |            |                       |            |                |      |                  |  |  |  |
|                        |  | .                    |            |                       |            |                |      |                  |  |  |  |
|                        |  | <b>-</b>             |            | -                     |            |                |      |                  |  |  |  |
|                        |  |                      | ••••       |                       | ••••••     |                |      |                  |  |  |  |
|                        |  |                      |            |                       |            |                |      |                  |  |  |  |
|                        |  |                      |            |                       |            |                |      |                  |  |  |  |
|                        |  | -                    |            |                       |            |                |      |                  |  |  |  |
|                        |  |                      |            |                       |            |                |      |                  |  |  |  |
|                        |  |                      |            |                       |            |                |      |                  |  |  |  |
|                        |  |                      |            |                       |            |                |      |                  |  |  |  |
|                        |  |                      |            |                       |            |                |      |                  |  |  |  |
| Fotal DSEs             |  |                      | 0.00       | Total DSEs            |            |                | 0.00 |                  |  |  |  |
| Gross Receipts Third   | Group  | •                    | 0.00       | Gross Receipts Fou    | rth Group  | •              | 0.00 |                  |  |  |  |
| oroga Mercibia IIIII a | Огоир  | \$                   | <u> </u>   | Cioss Necelpis Fou    | rai Gioup  | \$             | 0.00 |                  |  |  |  |
| Base Rate Fee Third    | Group  | \$                   | 0.00       | Base Rate Fee Fou     | rth Group  | \$             | 0.00 |                  |  |  |  |
|                        | the base rat   | e fees for each subs |            | as shown in the boxes |            | \$             | 3.00 |                  |  |  |  |

| LEGAL NAME OF OWNER CABLE ONE, INC.            | R OF CABLE | SYSTEM:         |  |                          |           | S               | YSTEM ID#<br>007417 | Name                |
|--|------------|-----------------|--|--------------------------|-----------|-----------------|---------------------|---------------------|
| В  | LOCK A:    | COMPUTATION O   | F BASE RA                              | TE FEES FOR EACH         | SUBSCRI   | BER GROUP       |                     |                     |
| SEVEN'<br>COMMUNITY/ AREA                      | TY-THIRD   | SUBSCRIBER GROU | JP <b>0</b>                            | SEVENTY COMMUNITY/ AREA  | /-FOURTH  | SUBSCRIBER GROU | P <b>0</b>          | 9                   |
| CALL SIGN                                      | Dec        | CALL SIGN       | Dec                                    | CALL SIGN                | Dec       | CALL SIGN       | I Dec               | Computation         |
| CALL SIGN                                      | DSE        | CALL SIGN       | DSE                                    | CALL SIGN                | DSE       | CALL SIGN       | DSE                 | of<br>Base Rate Fee |
|  |            |                 |  |                          |           |                 |                     | and                 |
|  |            |                 |  |                          |           |                 |                     | Syndicated          |
|  |            |                 |  |                          |           |                 |                     | Exclusivity         |
|  |            |                 |  |                          |           |                 |                     | Surcharge           |
|  |            |                 |  |                          |           |                 |                     | for<br>Partially    |
|  |            |                 | <del></del>                            |                          |           | H               |                     | Distant             |
|  |            |                 |  |                          |           |                 |                     | Stations            |
|  |            |                 |  |                          |           |                 |                     |                     |
|  |            |                 |  |                          |           |                 |                     |                     |
|  |            |                 |  |                          |           |                 |                     |                     |
|  |            |                 |  |                          |           |                 |                     |                     |
|  | -          |                 |  |                          |           |                 |                     |                     |
| Total DSEs                                     | -          |                 | 0.00                                   | Total DSEs               |           |                 | 0.00                |                     |
| Gross Receipts First Gr                        | oup        | \$              | 0.00                                   | Gross Receipts Second    | d Group   | \$              | 0.00                |                     |
| Base Rate Fee First Gr                         | oup        | \$              | 0.00                                   | Base Rate Fee Second     | d Group   | \$              | 0.00                |                     |
| SEVEN  | TY-FIFTH   | SUBSCRIBER GRO  | JP                                     | SEVE                     | NTY-SIXTH | SUBSCRIBER GROU | Р                   |                     |
| COMMUNITY/ AREA                                |            |                 | 0                                      | COMMUNITY/ AREA          |           |                 | 0                   |                     |
| CALL SIGN                                      | DSE        | CALL SIGN       | DSE                                    | CALL SIGN                | DSE       | CALL SIGN       | DSE                 |                     |
|  |            |                 |  |                          |           | -               |                     |                     |
|  |            |                 |  |                          |           |                 |                     |                     |
|  |            |                 |  |                          |           |                 |                     |                     |
|  |            |                 |  |                          |           |                 |                     |                     |
|  |            |                 |  |                          |           |                 |                     |                     |
|  |            |                 |  |                          |           |                 |                     |                     |
|  |            |                 |  |                          |           |                 |                     |                     |
|  |            |                 |  |                          |           |                 |                     |                     |
|  |            |                 | <u></u>                                |                          |           |                 |                     |                     |
|  |            |                 | ······································ |                          |           |                 | ····                |                     |
|  |            |                 |  |                          |           |                 |                     |                     |
|  |            |                 |  |                          | ļ         |                 |                     |                     |
|  |            |                 |  |                          |           |                 |                     |                     |
| Total DSEs                                     |            |                 | 0.00                                   | Total DSEs               |           |                 | 0.00                |                     |
| Gross Receipts Third G                         | roup       | \$              | 0.00                                   | Gross Receipts Fourth    | Group     | \$              | 0.00                |                     |
| Base Rate Fee Third G                          | roup       | \$              | 0.00                                   | Base Rate Fee Fourth     | Group     | \$              | 0.00                |                     |
| Base Rate Fee: Add the Enter here and in block |            |                 | riber group a                          | as shown in the boxes ab | ove.      | \$              |                     |                     |

| EGAL NAME OF OWNER OF CABLE SYSTEM:  SABLE ONE, INC.  SYSTEM ID# 007417 |            |                |                |  |           |                |          |                  |  |  |
|---|------------|----------------|----------------|--|-----------|----------------|----------|------------------|--|--|
|   | BLOCK A:   | COMPUTATION (  | OF BASE RA     | TE FEES FOR EAC                          | CH SUBSCR | IBER GROUP     |          |                  |  |  |
|   | Y-SEVENTH  | SUBSCRIBER GRO |                | 11                                       |           | SUBSCRIBER GRO |          | 0                |  |  |
| COMMUNITY/ AREA   |            |                | 0              | COMMUNITY/ ARE                           | Α         |                | 0        | 9<br>Computation |  |  |
| CALL SIGN   | DSE        | CALL SIGN      | DSE            | CALL SIGN                                | DSE       | CALL SIGN      | DSE      | Computation of   |  |  |
|   |            |                |                |  |           |                |          | Base Rate F      |  |  |
|   |            |                |                |  |           |                |          | and              |  |  |
|   |            |                |                |  |           |                |          | Syndicated       |  |  |
|   |            |                |                |  |           |                |          | Exclusivity      |  |  |
|   |            | -              |                |  |           |                |          | Surcharge<br>for |  |  |
|   |            | <u> </u>       |                |  |           |                |          | Partially        |  |  |
|   |            |                |                |  |           |                |          | Distant          |  |  |
|   |            |                |                |  |           |                |          | Stations         |  |  |
|   |            |                |                |  |           |                |          |                  |  |  |
|   |            |                |                |  |           |                |          |                  |  |  |
|   |            | -              |                |  |           |                |          |                  |  |  |
|   |            |                |                |  |           |                |          |                  |  |  |
|   |            |                |                |  |           |                |          |                  |  |  |
| Total DSEs  |            |                | 0.00           | Total DSEs                               |           |                | 0.00     |                  |  |  |
| Gross Receipts First (  | Group      | \$             | 0.00           | Gross Receipts Sec                       | ond Group | \$             | 0.00     |                  |  |  |
|   |            |                |                |  |           |                |          |                  |  |  |
| Base Rate Fee First (   |            | \$             | 0.00           | Base Rate Fee Sec                        |           | \$             | 0.00     |                  |  |  |
|   | :NTY-NINTH | SUBSCRIBER GRO |                |  |           | SUBSCRIBER GRO |          |                  |  |  |
| COMMUNITY/ AREA   |            |                | 0              | COMMUNITY/ AREA 0                        |           |                |          |                  |  |  |
| CALL SIGN   | DSE        | CALL SIGN      | DSE            | CALL SIGN                                | DSE       | CALL SIGN      | DSE      |                  |  |  |
| 07.22 0.0.1   | 202        | 07.122.010.1   | 332            | 07.122 07011                             | 332       | 07.122.01011   | 332      |                  |  |  |
|   |            |                |                |  |           |                |          |                  |  |  |
|   |            |                |                |  |           |                |          |                  |  |  |
|   |            | -              |                |  |           |                |          |                  |  |  |
|   |            | -              |                |  |           |                |          |                  |  |  |
|   |            |                |                |  |           |                |          |                  |  |  |
|   |            |                |                |  |           |                |          |                  |  |  |
|   |            |                |                |  |           |                |          |                  |  |  |
|   |            |                |                |  |           |                |          |                  |  |  |
|   |            |                |                |  |           |                |          |                  |  |  |
|   |            |                |                |  |           |                |          |                  |  |  |
|   |            | 1              |                |  |           |                |          |                  |  |  |
|   |            |                |                |  |           |                |          |                  |  |  |
| Total DSEs  |            |                | 0.00           | Total DSEs                               |           |                | 0.00     |                  |  |  |
| Gross Receipts Third  | Group      | \$             | 0.00           | Gross Receipts Fou                       | rth Group | \$             | 0.00     |                  |  |  |
| 2.300 Rooopta milu  | Sicup      | ·*             | <u> </u>       | S. S | Стоир     |                | <u> </u> |                  |  |  |
| Base Rate Fee Third   | Group      | \$             | 0.00           | Base Rate Fee Fou                        | rth Group | \$             | 0.00     |                  |  |  |
| Base Rate Fee: Add<br>Enter here and in bloo                            |            |                | criber group a | as shown in the boxes                    | above.    |                |          |                  |  |  |

| _              |      |                 |          |                       |         |                               |          |  |
|----------------|------|-----------------|----------|-----------------------|---------|-------------------------------|----------|--|
|                |      | BER GROUP       | SUBSCRI  | TE FEES FOR EACH      | BASE RA | COMPUTATION OF                | LOCK A:  | В                                      |
| 9              |      | SUBSCRIBER GROU | /-SECOND |                       |         | SUBSCRIBER GROU               | TY-FIRST |  |
| Computa        | 0    |                 |          | COMMUNITY/ AREA       | 0       |                               |          | COMMUNITY/ AREA                        |
| of             | DSE  | CALL SIGN       | DSE      | CALL SIGN             | DSE     | CALL SIGN                     | DSE      | CALL SIGN                              |
| Base Rate      |      |                 |          |                       |         |                               |          |  |
| and            |      |                 |          |                       |         |                               |          |  |
| Syndica        |      |                 |          |                       |         |                               |          |  |
| Exclusiv       |      |                 |          |                       |         |                               |          |  |
| Surchar<br>for |      |                 |          |                       |         |                               |          |  |
| Partial        |      |                 | <u></u>  |                       |         |                               |          |  |
| Distar         |      |                 |          |                       |         |                               |          |  |
| Station        |      |                 |          |                       |         |                               |          |  |
|                |      | -               |          |                       |         |                               |          |  |
|                |      |                 |          |                       |         |                               |          |  |
|                |      |                 |          |                       |         |                               |          |  |
|                |      |                 |          |                       |         | <u> </u>                      | <b></b>  |  |
|                |      |                 |          |                       |         |                               |          |  |
|                | 0.00 | •               | •        | Total DSEs            | 0.00    | •                             | -        | otal DSEs                              |
|                | 0.00 | •               | d Croup  |                       | 0.00    | <i>*</i>                      | oun      |  |
|                | 0.00 | \$              | a Group  | Gross Receipts Secon  | 0.00    | \$                            | bup      | ross Receipts First Gro                |
|                | 0.00 | \$              | d Group  | Base Rate Fee Second  | 0.00    | \$                            | oup      | ase Rate Fee First Gro                 |
|                | IP   | SUBSCRIBER GROU | Y-FOURTH | EIGHT                 | JP      | EIGHTY-THIRD SUBSCRIBER GROUP |          |  |
|                | 0    |                 |          | COMMUNITY/ AREA       | 0       |                               |          | OMMUNITY/ AREA                         |
|                |      |                 |          |                       |         |                               |          |  |
|                | DSE  | CALL SIGN       | DSE      | CALL SIGN             | DSE     | CALL SIGN                     | DSE      | CALL SIGN                              |
|                |      |                 |          |                       |         |                               |          |  |
|                |      |                 | <b></b>  |                       |         |                               | ·        |  |
|                |      |                 |          |                       |         |                               |          |  |
|                |      |                 |          |                       |         |                               |          |  |
|                |      |                 |          |                       |         |                               |          |  |
|                |      |                 |          |                       |         |                               |          |  |
|                |      |                 |          |                       |         |                               |          |  |
|                |      |                 |          |                       |         |                               |          |  |
|                |      |                 |          |                       |         |                               |          |  |
|                |      | -               |          |                       |         |                               |          |  |
|                |      |                 |          |                       |         |                               |          |  |
|                |      |                 | <u></u>  |                       |         |                               |          |  |
|                | 0.00 |                 | -        | Total DSEs            | 0.00    |                               |          | otal DSEs                              |
|                |      |                 |          | Gross Receipts Fourth | 0.00    |                               |          |  |
|                | 0.00 | \$              | Group    | Cross recoupts rourth |         |                               |          | ,, , , , , , , , , , , , , , , , , , , |
|                | 0.00 | \$              | Group    | Cross recoupts rourur |         |                               |          |  |

| EGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID#  007417 |           |                |                |                       |            |                |      |   |  |  |
|--|-----------|----------------|----------------|-----------------------|------------|----------------|------|---|--|--|
|  |           |                |                | TE FEES FOR EAC       |            |                |      |   |  |  |
|  |           | SUBSCRIBER GRO |                | 11                    |            | SUBSCRIBER GRO |      | a   |  |  |
| COMMUNITY/ AREA  |           |                | 0              | COMMUNITY/ ARE        | Α          |                | 0    |   |  |  |
| CALL SIGN  | DSE       | CALL SIGN      | DSE            | CALL SIGN             | DSE        | CALL SIGN      | DSE  | of  |  |  |
|  |           |                |                |                       |            |                |      | Base Rate F   |  |  |
|  |           | -              |                |                       |            |                |      | and   |  |  |
|  |           |                |                |                       |            |                |      |   |  |  |
|  |           |                | ••••           |                       |            |                |      | Surcharge   |  |  |
|  |           |                |                |                       |            |                |      | for   |  |  |
|  |           | -              |                |                       |            |                |      | Partially   |  |  |
|  |           |                |                |                       |            |                |      |   |  |  |
|  |           | <b> </b>       |                |                       |            |                |      | Gtationo  |  |  |
|  |           |                |                |                       |            |                |      |   |  |  |
|  |           |                |                |                       |            |                |      |   |  |  |
|  |           |                |                |                       |            |                |      |   |  |  |
|  |           | -              |                |                       |            |                |      |   |  |  |
| Total DSEs   |           | Щ              | 0.00           | Total DSEs            |            | 11             | 0.00 |   |  |  |
|  | Croup     | •              | 0.00           |                       | and Craun  | <u> </u>       | 0.00 |   |  |  |
| Gross Receipts First   | Group     | \$             | 0.00           | Gross Receipts Sec    | ona Group  | \$             | 0.00 |   |  |  |
| Base Rate Fee First  | Group     | \$             | 0.00           | Base Rate Fee Sec     | ond Group  | \$             | 0.00 |   |  |  |
| EIGHT  | Y-SEVENTH | SUBSCRIBER GRO | DUP            | EIG                   | HTY-EIGHTH | SUBSCRIBER GRO | UP   |   |  |  |
| COMMUNITY/ AREA  |           |                | 0              | COMMUNITY/ AREA       |            |                |      | Q<br>Computati<br>of<br>Base Rate<br>and<br>Syndicate<br>Exclusivit<br>Surcharg |  |  |
| CALL SIGN  | DSE       | CALL SIGN      | DSE            | CALL SIGN             | DSE        | CALL SIGN      | DSE  |   |  |  |
|  |           |                |                |                       |            |                |      |   |  |  |
|  |           |                |                |                       |            |                |      |   |  |  |
|  |           |                |                |                       |            |                |      |   |  |  |
|  |           |                |                |                       |            |                |      |   |  |  |
|  |           |                |                |                       |            |                |      |   |  |  |
|  |           |                |                |                       |            |                |      |   |  |  |
|  |           |                |                |                       |            |                |      |   |  |  |
|  |           |                |                |                       |            |                |      |   |  |  |
|  |           | 1              |                |                       |            |                |      |   |  |  |
|  |           |                |                |                       |            |                |      |   |  |  |
|  |           |                |                |                       |            |                |      |   |  |  |
|  |           |                |                |                       |            |                |      |   |  |  |
| Total DSEs   |           | II .           | 0.00           | Total DSEs            |            | 11             | 0.00 |   |  |  |
|  | Crour     | ¢              | 0.00           |                       | rth Crown  | ė.             | 0.00 |   |  |  |
| Gross Receipts Third   | готоир    | \$             | 0.00           | Gross Receipts Fou    | гит Стоир  | \$             | 0.00 |   |  |  |
| Base Rate Fee Third  | l Group   | \$             | 0.00           | Base Rate Fee Fou     | rth Group  | \$             | 0.00 |   |  |  |
| <b>Base Rate Fee:</b> Add<br>Enter here and in blo                       |           |                | criber group a | as shown in the boxes | above.     | \$             |      |   |  |  |

| LEGAL NAME OF OWNE CABLE ONE, INC.               | R OF CABLE | E SYSTEM:      | -              |                       |           | ,                | 007417      | Name                      |
|--|------------|----------------|----------------|-----------------------|-----------|------------------|-------------|---------------------------|
|  |            |                |                | TE FEES FOR EAC       |           |                  |             |                           |
| EIGH<br>COMMUNITY/ AREA                          | ITY-NINTH  | SUBSCRIBER GRO | 0<br>0         | COMMUNITY/ ARE        |           | 1 SUBSCRIBER GRO | UP <b>0</b> | 9                         |
| CALL SIGN  | DSE        | CALL SIGN      | DSE            | CALL SIGN             | DSE       | CALL SIGN        | DSE         | Computation of            |
| OALE GIGIV                                       | DOL        | O/LEE GIGIN    | DOL            | O/LE GIGIT            | BOL       | OALE GIGIT       | DOL         | Base Rate Fee             |
|  |            |                |                |                       |           |                  |             | and                       |
|  |            |                |                |                       |           |                  |             | Syndicated<br>Exclusivity |
|  |            |                |                |                       |           |                  |             | Surcharge                 |
|  |            |                |                |                       |           |                  |             | for                       |
|  |            |                |                |                       |           |                  |             | Partially<br>Distant      |
|  |            |                | ····           |                       |           |                  |             | Stations                  |
|  |            |                |                |                       |           |                  |             |                           |
|  |            |                |                |                       |           |                  |             |                           |
|  |            |                |                |                       |           |                  |             |                           |
|  |            |                |                |                       |           |                  |             |                           |
|  |            |                |                |                       |           |                  |             |                           |
| Total DSEs                                       |            |                | 0.00           | Total DSEs            |           |                  | 0.00        |                           |
| Gross Receipts First G                           | roup       | \$             | 0.00           | Gross Receipts Sec    | ond Group | \$               | 0.00        |                           |
| Base Rate Fee First G                            | roup       | \$             | 0.00           | Base Rate Fee Sec     | ond Group | \$               | 0.00        |                           |
| NINE   | TY-FIRST   | SUBSCRIBER GRO | UP             | ii e                  |           | SUBSCRIBER GRO   | UP          |                           |
| COMMUNITY/ AREA                                  |            |                | 0              | COMMUNITY/ ARE        | 4         |                  | 0           |                           |
| CALL SIGN  | DSE        | CALL SIGN      | DSE            | CALL SIGN             | DSE       | CALL SIGN        | DSE         |                           |
|  |            |                |                |                       |           |                  |             |                           |
|  |            |                |                |                       |           |                  |             |                           |
|  |            |                |                |                       |           |                  |             |                           |
|  |            |                |                |                       |           |                  |             |                           |
|  |            |                |                |                       |           |                  |             |                           |
|  |            |                |                |                       |           |                  |             |                           |
|  |            |                |                |                       |           |                  |             |                           |
|  |            |                |                |                       |           |                  |             |                           |
|  |            |                |                |                       |           |                  |             |                           |
|  |            |                |                |                       |           |                  |             |                           |
|  |            |                |                |                       |           |                  |             |                           |
| Total DSEs                                       |            |                | 0.00           | Total DSEs            |           |                  | 0.00        |                           |
| Gross Receipts Third G                           | Group      | \$             | 0.00           | Gross Receipts Fou    | rth Group | \$               | 0.00        |                           |
| ·  | •          |                |                |                       |           |                  |             |                           |
| Base Rate Fee Third G                            | Group      | \$             | 0.00           | Base Rate Fee Fou     | rth Group | \$               | 0.00        |                           |
| Base Rate Fee: Add th<br>Enter here and in block |            |                | criber group a | as shown in the boxes | above.    | \$               |             |                           |

|   | ABLE ONE, INC.  SYSTEM ID# 007417 |                      |            |                    |             |                |      |                          |  |  |  |
|---|-----------------------------------|----------------------|------------|--------------------|-------------|----------------|------|--------------------------|--|--|--|
|   | BLOCK A:                          | COMPUTATION (        | OF BASE RA | TE FEES FOR EAC    | CH SUBSCR   | IBER GROUP     |      |                          |  |  |  |
|   |                                   | SUBSCRIBER GRO       |            | П                  |             | SUBSCRIBER GRO |      | 9                        |  |  |  |
| COMMUNITY/ AREA   |                                   |                      | 0          | COMMUNITY/ ARE     | Α           |                | 0    | Computation              |  |  |  |
| CALL SIGN   | DSE                               | CALL SIGN            | DSE        | CALL SIGN          | DSE         | CALL SIGN      | DSE  | of                       |  |  |  |
|   |                                   |                      |            |                    |             |                |      | Base Rate F              |  |  |  |
|   |                                   | <b></b>              |            |                    |             |                |      | and                      |  |  |  |
|   |                                   |                      |            |                    |             |                |      | Syndicated               |  |  |  |
|   |                                   |                      |            | -                  |             |                |      | Exclusivity<br>Surcharge |  |  |  |
|   |                                   |                      |            |                    |             |                |      | for                      |  |  |  |
|   |                                   |                      |            |                    |             |                |      | Partially                |  |  |  |
|   |                                   |                      |            |                    |             |                |      | Distant                  |  |  |  |
|   |                                   |                      |            |                    |             |                |      | Stations                 |  |  |  |
|   |                                   |                      |            |                    |             |                |      |                          |  |  |  |
|   |                                   | -                    |            |                    |             |                |      |                          |  |  |  |
|   |                                   | <b> </b>             |            |                    |             |                |      |                          |  |  |  |
|   |                                   |                      |            |                    |             |                |      |                          |  |  |  |
|   |                                   |                      |            |                    |             |                |      |                          |  |  |  |
| Γotal 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 |                          |  |  |  |
| NI  | NETY-FIFTH                        | SUBSCRIBER GRO       | DUP        | N                  | INETY-SIXTH | SUBSCRIBER GRO | UP   |                          |  |  |  |
| COMMUNITY/ AREA   |                                   |                      | 0          | COMMUNITY/ ARE     | 0           |                |      |                          |  |  |  |
| CALL SIGN   | DSE                               | CALL SIGN            | DSE        | CALL SIGN          | DSE         | CALL SIGN      | DSE  |                          |  |  |  |
|   |                                   |                      |            |                    |             |                |      |                          |  |  |  |
|   |                                   |                      |            |                    |             |                |      |                          |  |  |  |
|   |                                   |                      |            |                    |             |                |      |                          |  |  |  |
|   |                                   |                      |            |                    |             |                |      |                          |  |  |  |
|   |                                   |                      |            |                    |             |                |      |                          |  |  |  |
|   |                                   |                      |            |                    |             |                |      |                          |  |  |  |
|   |                                   |                      |            |                    |             |                |      |                          |  |  |  |
|   |                                   |                      |            |                    |             |                |      |                          |  |  |  |
|   |                                   |                      |            |                    |             |                |      |                          |  |  |  |
|   |                                   |                      |            |                    |             |                |      |                          |  |  |  |
|   |                                   |                      |            |                    |             |                |      |                          |  |  |  |
|   |                                   |                      |            |                    |             |                |      |                          |  |  |  |
| Fotal DSEs  |                                   |                      | 0.00       | Total DSEs         |             |                | 0.00 |                          |  |  |  |
|   | 1.0                               |                      |            |                    |             |                | _    |                          |  |  |  |
| Gross Receipts Third  | Group                             | \$                   | 0.00       | Gross Receipts Fou | rtn Group   | \$             | 0.00 |                          |  |  |  |
| Base Rate Fee Third   | l Group                           | \$                   | 0.00       | Base Rate Fee Fou  | rth Group   | \$             | 0.00 |                          |  |  |  |
| Base Rate Fee Third  Base Rate Fee: Add Enter here and in blo | the base rat                      | e fees for each subs |            | Base Rate Fee Fou  |             | \$             | 0.00 |                          |  |  |  |

| O Computa O Computa O Selection  DSE of Base Rate and Syndica Exclusive Surchar for Partial Distar Station  0.00 0.00       | BER GROUP SUBSCRIBER GROUP  CALL SIGN |          | TE FEES FOR EACH NINI COMMUNITY/ AREA CALL SIGN  |      | CALL SIGN      | TY-SEVENTH                             |                       |
|---|---------------------------------------|----------|--|------|----------------|--|-----------------------|
| O Computa O Computa O Selection  DSE of Base Rate and Syndica Exclusive Surchal for Partial Distar Station  0.00 0.00  0.00 |                                       |          | COMMUNITY/ AREA  | 0    |                | EA                                     | COMMUNITY/ AREA       |
| DSE of Base Rate and Syndica Exclusive Surchart Distart Station 0.00 0.00   | CALL SIGN                             | DSE      |  |      | CALL SIGN      |  |                       |
| DSE of Base Rate and Syndica Exclusion Surchart for Partial Distart Station 0.00 0.00 0.00                                  | CALL SIGN                             | DSE      | CALL SIGN  | DSE  | CALL SIGN      | DSE                                    | CALL SIGN             |
| Syndica Exclusive Surchar for Partial Distant Station  0.00 0.00  |                                       |          |  |      |                |  |                       |
| Syndica Exclusive Surchar for Partial Distant Station  0.00 0.00  |                                       |          |  |      |                |  |                       |
| Exclusive Surchard for Partiall Distant Station  0.00  0.00  0.00   |                                       |          |  |      |                |  |                       |
| O.00  0.00  0.00  |                                       |          |  |      |                | ······································ |                       |
| for Partiall Distant Station  0.00 0.00 0.00  |                                       |          |  |      |                |  |                       |
| 0.00<br>0.00  |                                       |          |  |      |                |  |                       |
| 0.00<br>0.00  |                                       |          |  |      |                |  |                       |
| 0.00<br>0.00  |                                       |          |  |      | -              |  |                       |
| 0.00<br>0.00<br>0.00  |                                       |          |  | ···· | ·              |  |                       |
| 0.00  |                                       |          |  |      |                |  |                       |
| 0.00  |                                       |          |  |      |                |  |                       |
| 0.00  |                                       |          | THE STATE OF THE S |      |                |  |                       |
| 0.00  |                                       |          |  |      |                |  |                       |
| 0.00  | Ш                                     |          |  |      |                |  |                       |
| 0.00  |                                       |          |  |      |                |  |                       |
| 0.00  | -                                     |          | Total DSEs   | 0.00 |                |  | otal DSEs             |
|   | \$                                    | nd Group | Gross Receipts Seco  | 0.00 | \$             | st Group                               | ross Receipts First G |
|   |                                       |          |  |      |                |  |                       |
|   | \$                                    | nd Group | Base Rate Fee Seco   | 0.00 | \$             | st Group                               | ase Rate Fee First G  |
| OUP   |                                       |          |  | -    | •              |  |                       |
|   | SUBSCRIBER GROUP                      | UNDREDTH | ii e   |      | SUBSCRIBER GRO |  |                       |
| 0   |                                       |          | COMMUNITY/ AREA  | 0    |                | EA                                     | OMMUNITY/ AREA        |
|   | II                                    | T = -=   |  |      | II             | T                                      |                       |
| DSE   | CALL SIGN                             | DSE      | CALL SIGN  | DSE  | CALL SIGN      | DSE                                    | CALL SIGN             |
|   |                                       |          |  |      | -              |  |                       |
|   | -                                     | ••••     |  | ···· |                |  |                       |
|   |                                       |          |  | •••• |                |  |                       |
|   |                                       |          |  |      |                |  |                       |
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|   |                                       |          |  |      |                |  |                       |
|   |                                       |          |  |      |                |  |                       |
|   |                                       |          |  |      |                |  |                       |
|   |                                       |          |  |      |                |  |                       |
|   | -                                     |          |  |      |                |  |                       |
|   |                                       |          |  |      |                |  |                       |
|   |                                       |          |  |      |                |  |                       |
|   |                                       |          |  |      |                |  |                       |
| 0.00  |                                       |          | Total DSEs   | 0.00 |                |  | otal DSEs             |
| 0.00  |                                       |          |  | 0.00 | e              | ird Group                              |                       |
| -   | •                                     | h Group  |  | 0.00 | ф              | на Стоир                               | ross Receipts Third 0 |
| 0.00  | \$                                    | h Group  | Gross Receipts Four  |      |                |  |                       |
|   | \$                                    | h Group  | Gross Receipts Four  |      |                |  |                       |

| LEGAL NAME OF OWNER CABLE ONE, INC. | R OF CABLE | SYSTEM:        |                |                            |          | \$              | 3YSTEM ID#<br>007417 | Name                     |
|-------------------------------------|------------|----------------|----------------|----------------------------|----------|-----------------|----------------------|--------------------------|
|                                     |            |                |                | ATE FEES FOR EACH          | I SUBSCR | BER GROUP       |                      |                          |
| ONE HUNDR                           | ED FIRST   | SUBSCRIBER GRO | UP <b>0</b>    | ONE HUNDRE COMMUNITY/ AREA | D SECOND | SUBSCRIBER GROU | JP <b>0</b>          | 9                        |
| CALL SIGN                           | DSE        | CALL SIGN      | DSE            | CALL SIGN                  | DSE      | CALL SIGN       | DSE                  | Computation of           |
| CALL SIGN                           | DSE        | CALL SIGN      | DSE            | CALL SIGN                  | DOE      | CALL SIGN       | DSE                  | Base Rate Fe             |
|                                     |            |                |                |                            |          |                 |                      | and                      |
|                                     |            |                |                |                            |          |                 |                      | Syndicated               |
|                                     |            |                |                |                            |          | -               |                      | Exclusivity<br>Surcharge |
|                                     | <u></u>    |                |                |                            |          |                 |                      | for                      |
|                                     |            |                |                |                            |          |                 |                      | Partially                |
|                                     |            |                |                |                            |          |                 |                      | Distant<br>Stations      |
|                                     |            |                | ····           |                            | ···      |                 |                      | Stations                 |
|                                     |            |                |                |                            |          |                 |                      |                          |
|                                     |            |                |                |                            |          |                 |                      |                          |
|                                     |            |                |                |                            |          |                 |                      |                          |
|                                     |            |                |                |                            |          |                 |                      |                          |
| Total DSEs                          | !          |                | 0.00           | Total DSEs                 |          |                 | 0.00                 |                          |
| Gross Receipts First Gr             | oup        | \$             | 0.00           | Gross Receipts Secon       | nd Group | \$              | 0.00                 |                          |
| Base Rate Fee First Gr              | oup        | \$             | 0.00           | Base Rate Fee Secon        | ıd Group | \$              | 0.00                 |                          |
| ONE HUNDR                           | ED THIRD   | SUBSCRIBER GRO | UP             | ONE HUNDRE                 | D FOURTH | SUBSCRIBER GROU | JP                   |                          |
| COMMUNITY/ AREA                     |            |                | 0              | COMMUNITY/ AREA            |          |                 | 0                    |                          |
| CALL SIGN                           | DSE        | CALL SIGN      | DSE            | CALL SIGN                  | DSE      | CALL SIGN       | DSE                  |                          |
|                                     |            |                |                |                            |          |                 |                      |                          |
|                                     | <u></u>    |                |                | -                          | ••••••   | <del> </del>    |                      |                          |
|                                     |            |                |                |                            |          |                 |                      |                          |
|                                     |            |                |                |                            |          |                 |                      |                          |
|                                     |            |                |                |                            |          | -               |                      |                          |
|                                     | <u></u>    |                | ···            | -                          | ···      |                 |                      |                          |
|                                     |            |                |                |                            |          |                 |                      |                          |
|                                     |            |                |                |                            |          |                 |                      |                          |
|                                     |            |                |                |                            |          |                 |                      |                          |
|                                     |            |                |                |                            |          |                 |                      |                          |
|                                     |            |                |                |                            |          |                 |                      |                          |
| Total DSEs                          |            |                | 0.00           | Total DSEs                 |          |                 | 0.00                 |                          |
| Gross Receipts Third G              | roup       | \$             | 0.00           | Gross Receipts Fourth      | n Group  | \$              | 0.00                 |                          |
|                                     |            |                |                |                            |          |                 |                      |                          |
| Base Rate Fee Third G               | roup       | \$             | 0.00           | Base Rate Fee Fourth       | n Group  | \$              | 0.00                 |                          |
| se Rate Fee: Add th                 |            |                | criber group a | as shown in the boxes at   | oove.    | \$              |                      |                          |

| LEGAL NAME OF OWNER CABLE ONE, INC.            | R OF CABLE | SYSTEM:          |               |                            |          | S                         | YSTEM ID#<br>007417 | Name                 |
|--|------------|------------------|---------------|----------------------------|----------|---------------------------|---------------------|----------------------|
|  |            | 0014501747101101 |               | TE 5550 500 510U           | 01100001 |                           | 007417              |                      |
|  |            | SUBSCRIBER GROU  |               | TE FEES FOR EACH           |          | BER GROUP SUBSCRIBER GROU | P                   |                      |
| COMMUNITY/ AREA                                |            |                  | 0             | COMMUNITY/ AREA            |          |                           | 0                   | 9<br>Computation     |
| CALL SIGN                                      | DSE        | CALL SIGN        | DSE           | CALL SIGN                  | DSE      | CALL SIGN                 | DSE                 | Computation of       |
| O/ LEE OIOI V                                  | BOL        | OALL SIGH        | 562           | O'ALL SIGH                 | DOL      | O'ALL GIGIT               | 502                 | Base Rate Fee        |
|  |            |                  |               |                            |          |                           |                     | and                  |
|  |            |                  |               |                            |          |                           |                     | Syndicated           |
|  |            |                  |               |                            |          |                           |                     | Exclusivity          |
|  |            |                  |               |                            |          |                           |                     | Surcharge            |
|  |            |                  |               |                            |          |                           |                     | for                  |
|  |            |                  |               |                            |          |                           |                     | Partially<br>Distant |
|  |            |                  |               |                            |          |                           |                     | Stations             |
|  |            |                  |               |                            |          |                           |                     |                      |
|  |            |                  |               |                            |          |                           |                     |                      |
|  |            |                  |               |                            |          |                           |                     |                      |
|  |            |                  |               |                            |          |                           |                     |                      |
|  |            |                  |               |                            |          |                           |                     |                      |
|  |            |                  |               |                            |          |                           |                     |                      |
| Total DSEs                                     |            |                  | 0.00          | Total DSEs                 |          |                           | 0.00                |                      |
| Gross Receipts First Gro                       | oup        | \$               | 0.00          | Gross Receipts Second      | d Group  | \$                        | 0.00                |                      |
| Base Rate Fee First Gro                        | oup        | \$               | 0.00          | Base Rate Fee Second       | d Group  | \$                        | 0.00                |                      |
| ONE HUNDRED S                                  | SEVENTH    | SUBSCRIBER GROU  | JP            | ONE HUNDRE                 | D EIGHTH | SUBSCRIBER GROU           | Р                   |                      |
| COMMUNITY/ AREA                                |            |                  | 0             | COMMUNITY/ AREA            |          |                           | 0                   |                      |
| CALL SIGN                                      | DSE        | CALL SIGN        | DSE           | CALL SIGN                  | DSE      | CALL SIGN                 | DSE                 |                      |
|  |            |                  |               |                            |          |                           |                     |                      |
|  |            |                  |               |                            |          |                           |                     |                      |
|  |            |                  |               |                            |          |                           |                     |                      |
|  |            |                  |               |                            |          |                           |                     |                      |
|  |            |                  |               |                            |          |                           |                     |                      |
|  |            |                  |               |                            |          |                           |                     |                      |
|  |            |                  | ···           |                            |          |                           |                     |                      |
|  |            |                  | ••••••••••    |                            |          |                           |                     |                      |
|  |            |                  |               |                            |          |                           |                     |                      |
|  |            |                  |               |                            |          |                           |                     |                      |
|  | ļ          |                  |               |                            | <b>_</b> |                           |                     |                      |
|  |            |                  |               |                            |          |                           |                     |                      |
|  |            |                  |               |                            |          |                           |                     |                      |
| Total DSEs                                     |            |                  | 0.00          | Total DSEs                 |          |                           | 0.00                |                      |
| Gross Receipts Third G                         | oup        | \$               | 0.00          | Gross Receipts Fourth      | Group    | \$                        | 0.00                |                      |
| 2.200 1.000ipto 11iiid Ol                      |            | *                |               | S. 222 . (Coolpto i oditii | 2.5up    | ·                         |                     |                      |
| 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 a | as shown in the boxes ab   | ove.     | \$                        |                     |                      |

| ONE HUNDRED NINTH          | · COMPLITATION O                | _          |                    |            |                 | 007417 | Name                 |
|----------------------------|---------------------------------|------------|--------------------|------------|-----------------|--------|----------------------|
| ONE HUNDRED NINTH          | . JOINI CIATION                 | OF BASE RA | TE FEES FOR EAC    | H SUBSCR   | IBER GROUP      |        |                      |
| COMMUNITY/ AREA            | 1 SUBSCRIBER GRO                | DUP        | ONE HUNI           | DRED TENTH | SUBSCRIBER GROU | JP     | ^                    |
|                            |                                 | 0          | COMMUNITY/ ARE     | Α          |                 | 0      | <b>9</b> Computation |
| CALL SIGN DSE              | CALL SIGN                       | DSE        | CALL SIGN          | DSE        | CALL SIGN       | DSE    | of                   |
|                            |                                 |            |                    |            |                 |        | Base Rate F          |
|                            |                                 |            |                    |            |                 |        | and                  |
|                            |                                 |            |                    |            |                 |        | Syndicate            |
|                            |                                 |            |                    |            |                 |        | Exclusivity          |
|                            |                                 |            | .                  |            |                 |        | Surcharge<br>for     |
|                            |                                 |            |                    |            |                 |        | Partially            |
|                            |                                 |            |                    |            |                 |        | Distant              |
|                            |                                 |            |                    |            |                 |        | Stations             |
|                            |                                 |            |                    |            |                 |        |                      |
|                            |                                 |            |                    |            |                 |        |                      |
|                            |                                 |            |                    |            |                 |        |                      |
|                            |                                 |            |                    |            |                 |        |                      |
|                            |                                 |            |                    |            |                 |        |                      |
|                            |                                 |            |                    |            |                 |        |                      |
| otal DSEs                  |                                 | 0.00       | Total DSEs         |            |                 | 0.00   |                      |
| Gross Receipts First Group | \$                              | 0.00       | Gross Receipts Sec | ond Group  | \$              | 0.00   |                      |
| Base Rate Fee First Group  | \$                              | 0.00       | Base Rate Fee Sec  | ond Group  | \$              | 0.00   |                      |
| ONE HUNDRED ELEVENTH       | 1 SUBSCRIBER GRO                | DUP        | ONE HUNDRI         | D TWELVTH  | SUBSCRIBER GROU | JP     |                      |
| COMMUNITY/ AREA            | 0                               |            | COMMUNITY/ ARE     | Α          |                 | 0      |                      |
| CALL SIGN DSE              | CALL SIGN                       | DSE        | CALL SIGN          | DSE        | CALL SIGN       | DSE    |                      |
|                            |                                 |            |                    |            |                 |        |                      |
|                            |                                 |            |                    |            |                 |        |                      |
|                            |                                 |            |                    |            |                 |        |                      |
|                            |                                 |            |                    |            |                 |        |                      |
|                            |                                 |            |                    |            |                 |        |                      |
|                            |                                 |            |                    |            |                 |        |                      |
|                            |                                 |            |                    |            |                 |        |                      |
|                            |                                 |            |                    |            |                 |        |                      |
|                            |                                 |            |                    |            |                 |        |                      |
|                            |                                 |            |                    |            |                 |        |                      |
|                            |                                 |            |                    |            |                 |        |                      |
|                            |                                 |            |                    |            |                 |        |                      |
|                            |                                 |            |                    |            |                 |        |                      |
| otal DSEs                  |                                 | 0.00       | Total DSEs         |            |                 | 0.00   |                      |
| J. 10 20 20                |                                 |            |                    |            |                 | _      |                      |
| D 11 T1110                 | ss Receipts Third Group \$ 0.00 |            |                    | rth Group  | \$              | 0.00   |                      |
| Gross Receipts Third Group |                                 |            |                    |            |                 |        |                      |

| Name                 | 007417         | S               |          |                                  |  | SYSTEM:        | R OF CABLE | LEGAL NAME OF OWNER CABLE ONE, INC.  |
|----------------------|----------------|-----------------|----------|----------------------------------|--|----------------|------------|--------------------------------------|
|                      |                |                 |          | TE FEES FOR EACH                 |  |                |            |                                      |
| 9                    | JP<br><b>0</b> | SUBSCRIBER GROU | RTEENTH  | ONE HUNDRED FOL                  | JP <b>0</b>                            | SUBSCRIBER GRO | RTEENTH    | ONE HUNDRED THII<br>COMMUNITY/ AREA  |
| Computation of       | DSE            | CALL SIGN       | DSE      | CALL SIGN                        | DSE                                    | CALL SIGN      | DSE        | CALL SIGN                            |
| Base Rate Fe         |                |                 |          |                                  |  |                |            |                                      |
| and<br>Syndicated    |                |                 |          |                                  |  |                |            |                                      |
| Exclusivity          |                | H               |          |                                  |  |                | <u> </u>   |                                      |
| Surcharge            |                |                 |          |                                  |  |                |            |                                      |
| for                  |                |                 |          |                                  |  |                |            |                                      |
| Partially<br>Distant |                |                 |          |                                  | ······································ |                |            |                                      |
| Stations             |                |                 |          |                                  |  |                |            |                                      |
|                      |                |                 |          |                                  |  |                |            |                                      |
|                      |                |                 |          |                                  |  |                |            |                                      |
|                      |                |                 |          |                                  |  |                |            |                                      |
|                      |                |                 |          |                                  |  |                |            |                                      |
|                      |                |                 |          |                                  |  |                |            |                                      |
|                      | 0.00           |                 |          | Total DSEs                       | 0.00                                   |                |            | Total DSEs                           |
|                      | 0.00           | \$              | d Group  | Gross Receipts Secon             | 0.00                                   | \$             | oup        | Gross Receipts First Gr              |
|                      | 0.00           | \$              | d Group  | Base Rate Fee Second             | 0.00                                   | \$             | oup        | Base Rate Fee First Gr               |
|                      | JP             | SUBSCRIBER GROU | IXTEENTH |                                  |  | SUBSCRIBER GRO | FTEENTH    | ONE HUNDRED FI                       |
|                      | 0              |                 |          | COMMUNITY/ AREA                  | 0                                      |                |            | COMMUNITY/ AREA                      |
|                      | DSE            | CALL SIGN       | DSE      | CALL SIGN                        | DSE                                    | CALL SIGN      | DSE        | CALL SIGN                            |
|                      |                |                 |          |                                  |  |                |            |                                      |
|                      |                |                 |          |                                  | ······································ |                |            |                                      |
|                      |                |                 |          |                                  |  |                |            |                                      |
|                      |                |                 |          |                                  |  |                |            |                                      |
|                      |                |                 |          |                                  |  |                |            |                                      |
|                      |                |                 |          |                                  |  |                |            |                                      |
|                      |                |                 |          |                                  |  |                |            |                                      |
|                      |                |                 |          |                                  |  |                | •••        |                                      |
|                      |                |                 |          |                                  |  |                |            |                                      |
|                      |                |                 |          |                                  |  |                |            |                                      |
|                      |                |                 |          |                                  |  |                |            |                                      |
|                      |                |                 |          |                                  |  |                |            |                                      |
|                      | 0.00           |                 |          | Total DSEs                       | 0.00                                   |                |            | Total DSEs                           |
|                      | 0.00           | \$              | Group    | Total DSEs Gross Receipts Fourth | 0.00                                   | \$             | roup       | Total DSEs<br>Gross Receipts Third G |

| LEGAL NAME OF OWN                           |           | E SYSTEM:       |                |                       | Name      |                  |      |                  |
|---|-----------|-----------------|----------------|-----------------------|-----------|------------------|------|------------------|
|   | BLOCK A:  | COMPUTATION (   | OF BASE RA     | TE FEES FOR EAC       | CH SUBSCR | IBER GROUP       |      |                  |
|   |           | SUBSCRIBER GROU |                | 11                    |           | SUBSCRIBER GROUP |      | 9                |
| COMMUNITY/ AREA                             |           |                 | 0              | COMMUNITY/ ARE        | Α         |                  | 0    | Computation      |
| CALL SIGN                                   | DSE       | CALL SIGN       | DSE            | CALL SIGN             | DSE       | CALL SIGN        | DSE  | of               |
|   |           |                 |                |                       |           |                  |      | Base Rate F      |
|   |           | <b> </b>        |                |                       |           |                  |      | and              |
|   |           |                 |                |                       |           |                  |      | Syndicated       |
|   |           |                 |                |                       |           |                  |      | Exclusivity      |
|   |           |                 |                |                       |           |                  |      | Surcharge<br>for |
|   |           |                 |                |                       |           |                  |      | Partially        |
|   |           |                 |                |                       |           |                  |      | Distant          |
|   |           |                 |                |                       |           |                  |      | Stations         |
|   |           | -               |                |                       |           |                  |      |                  |
|   |           |                 |                |                       |           |                  |      |                  |
|   |           |                 |                |                       |           |                  |      |                  |
|   |           |                 |                |                       |           |                  |      |                  |
|   |           |                 |                |                       |           |                  |      |                  |
| otal DSEs                                   |           |                 | 0.00           | Total DSEs            |           |                  | 0.00 |                  |
| Gross Receipts First                        | Group     | \$              | 0.00           | Gross Receipts Sec    | ond Group | \$               | 0.00 |                  |
| Base Rate Fee First                         | Group     | \$              | 0.00           | Base Rate Fee Sec     | ond Group | \$               | 0.00 |                  |
| ONE HUNDRED                                 | NINTEENTH | SUBSCRIBER GRO  | DUP            | ONE HUNDRED           | TWENTIETH | SUBSCRIBER GRO   | UP   |                  |
| COMMUNITY/ AREA                             | / AREA    |                 | 0              |                       | 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                        | l Group   | \$              | 0.00           | Gross Receipts Fou    | rth Group | \$               | 0.00 |                  |
| •   | •         |                 |                |                       |           |                  |      |                  |
| Base Rate Fee Third                         | l Group   | \$              | 0.00           | Base Rate Fee Fou     | rth Group | \$               | 0.00 |                  |
| Base Rate Fee: Add<br>Enter here and in blo |           |                 | criber group a | as shown in the boxes | above.    | s                |      |                  |

|  | LE SYSTEM:         |           |  |            | `                     | 6YSTEM ID#<br>007417 | Nam             |
|--|--------------------|-----------|--|------------|-----------------------|----------------------|-----------------|
| BLOCK A  | : COMPUTATION C    | F BASE RA | ATE FEES FOR EAC                                       | H SUBSCRI  | IBER GROUP            |                      |                 |
| ONE HUNDRED TWENTY-FIRS  | T SUBSCRIBER GROUP |           | li   |            | SUBSCRIBER GROUP      |                      | 0               |
| COMMUNITY/ AREA  |                    | 0         | COMMUNITY/ AREA  |            |                       | 0                    | 9<br>Computa    |
| CALL SIGN DSE  | CALL SIGN          | DSE       | CALL SIGN  | DSE        | CALL SIGN             | DSE                  | of              |
| 0/122 0/01/  | 07.122.01011       | 202       | 0,120,011  | 202        | 0,122 0.0.1           | 352                  | Base Rate       |
|  |                    |           |  |            |                       |                      | and             |
|  |                    |           |  |            |                       |                      | Syndicat        |
|  |                    |           |  |            |                       |                      | Exclusiv        |
|  |                    |           |  |            |                       |                      | Surchar         |
|  |                    |           |  |            |                       |                      | for<br>Partiall |
|  |                    |           |  |            |                       |                      | Distan          |
|  |                    |           |  |            |                       |                      | Station         |
|  |                    |           |  |            |                       |                      |                 |
|  |                    |           |  |            |                       |                      |                 |
|  |                    |           |  |            |                       |                      |                 |
|  |                    |           |  |            |                       |                      |                 |
|  |                    |           | -  |            |                       |                      |                 |
|  | Щ                  | 0.00      | T  |            | H                     | 0.00                 |                 |
| Total DSEs   | -                  | 0.00      | Total DSEs   |            |                       | 0.00                 |                 |
| Gross Receipts First Group   | \$                 | 0.00      | Gross Receipts Seco                                    | nd Group   | \$                    | 0.00                 |                 |
|  |                    |           |  |            |                       |                      |                 |
|  |                    |           |  |            |                       |                      |                 |
| ·  | \$                 | 0.00      | Base Rate Fee Seco                                     |            | \$                    | 0.00                 |                 |
| ONE HUNDRED TWENTY-THIR  |                    | D         | ONE HUNDRED TWE  | NTY-FOURTH | \$ I SUBSCRIBER GROUP |                      |                 |
| ONE HUNDRED TWENTY-THIR  |                    |           |  | NTY-FOURTH | ļ                     | 0.00                 |                 |
| ONE HUNDRED TWENTY-THIR  |                    | D         | ONE HUNDRED TWE  | NTY-FOURTH | ļ                     |                      |                 |
| ONE HUNDRED TWENTY-THIR  | SUBSCRIBER GROUP   | 0         | ONE HUNDRED TWE  | NTY-FOURTH | SUBSCRIBER GROUP      | 0                    |                 |
| ONE HUNDRED TWENTY-THIR  | SUBSCRIBER GROUP   | 0         | ONE HUNDRED TWE  | NTY-FOURTH | SUBSCRIBER GROUP      | 0                    |                 |
| ONE HUNDRED TWENTY-THIR  | SUBSCRIBER GROUP   | 0         | ONE HUNDRED TWE  | NTY-FOURTH | SUBSCRIBER GROUP      | 0                    |                 |
| ONE HUNDRED TWENTY-THIR  | SUBSCRIBER GROUP   | 0         | ONE HUNDRED TWE  | NTY-FOURTH | SUBSCRIBER GROUP      | 0                    |                 |
| ONE HUNDRED TWENTY-THIR  | SUBSCRIBER GROUP   | 0         | ONE HUNDRED TWE  | NTY-FOURTH | SUBSCRIBER GROUP      | 0                    |                 |
| ONE HUNDRED TWENTY-THIR  | SUBSCRIBER GROUP   | 0         | ONE HUNDRED TWE  | NTY-FOURTH | SUBSCRIBER GROUP      | 0                    |                 |
| ONE HUNDRED TWENTY-THIR  | SUBSCRIBER GROUP   | 0         | ONE HUNDRED TWE  | NTY-FOURTH | SUBSCRIBER GROUP      | 0                    |                 |
| ONE HUNDRED TWENTY-THIR  | SUBSCRIBER GROUP   | 0         | ONE HUNDRED TWE  | NTY-FOURTH | SUBSCRIBER GROUP      | 0                    |                 |
| ONE HUNDRED TWENTY-THIR  | SUBSCRIBER GROUP   | 0         | ONE HUNDRED TWE  | NTY-FOURTH | SUBSCRIBER GROUP      | 0                    |                 |
| ONE HUNDRED TWENTY-THIR  | SUBSCRIBER GROUP   | 0         | ONE HUNDRED TWE  | NTY-FOURTH | SUBSCRIBER GROUP      | 0                    |                 |
| ONE HUNDRED TWENTY-THIR COMMUNITY/ AREA                            | SUBSCRIBER GROUP   | 0         | ONE HUNDRED TWE  | NTY-FOURTH | SUBSCRIBER GROUP      | 0                    |                 |
| ONE HUNDRED TWENTY-THIR  | SUBSCRIBER GROUP   | 0         | ONE HUNDRED TWE  | NTY-FOURTH | SUBSCRIBER GROUP      | 0                    |                 |
| ONE HUNDRED TWENTY-THIR  | SUBSCRIBER GROUP   | 0         | ONE HUNDRED TWE  | NTY-FOURTH | SUBSCRIBER GROUP      | 0                    |                 |
| ONE HUNDRED TWENTY-THIR COMMUNITY/ AREA  CALL SIGN DSE             | SUBSCRIBER GROUP   | 0         | ONE HUNDRED TWE  | NTY-FOURTH | SUBSCRIBER GROUP      | 0                    |                 |
| ONE HUNDRED TWENTY-THIR COMMUNITY/ AREA  CALL SIGN DSE             | CALL SIGN          | 0 DSE     | ONE HUNDRED TWE COMMUNITY/ AREA  CALL SIGN  Total DSEs | DSE DSE    | CALL SIGN             | 0 DSE                |                 |
| ONE HUNDRED TWENTY-THIR COMMUNITY/ AREA  CALL SIGN DSE  Total DSEs | SUBSCRIBER GROUP   | DSE       | ONE HUNDRED TWE COMMUNITY/ AREA  CALL SIGN             | DSE DSE    | SUBSCRIBER GROUP      | DSE                  |                 |
| COMMUNITY/ AREA  | CALL SIGN          | 0 DSE     | ONE HUNDRED TWE COMMUNITY/ AREA  CALL SIGN  Total DSEs | DSE COUP   | CALL SIGN             | 0 DSE                |                 |

| LEGAL NAME OF OWNE CABLE ONE, INC. | R OF CABLE  | SYSTEM:   |   |                       |            | S                          | 007417 | Name                     |
|------------------------------------|---|---|---|-----------------------|------------|----------------------------|--------|--------------------------|
|                                    |   | COMPUTATION OF  | BASE RA   | ATE FEES FOR EACH     |            | BER GROUP SUBSCRIBER GROUP |        |                          |
| COMMUNITY/ AREA                    |   |   | 0   | COMMUNITY/ AREA       |            |                            | 0      | 9<br>Computation         |
| CALL SIGN                          | DSE   | CALL SIGN   | DSE   | CALL SIGN             | DSE        | CALL SIGN                  | DSE    | of                       |
|                                    |   |   |   |                       |            |                            |        | Base Rate Fee            |
|                                    |   |   |   |                       |            |                            |        | Syndicated               |
|                                    |   |   |   |                       |            |                            |        | Exclusivity<br>Surcharge |
|                                    |   |   |   |                       |            |                            |        | for                      |
|                                    |   |   |   |                       |            |                            |        | Partially<br>Distant     |
|                                    |   |   |   |                       |            |                            |        | Stations                 |
|                                    |   |   |   |                       |            |                            |        |                          |
|                                    |   |   |   |                       |            |                            |        |                          |
|                                    |   |   |   |                       |            |                            |        |                          |
|                                    |   |   |   |                       |            |                            |        |                          |
| Total DSEs                         |   |   | 0.00  | Total DSEs            |            |                            | 0.00   |                          |
| Gross Receipts First G             | roup  | \$  | 0.00  | Gross Receipts Secon  | d Group    | \$                         | 0.00   |                          |
| <b>Base Rate Fee</b> First G       | roup  | \$  | 0.00  | Base Rate Fee Secon   | d Group    | \$                         | 0.00   |                          |
| ONE HUNDRED TWENTY                 | /-SEVENTH   | SUBSCRIBER GROUP  |   | ii .                  | NTY-EIGHTH | 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   |                          |
| Gross Receipts Fourth Group        | \$ 0.00  Gross Receipts Fourth Group  Base Rate Fee Fourth Group  e fees for each subscriber group as shown in the boxes above. | 0.00 Gross Receipts Fourth Group  0.00 Base Rate Fee Fourth Group | Gross Receipts Fourth Group  Base Rate Fee Fourth Group | Group                 |            |                            | 0.00   |                          |

| 9                | 007417 |                  |          |                       |          |                  |                | CABLE ONE, INC.         |
|------------------|--------|------------------|----------|-----------------------|----------|------------------|----------------|-------------------------|
| 9                |        | BER GROUP        | SUBSCRI  | TE FEES FOR EACH      | BASE RA  | COMPUTATION OF   | BLOCK A:       |                         |
| , ч              |        | SUBSCRIBER GROUP |          |                       |          | SUBSCRIBER GROUP |                |                         |
| 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<br>for |        |                  |          |                       |          |                  |                |                         |
| Partially        |        |                  |          |                       |          |                  |                |                         |
| Distant          |        |                  |          |                       |          |                  |                |                         |
| Stations         |        | _                |          |                       |          |                  |                |                         |
|                  |        |                  |          |                       |          |                  |                |                         |
|                  |        |                  | ļ        |                       | ļ        |                  | <del>.  </del> |                         |
|                  |        |                  | ļ        |                       | ļ        |                  | <del></del>    |                         |
|                  |        |                  |          |                       | ·····    |                  |                |                         |
|                  |        |                  |          |                       |          |                  | <u></u>        |                         |
|                  | 0.00   | -                | !        | Total DSEs            | 0.00     |                  | -              | Total DSEs              |
|                  | 0.00   | \$               | l Group  | Gross Receipts Second | 0.00     | \$               | oup            | Gross Receipts First Gr |
| 1                |        |                  |          |                       |          |                  |                |                         |
|                  | 0.00   | \$               | l Group  | Base Rate Fee Second  | 0.00     | \$               | oup            | Base Rate Fee First Gr  |
|                  |        | SUBSCRIBER GROUP | Y-SECOND | ONE HUNDRED THIRT     |          | SUBSCRIBER GROUP | RTY-FIRST      | ONE HUNDRED THI         |
|                  | 0      |                  |          | COMMUNITY/ AREA       | 0        |                  |                | COMMUNITY/ AREA         |
|                  | DSE    | CALL SIGN        | DSE      | CALL SIGN             | DSE      | CALL SIGN        | DSE            | CALL SIGN               |
|                  |        |                  |          |                       |          |                  |                |                         |
|                  |        |                  |          |                       |          |                  |                |                         |
|                  |        |                  |          |                       |          |                  |                |                         |
|                  |        |                  |          |                       |          |                  |                |                         |
|                  |        |                  |          |                       |          |                  |                |                         |
|                  |        |                  |          |                       |          |                  |                |                         |
|                  |        |                  |          |                       |          |                  |                |                         |
|                  |        |                  |          |                       | <b></b>  |                  |                |                         |
|                  |        |                  |          |                       | <b> </b> |                  |                |                         |
|                  |        |                  |          |                       |          |                  |                |                         |
|                  |        |                  |          |                       |          |                  |                |                         |
|                  |        |                  |          |                       |          |                  |                |                         |
|                  | 0.00   |                  |          | Total DSEs            | 0.00     |                  |                | Total DSEs              |
| -                | -      |                  | •        |                       |          |                  |                |                         |
|                  | 0.00   | \$               | Group    | Gross Receipts Fourth | 0.00     | \$               | roup           | Gross Receipts Third G  |
| -<br>1           | 1      | i                |          | 11                    |          |                  |                |                         |

| LEGAL NAME OF OWNER CABLE ONE, INC.            | OF CABLE | SYSTEM:          |              |                          |           | S                | YSTEM ID#<br>007417 | Name                    |
|--|----------|------------------|--------------|--------------------------|-----------|------------------|---------------------|-------------------------|
| В  | LOCK A:  | COMPUTATION OF   | BASE RA      | ATE FEES FOR EACH        | SUBSCRI   | BER GROUP        |                     |                         |
|  |          | SUBSCRIBER GROUP |              | III                      |           | SUBSCRIBER GROUP |                     | •                       |
| COMMUNITY/ AREA                                |          |                  | 0            | COMMUNITY/ AREA          |           |                  | 0                   | <b>9</b><br>Computation |
| CALL SIGN                                      | DSE      | CALL SIGN        | DSE          | CALL SIGN                | DSE       | CALL SIGN        | DSE                 | of                      |
|  |          |                  |              |                          |           |                  |                     | Base Rate Fee           |
|  |          |                  |              |                          |           |                  |                     | and                     |
|  |          |                  |              |                          |           |                  |                     | Syndicated              |
|  |          |                  |              |                          |           |                  |                     | Exclusivity             |
|  |          |                  |              |                          |           |                  |                     | Surcharge               |
|  |          |                  |              |                          |           |                  |                     | for                     |
|  |          |                  |              |                          |           |                  |                     | Partially               |
|  |          |                  |              |                          |           |                  | ····                | Distant<br>Stations     |
|  |          |                  |              |                          |           |                  |                     | Stations                |
|  |          |                  |              |                          |           |                  |                     |                         |
|  |          |                  |              |                          |           | -                | <del></del>         |                         |
|  |          |                  |              |                          |           |                  | <u> </u>            |                         |
|  |          |                  |              |                          |           |                  |                     |                         |
|  |          |                  |              |                          |           |                  |                     |                         |
| Total DSEs                                     |          |                  | 0.00         | Total DSEs               | •         |                  | 0.00                |                         |
| Gross Receipts First Gro                       | oup      | \$               | 0.00         | Gross Receipts Second    | d Group   | \$               | 0.00                |                         |
| Base Rate Fee First Gro                        | oup      | \$               | 0.00         | Base Rate Fee Second     | d Group   | \$               | 0.00                |                         |
| ONE HUNDRED THIR                               | TY-FIFTH | SUBSCRIBER GROU  | IP           | ONE HUNDRED THIS         | RTY-SIXTH | SUBSCRIBER GROUP | )                   |                         |
| COMMUNITY/ AREA                                |          |                  | 0            | COMMUNITY/ AREA          |           |                  |                     |                         |
| CALL SIGN                                      | DSE      | CALL SIGN        | DSE          | CALL SIGN                | DSE       | CALL SIGN        | DSE                 |                         |
|  |          |                  |              |                          |           |                  |                     |                         |
|  |          |                  |              |                          |           |                  |                     |                         |
|  |          |                  |              |                          |           |                  |                     |                         |
|  |          |                  |              |                          |           |                  |                     |                         |
|  |          |                  |              |                          |           |                  | ····                |                         |
|  |          |                  |              |                          |           | -                | <del></del>         |                         |
|  |          |                  |              |                          |           |                  | ···                 |                         |
|  |          |                  |              |                          |           |                  |                     |                         |
|  |          |                  |              |                          |           |                  |                     |                         |
|  |          |                  |              |                          |           |                  |                     |                         |
|  |          |                  |              |                          |           |                  |                     |                         |
|  | ļ        |                  |              |                          |           |                  |                     |                         |
|  |          |                  |              |                          |           |                  |                     |                         |
| Total DSEs                                     |          |                  | 0.00         | Total DSEs               |           |                  | 0.00                |                         |
|  | oup.     | ¢                |              |                          | Group     | ¢                |                     |                         |
| 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 |          |                  | iber group a | as shown in the boxes ab | ove.      | \$               |                     |                         |

|                   | 007417      | S                |            |                                       |             |                  | R OF CABLE | CABLE ONE, INC.                             |
|-------------------|-------------|------------------|------------|---------------------------------------|-------------|------------------|------------|---|
|                   |             |                  |            | TE FEES FOR EAC                       |             |                  |            |   |
| 9                 | 0           | SUBSCRIBER GROUP | RTY-EIGHTH | ONE HUNDRED TH                        | 0           | SUBSCRIBER GROUP | Y-SEVENTH  | ONE HUNDRED THIRTY COMMUNITY/ AREA          |
| Computatio of     | DSE         | CALL SIGN        | DSE        | CALL SIGN                             | DSE         | CALL SIGN        | DSE        | CALL SIGN                                   |
| Base Rate Fe      |             |                  |            |                                       |             |                  |            |   |
| and<br>Syndicated |             |                  |            |                                       |             |                  |            |   |
| Exclusivity       |             |                  |            |                                       |             |                  |            |   |
| Surcharge         |             |                  |            |                                       |             |                  |            |   |
| for<br>Partially  |             |                  |            |                                       |             |                  |            |   |
| Distant           |             |                  |            |                                       | <del></del> |                  |            |   |
| Stations          |             |                  |            |                                       |             |                  |            |   |
|                   |             |                  |            |                                       |             |                  |            |   |
|                   |             |                  |            |                                       | <u></u>     |                  |            |   |
|                   |             |                  |            |                                       |             |                  |            |   |
|                   |             |                  |            |                                       |             |                  |            |   |
|                   |             |                  |            |                                       |             |                  |            |   |
|                   | 0.00        |                  |            | Total DSEs                            | 0.00        |                  |            | Total DSEs                                  |
|                   | 0.00        | \$               | d Group    | Gross Receipts Seco                   | 0.00        | \$               | roup       | Gross Receipts First G                      |
|                   |             |                  |            |                                       |             |                  |            |   |
|                   | 0.00        | \$               | d Group    | Base Rate Fee Seco                    | 0.00        | \$               | roup       | Base Rate Fee First G                       |
|                   | JP          | SUBSCRIBER GROU  |            | ONE HUNDRE                            | JP          |                  |            | ONE HUNDRED THIR                            |
|                   |             |                  |            |                                       | -           |                  |            | ONE HUNDRED THIR                            |
|                   | JP          |                  |            | ONE HUNDRE                            | JP          |                  |            | ONE HUNDRED THIR                            |
|                   | JP <b>0</b> | SUBSCRIBER GROU  | FORTIETH   | ONE HUNDREI                           | JP <b>0</b> | SUBSCRIBER GROU  | RTY-NINTH  | ONE HUNDRED THIR                            |
|                   | JP <b>0</b> | SUBSCRIBER GROU  | FORTIETH   | ONE HUNDREI                           | JP <b>0</b> | SUBSCRIBER GROU  | RTY-NINTH  | ONE HUNDRED THIR                            |
|                   | JP <b>0</b> | SUBSCRIBER GROU  | FORTIETH   | ONE HUNDREI                           | JP <b>0</b> | SUBSCRIBER GROU  | RTY-NINTH  | ONE HUNDRED THIR                            |
|                   | JP <b>0</b> | SUBSCRIBER GROU  | FORTIETH   | ONE HUNDREI                           | JP <b>0</b> | SUBSCRIBER GROU  | RTY-NINTH  | ONE HUNDRED THIR                            |
|                   | JP <b>0</b> | SUBSCRIBER GROU  | FORTIETH   | ONE HUNDREI                           | JP <b>0</b> | SUBSCRIBER GROU  | RTY-NINTH  | ONE HUNDRED THIR                            |
|                   | JP <b>0</b> | SUBSCRIBER GROU  | FORTIETH   | ONE HUNDREI                           | JP <b>0</b> | SUBSCRIBER GROU  | RTY-NINTH  | ONE HUNDRED THIR                            |
|                   | JP <b>0</b> | SUBSCRIBER GROU  | FORTIETH   | ONE HUNDREI                           | JP <b>0</b> | SUBSCRIBER GROU  | RTY-NINTH  | ONE HUNDRED THIR                            |
|                   | JP <b>0</b> | SUBSCRIBER GROU  | FORTIETH   | ONE HUNDREI                           | JP <b>0</b> | SUBSCRIBER GROU  | RTY-NINTH  | ONE HUNDRED THIR                            |
|                   | JP <b>0</b> | SUBSCRIBER GROU  | FORTIETH   | ONE HUNDREI                           | JP <b>0</b> | SUBSCRIBER GROU  | RTY-NINTH  | ONE HUNDRED THIR                            |
|                   | JP <b>0</b> | SUBSCRIBER GROU  | FORTIETH   | ONE HUNDREI                           | JP <b>0</b> | SUBSCRIBER GROU  | RTY-NINTH  | COMMUNITY/ AREA                             |
|                   | JP <b>0</b> | SUBSCRIBER GROU  | FORTIETH   | ONE HUNDREI                           | JP <b>0</b> | SUBSCRIBER GROU  | RTY-NINTH  | ONE HUNDRED THIR                            |
|                   | JP <b>0</b> | SUBSCRIBER GROU  | FORTIETH   | ONE HUNDREI                           | JP <b>0</b> | SUBSCRIBER GROU  | RTY-NINTH  | ONE HUNDRED THIR                            |
|                   | DSE         | SUBSCRIBER GROU  | DSE        | ONE HUNDREI COMMUNITY/ AREA CALL SIGN | JP  0  DSE  | SUBSCRIBER GROU  | DSE        | ONE HUNDRED THIR COMMUNITY/ AREA  CALL SIGN |

|                        | 007417            |                  |          |                       |         | SYSTEM:          | R OF CABLE     | LEGAL NAME OF OWNER CABLE ONE, INC. |
|------------------------|-------------------|------------------|----------|-----------------------|---------|------------------|----------------|-------------------------------------|
|                        |                   | BER GROUP        | SUBSCRIE | TE FEES FOR EACH      | BASE RA |                  |                |                                     |
| 9                      | 0                 | SUBSCRIBER GROUP | Y-SECOND | ONE HUNDRED FORT      | 0       | SUBSCRIBER GROUP | RTY-FIRST      | ONE HUNDRED FOI                     |
| Computation of         | DSE               | CALL SIGN        | DSE      | CALL SIGN             | DSE     | CALL SIGN        | DSE            | CALL SIGN                           |
| Base Rate I            | 562               | O'ALL GIGIT      | DOL      | O/ ILL STOIT          | DOL     | ONEE CICIT       | BOL            | CALL GIGIT                          |
| and                    |                   |                  |          |                       |         |                  |                |                                     |
| Syndicate              |                   |                  |          |                       |         |                  |                |                                     |
| Exclusivit<br>Surcharg |                   |                  |          |                       |         |                  | <del> </del>   |                                     |
| for                    |                   |                  |          |                       |         |                  | <u></u>        |                                     |
| Partially              |                   |                  |          |                       |         |                  |                |                                     |
| Distant                |                   |                  |          |                       |         |                  |                |                                     |
| Stations               |                   |                  |          |                       |         |                  | <del>.  </del> |                                     |
|                        |                   | H                |          |                       |         |                  |                |                                     |
|                        |                   |                  |          |                       |         |                  |                |                                     |
|                        |                   |                  |          |                       |         |                  |                |                                     |
|                        |                   |                  |          |                       |         |                  | <u></u>        |                                     |
|                        | 0.00              | Ц                |          | T-4-1 DCC-            | 0.00    |                  |                | T-4-L DOE-                          |
|                        | 0.00              |                  |          | Total DSEs            | 0.00    |                  |                | Total DSEs                          |
|                        | 0.00              | \$               | Group    | Gross Receipts Second | 0.00    | \$               | oup            | Gross Receipts First Gr             |
|                        | 0.00              | \$               | Group    | Base Rate Fee Second  | 0.00    | \$               | oup            | Base Rate Fee First Gr              |
|                        |                   | SUBSCRIBER GROUP | Y-FOURTH | ONE HUNDRED FORT      |         | SUBSCRIBER GROUP | RTY-THIRD      | ONE HUNDRED FOR                     |
|                        | COMMUNITY/ AREA 0 |                  |          |                       |         |                  |                | COMMUNITY/ AREA                     |
|                        | DSE               | CALL SIGN        | DSE      | CALL SIGN             | DSE     | CALL SIGN        | DSE            | CALL SIGN                           |
|                        |                   |                  |          |                       |         |                  | <u></u>        |                                     |
|                        |                   |                  |          |                       |         |                  | <u> </u>       |                                     |
|                        |                   |                  |          |                       |         |                  |                |                                     |
|                        |                   |                  |          |                       |         |                  |                |                                     |
|                        |                   |                  |          |                       |         |                  | <u> </u>       |                                     |
|                        |                   |                  |          |                       |         |                  | <del></del>    |                                     |
|                        |                   |                  |          |                       |         |                  |                |                                     |
|                        |                   |                  |          |                       |         |                  |                |                                     |
|                        |                   |                  |          |                       |         |                  | <u> </u>       |                                     |
|                        |                   |                  |          |                       |         |                  | <u>-</u>       |                                     |
|                        |                   |                  |          |                       |         |                  |                |                                     |
|                        |                   |                  |          |                       |         |                  |                |                                     |
|                        | 0.00              |                  |          | Total DSEs            | 0.00    |                  |                | Total DSEs                          |
|                        | 0.00              |                  |          | 11                    |         |                  |                |                                     |
|                        | 0.00              | \$               | Group    | Gross Receipts Fourth | 0.00    | \$               | roup           | Gross Receipts Third G              |

|                   | 007417 |                  |           |                      |      | SYSTEM:          | VNER OF CABLI<br>NC. | CABLE ONE, INC.                   |
|-------------------|--------|------------------|-----------|----------------------|------|------------------|----------------------|-----------------------------------|
|                   |        |                  |           | ATE FEES FOR EACH    |      |                  |                      |                                   |
| 9                 | 0      | SUBSCRIBER GROUP | RTY-SIXTH | ONE HUNDRED FO       | 0    | SUBSCRIBER GROUI |                      | ONE HUNDRED FO                    |
| Computation of    | DSE    | CALL SIGN        | DSE       | CALL SIGN            | DSE  | CALL SIGN        | DSE                  | CALL SIGN                         |
| Base Rate Fe      |        |                  |           |                      |      |                  |                      |                                   |
| and<br>Syndicated |        |                  |           |                      |      |                  |                      |                                   |
| Exclusivity       |        |                  |           |                      |      |                  |                      |                                   |
| Surcharge         |        |                  |           |                      |      |                  |                      |                                   |
| for<br>Partially  |        |                  |           |                      |      |                  |                      |                                   |
| Distant           |        |                  |           |                      |      |                  |                      |                                   |
| Stations          |        |                  |           |                      |      |                  |                      |                                   |
|                   |        |                  |           |                      |      |                  |                      |                                   |
|                   |        |                  |           |                      |      |                  |                      |                                   |
|                   |        |                  |           |                      |      |                  |                      |                                   |
|                   |        |                  |           |                      |      |                  |                      |                                   |
|                   | 0.00   | <u> </u>         | <u> </u>  | Total DSEs           | 0.00 |                  |                      | Total DSEs                        |
|                   | 0.00   | \$               | d Group   | Gross Receipts Secon | 0.00 | \$               | st Group             | Gross Receipts First G            |
|                   | 0.00   | •                | ТОГОЦР    | Gross Receipts Gecom | 0.00 | Ψ                | st Oroup             | oross Receipts First C            |
|                   | 0.00   | \$               | d Group   | Base Rate Fee Secon  | 0.00 | \$               | st Group             | Base Rate Fee First G             |
|                   |        | SUBSCRIBER GROUP | TY-EIGHTH | <b>†</b>             |      | SUBSCRIBER GROUI |                      | ONE HUNDRED FORT                  |
|                   | 0      |                  |           | COMMUNITY/ AREA      | 0    |                  | EA                   | COMMUNITY/ AREA                   |
|                   | DSE    | CALL SIGN        | DSE       | CALL SIGN            | DSE  | CALL SIGN        | DSE                  | CALL SIGN                         |
|                   | 502    |                  |           |                      |      |                  |                      |                                   |
|                   |        |                  |           |                      |      |                  |                      |                                   |
|                   |        |                  |           |                      |      |                  |                      |                                   |
|                   |        |                  |           |                      |      |                  |                      |                                   |
|                   |        |                  |           |                      |      |                  |                      |                                   |
|                   |        |                  |           |                      |      |                  |                      |                                   |
|                   |        |                  |           |                      |      |                  |                      |                                   |
|                   |        |                  |           |                      |      |                  |                      |                                   |
|                   |        |                  |           |                      |      |                  |                      |                                   |
|                   |        |                  |           |                      |      |                  |                      |                                   |
|                   |        |                  |           |                      |      |                  |                      |                                   |
|                   |        |                  |           |                      |      |                  |                      |                                   |
|                   | 0.00   |                  |           | Total DSEs           | 0.00 |                  |                      | Total DSEs                        |
|                   |        | \$               | Group     |                      | 0.00 | \$               | ard Group            | Total DSEs Gross Receipts Third ( |

| NTH SUBSCRIBER | GROUP  | ATE FEES FOR EAC   | CH SUBSCR  | IBER GROUP   |   |   |
|----------------|--|--|--|--|---|---|
|                |  | ONE HUNDE  |  |  |   |   |
|                | _  |  |  | SUBSCRIBER GROU  |   | 9   |
| E II OALLOION  | 0  | COMMUNITY/ ARE   | ٩  |  | 0   | Computatio  |
| SE CALL SIGN   | DSE  | CALL SIGN  | DSE  | CALL SIGN  | DSE                                       | of  |
|                |  |  |  |  |   | Base Rate Fe  |
|                |  |  |  |  |   | and   |
|                |  |  |  |  |   | Syndicated  |
|                |  | -  |  |  |   | Exclusivity<br>Surcharge  |
|                |  |  |  |  |   | for   |
|                |  |  |  |  |   | Partially   |
|                |  |  |  |  |   | Distant   |
|                |  |  |  |  |   | Stations  |
|                |  |  |  |  |   |   |
|                |  |  |  |  |   |   |
|                |  |  |  | H  |   |   |
|                |  |  |  |  |   |   |
|                |  |  |  |  |   |   |
|                | 0.00   | Total DSEs   |  |  | 0.00                                      |   |
| \$             | 0.00   | Gross Receipts Sec   | ond Group  | \$   | 0.00                                      |   |
|                |  |  |  |  |   |   |
| \$             | 0.00   |  |  | \$   | 0.00                                      |   |
| RST SUBSCRIBER |  |  |  | SUBSCRIBER GROU  | _   |   |
|                | 0  | COMMUNITY/ AREA 0  |  |  |   |   |
| E CALL SIGN    | DSE  | CALL SIGN  | DSE  | CALL SIGN  | DSE                                       |   |
|                |  |  |  |  |   |   |
|                |  |  |  |  |   |   |
|                |  |  |  |  |   |   |
|                |  | -  |  |  |   |   |
|                |  |  |  |  |   |   |
|                |  |  |  |  |   |   |
|                |  |  |  |  |   |   |
|                |  |  |  |  |   |   |
|                |  |  |  |  |   |   |
|                |  |  |  |  |   |   |
|                |  |  |  |  |   |   |
|                |  |  |  |  |   |   |
|                |  |  |  |  |   |   |
|                | 0.00   | Total DSEs   |  |  | 0.00                                      |   |
| \$             | 0.00   | Gross Receipts Fou   | rth Group  | \$   | 0.00                                      |   |
|                |  |  |  |  |   |   |
| \$             | 0.00   | Base Rate Fee Fou  | rth Group  | \$   | 0.00                                      |   |
|                |  |  | ·<br>  | <u>.                                    </u>   |   |   |
|                |  |  |  |  |   |   |
|                | \$  SE CALL SIGN  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$ | \$ 0.00  \$ 0.00  EIRST SUBSCRIBER GROUP  O  SE CALL SIGN DSE  O.00  \$ 0.00  \$ 0.00  \$ 0.00 | \$ 0.00  STRINGT SUBSCRIBER GROUP  ONE HUNDRED FIRE  COMMUNITY/ AREA  SE CALL SIGN DSE CALL SIGN  SE CALL SIGN  DSE CALL SIGN  Total DSEs  Gross Receipts Sec  Base Rate Fee Sec  Total DSEs  Gross Receipts Fou  Base Rate Fee Fou  See rate fees for each subscriber group as shown in the boxes | \$ 0.00  STRICT SUBSCRIBER GROUP  ONE HUNDRED FIFTY-SECOND  COMMUNITY/ AREA  SE CALL SIGN DSE CALL SIGN DSE  O.00  Total DSEs  Gross Receipts Fourth Group  Base Rate Fee Fourth Group  Base Rate Fee Fourth Group  Base Rate Fee Fourth Group | \$ 0.00   Base Rate Fee Second Group   \$ | \$ 0.00  STREAM DEED TOTAL PROPERTY OF THE PROP |

| Gomputation of Base Rate F | <b>007417</b> | BER GROUP       | SUBSCRI  | TE EEES EOD EACH      |      |                                |          |                               |
|----------------------------|---------------|-----------------|----------|-----------------------|------|--------------------------------|----------|-------------------------------|
| Computation                | -             | SUBSCRIBER GROU |          | ONE HUNDRED FIFT      |      | COMPUTATION OF SUBSCRIBER GROU |          |                               |
| of                         | 0             |                 |          | COMMUNITY/ AREA       | 0    |                                |          | COMMUNITY/ AREA               |
| Rase Rate F                | DSE           | CALL SIGN       | DSE      | CALL SIGN             | DSE  | CALL SIGN                      | DSE      | CALL SIGN                     |
| and                        |               |                 |          |                       |      |                                |          |                               |
| Syndicated                 |               |                 |          |                       |      |                                |          |                               |
| Exclusivity Surcharge      |               |                 |          |                       |      |                                |          |                               |
| for                        |               |                 |          |                       |      |                                |          |                               |
| Partially<br>Distant       |               |                 |          |                       |      |                                |          |                               |
| Stations                   |               |                 |          |                       |      |                                |          |                               |
|                            |               |                 |          |                       |      |                                |          |                               |
|                            |               | -               |          |                       |      |                                |          |                               |
|                            |               |                 |          |                       |      |                                |          |                               |
| <u></u>                    |               |                 |          |                       |      |                                |          |                               |
|                            | 0.00          |                 |          | Total DSEs            | 0.00 |                                |          | Total DSEs                    |
|                            | 0.00          | \$              | l Group  | Gross Receipts Second | 0.00 | \$                             | oup      | Gross Receipts First Gr       |
|                            | 0.00          | \$              | l Group  | Base Rate Fee Second  | 0.00 | \$                             | oup      | <b>Base Rate Fee</b> First Gr |
|                            | UP            | SUBSCRIBER GROU | TY-SIXTH | ONE HUNDRED FI        | JP   | SUBSCRIBER GROU                | TY-FIFTH | ONE HUNDRED FIF               |
|                            | 0             |                 |          | COMMUNITY/ AREA       | 0    |                                |          | COMMUNITY/ AREA               |
|                            | DSE           | CALL SIGN       | DSE      | CALL SIGN             | DSE  | CALL SIGN                      | DSE      | CALL SIGN                     |
|                            |               |                 |          |                       |      |                                |          |                               |
|                            |               |                 |          |                       |      |                                |          |                               |
|                            |               |                 |          |                       |      |                                |          |                               |
|                            |               |                 |          |                       |      |                                |          |                               |
|                            |               |                 |          |                       |      |                                |          |                               |
|                            |               |                 |          |                       |      |                                |          |                               |
|                            |               |                 |          |                       |      |                                |          |                               |
|                            |               |                 |          |                       |      |                                |          |                               |
|                            |               |                 |          |                       |      |                                |          |                               |
|                            |               |                 |          |                       |      |                                |          |                               |
|                            | 0.00          |                 |          | Total DSEs            | 0.00 |                                |          | Total DSEs                    |
|                            | 0.00          | \$              | Group    | Gross Receipts Fourth | 0.00 | \$                             | iroup    | Gross Receipts Third G        |
|                            | 0.00          | \$              | Group    | Base Rate Fee Fourth  | 0.00 | \$                             | roup     | <b>Base Rate Fee</b> Third G  |

|                   |  |   |  | •  | 007417   | Name  |
|-------------------|--|---|--|--|--|---|
| A: COMPUTATION (  | OF BASE RA   | TE FEES FOR EAC   | H SUBSCR   | IBER GROUP   |  |   |
| H SUBSCRIBER GROU |  | 1   |  | I SUBSCRIBER GROUP   |  | 9   |
|                   | 0  | COMMUNITY/ ARE  | Α  |  | 0  | Computation   |
| CALL SIGN         | DSE  | CALL SIGN   | DSE  | CALL SIGN  | DSE  | of  |
|                   |  |   |  |  |  | Base Rate F   |
|                   |  |   |  |  |  | and   |
|                   |  |   |  |  |  | Syndicate   |
|                   |  |   |  |  |  | Exclusivit<br>Surcharge   |
|                   |  |   |  |  |  | for   |
|                   |  |   |  |  |  | Partially   |
|                   |  |   |  |  |  | Distant   |
|                   |  |   |  |  |  | Stations  |
|                   |  |   |  |  |  |   |
|                   |  |   |  |  |  |   |
|                   |  |   |  |  |  |   |
|                   |  |   |  |  |  |   |
|                   |  |   |  |  |  |   |
|                   | 0.00   | Total DSEs  |  |  | 0.00   |   |
| \$                | 0.00   | Gross Receipts Sec  | ond Group  | \$   | 0.00   |   |
|                   |  |   |  |  |  |   |
| \$                | 0.00   | Base Rate Fee Sec   | ond Group  | \$   | 0.00   |   |
| H SUBSCRIBER GRO  |  | ONE HUNDR   | ED SIXTIETH  | SUBSCRIBER GRO   | UP   |   |
|                   | 0  | COMMUNITY/ ARE  | Α  |  | 0  |   |
| CALL SIGN         | DSE  | CALL SIGN   | DSE  | CALL SIGN  | DSE  |   |
|                   |  |   |  |  |  |   |
|                   |  |   |  |  |  |   |
|                   |  |   | ·····  |  |  |   |
|                   |  |   |  |  |  |   |
|                   |  |   |  |  |  |   |
|                   |  |   |  |  |  |   |
|                   |  |   |  |  |  |   |
|                   |  |   |  |  |  |   |
|                   |  |   |  |  |  |   |
|                   |  |   |  |  |  |   |
|                   |  |   |  |  |  |   |
|                   |  |   |  |  |  |   |
|                   |  |   |  |  |  |   |
|                   |  |   |  |  |  |   |
|                   | 0.00   | Total DSEs  |  |  | 0.00   |   |
| \$                | 0.00   | Total DSEs Gross Receipts Fou                                       | rth Group  | \$   | 0.00   |   |
| \$                |  |   | rth Group  | \$   |  |   |
| \$                |  |   | ·  | \$   |  |   |
|                   | CALL SIGN  CALL SIGN  \$  \$  TH SUBSCRIBER GROUNDED TO THE SUBSCRIPT TO THE SU | CALL SIGN DSE  CALL SIGN DSE  O  O  O  O  O  O  O  O  O  O  O  O  O | CALL SIGN DSE CALL SIGN  CALL SIGN DSE CALL SIGN  CALL SIGN  DSE CALL SIGN  CALL SIGN  CALL SIGN  CALL SIGN  DSE CALL SIGN  CALL SIG | ONE HUNDRED FIFTY-EIGHTH  CALL SIGN DSE CALL SIGN DSE  CALL SIGN D | TH SUBSCRIBER GROUP  ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP  COMMUNITY/ AREA  CALL SIGN  DSE  CALL SIGN  DS | CALL SIGN   DSE   CALL SIGN |

SYSTEM ID#

007417

CABLE ONE, INC.

### BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Name

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

☐ First 50 major television market ☐ Second 50 major television market

#### INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| FIRST SUBSCRIBER GROUP   | SECOND SUBSCRIBER GROUP  |
|--|--|
| Line 1: Enter the VHF DSEs   | Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs  Line 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 |
| THIRD SUBSCRIBER GROUP   | FOURTH SUBSCRIBER GROUP  |
| 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  SYNDICATED EXCLUSIVITY SURCHARGE Third Group | 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 |
| Third Group  | Fourth Group   |

Name

FORM SA3E

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

007417

|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP  |
|---|---|
| _ | If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a |

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant

Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

| by section | on 76.5 of FCC rules in effect on June 24, 1981: |   |
|------------|--|---|
| INSTRII    | ☐ First 50 major television market CTIONS:       | Second 50 major television market                                 |
| Step 1:    |  | mmercial VHF Grade B contour stations listed in block A, part 9 o |

Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as

Exempt DSEs in block C, part 7 of this schedule. If none enter zero.

Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.

**Step 4:** Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| FIFTH SUBSCRIBER GROUP  | SIXTH 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 First Group  | SYNDICATED EXCLUSIVITY SURCHARGE Second Group   |
| SEVENTH SUBSCRIBER GROUP  | EIGHTH SUBSCRIBER GROUP   |
| Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs  |
| Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs   |
| Line 3: Subtract line 2 from line 1 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 ear in the boxes above. Enter here and in block 4, line 2 of space L (page 7                |   |

SYSTEM ID# 007417

CABLE ONE, INC.

## BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Name

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

☐ First 50 major television market ☐ Second 50 major television market

### INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| NINTH SUBSCRIBER GROUP  | TENTH SUBSCRIBER GROUP   |
|---|--|
| Line 1: Enter the VHF 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 |
| ELEVENTH SUBSCRIBER GROUP   | TWELVTH SUBSCRIBER GROUP   |
| Line 1: Enter the VHF 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  |

SYSTEM ID# 007417

CABLE ONE, INC.

### BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

Name

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

First 50 major television market Second 50 major television market INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| THIRTEENTH SUBSCRIBER GROUP  | FOURTEENTH SUBSCRIBER GROUP   |
|--|---|
| Line 1: Enter the VHF 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  |
| FIFTEENTH SUBSCRIBER GROUP   | SIXTEENTH SUBSCRIBER GROUP  |
| 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 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  SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |

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

SYSTEM ID#

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant Stations

Name CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. SEVENTEENTH SUBSCRIBER GROUP EIGHTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . NINEENTH SUBSCRIBER GROUP TWENTYTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

CABLE ONE, INC.

SYSTEM ID#

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant

Name 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. TWENTY-FIRST SUBSCRIBER GROUP TWENTY-SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . TWENTY-THIRD SUBSCRIBER GROUP TWENTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

SYSTEM ID# 007417

CABLE ONE, INC.

### BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Name

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

☐ First 50 major television market ☐ Second 50 major television market

### INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| TWENTY-FIFTH SUBSCRIBER GROUP  | TWENTY-SIXTH SUBSCRIBER GROUP   |
|--|---|
| Line 1: Enter the VHF 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  |
| TWENTY-SEVENTH SUBSCRIBER GROUP  | TWENTY-EIGHTH SUBSCRIBER GROUP  |
| 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  SYNDICATED EXCLUSIVITY SURCHARGE Third Group | 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  SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |

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

SYSTEM ID# 007417

CABLE ONE, INC.

### BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Name

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

☐ First 50 major television market ☐ Second 50 major television market

#### INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| TWENTY-NINTH SUBSCRIBER GROUP  | THIRTIETH SUBSCRIBER GROUP   |
|--|--|
| Line 1: Enter the VHF 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 |
| THIRTY-FIRST SUBSCRIBER GROUP  | THIRTY-SECOND SUBSCRIBER GROUP   |
| 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  SYNDICATED EXCLUSIVITY SURCHARGE Third Group | 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 |

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

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant

Name CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. THIRTY-THIRD SUBSCRIBER GROUP THIRTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . THIRTY-FIFTH SUBSCRIBER GROUP THIRTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

SYSTEM ID#

Name

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant

CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. THIRTY-SEVENTH SUBSCRIBER GROUP THIRTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . THIRTY-NINTH SUBSCRIBER GROUP FORTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

SYSTEM ID# 007417

CABLE ONE, INC.

## BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Name

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

☐ First 50 major television market ☐ Second 50 major television market

### INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| FORTY-FIRST SUBSCRIBER GROUP  | FORTY-SECOND SUBSCRIBER GROUP  |
|---|--|
| Line 1: Enter the VHF 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 |
| SURCHARGE   | SURCHARGE  |
| First Group   | Second Group   |
| FORTY-THIRD SUBSCRIBER GROUP  | FORTY-FOURTH SUBSCRIBER GROUP  |
| Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs   |
| Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs  |
| Line 3: Subtract line 2 from line 1 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  |

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CABLE ONE, INC.

### BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Name

Computation
of
Base Rate Fee
and
Syndicated
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Surcharge
for
Partially
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If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

☐ First 50 major television market ☐ Second 50 major television market

### INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| FORTY-FIFTH SUBSCRIBER GROUP   | FORTY-SIXTH SUBSCRIBER GROUP  |
|--------------------------------|---|
| Line 1: Enter the VHF DSEs     | Line 1: Enter the VHF DSEs  |
| FORTY-SEVENTH SUBSCRIBER GROUP | FORTY-EIGHTH SUBSCRIBER GROUP   |
| Line 1: Enter the VHF 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  SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |

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

SYSTEM ID#

# 9

Name

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of
Base Rate Fee
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CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. FORTY-NINTH SUBSCRIBER GROUP FIFTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . FIFTY-FIRST SUBSCRIBER GROUP FIFTY-SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

SYSTEM ID#

007417

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant

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

SYSTEM ID#

# 9

Name

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
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Distant
Stations

CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. FIFTY-SEVENTH SUBSCRIBER GROUP FIFTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . FIFTY-NINTH SUBSCRIBER GROUP SIXTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

SYSTEM ID#

### Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially

Name CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. SIXTY-FIRST SUBSCRIBER GROUP SIXTY-SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . SIXTY-THIRD SUBSCRIBER GROUP SIXTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

Name

SYSTEM ID#

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant

CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. SIXTY-FIFTH SUBSCRIBER GROUP SIXTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . . SIXTY-SEVENTH SUBSCRIBER GROUP SIXTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. SIXTY-NINTH SUBSCRIBER GROUP SEVENTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . . SEVENTY-FIRST SUBSCRIBER GROUP SEVENTY-SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

SYSTEM ID#

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Name

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant Stations

CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. SEVENTY-THIRD SUBSCRIBER GROUP SEVENTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . . SEVENTY-FIFTH SUBSCRIBER GROUP SEVENTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

Name

EGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

007417

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant

CABLE ONE, INC. BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. SEVENTY-SEVENTH SUBSCRIBER GROUP SEVENTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . . SEVENTY-NINTH SUBSCRIBER GROUP EIGHTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

SYSTEM ID# 007417

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant

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

ACCOUNTING PERIOD: 2023/2 FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. EIGHTY-FIFTH SUBSCRIBER GROUP EIGHTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . .

EIGHTY-SEVENTH SUBSCRIBER GROUP EIGHTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE 

SYSTEM ID# 007417

CABLE ONE, INC.

## BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Name

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

☐ First 50 major television market ☐ Second 50 major television market

## INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
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| EIGHTY-NINTH SUBSCRIBER GROUP  | NINETIETH SUBSCRIBER GROUP   |  |  |
|--|--|--|--|
| Line 1: Enter the VHF 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 |  |  |
| NINETY-FIRST SUBSCRIBER GROUP  | NINETY-SECOND SUBSCRIBER GROUP   |  |  |
| Line 1: Enter the VHF 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 | 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   |  |  |

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. NINETY-THIRD SUBSCRIBER GROUP NINETY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . NINETY-FIFTH SUBSCRIBER GROUP NINETY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

SYSTEM ID# 007417

CABLE ONE, INC.

## BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Name

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

☐ First 50 major television market ☐ Second 50 major television market

## INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
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| NINETY-SEVENTH SUBSCRIBER GROUP   | NINETY-EIGHTH SUBSCRIBER GROUP  |
|---|---|
| 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 | 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  SYNDICATED EXCLUSIVITY SURCHARGE First Group \$   | subject to the surcharge computation  |
| NINETY-NINTH SUBSCRIBER GROUP   | ONE HUNDREDTH 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 Third Group  | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group   |

Name CABLE ONE, INC.

SYSTEM ID#

007417

## BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

| by 30000011 70.0 011 | Tales in check on bane 24, 1001.   |                                   |
|----------------------|------------------------------------|-----------------------------------|
|                      | ☐ First 50 major television market | Second 50 major television market |
| MOTDLICTIONS.        |                                    |                                   |

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- **Step 4:** Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| ONE HUNDERED FIRST SUBSCRIBER GROUP   | ONE HUNDERED SECOND SUBSCRIBER GROUP   |
|---|--|
| Line 1: Enter the VHF 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 |
| First Group   | Second Group   |
| ONE HUNDERED THIRD SUBSCRIBER GROUP   | ONE HUNDERED 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 ear in the boxes above. Enter here and in block 4, line 2 of space L (page 7                |  |

Name CABLE ONE, INC. SYSTEM ID#

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant

007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. ONE HUNDRED FIFTH SUBSCRIBER GROUP ONE HUNDRED SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . ONE HUNDRED SEVENTH SUBSCRIBER GROUP ONE HUNDRED EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

SYSTEM ID#

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially

Name CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. ONE HUNDRED NINTH SUBSCRIBER GROUP ONE HUNDRED TENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . ONE HUNDRED TWELVTH SUBSCRIBER GROUP ONE HUNDRED ELEVENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

SYSTEM ID#

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant

Name CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP ONE HUNDRED FOURTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . . . . ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

SYSTEM ID#

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant

Name CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. ONE HUNDRED SEVENTEENTH SUBSCRIBER GROUP ONE HUNDRED EIGHTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . . . . ONE HUNDRED NINTEENTH SUBSCRIBER GROUP ONE HUNDRED TWENTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

FORM SA3

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

007417

## 9

Name

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations

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

SYSTEM ID#

9

Name

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations

CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. ONE HUNDRED TWENTY-FIFTH SUBSCRIBER GROUP ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . \_ SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . . . . ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED TWENTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP ONE HUNDRED THIRTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP ONE HUNDRED THIRTY-SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#

### Name CABLE ONE, INC. 007417

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant Stations

BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. ONE HUNDRED THIRTY-THIRD SUBSCRIBER GROUP ONE HUNDRED THIRTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . ONE HUNDRED THIRTY-SIXTH SUBSCRIBER GROUP ONE HUNDRED THIRTY-FIFTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE 

SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

Name

SYSTEM ID#

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant

CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. ONE HUNDRED THIRTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED THIRTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . . . . ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP ONE HUNDRED FORTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

SYSTEM ID# 007417

CABLE ONE, INC.

## BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Name

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

**Step 4:** Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

|  | П  |
|--|--|
| ONE HUNDRED FORTY-FIRST SUBSCRIBER GROUP   | ONE HUNDRED FORTY-SECOND SUBSCRIBER GROUP  |
| Line 1: Enter the VHF DSEs   | Line 1: Enter the VHF DSEs   |
| Line 2: Enter the Exempt DSEs  | Line 2: Enter the Exempt DSEs  |
| Line 3: Subtract line 2 from line 1  | Line 3: Subtract line 2 from line 1  |
| and enter here. This is the  | and enter here. This is the  |
| total number of DSEs for   | total number of DSEs for   |
| this subscriber group  | this subscriber group  |
| subject to the surcharge   | subject to the surcharge   |
| computation  | computation  |
| SYNDICATED EXCLUSIVITY   | SYNDICATED EXCLUSIVITY   |
| SURCHARGE  | SURCHARGE  |
| First Group  | Second Group   |
|  |  |
|  |  |
| ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP   | ONE HUNDRED FORTY-FOURTH SUBSCRIBER GROUP  |
|  | ONE HUNDRED FORTY-FOURTH SUBSCRIBER GROUP  Line 1: Enter the VHF DSEs  |
| ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP  Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs  |  |
| Line 1: Enter the VHF DSEs   | Line 1: Enter the VHF DSEs   |
| 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 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs  Line 3: Subtract line 2 from line 1   | Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs  Line 3: Subtract line 2 from line 1   |
| 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  | 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  |
| 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   | 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   |
| 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  | 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  |
| 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   | 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   |
| 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  SYNDICATED EXCLUSIVITY SURCHARGE | 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  SYNDICATED EXCLUSIVITY SURCHARGE |
| 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  SYNDICATED EXCLUSIVITY           | 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                                   |

SYSTEM ID# 007417

CABLE ONE, INC.

## BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Name

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

☐ First 50 major television market ☐ Second 50 major television market

## INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP   | ONE HUNDRED FORTY-SIXTH 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 First Group   | SYNDICATED EXCLUSIVITY SURCHARGE Second Group  |
|  | <u> </u>   |
| ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP   | ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP  |
| ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP  Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs   | ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP  Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs   |
| Line 1: Enter the VHF DSEs   | Line 1: Enter the VHF 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 | 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 |

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this subscriber group

SURCHARGE

subject to the surcharge

Third Group . . . . . . . . . . . .

Name CABLE ONE, INC.

SYSTEM ID#

# BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by coefficient 76.5 of ECC rules in effect on June 24, 1991.

| by section 76.5 of FCC rules in effect on June 24, 1981:  |   |  |
|---|---|--|
| ☐ First 50 major television market  | Second 50 major television market                                 |  |
| INSTRUCTIONS:   |   |  |
| Step 1: In line 1, give the total DSEs by subscriber group for comm   | nercial VHF Grade B contour stations listed in block A, part 9 of |  |
| 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 er   |   |  |
| Step 3: In line 3, subtract line 2 from line 1. This is the total number<br>Step 4: Compute the surcharge for each subscriber group using the |   |  |
|   | gures applicable to the particular group. You do not need to show |  |
| your actual calculations on this form.  | guies applicable to the particular group. Tou do not need to show |  |
| your actual outstand on the form.   |   |  |
|   |   |  |
|   |   |  |
| ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP  | ONE HUNDRED FIFTIETH SUBSCRIBER GROUP                             |  |
|   |   |  |
| Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs  |  |
| ine 2: Enter the Exempt DSEs  | Line 2: Enter the Exempt DSEs                                     |  |
| ine 2. Enter the Exempt Bolls   | Line 2. Litter the Exempt Bolls                                   |  |
| Line 3: Subtract line 2 from line 1   | Line 3: Subtract line 2 from line 1                               |  |
| and enter here. This is the   | and enter here. This is the                                       |  |
| total number of DSEs for  | total number of DSEs for  |  |
| this subscriber group   | this subscriber group   |  |
| subject to the surcharge  | subject to the surcharge  |  |
| computation   | computation   |  |
| SYNDICATED EXCLUSIVITY  | SYNDICATED EXCLUSIVITY  |  |
| SURCHARGE   | SURCHARGE   |  |
| First Group   | Second Group \$   |  |
|   |   |  |
|   |   |  |
| ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP  | ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP                         |  |
| line 4. Entenths MIE DCEs   | Line 4. Ententhe VIIIE DOEs                                       |  |
| Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs  |  |
| Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs                                     |  |
| ine 3: Subtract line 2 from line 1  | Line 3: Subtract line 2 from line 1                               |  |
| and enter here. This is the   | and enter here. This is the                                       |  |
| total number of DSEs for  | total number of DSEs for  |  |

this subscriber group

SYNDICATED EXCLUSIVITY

SURCHARGE

subject to the surcharge computation . . . . . . . .

Fourth Group . . . . . . . . . .

SYSTEM ID# 007417

CABLE ONE, INC.

## BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Name

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

☐ First 50 major television market ☐ Second 50 major television market

## INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

|  | 1   |
|--|---|
| ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP   | ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP   |
| Line 1: Enter the VHF 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  |
| SYNDICATED EXCLUSIVITY SURCHARGE First Group   | SYNDICATED EXCLUSIVITY SURCHARGE Second Group   |
| ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP   | ONE HUNDRED FIFTY-SIXTH SUBSCRIBER GROUP  |
| 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 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  SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ea   | ach subscriber group as shown   |

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EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 007417 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . . . . ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP ONE HUNDRED SIXTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

| Cable Worksheet                     |               | ble<br>rksheet        | Total amount of remittance | Number of SAs rec'd |                    | Initials |               |  |
|-------------------------------------|---------------|-----------------------|----------------------------|---------------------|--------------------|----------|---------------|--|
|                                     |               |                       | Date of remittance         | _<br>□ Check        | -<br>□ Check □ EFT |          | ☐ FILING FEES |  |
| Cable ID #                          |               |                       |                            |                     |                    | Amount   | Initials      |  |
| Examined by                         |               | Reviewed by           | Date examination completed | Allocatio           | on number          |          |               |  |
| Space A<br>Accounting<br>Period     |               |                       |                            |                     |                    |          |               |  |
|                                     | ☐ Janua       | ary 1 - June 30, 2017 |                            | July 1 - Decem      | ber 31, 2017       |          |               |  |
|                                     | ☐ Lette       | er sent               | С                          | Information re      | ceived             |          |               |  |
|                                     | ☐ Accepted    |                       | С                          | Phone call/Dat      | e/Contact          |          |               |  |
| Space B<br>Owner                    |               |                       |                            |                     |                    |          |               |  |
|                                     | ☐ Lette       | er sent               |                            | ☐ Information re    | ceived             |          |               |  |
|                                     | ☐ Accep       | pted                  |                            | Phone call/Dat      | e/Contact          |          |               |  |
| Space D<br>Area Served              |               |                       |                            |                     |                    |          |               |  |
|                                     | ☐ Lette       | er sent               |                            | Information re      | ceived             |          |               |  |
|                                     | ☐ Acce        | pted                  |                            | ☐ Phone call/Dat    | e/Contact          |          |               |  |
| Space E<br>Secondary<br>Transission |               |                       |                            |                     |                    |          |               |  |
| Service<br>Subscribers:             | ☐ Letter sent |                       | С                          | ☐ Information re    | ceived             |          |               |  |
| and Rates                           | ☐ Acce        | pted                  | С                          | Phone call/Dat      | e/Contact          |          |               |  |
| Space G<br>Primary<br>Transmitters: |               |                       |                            |                     |                    |          |               |  |
| Television                          | □ Lette       | er sent               | [                          | ☐ Information re    | eceived            |          |               |  |
|                                     | ☐ Acce        | pted                  | [                          | ☐ Phone call/Da     | te/Contact         |          |               |  |
| Space H Primary Transmitters:       |               |                       |                            |                     |                    |          |               |  |
| Radio                               | 1             |                       |                            | ·                   |                    |          |               |  |

☐ Phone call/Date/Contact

 $\square$  Accepted

|                         |                            | Space I<br>Substitute                           |
|-------------------------|----------------------------|---|
|                         |                            | Carriage  |
| ☐ Letter sent           | ☐ Information received     |   |
| ☐ Accepted              | ☐ Phone call/Date/Contact  |   |
|                         |                            | Space J<br>Part-time                            |
|                         |                            | Carriage Log                                    |
| ☑ Letter sent           | ☐ Information received     | (SA3 only)                                      |
| ☐ Accepted              | ☐ Phone call/Date/Contact  |   |
|                         |                            | Space K<br>Gross Receipts                       |
| ☐ Letter sent           | ☐ Information received     |   |
| ☐ Letter sent           | ☐ Phone call/Date/Contact  |   |
|                         |                            | Space L<br>Copyright Filing<br>and Royalty Fees |
| ☐ Royalty Fee should be | ☐ Refund request to fiscal |   |
| ☐ Letter sent           | ☐ Information received     |   |
| ☐ Accepted              | ☐ Phoe call/Date/Contact   |   |
|                         |                            | Space M<br>Channels                             |
| ☐ Letter sent           | ☐ Information received     |   |
| ☐ Accepted              | ☐ Phone call/Date/Contact  |   |
|                         |                            | Space O<br>Certification                        |
|                         | ☐ Information received     |   |
| ☐ Accepted              | ☐ Phone call/Date/Contact  |   |
|                         |                            | Space P<br>Statement of<br>Gross Receipts       |
| ☐ Letter sent           | ☐ Information received     |   |
| ☐ Accepted              | ☐ Phone call/Date/Contact  |   |
|                         |                            | Space Q<br>Interest<br>Assessment               |
| ☐ Letter sent           | ☐ Info/add'l fee received  |   |
| ☐ Accepted              | ☐ Phone call/Date/Contact  |   |