This form is effective beginning with the January 1 to June 30, 2017, accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

General instructions are located in the first tab of this workbook.

FOR COPYRIGHT OFFICE USE ONLY							
DATE RECEIVED AMOUNT							
	\$						
2-28-25	ALLOCATION NUMBER						

Return completed workbook by email to

coplicsoa@copyright.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting	2024/2				
Period					
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a strate 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 conductions. Check here if this is the system's first filing. If not, enter the system's ID in the cable system's lib in the system's first filing. If not, enter the system's ID in the cable system is a system in the cable system.	s of the cable system on the last day of the unting period.	m. e accounting period should sub	mit	52861
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM				
	CINCINNATI BELL EXTENDED TERRITORIES, LLC				
	ALTAFIBER				
				6286120	242
				62861 202	24/2
	221 E FOURTH STREET # 206				
	CINCINNATI, OH 45202				
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	the system, if dif	ferent from the address give	n in space B.	
System	1 IDENTIFICATION OF CABLE SYSTEM:				
	MAILING ADDRESS OF CABLE SYSTEM:				
	2 (Number, street, rural route, apartment, or suite number)				
	(City, town, state, zip code)				
D	Instructions: For complete space D instructions, see page 1b. Identify	only the first com	munity served below and re	ist on page 1b	
Area	with all communities.				
Served	CITY OR TOWN	STATE			
First	LEBANON	ОН			
Community	Below is a sample for reporting communities if you report multiple cha	annel line-ups in S	Space G.		
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#	#
Sample	Alliana	MD	A	1	
	Alliance Gering	MD MD	B B	3	
	Germig	IVID		,	

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 filing, a determination that would be made by a court of law.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 62861 CINCINNATI BELL EXTENDED TERRITORIES. LLC Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The first community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# **LEBANON** ОН AA First ALL OTHER COMMUNITIES IN OHIO EXCEPT AD BELOW ОН AΒ Community **INDIANA** IN AB KENTUCKY KY AC **FAIRBORN AND DAYTON AREA** ОН AD See instructions for additional information on alphabetization. **Whitewater Township (Franklin County)** IN1227 AB Harrison Township (Dearborn County) AB IN1229 1 **Kelso Township (Dearborn County)** IN1231 AB 1 Logan Township (Dearborn County) IN1233 AB 1 Add rows as necessary. Miller Township (Dearborn County) IN1235 AB 1 Springfield Township (Franklin County) AΒ 1 IN1239 Lawrenceburg Township (Dearborn County) IN1259 AB 1 IN1270 Hidden Valley Lake (Dearborn County) ΔB 1 Greendale (Dearborn County) IN1271 AB 1 Aurora (Dearborn County) AB IN1272 Lawrenceburg (Dearborn County) IN1273 AB 1 California (Campbell County) AC 1 **KY1273 Campbell County Fiscal Court (Campbell County) KY1274** AC Bellevue (Campbell County) AC **KY1275** Alexandria (Campbell County) **KY1276** AC 1 AC **Cold Spring (Campbell County) KY1277 Crestview (Campbell County) KY1278** AC 1 **Highland Heights (Campbell County) KY1279** AC Melbourne (Campbell County) **KY1280** AC 1 Mentor (Campbell County) AC 2 **KY1281** Silver Grove (Campbell County) **KY1282** AC Southgate (Campbell County) **KY1283** AC Wilder (Campbell County) **KY1284** AC 1 Woodlawn (Campbell County) **KY1285** AC Florence (Boone County) **KY1286** AC 1 **Boone County Fiscal Court (Boone County) KY1287** AC Covington (Kenton County) AC **KY1288** 1 AC 1 Crestview Hills (Kenton County) **KY1289** Edgewood (Kenton County) KY1290 AC 1 Elsmere (Kenton County) AC **KY1291** Fort Mitchell (Kenton County) **KY1292** AC 1 Fort Wright (Kenton County) AC **KY1293** Independence (Kenton County) KY1294 AC Lakeside Park (Kenton County) **KY1295** AC **Ludlow (Kenton County) KY1296** AC 1

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Elenton County Fiscal Court (Kenton County) KY1301 AC 1	Villa Hills (Kenton County)	KY1299	AC	1
Erlanger (Kenton County)				
Dayton (Campbell County)				
Union (Boone County)	Erlanger (Kenton County)	KY1301	AC	1
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Franklin (Warren County) OH2833 AB 1		OH2831	AB	1
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				1
Glendale (Hamilton County) OH2834 AB 1				
	Glendale (Hamilton County)	OH2834	AB	1

Golf Manor (Hamilton County)	OH2835	AB	1
Goshen Township (Clermont County)	OH2836	AB	1
Green Township (Hamilton County)	OH2837	AB	1
Hamilton Township (Warren County)	OH2839	AB	1
Harrison Township (Hamilton County)	OH2840	AB	1
Indian Hill (Hamilton County)	OH2841	AB	1
Lincoln Heights (Hamilton County)	OH2842	AB	1
Liberty Township (Butler County)	OH2843	AB	1
Lockland (Hamilton County)	OH2844	AB	1
Loveland (Clermont County)	OH2845	AB	1
Loveland (Hamilton County)	OH2846	AB	1
Loveland (Warren County)	OH2847	AB	1
			1
Madeira (Hamilton County)	OH2848	AB	1
Maineville (Warren County)	OH2849	AB	1
Mariemont (Hamilton County)	OH2850	AB	1
Miami Township (Clermont County)	OH2851	AB	1
Miami Township (Hamilton County)	OH2852	AB	1
Middletown (Butler County)	OH2853	AB	1
Middletown (Warren County)	OH2854	AB	1
Milford (Clermont County)	OH2855	AB	1
Milford (Hamilton County)	OH2856	AB	1
Montgomery (Hamilton County)	OH2857	AB	1
Mount Healthy (Hamilton County)	OH2858	AB	1
North College Hill (Hamilton County)	OH2859	AB	1
New Miami (Butler County)	OH2860	AB	1
Newtonsville (Clermont County)	OH2861	AB	1
Newtown (Hamilton County)	OH2862	AB	1
Oxford (Butler County)	OH3491	AB	1
Pierce Township (Clermont County)	OH2863	AB	1
Reading (Hamilton County)	OH2864	AB	1
Sharonville (Butler County)	OH2865	AB	1
Sharonville (Hamilton County)	OH2867	AB	1
South Lebanon (Warren County)	OH2868	AB	1
Silverton (Hamilton County)	OH2869	AB	1
Springdale (Hamilton County)	OH2870	AB	1
Springfield Township (Hamilton County)	OH2871	AB	1
Saint Bernard (Hamilton County)	OH2872	AB	1
			I
Sycamore Township (Hamilton County)	OH2873	AB	1
Symmes Township (Hamilton County)	OH2874	AB	1
Terrace Park (Hamilton County)	OH2875	AB	1
Union Township (Clermont County)	OH2876	AB	1
Monroe (Butler County)	OH2877	AB	1
Wayne Township (Clermont County)	OH2878	AB	1
Wayne Township (Clerinonic County) Woodlawn (Hamilton County)			
	OH2879	AB	1
Wyoming (Hamilton County)	OH2880	AB	1
Norwood (Hamilton County)	OH2881	AB	1
Batavia (Clermont County)	OH2915	AB	1
Batavia Township (Clermont County)	OH2920	AB	1
Fairfield Township (Butler County)	OH2921	AB	1
Amelia (Clermont County)	OH2922	AB	1
Wayne Township (Butler County)	OH2933	AB	1
Anderson Township (Clermont County)	OH3071	AB	1
Trenton (Butler County)	OH3083	AB	1
Ross Township (Butler County)	OH3115	AB	1
Hanover Township (Butler County)	OH3116	AB	1
Millville (Butler County)	OH3117	AB	1
Mill Creek Township (Hamilton County)	OH3118	AB	1
Whitewater Township (Hamilton County)	OH3119	AB	1
Ohio Township (Clermont County)	OH3120	AB	1
New Richmond (Clermont County)	OH3124	AB	1
Somerville (Butler County)	OH3125	AB	1
Seven Mile (Butler County)	OH3126	AB	1
Soron mile (Butter County)	0110120	70	

Addyston (Hamilton County)	Cross Hills (Hossilton County)	0112420	AD	4
North Bend (Hamilton County)	Green Hills (Hamilton County)	OH3128	AB	1
Stonolick Township (Clermont County)	, ,	OH3134	AB	1
Stonolick Township (Clermont County)	North Bend (Hamilton County)	OH3135	AB	1
Bethei (Clermont County)		OH3146	AB	1
Clark Township (Brown County)				
Clearcreek Township (Warren County)				
Cieves (Hamilton County)				
Millord Township (Butler County)	Clearcreek Township (Warren County)	OH3149	AB	1
Millord Township (Butler County)	Cleves (Hamilton County)	OH3150	AB	1
Mornos Township (Clermont County)				1
Morgan Township (Butler County)				
Perry Township (Brown County)				
Pike Township (Butler County)		OH3154	AB	1
Pike Township (Butler County)	Perry Township (Brown County)	OH3156	AB	1
Reliy Township (Butler County)		OH3157	ΔR	1
St Clair Township (Butler County)				1
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Williamsburg Township (Clermont County)	Tate Township (Clermont County)	OH3161	AB	1
Williamsburg Township (Clermont County)	Washington Township (Clermont County)	OH3162	AB	2
Williamsburg (Clermont County)				
Sterling Township (Brown County)				
Lemon Township (Butler County)				
Jackson Township (Clermont County)		OH3165	AB	1
Jackson Township (Clermont County)	Lemon Township (Butler County)	OH3166	AB	1
Harlan Township (Warren County)			AB	1
Okensyille (Clermont County)				
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Moraine (Montgomery County)	Miami Township (Montgomery County)	OH3509	AD	1
Bath Township (Greene County)			AD	1
Springboro (Warren County)				
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Beavercreek Township (Greene County) OH3772 AD 1 Washington Township (Montgomery County) OH3898 AD 1 Chester Township (Clinton County) OH3903 AB 4 Morrow (Warren County) OH3940 AB 1 Harveysburg (Warren County) OH3943 AB 4 Corwin (Warren County) OH3944 AB 4 Waynesville (Warren County) OH3945 AB 4 Massie Township (Warren County) OH3946 AB 4 Spring Valley Township (Greene County) OH3949 AD 1 Sugarcreek Township (Greene County) OH3950 AD 1 Miami Township (Hamilton County) OH3951 AB 1 Centerville (Greene County) OH3968 AD 1 Centerville (Montgomery County) OH3982 AD 1 Hamilton (Butler County) OH3991 AB 1 Oxford Township (Butler County) OH3993 AB 1 Oxford Township (Butler County) OH3994				4
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Washington Township (Montgomery County)OH3898AD1Chester Township (Clinton County)OH3903AB4Morrow (Warren County)OH3940AB1Harveysburg (Warren County)OH3943AB4Corwin (Warren County)OH3944AB4Waynesville (Warren County)OH3945AB4Massie Township (Warren County)OH3946AB4Spring Valley Township (Greene County)OH3949AD1Sugarcreek Township (Greene County)OH3950AD1Miami Township (Hamilton County)OH3951AB1Centerville (Greene County)OH3968AD1Centerville (Montgomery County)OH3968AD1Hamilton (Butler County)OH3991AB1Blanchester Village (Warren County)OH3992AB1Oxford Township (Butler County)OH3993AB1Xenia (Greene County)OH3994AD1	Beavercreek Township (Greene County)	OH3772	AD	1
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Ceasars Creek Township (Greene County)	OH3996	AD	1
Village of Blanchester (Clinton County)	OH3997	AB	1
Clarksville (Clinton County)	OH4020	AB	1
Miamisburg (Montgomery County)	OH3479	AD	1
Hamilton (Butler County)	OH3991	AB	1

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 62861

CINCINNATI BELL EXTENDED TERRITORIES, LLC

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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.

OCK 1		BLOCK 2		
NO. OF			NO. OF	
SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
108,001	\$69.73 - \$109).	-	\$ -
691	\$ 5.00		-	\$ -
			-	\$ -
140	\$5-\$35		-	\$ -
543	6.73-\$221.73		-	\$ -
			-	\$ -
242,123	\$ 8.99		-	\$ -
5,694	\$ 8.99		-	\$ -
	NO. OF SUBSCRIBERS 108,001 691 140 543	NO. OF SUBSCRIBERS RATE 108,001 \$69.73 - \$109 691 \$ 5.00 140 \$5-\$35 543 6.73-\$221.73 242,123 \$ 8.99	NO. OF SUBSCRIBERS RATE CATEGORY OF SERVICE 108,001 \$69.73 - \$109 691 \$ 5.00 140 \$5-\$35 543 6.73-\$221.73	NO. OF SUBSCRIBERS RATE CATEGORY OF SERVICE NO. OF SUBSCRIBERS 108,001 \$69.73 - \$109 - 691 \$ 5.00 - 140 \$5-\$35 - 543 6.73-\$221.73 - 242,123 \$ 8.99 -

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

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

FORM SA3E. PAGE 3.						1	
LEGAL NAME OF OWN				_	SYSTEM ID#	Name	
CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861							
PRIMARY TRANSMITTERS: TELEVISION							
In General: In space G, identify every television station (including translator stations and low power television stations)							
carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections							
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a							
substitute program basis, as explained in the next paragraph.							
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:							
· ·				e Special Stateme	ent and Program Log)—if the		
station was carried	•		ation was carried	d hoth on a substit	ute basis and also on some other		
	-				f the general instructions located		
in the paper SA3 for		-: D			- LIDO FORM At Identify		
		-	· -		s such as HBO, ESPN, etc. Identify tion. For example, report multi-		
			•	•	n stream separately; for example		
WETA-simulcast).	channal numb	or the ECC h	as assigned to	the television stati	on for broadcasting over the air in		
			-		on for broadcasting over-the-air in may be different from the channel		
on which your cable sy	stem carried th	e station.			•		
					pendent station, or a noncommercial ast), "I" (for independent), "I-M"		
-	-	•	, ,		mmercial educational multicast).		
For the meaning of the							
planation of local service				,.	s". If not, enter "No". For an ex-		
					stating the basis on which your		
		•	• • • • • • • • • • • • • • • • • • • •	•	ering "LAC" if your cable system		
carried the distant station For the retransmissi	-				payment because it is the subject		
of a written agreement	entered into or	n or before Ju	ne 30, 2009, be	tween a cable sys	tem or an association representing		
	•				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		
Note: If you are utilizing				-	which the station is identified. channel line-up.		
you are amizing		•	•				
		CHANN	EL LINE-UP	AA			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)			
WBQC 25.1	25.1	I	No	(II Distant)	CINCINNATI, OH		
		_					
WBQC 25.10	25.10	<u> </u>	No		CINCINNATI, OH	See instructions for	
WBQC 25.11	25.11	l	No		CINCINNATI, OH	additional information on alphabetization.	
WBQC 25.12	25.12	I	No		CINCINNATI, OH		
WBQC 25.2	25.2	I	No		CINCINNATI, OH		
WBQC 25.3	25.3	I	No		CINCINNATI, OH		
WBQC 25.4	25.4	1	No		CINCINNATI, OH		
WBQC 25.6	25.6	ı	No		CINCINNATI, OH		
WBQC 25.7	25.7	I	No		CINCINNATI, OH		
WBQC 25.8	25.8	I	No				
		_			CINCINNATI, OH		
WBQC 25.9	25.9		No		CINCINNATI, OH	•	
WCET 48	48	Е	No		CINCINNATI, OH		
WCET ARTS 48.3	48.3	Е	No		CINCINNATI, OH		
WCET CREATE 48	48.2	Е	No		CINCINNATI, OH		
WCET HD 48	48	Е	No		CINCINNATI, OH		
WCPO ABC 9.1	9.1	N	No		CINCINNATI, OH		
WCPO ABC HD 9.	9.1	N	No		CINCINNATI, OH]	
	19	1	No				
WXIX FOX 19	19	<u> </u>	NO	<u></u>	NEWPORT, KY		

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62861 CINCINNATI BELL EXTENDED TERRITORIES. LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G. identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))); and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: · Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-simulcast) Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast). "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA CONTINUED 1 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER STATION (If Distant) **WCPO 9.2** 9.2 ı No CINCINNATI, OH **WCPO 9.3** 9.3 Ī No CINCINNATI, OH **WCPO 9.5** 9.5 ı No CINCINNATI, OH **WCPO HD 9.6** 9.6 Ī No CINCINNATI, OH **WCVN 54** 54 Ε No COVINGTON, KY **WCVN 54.2** 54.2 Ε No COVINGTON, KY WKRC CBS 12 12 Ν No CINCINNATI, OH WKRC CBS HD 12 12 Ν No CINCINNATI, OH **WKRC CW 12.2** 12.2 I No CINCINNATI, OH WKRC CW HD 12 ī 12.2 No CINCINNATI, OH 12.3 **WKRC 12.3** Ī No CINCINNATI, OH WLWT NBC 5 5 Ν No CINCINNATI, OH WLWT NBC HD 5 5 Ν No CINCINNATI, OH **WLWT 5.2** 5.2 Ī No CINCINNATI, OH WSTR MY64 64 Ī No CINCINNATI, OH WSTR MY64 HD 64 ī No CINCINNATI, OH **WSTR 64.2** 64.2 No CINCINNATI, OH ı **WLWT 5.5** 5.5 ī No CINCINNATI, OH

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM Name 62861 CINCINNATI BELL EXTENDED TERRITORIES. LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G. identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: · Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-simulcast) Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast). "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA CONTINUED 2 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 1. CALL 6. LOCATION OF STATION CHANNEL SIGN OF (Yes or No) **CARRIAGE** NUMBER STATION (If Distant) WXIX FOX HD 19. 19 ı NEWPORT, KY No **WXIX 19.2** 19.2 Ī No NEWPORT, KY **WXIX 19.3** 19.3 I No NEWPORT, KY **WXIX 19.4** 19.4 Ī No NEWPORT, KY WPTD THINK TV 16 Ε No DAYTON, OH **WPTO 14** 14 Ε No OXFORD, OH **WLWT 5.4** 5.4 ı No CINCINNATI, OH

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62861 CINCINNATI BELL EXTENDED TERRITORIES. LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G. identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))); and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: · Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-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 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION 1. CALL CARRIAGE SIGN CHANNEL OF (Yes or No) NUMBER STATION (If Distant) **WBQC 25.1** 25.1 ı No CINCINNATI, OH **WBQC 25.10** 25.10 Ī No CINCINNATI, OH **WBQC 25.11** 25.11 ı No CINCINNATI, OH **WBQC 25.12** 25.12 Ī No CINCINNATI, OH **WBQC 25.2** 25.2 ī No CINCINNATI, OH **WBQC 25.3** 25.3 ī No CINCINNATI, OH **WBQC 25.4** 25.4 ı No CINCINNATI, OH **WBQC 25.6** 25.6 I No CINCINNATI, OH **WBQC 25.7** 25.7 I No CINCINNATI, OH **WBQC 25.8** ī 25.8 No CINCINNATI, OH **WBQC 25.9** 25.9 Ī No CINCINNATI, OH **WCET 48** 48 Ε No CINCINNATI, OH WCET ARTS 48.3 Ε No CINCINNATI, OH 48.3 WCET CREATE 48 Ε 48.2 No CINCINNATI, OH WCET HD 48 48 Е No CINCINNATI, OH WCPO ABC 9.1 Ν 9.1 No CINCINNATI, OH WCPO ABC HD 9. 9.1 Ν No CINCINNATI, OH **WLWT 5.5** 5.5 ı No CINCINNATI, OH

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62861 CINCINNATI BELL EXTENDED TERRITORIES. LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G. identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))); and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: · Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-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 CONTINUED 1 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER STATION (If Distant) **WCPO 9.2** 9.2 ı No CINCINNATI, OH **WCPO 9.3** 9.3 Ī No CINCINNATI, OH **WCPO 9.5** 9.5 ı No CINCINNATI, OH **WCPO HD 9.6** 9.6 Ī No CINCINNATI, OH **WCVN 54** 54 Ε Yes 0 COVINGTON, KY **WCVN 54.2** 54.2 Ε Yes 0 COVINGTON, KY WKRC CBS 12 12 Ν No CINCINNATI, OH WKRC CBS HD 12 12 Ν No CINCINNATI, OH **WKRC CW 12.2** 12.2 I No CINCINNATI, OH WKRC CW HD 12 ī 12.2 No CINCINNATI, OH 12.3 **WKRC 12.3** Ī No CINCINNATI, OH WLWT NBC 5 5 Ν No CINCINNATI, OH WLWT NBC HD 5 5 Ν No CINCINNATI, OH **WLWT 5.2** 5.2 Ī No CINCINNATI, OH WSTR MY64 64 Ī No CINCINNATI, OH WSTR MY64 HD 64 ī No CINCINNATI, OH **WSTR 64.2** 64.2 No CINCINNATI, OH ı WXIX FOX 19 19 ī No **NEWPORT, KY**

FURINI SASE, PAGE 3.					SYSTEM ID#	4	
CINCINNATI BE			ITORIES, LL	С	62861	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program							
basis under specifc FC	CC rules, regula	ations, or auth	orizations:		nent and Program Log)—if the	Television	
basis. For further in	and also in spa formation cond	ace I, if the sta			itute basis and also on some other of the general instructions located		
each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the	th station's call associated with a-2". Simulcast e channel numb	h a station ac streams mus	cording to its ov t be reported in has assigned to	rer-the-air designate column 1 (list each the television sta	es such as HBO, ESPN, etc. Identify ation. For example, report multi- ch stream separately; for example tion for broadcasting over-the-air in		
on which your cable sy	stem carried th	ne station.			emay be different from the channel		
educational station, by (for independent multion For the meaning of the Column 4: If the state planation of local servi	entering the le cast), "E" (for no ese terms, see ation is outside ce area, see pa	etter "N" (for noncommercial page (v) of the the local serage (v) of the	etwork), "N-M" (I educational), c e general instru vice area, (i.e. "o general instruct	for network multion "E-M" (for noncections located in the distant"), enter "Y ions located in the firms to the firms iocated in the firms in the firms iocated	cast), "I" (for independent), "I-M" ommercial educational multicast). the paper SA3 form. es". If not, enter "No". For an ex- e paper SA3 form.		
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		CHANN	EL LINE-UP	AB CONTINU	JED 2		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
WXIX FOX HD 19.	19	I	No		NEWPORT, KY		
WXIX 19.2	19.2	I	No		NEWPORT, KY	"	
WXIX 19.3	19.3	ı	No		NEWPORT, KY	"	
WXIX 19.4	19.4	I	No		NEWPORT, KY		
WPTD THINK TV	16	Е	Yes	0	DAYTON, OH	"	
WPTO 14	14	Е	No		OXFORD, OH	"	
WLWT 5.4	5.4	I	No		CINCINNATI, OH	"	
		I				1	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62861 CINCINNATI BELL EXTENDED TERRITORIES. LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G. identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))); and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: · Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-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 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CARRIAGE SIGN CHANNEL OF (Yes or No) NUMBER STATION (If Distant) **WBQC 25.1** 25.1 ı No CINCINNATI, OH **WBQC 25.10** 25.10 Ī No CINCINNATI, OH **WBQC 25.11** 25.11 ı No CINCINNATI, OH **WBQC 25.12** 25.12 Ī No CINCINNATI, OH **WBQC 25.2** 25.2 ī No CINCINNATI, OH **WBQC 25.3** 25.3 ī No CINCINNATI, OH **WBQC 25.4** 25.4 ı No CINCINNATI, OH **WBQC 25.6** 25.6 I No CINCINNATI, OH **WBQC 25.7** 25.7 I No CINCINNATI, OH **WBQC 25.8** ī 25.8 No CINCINNATI, OH **WBQC 25.9** 25.9 Ī No CINCINNATI, OH **WCET 48** 48 Ε Yes 0 CINCINNATI, OH 0 WCET ARTS 48.3 Ε Yes CINCINNATI, OH 48.3 WCET CREATE 48 Ε 0 48.2 Yes CINCINNATI, OH WCET HD 48 48 Ε Yes Ε CINCINNATI, OH WCPO ABC 9.1 Ν CINCINNATI, OH 9.1 No WCPO ABC HD 9. 9.1 Ν No CINCINNATI, OH **WLWT 5.5** 5.5 ı No CINCINNATI, OH

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62861 CINCINNATI BELL EXTENDED TERRITORIES. LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G. identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))); and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: · Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-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 CONTINUED 1 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER STATION (If Distant) **WCPO 9.2** 9.2 ı No CINCINNATI, OH **WCPO 9.3** 9.3 Ī No CINCINNATI, OH **WCPO 9.5** 9.5 ı No CINCINNATI, OH **WCPO HD 9.6** 9.6 Ī No CINCINNATI, OH **WCVN 54** 54 Ε Yes 0 COVINGTON, KY **WCVN 54.2** 54.2 Ε Yes 0 COVINGTON, KY WKRC CBS 12 12 Ν No CINCINNATI, OH WKRC CBS HD 12 12 Ν No CINCINNATI, OH **WKRC CW 12.2** 12.2 I No CINCINNATI, OH WKRC CW HD 12 ī 12.2 No CINCINNATI, OH 12.3 **WKRC 12.3** Ī No CINCINNATI, OH WLWT NBC 5 5 Ν No CINCINNATI, OH WLWT NBC HD 5 5 Ν No CINCINNATI, OH **WLWT 5.2** 5.2 Ī No CINCINNATI, OH WSTR MY64 64 Ī No CINCINNATI, OH WSTR MY64 HD 64 ī No CINCINNATI, OH **WSTR 64.2** 64.2 No CINCINNATI, OH ı WXIX FOX 19 19 ī No **NEWPORT, KY**

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM Name 62861 CINCINNATI BELL EXTENDED TERRITORIES. LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G. identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: · Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-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 CONTINUED 2 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 1. CALL 6. LOCATION OF STATION CHANNEL SIGN OF (Yes or No) **CARRIAGE** NUMBER STATION (If Distant) WXIX FOX HD 19. 19 ı NEWPORT, KY No **WXIX 19.2** 19.2 Ī No NEWPORT, KY **WXIX 19.3** 19.3 I NEWPORT, KY No **WXIX 19.4** 19.4 Ī No NEWPORT, KY WPTD THINK TV 16 Ε Yes 0 DAYTON, OH **WPTO 14** 14 Ε No OXFORD, OH **WLWT 5.4** 5.4 ı No CINCINNATI, OH

LEGAL NAME OF OWN	FR OF CABLE SY	STFM:			SYSTEM ID#	
CINCINNATI BE			TORIES, LL	C	62861	Name
carried by your cable so FCC rules and regulation 76.59(d)(2) and (4), 76. Substitute program bas Substitute Basis Substitute Basis Subasis under specific FC Do not list the station station was carried to List the station here, a basis. For further into in the paper SA3 for Column 1: List each each multicast stream as "WETA-simulcast). Column 2: Give the its community of licenson which your cable sy. Column 3: Indicate educational station, by (for independent multic For the meaning of these	G, identify every ystem during the ons in effect or .61(e)(2) and (4 sis, as explained tations: With record only on a substand also in spatformation concern. h station's call associated with -2". Simulcast see channel numbers the carried the in each case we entering the lecast), "E" (for no see terms, see p	r television started accounting a June 24, 194, or 76.63 (r d in the next perspect to any attorns, or auth G—but do list itute basis. In the started accounting substitute sign. Do not rear a station account a station account a station. In the station, whether the station. The station account a station. The station account a station. The station account a station.	period, except 81, permitting the ferring to 76.6 paragraph. vistant stations orizations: tit in space I (the fitten was carried tute basis station report origination cording to its over the fitten was assigned to pannel 4 in Wash attion is a network), "N-M" (I educational), core general instructions to 76.0 period in 19.0 period in 1	(1) stations carried carriage of cert (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 statington, D.C. This bork station, an indefor network multipor "E-M" (for none citions located in terms of the carried of the station of the sta	s and low power television stations) ad only on a part-time basis under ain network programs [sections and (2) certain stations carried on a cable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located as such as HBO, ESPN, etc. Identify ation. For example, report multi- the stream separately; for example cion for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial tast), "I" (for independent), "I-M" commercial educational multicast). the paper SA3 form. as". If not, enter "No". For an ex-	G Primary Transmitters: Television
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LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#			
CINCINNATI BE			TORIES, LLO	C	62861	Nama		
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a								
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations:								
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 formation cond	ice I, if the sta			ute basis and also on some other f the general instructions located			
each multicast stream cast stream as "WETA WETA-simulcast).	associated witl 2". Simulcast	n a station ac streams must	cording to its ov	er-the-air designat column 1 (list each	s such as HBO, ESPN, etc. Identify cion. For example, report multi- n stream separately; for example			
its community of licens on which your cable sy	e. For example stem carried th	e, WRC is Cha ne station.	annel 4 in Wash	nington, D.C. This	on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial			
educational station, by (for independent multion For the meaning of the	entering the le cast), "E" (for no se terms, see	etter "N" (for ne oncommercia page (v) of the	etwork), "N-M" (i l educational), o e general instruc	for network multica or "E-M" (for nonco ctions located in th	ast), "I" (for independent), "I-M" mmercial educational multicast).			
•	ave entered "Ye ne distant statio	es" in column on during the	you must cor accounting perio	mplete column 5, s od. Indicate by ent	tating the basis on which your ering "LAC" if your cable system			
For the retransmiss of a written agreement the cable system and a	ion of a distant entered into o a primary trans	multicast stren n or before Ju mitter or an a	eam that is not s ine 30, 2009, be ssociation repre	subject to a royalty tween a cable sys senting the primar	payment because it is the subject tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further			
Column 6: Give the	e location of ea Canadian statio	ch station. Fo	or U.S. stations, e the name of th	list the community ne community with	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	AE		1		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FURINI SAJE. PAGE 3.					0)/07514 ID/	,1
CINCINNATI BE			ITORIES, LLO	C	SYSTEM ID# 62861	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during the system during the system during the system of the syst	ne accounting n June 24, 19 4), or 76.63 (i d in the next	g period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carried ne carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under hin network programs [sections and (2) certain stations carried on a	Primary Transmitters:
basis under specifc FC				s carried by your ca	able system on a substitute program	Television
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basis. For further in	and also in spa formation cond	ace I, if the sta			ute basis and also on some other f the general instructions located	
in the paper SA3 fo Column 1: List eac		sign. Do not	report origination	n program services	s such as HBO, ESPN, etc. Identify	
			-	-	ion. For example, report multi-	
WETA-simulcast).	1-2 . Simulcast	streams mus	t be reported in	column i (list eaci	n stream separately; for example	
					on for broadcasting over-the-air in	
on which your cable sy			annei 4 in vvasr	nington, D.C. This	may be different from the channel	
					pendent station, or a noncommercial	
	•	•	,		ast), "I" (for independent), "I-M" mmercial educational multicast).	
For the meaning of the	se terms, see	page (v) of th	e general instru	ctions located in th	e paper SA3 form.	
planation of local servi			•	•	s". If not, enter "No". For an ex-	
					stating the basis on which your	
cable system carried the carried the distant state		•	• .	•	ering "LAC" if your cable system	
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_				-	tem or an association representing	
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explanation of these th	ree categories	, see page (v) of the general	instructions locate	d in the paper SA3 form.	
				-	to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing				-		
	1	CHANN	EL LINE-UP	AF		-
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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LEGAL NAME OF OWN	IER OF CARLE SY	/STEM:			SYSTEM ID#	
CINCINNATI BE			TORIES, LLO	С	62861	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati	ystem during to ons in effect on i.61(e)(2) and (ne accounting n June 24, 19 4), or 76.63 (r	period, except 81, permitting the referring to 76.6	(1) stations carried ne carriage of certa	and low power television stations) d only on a part-time basis under nin network programs [sections nd (2) certain stations carried on a	G Primary Transmitters:
				s carried by your ca	able system on a substitute program	Television
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station was carried • List the station here, basis. For further in	only on a subs and also in spa formation cond	titute basis. ace I, if the sta	ation was carried	d both on a substite	ute basis and also on some other f the general instructions located	
each multicast stream cast stream as "WETA	h station's call associated wit	h a station ac	cording to its ov	er-the-air designat	s such as HBO, ESPN, etc. Identify ion. For example, report multi- n stream separately; for example	
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(for independent multid For the meaning of the	cast), "E" (for nesse terms, see	oncommercia page (v) of the	l educational), o e general instruc	or "E-M" (for nonco ctions located in th	• •	
planation of local servi	ce area, see p	age (v) of the	general instruct	ions located in the	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your	
cable system carried the carried the distant state	ne distant statio ion on a part-tii	on during the me basis beca	accounting perions	od. Indicate by ento activated channel o	ering "LAC" if your cable system capacity.	
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	entered into o a primary trans simulcasts, also aree categories e location of ea	n or before Ju mitter or an a o enter "E". If , see page (v ch station. Fo	ne 30, 2009, be ssociation repre you carried the of the general in tr U.S. stations,	etween a cable systeming the primar channel on any othe instructions located list the community	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. to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing						
		CHANN	EL LINE-UP	AG		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#		
CINCINNATI BE			TORIES, LLO	C	62861	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s FCC rules and regulati	ystem during the ons in effect or	ne accounting n June 24, 19	period, except 81, permitting th	(1) stations carried 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 Substitute Basis S	sis, as explaine stations: With r	d in the next espect to any	paragraph. / distant stations	. , , , , , , , , , , ,	nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television	
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List the station here, basis. For further in	List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1.1 integers to the paper SA3 form.						
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the ECC has assigned to the television station for broadcasting over the air in							
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							
(for independent multion For the meaning of the	cast), "E" (for no se terms, see	oncommercia page (v) of the	l educational), o e general instruc	or "E-M" (for nonco ctions located in th	ast), "I" (for independent), "I-M" mmercial educational multicast). se paper SA3 form. s". If not, enter "No". For an ex-		
cable system carried th	ave entered "Ye ne distant statio	es" in column on during the	you must cor accounting perio	mplete column 5, s od. Indicate by ent	tating the basis on which your ering "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							
Column 6: Give the	e location of ea Canadian statio	ch station. Fo	or U.S. stations, e the name of th	list the community ne community with	d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.		
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

LEGAL NAME OF OWN	IER OF CARLE S	/STEM·			SYSTEM ID#	
CINCINNATI BE			TORIES, LLO	С	62861	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s	ystem during to ons in effect on i.61(e)(2) and (ne accounting n June 24, 19 4), or 76.63 (r	period, except 81, permitting the referring to 76.6	(1) stations carried ne carriage of certa	and low power television stations) d only on a part-time basis under nin network programs [sections nd (2) certain stations carried on a	G Primary Transmitters:
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(for independent multid For the meaning of the	cast), "E" (for nesse terms, see	oncommercia page (v) of the	l educational), o e general instruc	or "E-M" (for nonco ctions located in th	• •	
planation of local servi	ce area, see p	age (v) of the	general instruct	ions located in the	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your	
1	ne distant statio	on during the	accounting perio	od. Indicate by ent	ering "LAC" if your cable system	
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	entered into o a primary trans simulcasts, also aree categories e location of ea	n or before Ju mitter or an a o enter "E". If , see page (v ch station. Fo	ne 30, 2009, be ssociation repre you carried the of the general in tr U.S. stations,	etween a cable systeming the primar channel on any othe instructions located list the community	payment because it is the subject tem or an association representing y transmitter, enter the designancer basis, enter "O." For a further d in the paper SA3 form. It o which the station is licensed by the which the station is identifed.	
Note: If you are utilizing						
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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LEGAL NAME OF OWN	IER OF CARLE SY	/STEM:			SYSTEM ID#	
CINCINNATI BE			TORIES, LLO	С	62861	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s	ystem during to ons in effect on i.61(e)(2) and (ne accounting n June 24, 19 4), or 76.63 (r	period, except 81, permitting the referring to 76.6	(1) stations carried ne carriage of certa	and low power television stations) d only on a part-time basis under nin network programs [sections nd (2) certain stations carried on a	G Primary Transmitters:
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on which your cable sy Column 3: Indicate	stem carried the in each case v	ne station. whether the st	ation is a netwo	ork station, an inde	pendent station, or a noncommercial	
	cast), "E" (for n	oncommercia	l educational), o	or "E-M" (for nonco	sst), "I" (for independent), "I-M" mmercial educational multicast). e paper SA3 form.	
planation of local servi	ce area, see p	age (v) of the	general instruct	ions located in the		
-	ne distant statio	on during the	accounting perio	od. Indicate by ent	tating the basis on which your ering "LAC" if your cable system apacity.	
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	entered into o a primary trans simulcasts, also aree categories e location of ea	n or before Ju mitter or an a o enter "E". If , see page (v ch station. Fo	ne 30, 2009, be ssociation repre you carried the of the general in tr U.S. stations,	etween a cable systeming the primar channel on any othe instructions located list the community	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. to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing						
		CHANN	EL LINE-UP	AJ		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
]
	••••••]

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	
CINCINNATI BE			TORIES, LLO	3	62861	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati	ystem during the	ne accounting n June 24, 19	period, except 81, permitting th	(1) stations carried ne carriage of certa	and low power television stations) d only on a part-time basis under iin network programs [sections	G
substitute program bas Substitute Basis S	sis, as explaine stations: With r	d in the next espect to any	paragraph. / distant stations	. , , , , , , , , , , , ,	nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
 basis under specifc FC Do not list the station station was carried 	here in space	G—but do lis		e Special Stateme	ent and Program Log)—if the	
• List the station here,	and also in spa formation cond	ice I, if the sta			ute basis and also on some other fthe 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 (for independent multion For the meaning of the	entering the le cast), "E" (for no se terms, see	tter "N" (for no oncommercia page (v) of the	etwork), "N-M" (i l educational), o e general instruc	for network multica or "E-M" (for nonco ctions located in th	nst), "I" (for independent), "I-M" mmercial educational multicast).	
cable system carried th	ave entered "Ye ne distant statio	es" in column on during the	you must cor accounting perio	nplete column 5, s od. Indicate by ent	tating the basis on which your ering "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						
Column 6: Give the	e location of ea Canadian statio	ch station. Fo	or U.S. stations, e the name of th	list the community ne community with	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	AK		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
						1

FURINI SAJE. PAGE 3.					0\/0TEM ID#	,1
CINCINNATI BE			ITORIES, LLO	С	SYSTEM ID# 62861	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during the consinering the consinering the considering the consistency of the cons	ne accounting n June 24, 19 4), or 76.63 (i d in the next	p period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carried ne carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under hin network programs [sections and (2) certain stations carried on a	Primary Transmitters:
basis under specifc FC				s carried by your ca	able system on a substitute program	Television
Do not list the station	here in space	G—but do lis		ne Special Stateme	ent and Program Log)—if the	
basis. For further in	and also in spa formation cond	ace I, if the sta			ute basis and also on some other f the general instructions located	
in the paper SA3 fo Column 1: List eac		sign. Do not	report origination	n program services	s such as HBO, ESPN, etc. Identify	
			-	-	ion. For example, report multi-	
WETA-simulcast).	1-2 . Simulcast	streams mus	t be reported in	column i (list eaci	stream separately; for example	
					on for broadcasting over-the-air in	
on which your cable sy			annei 4 in vvasr	nington, D.C. This	may be different from the channel	
Column 3: Indicate	in each case v	whether the s			pendent station, or a noncommercial	
	•	•	,		ast), "I" (for independent), "I-M" mmercial educational multicast).	
For the meaning of the	se terms, see	page (v) of th	e general instru	ctions located in th	e paper SA3 form.	
planation of local servi			•	•	s". If not, enter "No". For an ex- paper SA3 form	
					tating the basis on which your	
cable system carried the carried the distant state		•	• .	•	ering "LAC" if your cable system	
	•				payment because it is the subject	
_				-	tem or an association representing	
-	•		-		y transmitter, enter the designa- ner basis, enter "O." For a further	
explanation of these th	ree categories	, see page (v) of the general	instructions locate	d in the paper SA3 form.	
				-	to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing				-		
	1	CHANN	EL LINE-UP	AL		-
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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						.

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	
CINCINNATI BE			TORIES, LLO		62861	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati	ystem during the	ne accounting n June 24, 19	period, except 81, permitting th	(1) stations carried te carriage of certa	and low power television stations) d only on a part-time basis under ain network programs [sections	G
substitute program bas Substitute Basis S	sis, as explaine stations: With r	d in the next espect to any	paragraph. / distant stations	. , , , , , , , , , , , , , , , , , , ,	nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
 basis under specifc FC Do not list the station station was carried 	here in space	G—but do lis		e Special Stateme	ent and Program Log)—if the	
• List the station here,	and also in spa formation cond	ice I, if the sta			ute basis and also on some other f 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						
(for independent multion For the meaning of the	east), "E" (for no se terms, see	oncommercia page (v) of the	l educational), o e general instruc	r "E-M" (for nonco ctions located in th	ast), "I" (for independent), "I-M" mmercial educational multicast). se paper SA3 form. s". If not, enter "No". For an ex-	
cable system carried th	ave entered "Ye ne distant statio	es" in column on during the	you must cor accounting perio	nplete column 5, s od. Indicate by ent	tating the basis on which your ering "LAC" if your cable system	
of a written agreement the cable system and a	ion of a distant entered into o a primary trans	multicast stre n or before Ju mitter or an a	eam that is not s ine 30, 2009, be ssociation repre	subject to a royalty tween a cable sys senting the primar	payment because it is the subject tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further	
explanation of these the	ree categories location of ea Canadian statio	, see page (v) ch station. Fo ns, if any, giv	of the general in the stations, ethe name of the	nstructions located list the community ne community with	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
·		CHANN	EL LINE-UP	AM	·	-
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#						
CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861	Name					
PRIMARY TRANSMITTERS: TELEVISION						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections	G					
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program	Primary Transmitters: Television					
basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.						
List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.						
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).						
Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial						
educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex-						
planation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.						
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 AN						
1. CALL SIGN 2. B'CAST CHANNEL OF CHANNEL NUMBER 3. TYPE 4. DISTANT? (Yes or No) CARRIAGE (If Distant) 6. LOCATION OF STATION						
SIGN CHANNEL OF (Yes or No) CARRIAGE						
SIGN CHANNEL OF (Yes or No) CARRIAGE						
SIGN CHANNEL OF (Yes or No) CARRIAGE						
SIGN CHANNEL OF (Yes or No) CARRIAGE						
SIGN CHANNEL OF (Yes or No) CARRIAGE						
SIGN CHANNEL OF (Yes or No) CARRIAGE						
SIGN CHANNEL OF (Yes or No) CARRIAGE						
SIGN CHANNEL OF (Yes or No) CARRIAGE						
SIGN CHANNEL OF (Yes or No) CARRIAGE						
SIGN CHANNEL OF (Yes or No) CARRIAGE						
SIGN CHANNEL OF (Yes or No) CARRIAGE						
SIGN CHANNEL OF (Yes or No) CARRIAGE						

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	
CINCINNATI BE			TORIES, LLO		62861	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati	ystem during the ons in effect or	ne accounting n June 24, 19	period, except 81, permitting th	(1) stations carried te carriage of certa	and low power television stations) d only on a part-time basis under iin network programs [sections	G
substitute program bas Substitute Basis S	sis, as explaine stations: With r	d in the next espect to any	paragraph. / distant stations	. , , , , , , , , , , , , , , , , , , ,	nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
 basis under specifc FC Do not list the station station was carried 	here in space	G—but do lis		e Special Stateme	ent and Program Log)—if the	
• List the station here,	and also in spa formation cond	ice I, if the sta			ute basis and also on some other f 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 (for independent multion For the meaning of the	entering the le cast), "E" (for no se terms, see	tter "N" (for no oncommercia page (v) of the	etwork), "N-M" (i l educational), o e general instruc	for network multica r "E-M" (for nonco ctions located in th	nst), "I" (for independent), "I-M" mmercial educational multicast).	
•	ave entered "Ye ne distant statio	es" in column on during the	you must cor accounting perio	nplete column 5, s od. Indicate by ent	tating the basis on which your ering "LAC" if your cable system	
For the retransmiss of a written agreement the cable system and a	ion of a distant entered into o a primary trans	multicast stre n or before Ju mitter or an a	eam that is not s ine 30, 2009, be ssociation repre	subject to a royalty tween a cable sys senting the primar	payment because it is the subject tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further	
Column 6: Give the	e location of ea Canadian statio	ch station. Fo	or U.S. stations, e the name of th	list the community ne community with	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	AO		-
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OWN	IER OF CARLE SY	/STEM:			SYSTEM ID#	
CINCINNATI BE			TORIES, LLO	С	62861	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati	ystem during to ons in effect on i.61(e)(2) and (ne accounting n June 24, 19 4), or 76.63 (r	period, except 81, permitting the referring to 76.6	(1) stations carried ne carriage of certa	and low power television stations) d only on a part-time basis under nin network programs [sections nd (2) certain stations carried on a	G Primary Transmitters:
				s carried by your ca	able system on a substitute program	Television
basis under specifc FCDo not list the station				e Special Stateme	ent and Program Log)—if the	
basis. For further in	and also in spa formation cond	ace I, if the sta			ute basis and also on some other f the general instructions located	
each multicast stream	h station's call associated wit	h a station ac	cording to its ov	er-the-air designat	s such as HBO, ESPN, etc. Identify ion. For example, report multi-	
WETA-simulcast). Column 2: Give the	e channel numl	per the FCC h	ias assigned to	the television station	n stream separately; for example on for broadcasting over-the-air in	
on which your cable sy	stem carried th	ne station.			may be different from the channel pendent station, or a noncommercial	
-	cast), "E" (for n	oncommercia	l educational), o	or "E-M" (for nonco	ast), "I" (for independent), "I-M" mmercial educational multicast). e paper SA3 form.	
planation of local servi	ce area, see p	age (v) of the	general instruct	ions located in the	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your	
carried the distant stat	ion on a part-tii	me basis bec	ause of lack of a	activated channel o	ering "LAC" if your cable system apacity. payment because it is the subject	
the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	a primary trans simulcasts, also aree categories e location of ea	mitter or an a o enter "E". If , see page (v ch station. Fo	ssociation repre you carried the of the general in the U.S. stations,	senting the primar channel on any oth instructions located list the community	tem or an association representing 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	
Note: If you are utilizing					which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AP		-
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FURINI SASE, PAGE 3.					21/2=		
CINCINNATI BE			TORIES, LLO	С		EM ID# 62861	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during the system during the system during the system of the syst	ne accounting n June 24, 19 4), or 76.63 (r d in the next	period, except 81, permitting the eferring to 76.6 paragraph.	(1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections nd (2) certain stations carried on a able system on a substitute program		Primary Transmitters: Television
basis under specifc FC • Do not list the station station was carried	CC rules, regula here in space only on a subs	ations, or auth G—but do lis titute basis.	norizations: t it in space I (th	ne Special Statem	ent and Program Log)—if the ute basis and also on some other		
in the paper SA3 fo Column 1: List each	rm. h station's call	sign. Do not	report origination	n program service	f the general instructions located s such as HBO, ESPN, etc. Identify		
cast stream as "WETA WETA-simulcast). Column 2: Give the	a-2". Simulcast e channel numl	streams mus	t be reported in	column 1 (list each	tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in		
on which your cable sy Column 3: Indicate	stem carried the in each case w	ne station. whether the st	tation is a netwo	ork station, an inde	may be different from the channel pendent station, or a noncommercial ast), "I" (for independent), "I-M"	I	
(for independent multion For the meaning of the	cast), "E" (for nese terms, see ation is outside	oncommercia page (v) of the the local ser	l educational), o e general instruc vice area, (i.e. "o	or "E-M" (for nonco ctions located in th distant"), enter "Ye	mmercial educational multicast). ne paper SA3 form. s". If not, enter "No". For an ex-		
Column 5: If you ha	ave entered "Yo ne distant station	es" in column on during the	4, you must cor accounting perion	mplete column 5, s od. Indicate by ent	stating the basis on which your ering "LAC" if your cable system		
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	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio	n or before Ju mitter or an a p enter "E". If , see page (v ch station. Fo ns, if any, giv	ine 30, 2009, be ssociation repre you carried the) of the general i or U.S. stations, e the name of the	etween a cable systemen a cable systementing the primal channel on any ot instructions locate list the community with the commu	payment because it is the subject stem or an association representing y transmitter, enter the designather 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.	ne	
Note: If you are utilizing	g multiple char	• •	•		channel line-up.		
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		
	NUMBER	STATION		(If Distant)			
		1					

ACCOUNTING PERIOD: 2024/2 FORM SA3E. PAGE 4.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CINCINNATI BELL EXTENDED TERRITORIES. LLC 62861 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: 2024/2
LEGAL NAME OF OWNER OF	CABLE SYST	EM:				;	SYSTEM ID#	Nama
CINCINNATI BELL EXT	ENDED T	ERRITORIE	S, LLC				62861	Name
SUBSTITUTE CARRIAGE	: SPECIAI	STATEMEN	T AND PROGRAM LOG					
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.								
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? Ves X No								
Note: If your answer is "No," leave the rest of this page blank. If your answer is "Yes," you must complete the program								Program Log
log in block 2. 2. LOG OF SUBSTITUTE	DBUCD V	MS						
In General: List each subst			te line. Use abbreviations	wherever pos	sible, if th	eir meaning i	S	
clear. If you need more spa	ce, please a	attach addition	al pages.	·		-		
			ision program (substitute p				tion	
period, was broadcast by a under certain FCC rules, re								
SA3 form for futher informa								
titles, for example, "I Love L	•							
			r "Yes." Otherwise enter "N esting the substitute progra					
	-		ne community to which the		nsed by th	ne FCC or, in		
the case of Mexican or Can								
first. Example: for May 7 given		when your syst	tem carried the substitute p	orogram. Use	numerals	s, with the mo	nth	
		substitute pro	gram was carried by your o	able system.	List the ti	mes accurate	ly	
to the nearest five minutes.							•	
stated as "6:00–6:30 p.m."	or "D" if the	listed program	was substituted for progra	mming that w	our evetor	m was roquire	d	
to delete under FCC rules a							·u	
gram was substituted for pr								
effect on October 19, 1976.								
				WHE	EN SUBS	TITUTE	7. REASON	
S	UBSTITUT	E PROGRAM	<u> </u>	CARR				
1. TITLE OF PROGRAM	1. TITLE OF PROGRAM 2. LIVE? 3. STATION Yes or No CALL SIGN		4. STATION'S LOCATION	5. MONTH AND DAY			DELETION	
	103 01 140	OALL GIGIT	4. CIATION CECOATION	AND BAT	TROW	_		
	<u> </u>							
						_		
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ACCOUNTING PERIOD: 2024/2 FORM SA3E. PAGE 6.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861									
J Part-Time Carriage Log	Icolumn 5 of space (-									
			DATE	S AND HOURS	OF F	PART-TIME CAR	RRIAGE			
	CALL SIGN		N CARRIAGE OCCU	RS		CALL SIGN	WHEN CARRIAGE OCCURR			
		DATE	FROM	ТО			DATE	FROM		то
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LEGA	AL NAME OF OWNER OF CABLE SYSTEM: ICINNATI BELL EXTENDED TERRITORIES, LLC	SYSTEM ID# 62861	Name				
GR Inst	OSS RECEIPTS tructions: The figure you give in this space determines the form you file and the amount you amounts (gross receipts) paid to your cable system by subscribers for the system's secondar	ı pay. Enter the total of ry transmission service	K				
	identified in space E) during the accounting period. For a further explanation of how to comp e (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period.	s 39,777,326.42	Gross Receipts				
IMP	PORTANT: You must complete a statement in space P concerning gross receipts.	(Amount of gross receipts)					
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.							
bloc	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be ente ck 3 below.						
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be entere elow.	red on line 2 in block					
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be block 4 below.	e entered on line					
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are least the minimum fee, regardless of whether they carried any distant stations. This fee is 1 system's gross receipts for the accounting period.	.064 percent of the					
	Line 1. Enter the amount of gross receipts from space K. Line 2. Multiply the amount in line 1 by 0.01064.	\$ 39,777,326.42					
	Enter the result here. This is your minimum fee.	\$ 423,230.75					
2	space G. If, in space G, you identified any stations as "distant" by stating "Yes" in column 4, "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 complete the DSE schedule.	•					
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero.	\$ 4,120.38					
	Line 2. 3.75 Fee: 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.	\$ 4,120.38					
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger.	\$ 423,230.75	Cable systems				
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter	0.00	submitting additional deposits under				
	zero. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)						
	Line 4. FILING FEE	\$ 725.00	the Licensing additional fees. Division for the				
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 423,955.75	appropriate form for submitting the				
	EFT Trace # or TRANSACTION ID # 76972064254&76974181207		additional fees.				
Remit this amount via electronic payment payable to Register of Copyrights. (See page (i) of the							
	general instructions located in the paper SA3 form and the Excel instructions tab for r	more information.)					

Name		OF OWNER OF CABLE S						EM ID#		
	CINCINN	ATI BELL EXTEN	IDED TERRITOR	RIES, LLC				62861		
М	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.									
Channels										
	1. Enter the total number of channels on which the cable system carried television broadcast stations									
	2. Enter the total number of activated channels									
	on which the cable system carried television broadcast stations and nonbroadcast services									
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)									
Be Contacted for Further Information	Name	ANGELA KRA	MER			Telephone	513-604-1689			
	Address	221 E. 4TH ST (Number, street, rural r								
		CINCINNATI, (City, town, state, zip)								
	Email	ANGE	ELA.KRAMER(@ALTAFIBEF	R.COM	Fax (optional)				
•	CERTIFICA	ATION (This statem	ent of account mu	st be certified an	d signed in accorda	nce with Copyright Office reg	gulations.)			
O Certification	• I, the und	ersigned, hereby cer	tify that (Check one	, but only one, of	the boxes.)					
	(Owner	other than corpora	ation or partnershi	i p) I am the owner	of the cable system	as identified in line 1 of space l	В; ог			
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or									
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.									
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]									
		X	/s/ Jason Pra	aeter						
		(e.g., /s/	John Smith). Before	e entering the first	forward slash of the /s	If to certify this statement. If signature, place your cursor in the point of t				
		Typed o	or printed name:	Jason Prae	ter					
		Title:			mall Business					
		Date:	February 25, 202	25						

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 filing, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM:	STEM ID#	
CINCINNATI BELL EXTENDED TERRITORIES, LLC	62861	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include a scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmission made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below	sub-	Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment for an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	ent.	Q
Line 1 Enter the amount of late payment or underpayment	-)%	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- 0 days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	<u> </u>	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,		
space L (page 7)	rge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance pleat contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	ase	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, accounting period, and ID number as given in the origi filing.	nal	
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 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 filing, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2024/2

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
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, 1981, 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 SCHEDULE

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

- 5. Calculate a separate base rate fee for each subscriber group, using (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

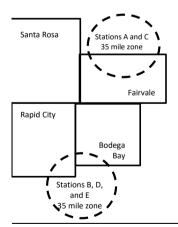
Rounding Off DSEs. In computing DSEs on the DSE schedule, you may round off to no less than the third decimal point. If you round off a DSE in any case, you must round off DSEs throughout the schedule as follows:

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

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

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

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



Distant Stations Ca	rried	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

 \$6,384.00

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: 2024/2

DSE SCHEDULE. PAGE	11. (CONTINUED)								
1	LEGAL NAME OF OWNER OF CABLE SYSTEM:								
1	CINCINNATI BELL EXTE	ENDED TERR	ITORIES, LLC			62861			
	SUM OF DSEs OF CATEGORY "O" STATIONS:								
	Add the DSEs of each station.								
	Enter the sum here and in line	1 of part 5 of this	schedule.		1.50				
	Instructions:								
2	In the column headed "Call S	Sign": list the call	l signs of all distant stations in	dentified by the	e letter "O" in column 5				
Computation	of space G (page 3). In the column headed "DSE"	· for each indene	endent station, give the DSF a	as "1 N"· for ea	ach network or noncom-				
	mercial educational station, giv			10 , 101 00	ion network of noncom				
Category "O"	, ,		CATEGORY "O" STATION	S: DSEs					
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	WCET 48	0.250							
	WCET ARTS 48.3	0.250							
	WCET CREATE 48.2	0.250							
	WCVN 54	0.250							
	WCVN 54.2	0.250							
Add rows as	WPTD THINK TV 16	0.250							
necessary.	TALLE TIMER IA 10	0.230							
Remember to copy all		 							
formula into new									
rows.									
		 							
									
									
		 							
Ī		<u> </u>				L			

Name		OWNER OF CABLE SYSTEM: BELL EXTENDED TO	ERRITORIES	, LLC			S	62861
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station,							
	4 0411						0.00	
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTE	JRS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE		-)E
			÷			<u>x</u>	=	
						x	=	
			÷	=		x	=	
			÷			x x	=	
			÷			x	=	
			÷	=		x	=	
	Add the DSEs	s OF CATEGORY LAC S of each station. um here and in line 2 of p		edule,	▶	0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in effetons in effetons in effetons cased ly. Column 2: at your option. Column 3: Column 4:	re the call sign of each stand by your system in substant on October 19, 1976 (one or more live, nonnetwork). For each station give the This figure should correct Enter the number of days Divide the figure in column This is the station's DSE	itution for a pro- as shown by th ork programs du number of live, spond with the is in the calenda in 2 by the figur (For more infor	gram that your system of eletter "P" in column 7 iring that optional carria nonnetwork programs information in space I. It year: 365, except in a e in column 3, and give mation on rounding, second	was permitted to of space I); and ge (as shown by t carried in substi leap year. the result in col e page (viii) of th	delete under FCC rules the word "Yes" in column 2 itution for programs that the lumn 4. Round to no less the general instructions in	of were deleted than the third	n).
				BASIS STATIONS			F	T
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBE OF DAY IN YEAF	S	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
			+	=				=
			: :	=		-		=
		-	+	=		-		=
			+	=		-		=
	Add the DSEs	s OF SUBSTITUTE-BASI of each station. um here and in line 3 of p		edule,		0.00		=
5		ER OF DSEs: Give the am s applicable to your systen		poxes in parts 2, 3, and 4	of this schedule	and add them to provide	the total	
Total Number	1. Number	of DSEs from part 2 ●				>	1.50	
of DSEs		of DSEs from part 3 ●	_			<u> </u>	0.00	
	3. Number	of DSEs from part 4 ●				<u> </u>	0.00	
	TOTAL NUMBE	ER OF DSEs						1.50

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2024/2

LEGAL NAME OF O							S	YSTEM ID#	Name
CINCINNATI BI	ELL EXTENDE	DIERRII	URIES, LLC	•				62861	
Instructions: Bloc In block A:	k A must be comp	leted.							
• 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								6	
schedule. • If your answer if "No," complete blocks B and C below.									
In the control of the	. 1 4 1 1 11			TELEVISION MA		70.5 (50.	0	41	Computation of 3.75 Fee
Is the cable system effect on June 24,		itside of all m	ajor and smalle	er markets as defin	ea unaer secti	on 76.5 of FC	C rules and regula	itions in	
	•		O NOT COMP	LETE THE REMAI	NDER OF PA	RT 6 AND 7.			
X No—Comp	lete blocks B and	C below.							
		BLO	CK B: CARR	IAGE OF PERM	/IITTED DS	Es			
Column 1: CALL SIGN	under FCC rules	and regulatione DSE Scheo	ns prior to Jun dule. (Note: Th	part 2, 3, and 4 of t e 25, 1981. For fur e letter M below re Act of 2010.)	ther explanation	on of permitted	stations, see the		
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)]	lles and regul ed pursuant to	ations cited be the FCC mar	sis on which you ca low pertain to those ket quota rules [76	e in effect on . .57, 76.59(b),	June 24, 1981. 76.61(b)(c), 76	6.63(a) referring to)	
	C Noncommeric	al educationa d station (76.6 r DSE sched	l station [76.59 5) (see paragr ule).	6.59(d)(1), 76.61(e) (c), 76.61(d), 76.63 aph regarding subs CC rules (76.7)	3(a) referring t	o 76.61(d)]			
	•	IHF station w	thin grade-B c	e or substitute basi ontour, [76.59(d)(5 am.	•		ring to 76.61(e)(5))]	
Column 3:		e stations ider	ntified by the le	parts 2, 3, and 4 o			rksheet on page 1	4 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
WCET 48	С	0.25							
WCET ARTS	+	0.25 0.25							
WCVN 54	C	0.25							
WCVN 54.2	С	0.25							
WPTD THIN	С	0.25							
								1.50	
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of l								
Line 2: Enter the									
					to the 2.75 rs	-t-			
Line 3: Subtract I (If zero, le				of this schedule					
Line 4: Enter gros	ss receipts from	space K (pa	ge 7)				x 0.0	375	Do any of the DSEs represent partially
Line 5: Multiply lii	ne 4 by 0.0375 a	ınd enter suı	n here				x		permited/ partially nonpermitted
Line 6: Enter tota	I number of DSE	Es from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply lii	ne 6 by line 5 an	d enter here	and on line 2	2, block 3, space	L (page 7)			0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861						Name			
		BLOCK	A: TELEVI	SION MARKETS	S (CONTIN	UED)			
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
	Brole		0.014	B/ (616		5.5.1	Bricio		Computation of 3.75 Fee
									001
				<u> </u>					
					l				
						H			
					<u> </u>				
					l				
			Ц	1	<u> </u>	II	1	<u> </u>	

ACCOUNTING PERIOD: 2024/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CINCINNATI BELL EXTENDED TERRITORIES. LLC 62861 Instructions: You must complete this worksheet for those stations identified 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 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 CALL SIGN DSE DSE DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC	SYSTEM ID# 62861	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	39,777,326.42	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? X Yes—Complete section 3 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? No—Complete the applicable section below. If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS	SF	
	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 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Nama	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM:	STEM ID#
Name	(CINCINNATI BELL EXTENDED TERRITORIES, LLC	62861
7	Section		
-	4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1)	0.00
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ <u>\$</u> 0.00	
Surcharge		C. Multiply line B by 3.000 and enter here	0.00
		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	0.00
		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	0.00
	Instru	ctions:	
8	You m	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	
0		checked "Yes," use the total number of DSEs from part 5.	
Commutation		ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation of	1 '	ır answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ır answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below	
Base Rate Fee	blank		
	What i	is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
	were lo	ocated within that station's local service area and others were located outside that area. For the definition of a station's "local	
	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 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.)	<u> </u>
	Section		
	3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank.	
		NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts	
		(the amount in section 1)▶ <u></u> \$	•
		D. Enter 0.00704 of group receipts	
		B. Enter 0.00701 of gross receipts (the amount in section 1)▶	
		C. Subtract 1.000 from total DSEs	
		(the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here ▶	
		E. Add lines A and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7)	
		Base Rate Fee	0.00
	1		

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2024/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM	
CINCINNATI BELL EXTENDED TERRITORIES, LLC 628	Name 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)	
(the amount in section 1) ▶\$	
B. Enter 0.00701 of gross receipts	Computation
(the amount in section 1) \$	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.	\neg
Enter here and in block 3, line 1, space L (page 7) Base Rate Fee	,
Base Rate Fee \$ 0.00	<u></u>
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals sha	all
instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in	9
Space G.	
In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of the	his 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 to the same	and Syndicated
station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.	Exclusivity
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge for
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you mu	ıst Partially
also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. Howeve your cable system is wholly located outside all major television markets, complete block A only.	Pr, if Distant 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 station you	Permitted Stations
carried to that community.	
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by same token, the station is distant to the subscriber.)	the
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable sys	stem.
will have only one subscriber group when the distant stations it carried have local service areas that coincide.	ion.
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber groups.	ber
In each section:	
• Identify the communities/areas represented by each subscriber group.	
• Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the subscribers in the group.	
• If:	
1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, a of this schedule; or,	nd 4
2) 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.	
Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions in the paper SA3 form.	
Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding	
page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show you actual calculations on the form.	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62861 CINCINNATI BELL EXTENDED TERRITORIES, LLC Guidance for Computing the Royalty Fee for Partially Permitted/Partially Nonpermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNER CINCINNATI BELL I			s, LLC			S	62861	Name	
Bl	OCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRIE	BER GROUP			
FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP								9	
COMMUNITY/ AREA		0		COMMUNITY/ AREA	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	DSE CALL SIGN DSE CALL SIGN DSE				Computation of	
CALL SIGN	DSE	CALL SIGN	DSE	WPTD THINK TV 1		CALL SIGN	DSE	Base Rate Fee	
				WI ID IIIIWK IV I	0.23				
								and	
								Syndicated	
								Exclusivity	
								Surcharge	
								for	
								Partially	
								Distant	
								Stations	
Total DSEs			0.00	Total DSEs			0.25		
Gross Receipts First Gro	un	\$ 38,244,	381.89	Gross Receipts Second	d Group	\$ 1,5	20,427.43		
erece receipte riller ere	ч	00,2 : :,		Cross resolpts essent	. Croup	<u> </u>	20,121110		
Base Rate Fee First Gro	up	\$	0.00	Base Rate Fee Second	d Group	\$	4,044.34		
	THIRD	SUBSCRIBER GROU	Р		FOURTH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
WCET 48	0.25			WCVN 54	0.25				
WCET ARTS 48.3	0.25			WCVN 54.2	0.25				
WCET CREATE 48.2	0.25								
WCVN 54	0.25								
WCVN 54.2	0.25								
WPTD THINK TV 16									
				1					
							••••		
Total DSEs	l.		1.50	Total DSEs			0.50		
Gross Receipts Third Gro	aun	•	0.00	Gross Receipts Fourth	Group	\$	8,964.93		
Oloss Necelpts Tillia Ol	oup		0.00	Oross receipts rourur	Огоир	Ψ	0,304.30		
Base Rate Fee Third Gro	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	47.69		
Base Rate Fee: Add the	base rate	e fees for each subscri	per group a	s shown in the hoxes abo	ove.				
Enter here and in block 3			- 2. group c	#1 tile boxes abc		\$	4,120.38		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861									
Bl	OCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP			
		SUBSCRIBER GROU				SUBSCRIBER GROU	Р		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
WCVN 54	0.25							Base Rate Fee	
WCVN 54.2	0.25							and	
WPTD THINK TV 16								Syndicated Exclusivity	
								Surcharge for Partially	
								Distant Stations	
Total DSEs			0.75	Total DSEs			0.00		
	<u></u>								
Gross Receipts First Group \$ 3,552.17				Gross Receipts Secon	d Group	\$	0.00		
Base Rate Fee First Gro		\$	28.35	Base Rate Fee Secon		\$	0.00		
COMMUNITY/ AREA	EVENIA	SUBSCRIBER GROU	0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						-			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third Group \$ 0.00		Gross Receipts Fourth	Group	\$	0.00				
Base Rate Fee Third Gro	Base Rate Fee Third Group \$ 0.00			Base Rate Fee Fourth	ı Group	\$	0.00		
Base Rate Fee: Add the			ber group a	as shown in the boxes ab	oove.				
Enter here and in block 3	, line 1, sp	pace L (page 7)				\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861									
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 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			
									
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Gro	ross Receipts First Group \$ 0.0				d Group	\$	0.00		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00		
EL	.EVENTH	SUBSCRIBER GROU	Р		TWELVTH	SUBSCRIBER GROUP)		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	·····								
	.				<u></u>				
	 				.		 		
	 				ļ		 		
	 						<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 Gr	ase Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	Group	\$	0.00			
Book Both For A LLC	hace	food for some 1 1 1	hor c	on alcours in the last	21/2				
Base Rate Fee: Add the Enter here and in block 3			uei group a	as shown in the doxes ab	ove.	\$			

CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base R. ar Syndi Exclu Surch Part Dist	BL		COMPLITATION OF	DACEDA	TE EEEO FOD FAC	T CLIDOOD	IDED CDOLID	İ	
CALL SIGN DSE CALL SIGN	ТЫРТ				Н	IP			
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base R			SOBOOKIDEK GROO				9		
									Computa
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
Syndi Security Substitution Syndi Security Substitution Syndi Security State									
State									
Suret feat									Exclusiv
Total DSEs Joan DSE CALL SIGN JOAN DSE JOAN D									Surchar
Station of the state of the sta									for
Stati DSEs Joint									Partiall
Datal DSEs OLOO Stal DSEs OLOO Gross Receipts Second Group SOUTH SET SET STORT SUBSCRIBER GROUP OMMUNITY/ AREA OLOO CALL SIGN DSE CA									Distan
See Rate Fee First Group See Rate Fee First Group SixTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA OCALL SIGN DSE CALL SIGN D									Station
Tross Receipts First Group S O.00 Base Rate Fee First Group FIFTEENTH SUBSCRIBER GROUP OMMUNITY/ AREA O CALL SIGN DSE D.00 DITOTAL DSES O.00									
Tross Receipts First Group S O.00 Base Rate Fee First Group FIFTEENTH SUBSCRIBER GROUP OMMUNITY/ AREA O CALL SIGN DSE D.00 DTotal DSEs O.00				.					
ase Rate Fee First Group S O.00 Base Rate Fee Second Group FIFTEENTH SUBSCRIBER GROUP OMMUNITY/ AREA O CALL SIGN DSE							.		
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FIFTEENTH SUBSCRIBER GROUP OMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DS		,			Cross resolpte cos	ona oroap			
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Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
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ase Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00		ıp	\$			rth Group	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861									
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP			
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Gross Receipts First Gro	ross Receipts First Group \$ 0.00				Gross Receipts Second Group \$ 0.00				
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Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fourth	Group	\$	0.00			
sase Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	Group	\$	0.00				
Raco Dato Eco: Add 4-	hace ==t-	foos for each subs	hor grove =	e chown in the bayes	200				
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ase Rate Fee First Group)	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
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ase Rate Fee Third Grou	р	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	

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LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861									
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP			
TWEN ⁻	TY-NINTH	SUBSCRIBER GROU	Р	-	THIRTIETH	SUBSCRIBER GROUP)	0	
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Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00		
THIR	TY-FIRST	SUBSCRIBER GROU	P	THIRT	/-SECOND	SUBSCRIBER GROUP)		
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ase Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	Group	\$	0.00				
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Base Rate Fee: Add the Enter here and in block			ber group a	s shown in the boxes ab	ove.	\$			
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LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861									
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP			
	TY-THIRD	SUBSCRIBER GROU		1	Y-FOURTH	SUBSCRIBER GROUP		9	
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Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Gr	ross Receipts First Group \$ 0.00				Gross Receipts Second Group \$ 0.00				
Base Rate Fee First Gre		\$	0.00	Base Rate Fee Second		\$	0.00		
	TY-FIFTH	SUBSCRIBER GROU		11	RTY-SIXTH	SUBSCRIBER GROUP	_		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0				
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Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third Group \$ 0.00			0.00	Gross Receipts Fourth	Group	\$	0.00		
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Base Rate Fee Third G	Base Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	Group	\$	0.00			
Base Rate Fee: Add the Enter here and in block		s shown in the boxes ab	ove.	\$					
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LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861									
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP			
THIRTY-S	SEVENTH	SUBSCRIBER GROU	-	THIRT	Y-EIGHTH	SUBSCRIBER GROUP)	0	
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Total DSEs			0.00	Total DSEs			0.00		
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sase Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	Group	\$	0.00				
Base Rate Fee: Add the	haso rata	foos for each subscri	ner aroun a	s shown in the boxes abo	ove				
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LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861									
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 Computation	
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Total DSEs	 		0.00	Total DSEs	Į.	<u> </u>	0.00		
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·	oss Receipts First Group \$ 0.00				·				
Base Rate Fee First Gro		\$	0.00	Base Rate Fee Second		\$	0.00		
	Y-THIRD	SUBSCRIBER GROU		11	7-FOURTH	SUBSCRIBER GROUP	_		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
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Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00		
ase Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	Group	\$	0.00				
Base Rate Fee: Add the Enter here and in block 3			per group a	s shown in the boxes abo	ove.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861									
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP			
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Base Rate Fee First Gro		\$	0.00	Base Rate Fee Second		\$	0.00		
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LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861									
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP			
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Base Rate Fee Second Group \$ 0.00 Interfee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FIFTY-NINTH SUBSCRIBER GROUP INITY/ AREA 0 COMMUNITY/ AREA 0.0 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 SIG		ļ							
Base Rate Fee Second Group \$ 0.00 Interfee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FIFTY-NINTH SUBSCRIBER GROUP INITY/ AREA 0 COMMUNITY/ AREA 0.0 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 SIG		ļ							
Base Rate Fee Second Group \$ 0.00 Interfee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FIFTY-NINTH SUBSCRIBER GROUP INITY/ AREA 0 COMMUNITY/ AREA 0.0 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 SIG									
Base Rate Fee Second Group FIFTY-NINTH SUBSCRIBER GROUP NITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE C	otal DSEs			0.00	Total DSEs			0.00	
FIFTY-NINTH SUBSCRIBER GROUP NITY/ AREA 0 COMMUNITY/ AREA 0 SIGN DSE CALL	ross Receipts First Gro	up	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
FIFTY-NINTH SUBSCRIBER GROUP NITY/ AREA 0 COMMUNITY/ AREA 0 SIGN DSE CALL								1	
FIFTY-NINTH SUBSCRIBER GROUP NITY/ AREA 0 COMMUNITY/ AREA 0 SIGN DSE CALL	ase Rate Fee First Gro	up	s	0.00	Base Rate Fee Sec	ond Group	s	0.00	
NITY/ AREA O COMMUNITY/ AREA O							ļ.	•	
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eceipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gloss Receipts Fourth Gloup 5 0.00	otal DSEs			0.00	Total DSEs			0.00	
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		oup	\$	-		rth Group	\$		
te Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	otal DSEs Fross Receipts Third Gro	oup	\$	-		rth Group	\$		
			\$	0.00	Gross Receipts Fou			0.00	

LEGAL NAME OF OWNER CINCINNATI BELL			S, LLC			SY	STEM ID# 62861	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
		SUBSCRIBER GROU		N .		SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
0,122 0,0,1	202	07.122.01.01.1		5/122 5/5/1	202	07.122.01.01.1	332	Base Rate Fee
								and
								Syndicated
								Exclusivity
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						-		for
								Partially
								Distant Stations
								Stations
	 						 	
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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	ry-third	SUBSCRIBER GROU	Р	SIXT	Y-FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	OUD	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
C.000 Novelpto Tillia Gi	Jup	*	<u> </u>	Oross Receipts Fourth	Эгоар	•	<u> </u>	
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 3			ber group a	s shown in the boxes ab	ove.	\$		
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LEGAL NAME OF OWNER CINCINNATI BELL I			, LLC			SYS	62861	Name
BI	OCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRII	BER GROUP		
SIX	Y-FIFTH	SUBSCRIBER GROU	D	SIX	TY-SIXTH	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
						-		Syndicated
								Exclusivity
								Surcharge
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								Partially
						-		Distant
						_		Stations
Total DSEs			0.00	Total DSEs		!	0.00	
Gross Receipts First Gro	up	\$	0.00	Gross Receipts Second	l Group	\$	0.00	
Base Rate Fee First Gro	up	\$	0.00	Base Rate Fee Second	l Group	\$	0.00	
SIXTY-S	EVENTH	SUBSCRIBER GROU	D	SIXT	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 Gro	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gro	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
David Balling		f f						
Base Rate Fee: Add the Enter here and in block 3			oer group a	is snown in the boxes abo	ove.	\$		

LEGAL NAME OF OWNER CINCINNATI BELL			S, LLC			SY	(STEM ID# 62861	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
SIX	TY-NINTH	SUBSCRIBER GROU	Р	SE	VENTIETH	SUBSCRIBER GROUP	•	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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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	
SEVEN	TY-FIRST	SUBSCRIBER GROU	P	SEVENT	/-SECOND	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	roup	•	0.00	Gross Receipts Fourth	Group	•	0.00	
Gross Receipts Third Gr	Jup	\$	0.00	Oross Necelpis Fourth	Эгоир	\$	0.00	
Base Rate Fee Third Gr	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	s shown in the boxes ab	ove.	\$		
	, , . ,	(1 5)						

LEGAL NAME OF OWN			S, LLC				62861	Name
SEVE		COMPUTATION O SUBSCRIBER GRO		ATE FEES FOR EAC		BER GROUP SUBSCRIBER GRO	UP	
COMMUNITY/ AREA		3	0	COMMUNITY/ AREA		323.000	0	9 Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
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Total DSEs		ч	0.00	Total DSEs			0.00	
Total DSEs				Total DSEs				
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	
SEVE	NTY-FIFTH	SUBSCRIBER GRO	UP	SE\	/ENTY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	4		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	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	
				Ш				
Base Rate Fee: Add t Enter here and in bloc			riber group a	as shown in the boxes	above.	\$		
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CALL SIGN DSE CALL SIGN DSE Dotal DSEs Toss Receipts First Group	CALL SIGN	0 DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	0 DSE	Computa of Base Rate and Syndica Exclusiv Surchar for Partial Distar
CALL SIGN DSE CALL SIGN DSE Dotal DSEs ross Receipts First Group	\$	DSE	CALL SIGN Total DSEs	DSE		DSE	Computa of Base Rate and Syndica Exclusiv Surchar for Partial Distan
otal DSEs ross Receipts First Group	\$	0.00	Total DSEs			0.00	of Base Rate and Syndica Exclusiv Surchar for Partial Distan
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ross Receipts First Group				ond Group	\$	-	
ross Receipts First Group				and Group	\$	-	
		0.00	Gross Receipts Seco	ond Group	\$	0.00	
ase Rate Fee First Group							
ase Rate Fee First Group			II				
	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
OEVENTY MINT	L CURCODIDED CDOL	ID.		FIGURET	L CLIDCODIDED ODOL	ID	
	SUBSCRIBER GROU				SUBSCRIBER GROU	_	
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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otal DSEs		0.00	Total DSEs		-	0.00	
ross Receipts Third Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
							
ase Rate Fee Third Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
and the time of our	Ψ	0.00		С.очр	<u> </u>	3.00	

LEGAL NAME OF OWNER CINCINNATI BELL			s, LLC			SY	STEM ID# 62861	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
EIGH'	TY-FIRST	SUBSCRIBER GROU	>	EIGHTY	-SECOND	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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						-		Syndicated
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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		\$	0.00	Base Rate Fee Second		\$	0.00	
	Y-THIRD	SUBSCRIBER GROU		11	/-FOURTH	SUBSCRIBER GROUP	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	 							
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
			per group a	s shown in the boxes abo	ove.			
Enter here and in block	3, line 1, sp	pace L (page 7)				\$		

LEGAL NAME OF OWNER CINCINNATI BELL			S, LLC			SY	STEM ID# 62861	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
EIGH'	TY-FIFTH	SUBSCRIBER GROU	Р	EIGH	HTY-SIXTH	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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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	
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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	
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Page Pate Face Add the	haas ret-	• food for each sub	hor grown =	o about in the haves	0.40			
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		BSCRIBER GROU		TE FEES FOR EACH		SUBSCRIBER GROU	JP	
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CALL SIGN DS	SE C	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First Group	\$		0.00	Gross Receipts Secon	nd Group	\$	0.00	
ase Rate Fee First Group	\$		0.00	Base Rate Fee Secon	nd Group	\$	0.00	
NINETY-F	RST SU	BSCRIBER GROU	IP	NINET	Y-SECOND	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			•	
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CALL SIGN DS CA	SE (CALL SIGN	0.00	Total DSEs	h Group		DSE	
otal DSEs	\$	CALL SIGN	0.00	Total DSEs Gross Receipts Fourth	h Group	\$	DSE	

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	A: COMPUTATION (RD SUBSCRIBER GRO				IBER GROUP I SUBSCRIBER GROU	IP	
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CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate
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otal DSEs		0.00	Total DSEs			0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NINETY-FIF	TH SUBSCRIBER GRO	DUP	N	IINETY-SIXTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA		0	COMMUNITY/ ARE.	Α		0	
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	11						
otal DSEs		0.00	Total DSEs			0.00	
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otal DSEs iross Receipts Third Group	\$	0.00	Gross Receipts Fou		\$	0.00	
	\$	-			\$	_	

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861										
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP				
NINETY-S	SEVENTH	SUBSCRIBER GROU	Р	NINET	Y-EIGHTH	SUBSCRIBER GROUP)	0		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
O' LE GIGIY	DOL	ONEE CICIA	DOL	OALL GIGIN	DOL	O'ALL GIGIT	DOL	Base Rate Fee		
								and		
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Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Second	d Group	\$	0.00			
Base Rate Fee First Gro		\$	0.00	Base Rate Fee Second		\$	0.00			
	ry-NINTH	SUBSCRIBER GROU		†	NDREDTH	SUBSCRIBER GROUP	_			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0			
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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			
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Base Rate Fee: Add the Enter here and in block 3			ber group a	as shown in the boxes abo	ove.	\$				
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LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861									
				TE FEES FOR EACH					
ONE HUNDRI COMMUNITY/ AREA	ED FIRST	SUBSCRIBER GROU	0	ONE HUNDRED	SECOND	SUBSCRIBER GROUP	0	9	
COMMONT 177 WEEK				GOWNIOTH 1774 (E)				Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee and	
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Total DSEs	-		0.00	Total DSEs	•		0.00		
Gross Receipts First Gro	Gross Receipts First Group \$ 0.00			Gross Receipts Second	d Group	\$	0.00		
Base Rate Fee First Gro		\$	0.00	Base Rate Fee Second		\$	0.00		
	D THIRD	SUBSCRIBER GROU		†	FOURTH	SUBSCRIBER GROUP	_		
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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Total DSEs			0.00	Total DSEs			0.00		
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LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861										
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Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Second	d Group	\$	0.00			
Base Rate Fee First Gro		\$	0.00	Base Rate Fee Second		\$	0.00			
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Total DSEs			0.00	Total DSEs			0.00			
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LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861										
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iross Receipts First Group \$ 0.00			0.00	Gross Receipts Second	d Group	\$	0.00			
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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			
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Base Rate Fee: Add the Enter here and in block 3			oer group a	is snown in the boxes abo	ove.	\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861									
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LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861									
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP			
ONE HUNDRED TWEN	NTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED TWE	NTY-SIXTH	SUBSCRIBER GROUP		0	
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Gross Receipts First Group \$ 0.00			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 TWENTY-	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED TWEN	TY-EIGHTH	SUBSCRIBER GROUP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
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Base Rate Fee Third Group \$ 0.00			Base Rate Fee Fourth	Group	\$	0.00			
			ber group a	s shown in the boxes abo	ove.				
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LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861										
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP				
ONE HUNDRED TWEN	ITY-NINTH	SUBSCRIBER GROUP		ONE HUNDRED	THIRTIETH	SUBSCRIBER GROUP		0		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation		
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Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First Gro	ross Receipts First Group \$ 0.00			Gross Receipts Second	d Group	\$	0.00			
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Second	d Group		0.00			
		SUBSCRIBER GROUP	0.00			SUBSCRIBER GROUP	0.00			
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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 Group \$ 0.00			Base Rate Fee Fourth	Group	\$	0.00				
Base Rate Fee: Add the Enter here and in block			ber group a	s shown in the boxes ab	ove.	\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861									
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP			
ONE HUNDRED THIR	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED THIRT	Y-FOURTH	SUBSCRIBER GROUP		•	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
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Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	l Group	\$	0.00		
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Base Rate Fee Third Group \$ 0.00			Base Rate Fee Fourth	Group	\$	0.00			
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Base Rate Fee: Add the Enter here and in block 3			oer group a	s snown in the boxes abo	ove.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861									
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP			
ONE HUNDRED THIRTY-	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED THIR	TY-EIGHTH	SUBSCRIBER GROUP		0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
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	ross Receipts First Group \$ 0.00			Gross Receipts Second	d Group	\$	0.00		
Base Rate Fee First Gro		\$	0.00	Base Rate Fee Second		\$	0.00		
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Base Rate Fee: Add the Enter here and in block 3			per group a	s snown in the boxes abo	ove.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861									
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP			
ONE HUNDRED FOR	RTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED FORT	Y-SECOND	SUBSCRIBER GROUP		0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation	
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Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Second	d Group	\$	0.00		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	l Group	\$	0.00		
ONE HUNDRED FOR	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED FORT	Y-FOURTH	SUBSCRIBER GROUP			
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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 a	II s shown in the boxes abo	ove.				
Enter here and in block 3				\$					

LEGAL NAME OF OWNER CINCINNATI BELL			S, LLC			SY	STEM ID# 62861	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
ONE HUNDRED FOR	RTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED FO	RTY-SIXTH	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
						=		Syndicated
								Exclusivity
								Surcharge
								for
								Partially
	<u></u>							Distant
						-	<u></u>	Stations
	-				<u></u>		<u></u>	
	 						-	
	 						-	
								
								
Total DSEs	!!		0.00	Total DSEs		! I	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	
ONE HUNDRED FORTY-	SEVENTH	SUBSCRIBER GROUP		 	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	
Base Rate Fee: Add the Enter here and in block 3			ber group a	s shown in the boxes ab	ove.	\$		
	•	•						

LEGAL NAME OF OWNER CINCINNATI BELL			s, LLC			SY	STEM ID# 62861	Name
B ONE HUNDRED FORT				TE FEES FOR EACH		BER GROUP SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
	ļ							
Total DSEs	!	!	0.00	Total DSEs	ļ	!!	0.00	
Gross Receipts First Gro	nun	\$	0.00	Gross Receipts Second	l Group	\$	0.00	
Gloss Receipts I list Glo	лир		0.00	Oross Neceipts decond	ТОГОЦР	<u> </u>	0.00	
Base Rate Fee First Gro		\$	0.00	Base Rate Fee Second		\$	0.00	
	TY-FIRST	SUBSCRIBER GROU		11	'-SECOND	SUBSCRIBER GROUP	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	 							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the	base rate	e fees for each subscri	per group a	s shown in the boxes abo	ove.			
Enter here and in block			3			\$		

LEGAL NAME OF OWNER CINCINNATI BELL			s, LLC			SY	STEM ID# 62861	Name
ONE HUNDRED FIFT		COMPUTATION OF SUBSCRIBER GROU	D			BER GROUP SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								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		\$		Base Rate Fee Second		\$	0.00	
	TY-FIFTH	SUBSCRIBER GROU	0	11	-TY-SIXTH	SUBSCRIBER GROUP	0	
COMMUNITY/ AREA			U	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	ļ							
	 							
	 							
Total DSEs	1		0.00	Total DSEs	1		0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
	•	<u>·</u>				·		
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 subscril	oer group a	s shown in the boxes abo	ove.			
Enter here and in block 3			5 1 -			\$		

LEGAL NAME OF OWNER CINCINNATI BELL			s, LLC			SY	STEM ID# 62861	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 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
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							<u> </u>	
Total DSEs	<u> </u>		0.00	Total DSEs	ļ	<u> </u>	0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
							1	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	l 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	
								
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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	
Dana Bata Francis Aller	haas	. fana fan ar 1 - 1 - 1						
Base Rate Fee: Add the Enter here and in block 3			ver group a	is snown in the boxes abo	ove.	\$		

BISOCK A COMPUTATION OF BASE PATE FEES FOR EACH SUBSCRIBER GROUP FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP SERVING SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP SEC	LEGAL NAME OF OWNER						S	SYSTEM ID#	Name
SICOMO SUBSCRIBER GROUP	CINCINNATI BELL	EXTEND	DED TERRITORIE	S, LLC				62861	Name
CALL SIGN DSE CA	E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACI	H SUBSCR	IBER GROUP		
CALL SIGN DSE CA		FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GROU	JP	•
CALL SIGN	COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
Base Rate Fee and syndicated Exclusivity Distant Stations	CALL SIGN	DSF	CALL SIGN	DSF	CALL SIGN	DSF	CALL SIGN	DSF	
Syndicated Exclusivity Surcharge for Partially Distant Stations Total DSEs									
Exclusivity Surcharge for Partially Distant Stations Total DSEs 0.00 Total DSEs 0.00 THIRD SUBSCRIBER GROUP COMMUNITY AREA 0 Total DSE CALL SIGN DSE C									and
Surcharge for Partially Distant Stations									Syndicated
For partially platant Stations Total DSEs O.00 Gross Receipts First Group Third Subscriber Group Total DSEs CALL SIGN DSE CALL									Exclusivity
Partially Distant Stations Total DSEs O.00 Gross Receipts First Group 3 38,244,381.89 Gross Receipts Second Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN D									Surcharge
Distant Stations Total DSEs O.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE									
Stations Statio									Partially
Total DSEs O.00 Gross Receipts First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL									
Gross Receipts First Group S 38,244,381.89 Gross Receipts Second Group S 1,520,427.43 Base Rate Fee First Group S 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE									Stations
Gross Receipts First Group S 38,244,381.89 Gross Receipts Second Group S 1,520,427.43 Base Rate Fee First Group S 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE									
Gross Receipts First Group S 38,244,381.89 Gross Receipts Second Group S 1,520,427.43 Base Rate Fee First Group S 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE									
Gross Receipts First Group S 38,244,381.89 Gross Receipts Second Group S 1,520,427.43 Base Rate Fee First Group S 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE									
Gross Receipts First Group S 38,244,381.89 Gross Receipts Second Group S 1,520,427.43 Base Rate Fee First Group S 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE				·					
Gross Receipts First Group S 38,244,381.89 Gross Receipts Second Group S 1,520,427.43 Base Rate Fee First Group S 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE									
Gross Receipts First Group S 38,244,381.89 Gross Receipts Second Group S 1,520,427.43 Base Rate Fee First Group S 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE	Total DSEs			0.00	Total DSEs		Щ	0.00	
THIRD SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE CA	Gross Receipts First Gr	roup	\$ 38,244		Gross Receipts Seco	nd Group	s 1,5	520,427.43	
THIRD SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE CA									
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIG	Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
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 DS		THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GROU	JP	
Total DSEs	COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 8,964.93 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.	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 8,964.93 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.									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 8,964.93 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.									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 8,964.93 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.									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 8,964.93 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.									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 8,964.93 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.									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 8,964.93 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.									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 8,964.93 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.									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 8,964.93 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.									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 8,964.93 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.									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 8,964.93 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.									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 8,964.93 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.									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 8,964.93 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.									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 8,964.93 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.									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 8,964.93 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.	Total DSEs			0.00	Total DSEs		П	0.00	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00		iroun	<u> </u>			h Group	\$		
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	C.033 Neceipis IIIII G	oup	*	3.00	S1000 Necelpts Fourt	O.Oup	*	0,007.00	
	Base Rate Fee Third G	Froup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
					и				
				iber group a	as shown in the boxes a	ibove.	\$	0.00	

LEGAL NAME OF OWNER						\$	SYSTEM ID#	Name
CINCINNATI BELL	EXTEND	ED TERRITORIE	S, LLC				62861	name
	LOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	^
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
CALL GIOIN	DOL	CALL GIGIN	DOL	OALE GIGIN	DOL	CALL SIGIV	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
	-		 					
	-		···					
Total DSEs		!	0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$ 3	3,552.17	Gross Receipts Secon	nd Group	\$	0.00	
·	•			·	,			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
;	SEVENTH	SUBSCRIBER GRO	UP		EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	-		···					
	<u> </u>							
	ļ							
	<u>-</u>		<mark></mark>					
	 							
Total DSEs	1		0.00	Total DSEs		П	0.00	
Gross Receipts Third G	roun	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Cross Medeibre Hilling G	Jup	<u>*</u>	0.00	O1033 Neceibis Fourti	i Group	4	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNE						\$	SYSTEM ID#	Namo
CINCINNATI BELL	EXTEND	ED TERRITORIE	S, LLC				62861	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EACH	H SUBSCR	IBER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
3.122.533								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
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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 Second	nd Group	\$	0.00	
I	ELEVENTH	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	
					····			
			···		·····			
			···					
	••••							
								
Total DSEs			0.00	Total DSEs		П	0.00	
Gross Receipts Third (- -	•	0.00	Gross Receipts Fourt	h Group	•	0.00	
Cross Necelhis IIIII (ο υ μ	\$	0.00	Orosa Neceibia Lonii	ii Oioup	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes a	bove.	\$		

	EXTEND	DED TERRITORI	ES, LLC				62861	Name
				TE FEES FOR EAC				
	IRTEENTH	SUBSCRIBER GRO		li .		SUBSCRIBER GRO	_	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fo
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
						··		• • • • • • • • • • • • • • • • • • • •
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
·					·			
Base Rate Fee First G	roup		0.00	Base Rate Fee Sec	and Croup		0.00	
Sase Nate Fee First C	поир	\$	0.00	Dase Nate Fee Sec	ond Group	\$	0.00	
F	IFTEENTH	SUBSCRIBER GRO	DUP		SIXTEENTH	SUBSCRIBER GRO	LID	
				 	OIXTELITI	1 30D3CINDLIN GINO	OUP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		1 SOBSCRIBER GRO	0	
CALL SIGN	DSE	CALL SIGN		COMMUNITY/ AREA		CALL SIGN	_	
	DSE	CALL SIGN	0				0	
	DSE	CALL SIGN	0				0	
	DSE	CALL SIGN	0				0	
	DSE	CALL SIGN	0				0	
	DSE	CALL SIGN	0				0	
	DSE	CALL SIGN	0				0	
	DSE	CALL SIGN	0				0	
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	DSE	CALL SIGN	0				0	
	DSE	CALL SIGN	0				0	
	DSE	CALL SIGN	0				0	
	DSE	CALL SIGN	0				0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			DSE	
CALL SIGN			0 DSE	CALL SIGN Total DSEs	DSE	CALL SIGN	0 DSE	
CALL SIGN		CALL SIGN	DSE	CALL SIGN	DSE		DSE	
CALL SIGN CALL SIGN Fotal DSEs Gross Receipts Third (Group	\$	0.00 0.00	Total DSEs Gross Receipts Fou	DSE DSE	\$	0 DSE	
CALL SIGN	Group		0 DSE	CALL SIGN Total DSEs	DSE DSE	CALL SIGN	0 DSE	

LEGAL NAME OF OWN CINCINNATI BEL			ES, LLC				62861	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		T .		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 Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	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	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	
				II.				
Base Rate Fee: Add Enter here and in bloo			criber group a	s shown in the boxes	above.	\$		

LEGAL NAME OF OWNI			ES, LLC				SYSTEM ID# 62861	Name
				ATE FEES FOR EAC				
TWE	NTY-FIRST	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA) SUBSCRIBER GRO	0 0	9
0.1.1.0.001	1 505					II out oou	505	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fe
								and
								Syndicated
	••••							Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Second	ond Group	\$	0.00	
TWE	NTY-THIRD	SUBSCRIBER GRO	DUP	TWEN	NTY-FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	•••••				·····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
•	-							
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN CINCINNATI BEL			ES, LLC				SYSTEM ID# 62861	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		Ħ		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 Fe
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GRO	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	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	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	
				II.				
Base Rate Fee: Add Enter here and in bloo			criber group a	s shown in the boxes	above.	\$		

	EXTEND	DED TERRITORII	ES, LLC				62861	Name
				TE FEES FOR EAC				
	ITY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GRO	_	9
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
•	·				•			
ase Rate Fee First G	roup		0.00	Bass Bats Fac Cass			0.00	
ase nate ree i list Gi	OUD							
	•	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GRO	•	
		-			TY-SECOND		•	
THIF		-	DUP	THIR	TY-SECOND		UP	
THIF OMMUNITY/ AREA	RTY-FIRST	SUBSCRIBER GRO	0 0	THIR COMMUNITY/ AREA	TY-SECOND) SUBSCRIBER GRO	UP 0	
THIF OMMUNITY/ AREA	RTY-FIRST	SUBSCRIBER GRO	0 0	THIR COMMUNITY/ AREA	TY-SECOND) SUBSCRIBER GRO	UP 0	
THIF OMMUNITY/ AREA	RTY-FIRST	SUBSCRIBER GRO	0 0	THIR COMMUNITY/ AREA	TY-SECOND) SUBSCRIBER GRO	UP 0	
THIF OMMUNITY/ AREA	RTY-FIRST	SUBSCRIBER GRO	0 0	THIR COMMUNITY/ AREA	TY-SECOND) SUBSCRIBER GRO	UP 0	
THIF OMMUNITY/ AREA	RTY-FIRST	SUBSCRIBER GRO	0 0	THIR COMMUNITY/ AREA	TY-SECOND) SUBSCRIBER GRO	UP 0	
THIF OMMUNITY/ AREA	RTY-FIRST	SUBSCRIBER GRO	0 0	THIR COMMUNITY/ AREA	TY-SECOND) SUBSCRIBER GRO	UP 0	
THIF OMMUNITY/ AREA	RTY-FIRST	SUBSCRIBER GRO	0 0	THIR COMMUNITY/ AREA	TY-SECOND) SUBSCRIBER GRO	UP 0	
THIF OMMUNITY/ AREA	RTY-FIRST	SUBSCRIBER GRO	0 0	THIR COMMUNITY/ AREA	TY-SECOND) SUBSCRIBER GRO	UP 0	
THIF OMMUNITY/ AREA	RTY-FIRST	SUBSCRIBER GRO	0 0	THIR COMMUNITY/ AREA	TY-SECOND) SUBSCRIBER GRO	UP 0	
THIF OMMUNITY/ AREA	RTY-FIRST	SUBSCRIBER GRO	0 0	THIR COMMUNITY/ AREA	TY-SECOND) SUBSCRIBER GRO	UP 0	
THIF OMMUNITY/ AREA	RTY-FIRST	SUBSCRIBER GRO	0 0	THIR COMMUNITY/ AREA	TY-SECOND) SUBSCRIBER GRO	UP 0	
THIF OMMUNITY/ AREA	RTY-FIRST	SUBSCRIBER GRO	0 0	THIR COMMUNITY/ AREA	TY-SECOND) SUBSCRIBER GRO	UP 0	
THIF OMMUNITY/ AREA	RTY-FIRST	SUBSCRIBER GRO	0 0	THIR COMMUNITY/ AREA	TY-SECOND) SUBSCRIBER GRO	UP 0	
THIF OMMUNITY/ AREA CALL SIGN	RTY-FIRST	SUBSCRIBER GRO	DUP 0	THIR COMMUNITY/ AREA CALL SIGN	TY-SECOND) SUBSCRIBER GRO	DSE	
THIF OMMUNITY/ AREA CALL SIGN btal DSEs	DSE DSE	CALL SIGN	DUP O DSE O O O O O O O O O O O O O	THIR COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	DSE 0.00	
THIF OMMUNITY/ AREA CALL SIGN	DSE DSE	SUBSCRIBER GRO	DUP 0	THIR COMMUNITY/ AREA CALL SIGN	DSE) SUBSCRIBER GRO	DSE	
THIF OMMUNITY/ AREA CALL SIGN btal DSEs ross Receipts Third G	DSE DSE DSFORD	SUBSCRIBER GRO	0.00 0.00	THIR COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Four	DSE DSE	SUBSCRIBER GRO	0.00 0.00	
THIF OMMUNITY/ AREA CALL SIGN btal DSEs	DSE DSE DSFORD	CALL SIGN	DUP O DSE O O O O O O O O O O O O O	THIR COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE	CALL SIGN	DSE 0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
				TE FEES FOR EAC				
		SUBSCRIBER GRO		Ħ		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 Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Second Group \$ 0.00				
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO		1		SUBSCRIBER GRO	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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	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 Enter here and in bloo			criber group a	s shown in the boxes	apove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
THIRT		COMPUTATION C SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP	UP	_
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
				TE FEES FOR EAC				
	RTY-FIRST	SUBSCRIBER GRO		Ħ		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 Fe
								and
			····					Syndicated Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Sec	Gross Receipts Second Group \$ 0.00			
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	RTY-THIRD	SUBSCRIBER GRO				SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	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	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	-F	·			F	·		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				II.				
Base Rate Fee: Add Enter here and in bloc			criber group a	s shown in the boxes	above.	\$		

LEGAL NAME OF OWNE						(SYSTEM ID#	Name
CINCINNATI BELI	EXTEND	DED TERRITORIE	ES, LLC				62861	Hame
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EACH	H SUBSCR	IBER GROUP		
FO	RTY-FIFTH	SUBSCRIBER GRO	UP	FC	ORTY-SIXTH	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			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	
FORTY	-SEVENTH	SUBSCRIBER GRO	UP	FOF	RTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						H		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
C.000 Receipts Hill (J.0up		0.00	O O O O O O O O O O O O O O O O O O O	Oroup	•	<u> </u>	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group a	as shown in the boxes a	ibove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
				TE FEES FOR EAC				
COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		SUBSCRIBER GRO	UP 0	9
COMMUNITY AREA				COMMUNITY ARE	···			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
			·····					Stations
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Sec	ond Group	\$		
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GRO)UP 0	COMMUNITY/ ARE		SUBSCRIBER GRO	0P	
OOMMONT 1774CE				COMMONT IT TO THE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				<u>II</u>				
Base Rate Fee: Add	the base rat	e fees for each subs	criber group a	as shown in the boxes	above.			
Enter here and in blo			J 1			\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
				TE FEES FOR EAC				
COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		SUBSCRIBER GRO	UP 0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fe
								and
								Syndicated
								Exclusivity Surcharge
			····					for
								Partially
								Distant Stations
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Sec	ond Group			
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO		001441117774		SUBSCRIBER GRO	UP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		II	0.00	Total DSEs			0.00	
Gross Receipts Third	l 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	
				Ш				
Base Rate Fee: Add Enter here and in blo			criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
	BLOCK A:	COMPUTATION C	OF BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
		SUBSCRIBER GRO		Ħ		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
			·····					
Total DSEs		Ш	0.00	Total DSEs		ļļ.	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)UP		SIXTIETH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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 Enter here and in blo			criber group a	s shown in the boxes	above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861									
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP				
		SUBSCRIBER GRO				SUBSCRIBER GRO	UP	^		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	٩		0	9 Commutation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
OALL GIGIN	DOL	CALL SIGIV	DOL	CALL SIGIV	DOL	CALL SIGIN	DOL	Base Rate Fe		
			·····					and		
			·····					Syndicated		
			····					Exclusivity		
								Surcharge		
								for		
								Partially		
								Distant		
								Stations		
Total DSEs	•		0.00	Total DSEs	·		0.00			
ross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00			
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Sec	ond Group	\$	0.00			
SIX	(TY-THIRD	SUBSCRIBER GRO	UP	SIZ	XTY-FOURTH	SUBSCRIBER GRO	UP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٩		0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
			<mark></mark>	.						
			·····				······			
			····							
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	Broup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00			
Base Rate Fee: Add th		e fees for each subspace L (page 7)	criber group a	as shown in the boxes	above.	\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
		SUBSCRIBER GRO		H		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DOFa			0.00	Total DSEs			0.00	
otal DSEs 0.00 Gross Receipts First Group \$ 0.00				Gross Receipts Sec	and Group	\$	0.00	
sioss receipts riist Group				Cross rescipte cos	ond Group	<u>*</u>		
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	0.00	
SIXTY	'-SEVENTH	SUBSCRIBER GRO	UP	S	IXTY-EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<mark></mark>					
			·····				······	
	••••		·····		·····			
Total DSEs		II	0.00	Total DSEs		II	0.00	
	Group	¢	0.00		rth Group	¢	0.00	
Gross Receipts Third	Эгоир	\$	0.00	Gross Receipts Fou	iui Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Foun	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
				TE FEES FOR EAC				
	XTY-NINTH	SUBSCRIBER GRO		T .		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 Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
								:
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Sec	ond Group	0.00		
Base Rate Fee First (\$	0.00	Base Rate Fee Sec		\$	0.00	:
	NTY-FIRST	SUBSCRIBER GRO				SUBSCRIBER GRO	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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	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	
				II.				
Base Rate Fee: Add t Enter here and in bloc			criber group a	s shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
				TE FEES FOR EAC				
		SUBSCRIBER GRO		ii .		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 Fe
					<u></u>			and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Second Group \$ 0.00				
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
					<u></u>			
					<u></u>			
					<u></u>			
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	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				Ш				
Base Rate Fee: Add Enter here and in blo			criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
		SUBSCRIBER GRO		Ħ		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 Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
			····					Stations
			••••					
		<u> </u>	0.00			Ш	0.00	
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-NINTH	SUBSCRIBER GRO)UP		EIGHTIETH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		11	0.00	Total DSEs		-11	0.00	
Gross Receipts Third	l Group	•	0.00	Gross Receipts Fou	rth Group	•	0.00	
oross Medelbis Tillico	і Этоир	\$	0.00	Gross Receipts Fou	rai Gioup	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	as shown in the boxes	above.	\$		

	GAL NAME OF OWNER OF CABLE SYSTEM: INCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
	BLOCK A:	COMPUTATION (OF BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP			
EIG	HTY-FIRST	SUBSCRIBER GRO	DUP	li .		SUBSCRIBER GRO	UP	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
OALL SIGIN	DOL	OALE GIGIT	DOL	CALL GIOIN	DOL	CALL SIGIN	DOL	Base Rate Fe	
								and	
			•••••		·····			Syndicated	
			•••••		·····			Exclusivity	
	•••••							Surcharge	
								for	
								Partially	
								Distant	
								Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
EIG	HTY-THIRD	SUBSCRIBER GRO	DUP	EIGH	TY-FOURTH	SUBSCRIBER GRO	UP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
				.					
							·····		
	····								
	••••								
Total DSEs			0.00	Total DSEs			0.00		
					rth Crows	*	0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	iui Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
Base Rate Fee: Add t			criber group a	as shown in the boxes	above.	\$			

	GAL NAME OF OWNER OF CABLE SYSTEM: INCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP			
		SUBSCRIBER GRO		H		SUBSCRIBER GRO	UP	•	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fe	
	••••		••••					and	
	••••		••••					Syndicated	
								Exclusivity	
								Surcharge	
								for	
								Partially	
								Distant	
								Stations	
	••••		••••						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
							1		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
EIGHTY	-SEVENTH	SUBSCRIBER GRO)UP	EIG	HTY-EIGHTH	SUBSCRIBER GRO	UP		
COMMUNITY/ AREA			0	COMMUNITY/ 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		
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Croos Necelpis IIIII (J. σαμ	•	0.00	S1000 Receipts Fou	an Oroup	*	<u> </u>		
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
				<u>II</u>					
Base Rate Fee: Add the Enter here and in block			criber group a	as shown in the boxes	above.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
				TE FEES FOR EAC			LID	
COMMUNITY/ AREA		SUBSCRIBER GRO	0	COMMUNITY/ ARE		I SUBSCRIBER GRO	UP 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fe
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Tatal DCTa		<u> </u>	0.00	Total DSEs		1	0.00	
Total DSEs	0				10			
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	
NII	NETY-FIRST	SUBSCRIBER GRO)UP	NINE	ETY-SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		II	0.00	Total DSEs		II	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	- ·· r *	·				·		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	s shown in the boxes	above.	\$		

EGAL NAME OF OWNER OF CABLE SYSTEM: SINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
	BLOCK A:	COMPUTATION C	OF BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
NIN	ETY-THIRD	SUBSCRIBER GRO	DUP	NINE	TY-FOURTH	SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	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
			••••		·····			Surcharge
	••••		••••					for
								Partially
		+						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
NIN	ETY-FIFTH	SUBSCRIBER GRO	DUP	N	INETY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····				······	
						··		
Total DSEs			0.00	Total DSEs			0.00	
							_	
Gross Receipts Third	опоир	\$	0.00	Gross Receipts Fou	ıııı Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Foun	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
				TE FEES FOR EAC				
		SUBSCRIBER GRO		Ħ		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 Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO		#		SUBSCRIBER GRO	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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	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	
				Ш				
Base Rate Fee: Add Enter here and in bloo			criber group a	s shown in the boxes	above.	\$		

LEGAL NAME OF OWNE						S	SYSTEM ID#	Name
CINCINNATI BELL	EXTEND	ED TERRITORIE	S, LLC				62861	Name
				TE FEES FOR EACH	SUBSCR	BER GROUP		
ONE HUNDS	RED FIRST	SUBSCRIBER GROU	UP	ONE HUNDRE	D SECOND	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	Dec	CALLSION	Dec	CALLEICN	Dec	I CALL SIGN	DOE	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
					•••••••			and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
						-		Distant
								Stations
						-		
						-		
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDR	ED THIRD	SUBSCRIBER GROU	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>					
			<u></u>					
Total DSEs			0.00	Total DSEs		Ш	0.00	
Gross Possints Third G	roup	¢	0.00	Gross Possints Fourth	Group	¢	0.00	
Gross Receipts Third G	ioup	\$	0.00	Gross Receipts Fourth	г Эгоир	\$	3.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group a	as shown in the boxes at	bove.	\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
				TE FEES FOR EAC					
9		SUBSCRIBER GROU	RED SIXTH	ii ee		SUBSCRIBER GRO	RED FIFTH		
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate I									
and Syndicate									
Exclusivit									
Surcharg									
for									
Partially Distant									
Stations		-							
				T-4-1 DOE-	0.00			otal DSEs	
	0.00								
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	Group	ross Receipts First G	
	_	\$	d Group			\$	Group	ross Receipts First G	
	_	\$				\$	·	·	
	0.00		d Group	Gross Receipts Seco	0.00 0.00		Group	ase Rate Fee First G	
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	Group	ase Rate Fee First G	
	0.00	\$	d Group	Gross Receipts Seco	0.00 0.00	\$	Group	ONE HUNDRED	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDF COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	SEVENTH	ONE HUNDRED	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDF COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	SEVENTH	ONE HUNDRED	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDF COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	SEVENTH	ONE HUNDRED	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDF COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	SEVENTH	ONE HUNDRED	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDF COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	SEVENTH	ONE HUNDRED	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDF COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	SEVENTH	ONE HUNDRED	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDF COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	SEVENTH	ONE HUNDRED	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDF COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	SEVENTH	ONE HUNDRED	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDF COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	SEVENTH	ONE HUNDRED COMMUNITY/ AREA CALL SIGN	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDF COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	SEVENTH	ONE HUNDRED	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDF COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	SEVENTH	ONE HUNDRED	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDF COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	SEVENTH	ONE HUNDRED	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDF COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	SEVENTH	ONE HUNDRED OMMUNITY/ AREA CALL SIGN	
	0.00 0.00 DSE	\$ SUBSCRIBER GROU	d Group ED EIGHTH DSE	Gross Receipts Seco Base Rate Fee Seco ONE HUNDE COMMUNITY/ AREA CALL SIGN	0.00 0.00 DSE	\$ SUBSCRIBER GRO	DSE DSE	ONE HUNDRED OMMUNITY/ AREA CALL SIGN otal DSEs	
	0.00 0.00 DSE 0.00 0.00	SUBSCRIBER GROU	d Group ED EIGHTH DSE	Gross Receipts Seco Base Rate Fee Seco ONE HUNDE COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 0.00 DSE 0.00	SUBSCRIBER GRO	DSE DSE	ONE HUNDRED	
	0.00 0.00 DSE 0.00 0.00	SUBSCRIBER GROU	DSE Group	Gross Receipts Seco Base Rate Fee Seco ONE HUNDE COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 0.00 DSE 0.00	SUBSCRIBER GRO	DSE DSE	ONE HUNDRED OMMUNITY/ AREA CALL SIGN otal DSEs	

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								Name
							62861	
				TE FEES FOR EACH				
ONE HUNDR COMMUNITY/ AREA	FD NINTH	SUBSCRIBER GROU	JP 0	ONE HUNDR	KED TENTH	SUBSCRIBER GROU	JP 0	9
COMMUNITY/ AREA			U	COMMUNITY/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
	<u> </u>							Exclusivity Surcharge
	<u> </u>		···		···	-		for
								Partially
								Distant
								Stations
	<u> </u>							
	·		···					
Total DSEs			0.00	Total DSEs			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	ıd Group	\$	0.00	
ONE HUNDRED E	LEVENTH	SUBSCRIBER GROU	JP	ONE HUNDRED	TWELVTH	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		II	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
C.000 Neverbis IIII d	· Jup	*	0.00	S1000 Receipts Fourth	, Jioup	*	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes ab	oove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								Name
							62861	
				TE FEES FOR EACH				
ONE HUNDRED THI	RTEENTH	SUBSCRIBER GROU		li .	URTEENTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
	·							for
								Partially
								Distant
								Stations
						-		
			·					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	id Group	\$	0.00	
ONE HUNDRED FI	FTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED S	SIXTEENTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
	-					-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
		·		Sizzz Nossipio Fodiui	-:	·		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes ab	oove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
				TE FEES FOR EAC				
		SUBSCRIBER GROUI		Ħ		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 Fee
								and Syndicated
			·····					Exclusivity
								Surcharge
								for
			·····					Partially Distant
								Stations
								•
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	:
		SUBSCRIBER GRO				SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	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	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	J. J. J.	·						
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				II				
Base Rate Fee: Add Enter here and in bloo			criber group a	s shown in the boxes	above.	\$		

CINCINNATI BELL EXTENI						
BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EACH	SUBSCRI	IBER GROUP	
ONE HUNDRED TWENTY-FIRST	SUBSCRIBER GROUP		1		SUBSCRIBER GROUP	
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		<u> </u>				
		<u> </u>				
		<u></u>				
	-	<u>-</u>				
		<u>-</u>				
		<u>-</u>		····		
		<u> </u>				
al DSEs		0.00	Total DSEs			0.00
s Receipts First Group \$ 0.00			Gross Receipts Secon	nd Group	\$	0.00
ss receipts i list Group	Trecepts I list Gloup • 0.00					
ss Neceipis i list Group			·			
	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00
e Rate Fee First Group			Base Rate Fee Secon		\$ I SUBSCRIBER GROUP	
e Rate Fee First Group NE HUNDRED TWENTY-THIRD			Base Rate Fee Secon	NTY-FOURTH		
Rate Fee First Group NE HUNDRED TWENTY-THIRD MUNITY/ AREA)	Base Rate Fee Secon	NTY-FOURTH		
Rate Fee First Group IE HUNDRED TWENTY-THIRD MUNITY/ AREA	SUBSCRIBER GROUP	0	Base Rate Fee Secon ONE HUNDRED TWEN COMMUNITY/ AREA	NTY-FOURTH	I SUBSCRIBER GROUP	0
e Rate Fee First Group NE HUNDRED TWENTY-THIRD IMUNITY/ AREA	SUBSCRIBER GROUP	0	Base Rate Fee Secon ONE HUNDRED TWEN COMMUNITY/ AREA	NTY-FOURTH	I SUBSCRIBER GROUP	0
Rate Fee First Group NE HUNDRED TWENTY-THIRD IMUNITY/ AREA	SUBSCRIBER GROUP	0	Base Rate Fee Secon ONE HUNDRED TWEN COMMUNITY/ AREA	NTY-FOURTH	I SUBSCRIBER GROUP	0
e Rate Fee First Group NE HUNDRED TWENTY-THIRD IMUNITY/ AREA	SUBSCRIBER GROUP	0	Base Rate Fee Secon ONE HUNDRED TWEN COMMUNITY/ AREA	NTY-FOURTH	I SUBSCRIBER GROUP	0
e Rate Fee First Group DIE HUNDRED TWENTY-THIRD MMUNITY/ AREA	SUBSCRIBER GROUP	0	Base Rate Fee Secon ONE HUNDRED TWEN COMMUNITY/ AREA	NTY-FOURTH	I SUBSCRIBER GROUP	0
DE Rate Fee First Group ONE HUNDRED TWENTY-THIRD MMUNITY/ AREA	SUBSCRIBER GROUP	0	Base Rate Fee Secon ONE HUNDRED TWEN COMMUNITY/ AREA	NTY-FOURTH	I SUBSCRIBER GROUP	0
DE Rate Fee First Group ONE HUNDRED TWENTY-THIRD MMUNITY/ AREA	SUBSCRIBER GROUP	0	Base Rate Fee Secon ONE HUNDRED TWEN COMMUNITY/ AREA	NTY-FOURTH	I SUBSCRIBER GROUP	0
DE Rate Fee First Group ONE HUNDRED TWENTY-THIRD MMUNITY/ AREA	SUBSCRIBER GROUP	0	Base Rate Fee Secon ONE HUNDRED TWEN COMMUNITY/ AREA	NTY-FOURTH	I SUBSCRIBER GROUP	0
SE Rate Fee First Group ONE HUNDRED TWENTY-THIRD MMUNITY/ AREA	SUBSCRIBER GROUP	0	Base Rate Fee Secon ONE HUNDRED TWEN COMMUNITY/ AREA	NTY-FOURTH	I SUBSCRIBER GROUP	0
se Rate Fee First Group DNE HUNDRED TWENTY-THIRD MMUNITY/ AREA	SUBSCRIBER GROUP	0	Base Rate Fee Secon ONE HUNDRED TWEN COMMUNITY/ AREA	NTY-FOURTH	I SUBSCRIBER GROUP	0
se Rate Fee First Group DNE HUNDRED TWENTY-THIRD MMUNITY/ AREA	SUBSCRIBER GROUP	0	Base Rate Fee Secon ONE HUNDRED TWEN COMMUNITY/ AREA	NTY-FOURTH	I SUBSCRIBER GROUP	0
se Rate Fee First Group DNE HUNDRED TWENTY-THIRD MMUNITY/ AREA	SUBSCRIBER GROUP	0	Base Rate Fee Secon ONE HUNDRED TWEN COMMUNITY/ AREA	NTY-FOURTH	I SUBSCRIBER GROUP	0
se Rate Fee First Group DNE HUNDRED TWENTY-THIRD MMUNITY/ AREA	SUBSCRIBER GROUP	0	Base Rate Fee Secon ONE HUNDRED TWEN COMMUNITY/ AREA	NTY-FOURTH	I SUBSCRIBER GROUP	0
SE Rate Fee First Group ONE HUNDRED TWENTY-THIRD MMUNITY/ AREA CALL SIGN DSE	SUBSCRIBER GROUP	DSE	Base Rate Fee Secon ONE HUNDRED TWEN COMMUNITY/ AREA CALL SIGN	NTY-FOURTH	I SUBSCRIBER GROUP	DSE
SE RATE FEE FIRST GROUP ONE HUNDRED TWENTY-THIRD OMMUNITY/ AREA CALL SIGN DSE tal DSEs	CALL SIGN	0 DSE	Base Rate Fee Second ONE HUNDRED TWENT COMMUNITY AREA CALL SIGN	DSE	CALL SIGN	0 DSE
ONE HUNDRED TWENTY-THIRD DMMUNITY/ AREA CALL SIGN DSE	SUBSCRIBER GROUP	DSE	Base Rate Fee Secon ONE HUNDRED TWEN COMMUNITY/ AREA CALL SIGN	DSE	I SUBSCRIBER GROUP	DSE
ONE HUNDRED TWENTY-THIRD	CALL SIGN	0 DSE	Base Rate Fee Second ONE HUNDRED TWENT COMMUNITY AREA CALL SIGN	DSE h Group	CALL SIGN	0 DSE

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861								
0115				TE FEES FOR EAC				
ONE HUNDRED TO COMMUNITY/ AREA		SUBSCRIBER GROUI	P 0	ONE HUNDRED T		SUBSCRIBER GROUF	0	9
		II				П		Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
		H	·····					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	-	\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GROU				SUBSCRIBER GROUP	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
	1.0						•	
Gross Receipts Third	i Group	\$	0.00	Gross Receipts Fou	rm Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				U.				
Base Rate Fee: Add Enter here and in blo			criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861						Name		
							62861	
			BASE RA	ATE FEES FOR EACH				
COMMUNITY/ AREA	INI Y-NINIH	SUBSCRIBER GROUP	0	ONE HUNDRED THIRTIETH SUBSCRIBER GROUP COMMUNITY/ AREA 0			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	nge	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
								and
								Syndicated
								Exclusivity
						-		Surcharge
						-		for
						-		Partially Distant
					···			Stations
	-		ļ					
Total DSEs			0.00	Total DSEs		Ш	0.00	
Gross Receipts First Group \$ 0.00			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	
ONE HUNDRED THI	RTY-FIRST	SUBSCRIBER GROUP			TY-SECOND	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 G	iroup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			iber group a	as shown in the boxes ab	oove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861						Name		
		COMPUTATION OF SUBSCRIBER GROUP	BASE RA	TE FEES FOR EACH				
COMMUNITY/ AREA			0	COMMUNITY/ AREA	ONE HUNDRED THIRTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0			9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
						-		Stations
	<u></u>							
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	id Group	\$	0.00	
ONE HUNDRED THIS	RTY-FIFTH	SUBSCRIBER GROU	JP	ONE HUNDRED THI	RTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
								
	···				<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			iber group a	as shown in the boxes ab	oove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861						Name		
E ONE HUNDRED THIRTY			BASE RA	ATE FEES FOR EACH		BER GROUP SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
					<u></u>			Exclusivity
								Surcharge
								for
					<u> </u>			Partially Distant
								Stations
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			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	
ONE HUNDRED THIR	TY-NINTH	SUBSCRIBER GROU	JP	ONE HUNDRED	FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes ab	oove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861						Name		
				TE FEES FOR EACH	SUBSCRI	BER GROUP		
ONE HUNDRED FO	ORTY-FIRST	SUBSCRIBER GROUP	0	ONE HUNDRED FOR COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROUP	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
						-		Partially Distant
								Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FO	RTY-THIRD	SUBSCRIBER GROUP			TY-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	1		0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes at	oove.	\$		

LEGAL NAME OF OWNER CINCINNATI BELL			S, LLC			S	62861	Name
				TE EEEO EOO EAO::	CLIDOOD.	DED ODOUR	02001	
		SUBSCRIBER GROUP	BASE KA	ONE HUNDRED FO		SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0			9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
	.							
	†							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			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	RTY-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	1		0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oun.	e	0.00	Base Rate Fee Fourth	Group	¢	0.00	
Daso Rato 1 66 THII O		\$	0.00	Dago Nato i Ge i Guitti	Отоир	\$	3.00	
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes ab	ove.	\$		

LEGAL NAME OF OWN CINCINNATI BEL			ES, LLC			,	62861	Name
				TE FEES FOR EAC				
ONE HUNDRED FO	RTY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	٩		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
			····					Exclusivity Surcharge
						··		for
								Partially
								Distant
								Stations
			····					
Total DSEs			0.00	Total DSEs			0.00	
			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 F	IFTY-FIRST	SUBSCRIBER GRO	UP	ONE HUNDRED FIR	TY-SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····					
			·····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
		·			p			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN			ES, LLC			:	SYSTEM ID# 62861	Name
ONE HUNDRED F		COMPUTATION C SUBSCRIBER GRC		TE FEES FOR EAC		IBER GROUP	UP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	GN DSE CALL SIGN DSE CALL SIGN DSE				DSE	Computation of		
								Base Rate Fee
			····					and Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED	FIFTY-FIFTH	SUBSCRIBER GRO)UP	ONE HUNDRED	FIFTY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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 Enter here and in blo			criber group a	II as shown in the boxes	above.	\$		

LEGAL NAME OF OWI			ES, LLC				SYSTEM ID# 62861	Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED FIF	TY-SEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRED	FIFTY-EIGHTH	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
		H						Distant
								Stations
Total DSEs			Total DSEs					
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 F	-IFTY-NINTH	SUBSCRIBER GRO	UP	ONE HUNDR	ED SIXTIETH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		H						
Total DSEs		Ш	0.00	Total DSEs		11	0.00	
	l Crown				rth Crous	•	•	
Gross Receipts Third	ı Group	\$	0.00	Gross Receipts Fou	ıın Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	s shown in the boxes	above.	\$		

Name

SYSTEM ID# 62861

CINCINNATI BELL EXTENDED TERRITORIES, LLC

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

BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY	SURCHARGE FOR EACH SUBSCRIBER GROUP
	in it and account in Dark 7 and and all a comments

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 vour 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
SURCHARGE	SURCHARGE
First Group	Second Group
THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP
Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
Line 3: Subtract line 2 from line 1 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 each subscriber group as shown

SYSTEM ID#

CINCINNATI BELL EXTENDED TERRITORIES, LLC

Name

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

62861 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 vour actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group Second Group SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group 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 Stations

CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861 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 vour 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 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 **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 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 Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

SYSTEM ID# 62861

CINCINNATI BELL EXTENDED TERRITORIES, LLC

Name

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

BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY	SURCHARGE FOR EACH SUBSCRIBER GROUP
r cable avetem is legated within a ten 100 television market and the static	on is not exempt in Part 7, you must also compute a

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 SYNDICATED EXCLUSIVITY SURCHARGE Second Group
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

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

Name

CINCINNATI BELL EXTENDED TERRITORIES, LLC

SYSTEM ID#

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

62861 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 vour actual calculations on this form. EIGHTEENTH SUBSCRIBER GROUP SEVENTEENTH 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 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 Third Group 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 Stations

CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861 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 vour 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 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 Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

SYSTEM ID#

CINCINNATI BELL EXTENDED TERRITORIES, LLC

Name

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

62861 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 vour 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 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 TWENTY-SEVENTH SUBSCRIBER GROUP 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 Third Group

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

SYSTEM ID# 62861

CINCINNATI BELL EXTENDED TERRITORIES, LLC

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.

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-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 Fourth Group

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

Name

CINCINNATI BELL EXTENDED TERRITORIES, LLC

SYSTEM ID# 62861

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:

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.

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 Second Group
THIRTY-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
SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group

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

Name

SYSTEM ID# 62861

CINCINNATI BELL EXTENDED TERRITORIES, LLC

Computation 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:

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

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 vour actual calculations on this form.

THIRTY-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
FORTIETH 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 Fourth Group

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

SYSTEM ID# 62861

CINCINNATI BELL EXTENDED TERRITORIES, LLC

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 First Group	SURCHARGE Second Group
T II St Glodg	v v v v v v v v v v v v v v v v v v v
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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Name

SYSTEM ID#

CINCINNATI BELL EXTENDED TERRITORIES, LLC

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

62861 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 vour 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 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 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 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 Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

Name CINCINIATI DELL EXTER

SYSTEM ID# 62861

CINCINNATI BELL EXTENDED TERRITORIES, LLC

9

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

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

- SET DI ICTIONE.
- ____ Second 30 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 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	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 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 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	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group

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

SYSTEM ID#

CINCINNATI BELL EXTENDED TERRITORIES, LLC

Name

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

62861 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 vour actual calculations on this form. FIFTY-THIRD SUBSCRIBER GROUP FIFTY-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 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 Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

Name

CINCINNATI BELL EXTENDED TERRITORIES, LLC

SYSTEM ID# 62861

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:

☐ 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 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
FIFTY-NINTH SUBSCRIBER GROUP	SIXTIETH 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# 62861

CINCINNATI BELL EXTENDED TERRITORIES, LLC

Name

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

BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GRO)UP

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.

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 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs	ST SUBSCRIBER GROUP SIXTY-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	Line 2: Enter the Exempt DSEs Dom line 1 This is the DSEs for roup rcharge
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 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	RD SUBSCRIBER GROUP SIXTY-FOURTH SUBSCRIBER GROUP
subject to the surcharge computation	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 This is the DSEs for Troup Troharge Troha

SYSTEM ID# 62861

Name

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

	INCINNATI	BELL	EXTENDED	TERRITORIES,	LLC
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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:

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

First 50 major television market	Second 50 major television market
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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.

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 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
SURCHARGE First Group	SURCHARGE Second Group
SIXTY-SEVENTH SUBSCRIBER GROUP	SIXTY-EIGHTH SUBSCRIBER GROUP
CIXTI-GEVENTI GOBGONIBEN GNOOT	35011 21011111 002001112211 011001
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 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

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

Name **CINCINNATI BELL EXTENDED TERRITORIES, LLC** 62861 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 vour actual calculations on this form. SEVENTIETH SUBSCRIBER GROUP SIXTY-NINTH 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 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 Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

Name

CINCINNATI BELL EXTENDED TERRITORIES, LLC

SYSTEM ID# 62861

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:

☐ 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 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
SURCHARGE First Group	SURCHARGE Second Group
	OF VENTY ON THE OUR OR DEPT OF OUR
SEVENTY-FIFTH SUBSCRIBER GROUP	SEVENTY-SIXTH SUBSCRIBER GROUP
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

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

SYSTEM ID# 62861

CINCINNATI BELL EXTENDED TERRITORIES, LLC

Name

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

BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GR	OUF

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:

> Second 50 major television market First 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 vour 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 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 Second Group
SEVENTY-NINTH SUBSCRIBER GROUP	EIGHTIETH 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

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

Name

SYSTEM ID# 62861

CINCINNATI BELL EXTENDED TERRITORIES, LLC

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

BLOC	KB:	CC	OME	PU	TΑ	TIC) N	OF	SY	NDI	CA.	TED	E)	XCL	US	IVI	ΤY	SU	RCI	HAR	GE	FC	R	EACH	SU	BSC	RIBE	ER (GRO	UP
																								_						

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:

> Second 50 major television market First 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 vour actual calculations on this form.

Line 1: Enter the VHF DSEs
SYNDICATED EXCLUSIVITY SURCHARGE Second Group
EIGHTY-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

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

Name

SYSTEM ID#

CINCINNATI BELL EXTENDED TERRITORIES, LLC

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

62861 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 vour 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 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 Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

SYSTEM ID# 62861

CINCINNATI BELL EXTENDED TERRITORIES, LLC

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 vour actual calculations on this form. 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 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

NINETY-FIRST SUBSCRIBER GROUP	NINETY-SECOND 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	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	total number of DSEs for this subscriber group subject to the surcharge
computation	computation
SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
SURCHARGE	SURCHARGE
Third Group	Fourth Group \$

\$

SYSTEM ID#

CINCINNATI BELL EXTENDED TERRITORIES, LLC

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

Name 62861 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 vour actual calculations on this form. NINETY-FOURTH SUBSCRIBER GROUP NINETY-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 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 Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

Name

SYSTEM ID#

CINCINNATI BELL EXTENDED TERRITORIES, LLC

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

62861 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 vour actual calculations on this form. NINETY-SEVENTH SUBSCRIBER GROUP NINETY-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 First Group 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 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 Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

SYSTEM ID# 62861

CINCINNATI BELL EXTENDED TERRITORIES, LLC

9

Name

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

BLOCK B: COMPUTATION O	E SANDICATED EACH HOWAT	V SLIDCHADGE EOD E	EACH SHRECDIRED COOLIE
BLOCK B. CONFOTATION O	I STNDICATED EXCEOSIVIT	I SUNCHAINGE I ON L	TACIT SODSCINDLIN GINOOF

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 vour 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 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

ONE HUNDERED THIRD SUBSCRIBER GROUP	ONE HUNDERED 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	SYNDICATED EXCLUSIVITY SURCHARGE

Second Group \$

Fourth Group

Name

SYSTEM ID#

CINCINNATI BELL EXTENDED TERRITORIES, LLC

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

62861 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 vour 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 computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First 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 computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

Name

CINCINNATI BELL EXTENDED TERRITORIES, LLC

SYSTEM ID# 62861

В

	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP										
9	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											
Base Rate Fee and	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											
Syndicated	this schedule.											
Exclusivity Surcharge	Step 2: In line 2, give the total number of DSEs by subscriber group for Exempt DSEs in block C, part 7 of this schedule. If none enter											
for Partially	Step 3: In line 3, subtract line 2 from line 1. This is the total number ofStep 4: Compute the surcharge for each subscriber group using the for											
Distant	schedule. In making this computation, use gross receipts figur	res 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 total number of DSEs for	and enter here. This is the total number of DSEs for										
	this subscriber group	this subscriber group										
	subject to the surcharge computation	subject to the surcharge computation										
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY										
	SURCHARGE First Group	SURCHARGE Second Group										
	T iist Gloup	Second Group										
	ONE HUNDRED ELEVENTH SUBSCRIBER GROUP	ONE HUNDRED TWELVTH 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 total number of DSEs for	and enter here. This is the total number of DSEs for										
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge										
	computation	computation										
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY										
	SURCHARGE Third Group	SURCHARGE Fourth Group										
		<u></u>										
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for earlin the boxes above. Enter here and in block 4, line 2 of space L (page 7)	ach subscriber group as shown 7)										

SYSTEM ID#

CINCINNATI BELL EXTENDED TERRITORIES, LLC

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

Name 62861 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 vour 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 FIFTEENTH SUBSCRIBER GROUP ONE HUNDRED SIXTEENTH 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 Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

SYSTEM ID# 62861

CINCINNATI BELL EXTENDED TERRITORIES, LLC

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 EIGHTEENTH 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
ONE HUNDRED TWENTIETH 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 Fourth Group

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

Name

CINCINNATI BELL EXTENDED TERRITORIES, LLC

SYSTEM ID# 62861

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:

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 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
ONE HUNDRED TWENTY-THIRD SUBSCRIBER GROUP	ONE HUNDRED TWENTY-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 ea	ach subscriber group as shown

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 CINCINNATI BELL EXTENDED TERRITORIES, LLC 62861 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 vour 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 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 Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

Name

CINCINNATI BELL EXTENDED TERRITORIES, LLC

SYSTEM ID# 62861

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:

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-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 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 Second Group
ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED 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	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	ich subscriber group as shown

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

Name

SYSTEM ID#

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

	6286
BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
If your cable system is located within a top 100 television market and th Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981:	
First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commerce	☐ Second 50 major television market cial 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 Exempt DSEs in block C, part 7 of this schedule. If none enter Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the for schedule. In making this computation, use gross receipts figure your actual calculations on this form.	or the VHF Grade B contour stations that were classified as zero. DSEs used to compute the surcharge. ormula outlined in block D, section 3 or 4 of part 7 of this
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 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
ONE HUNDRED THIRTY-FIFTH SUBSCRIBER GROUP	ONE HUNDRED 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 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
	ach subscriber group as shown

Name

CINCINNATI BELL EXTENDED TERRITORIES, LLC

SYSTEM ID# 62861

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

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

Name

SYSTEM ID#

CINCINNATI BELL EXTENDED TERRITORIES, LLC

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

62861 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 vour actual calculations on this form. 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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group Second Group ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP ONE HUNDRED 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 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 Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

Name

CINCINNATI BELL EXTENDED TERRITORIES, LLC

SYSTEM ID# 62861

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:

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 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 \$	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 Second Group
ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP	ONE HUNDRED FORTY-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	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)

Name

SYSTEM ID#

CINCINNATI BELL EXTENDED TERRITORIES, LLC

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

62861 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 vour actual calculations on this form. ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP ONE HUNDRED 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 ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED 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 Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

Name

CINCINNATI BELL EXTENDED TERRITORIES, LLC

SYSTEM ID# 62861

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:

☐ 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 FIFTY-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 Second 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
SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group

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

Name

SYSTEM ID# 62861

CINCINNATI BELL EXTENDED TERRITORIES, LLC

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

BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a
and Control of Completion and Indicate orbitals make a control of many and the control of control of control of the control of

If your 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 marke

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.

Line 1: Enter the VHF 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 total number of DSEs for
total number of DSEs for this subscriber group
5 1
subject to the surcharge
computation
SYNDICATED EXCLUSIVITY
SURCHARGE
Second Group
ONE HUNDRED SIXTIETH 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
Fourth Group

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

C	Cable Worksheet	Total amount of remittance	Number of SAs r	ec'd Initials
		Date of remittance	_ ☐ Check ☐ EFT	☐ FILING FEES
Cable ID #				Amount Initials
Examined by	Reviewed by	Date examination completed	Allocation number	
Space A Accounting		(enter four digit year and	d /1 (for Jan-Jun period) or /2 (fo	r Jul-Dec period) No spaces)
Period	☐ Letter sent		☐ Information received	
	□ Accepted		☐ Phone call/Date/Contact	
Space B Owner				
	☐ Letter sent		☐ Information received	
	☐ Accepted		☐ Phone call/Date/Contact	
Space D Area Served				
	☐ Letter sent	[☐ Information received	
	☐ Accepted		☐ Phone call/Date/Contact	
Space E Secondary Transission				
Service Subscribers:	☐ Letter sent]	☐ Information received	
and Rates	☐ Accepted	[☐ Phone call/Date/Contact	
Space G Primary Transmitters:				
Television	☐ Letter sent]	☐ Information received	
	☐ Accepted	Į	☐ Phone call/Date/Contact	
Space H Primary Transmitters:				
Radio	☐ Accepted		☐ Phone call/Date/Contact	

Space I Substitute

		Carriage
☐ Letter sent	☐ Information received	
☐ Accepted	☐ Phone call/Date/Contact	
		Space J Part-time Carriage Log
☐ Letter sent	☐ Information received	(SA3 only)
☐ Accepted	☐ Phone call/Date/Contact	
		Space K Gross Receipts
☐ Letter sent	☐ Information received	
☐ Accepted	☐ Phone call/Date/Contact	
		Space L Copyright Filing and Royalty Fees
☐ Royalty Fee should be	☐ Refund request to fiscal	
☐ Letter sent	☐ Information received	
☐ Accepted	☐ Phoe call/Date/Contact	
		Space M
		Channels
☐ Letter sent	☐ Information received	Channels
☐ Letter sent	☐ Information received ☐ Phone call/Date/Contact	Channels
		Space O Certification
		Space O
☐ Accepted	☐ Phone call/Date/Contact	Space O
☐ Accepted	☐ Phone call/Date/Contact ☐ Information received	Space O
☐ Accepted	☐ Phone call/Date/Contact ☐ Information received	Space O Certification Space P Statement of
☐ Accepted ☐ Letter sent ☐ Accepted	☐ Phone call/Date/Contact ☐ Information received ☐ Phone call/Date/Contact	Space O Certification Space P Statement of
☐ Accepted ☐ Letter sent ☐ Accepted ☐ Letter sent ☐ Letter sent	☐ Phone call/Date/Contact ☐ Information received ☐ Phone call/Date/Contact ☐ Information received	Space O Certification Space P Statement of
☐ Accepted ☐ Letter sent ☐ Accepted ☐ Letter sent ☐ Letter sent	☐ Phone call/Date/Contact ☐ Information received ☐ Phone call/Date/Contact ☐ Information received	Space O Certification Space P Statement of Gross Receipts Space Q Interest