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

**STATEMENT OF ACCOUNT** for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

# SA3E Long Form

Return completed workbook by email to:

### coplicsoa@loc.gov

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

| Α                    | AC          | COUNTING PERIOD COVERED E  | BY THIS STATEMENT:  |  |                                     |              |        |  |
|----------------------|-------------|--|---|--|-------------------------------------|--------------|--------|--|
| Accounting<br>Period |             | 2018/1   |   |  |                                     |              |        |  |
| B<br>Owner           | rate        | ructions:<br>Give the full legal name of the owner of the<br>title of the subsidiary, not that of the paren<br>List any other name or names under which<br>If there were different owners during the a<br>ngle statement of account and royalty fee p<br>Check here if this is the system's first fill | t corporation<br>the owner conducts the busin<br>accounting period, only the owner<br>bayment covering the entire account | ess of the cable syste<br>er on the last day of the<br>counting period | em<br>he accounting period should s |              | 010647 |  |
|                      | LE          | GAL NAME OF OWNER/MAILING ADDR   | ESS OF CABLE SYSTEM   |  |                                     |              |        |  |
|                      |             | CEQUEL COMMUNICATIONS  | LLC   |  |                                     |              |        |  |
|                      |             |  |   |  |                                     | 01064        | 720181 |  |
|                      |             |  |   |  |                                     | 010647       | 2018/1 |  |
|                      |             |  |   |  |                                     |              |        |  |
|                      |             | 3015 S SE LOOP 323<br>TYLER, TX 75701  |   |  |                                     |              |        |  |
| С                    |             | TRUCTIONS: In line 1, give any busin<br>nes already appear in space B. In line 2   |   |  |                                     |              |        |  |
| System               | 1           | 1 IDENTIFICATION OF CABLE SYSTEM:  |   |  |                                     |              |        |  |
|                      | -           | KINGMAN<br>MAILING ADDRESS OF CABLE SYSTEM:  |   |  |                                     |              |        |  |
|                      | 2           |  |   |  |                                     |              |        |  |
|                      | 2           | (Number, street, rural route, apartment, or suite number   | er)   |  |                                     |              |        |  |
|                      |             | (City, town, state, zip code)  |   |  |                                     |              |        |  |
| D                    | Ins         | tructions: For complete space D instru   | uctions, see page 1b. Identify  | y only the frst comm   | nunity served below and re          | list on page | ∋1b    |  |
| Area<br>Served       | witl        | all communities.   |   |  |                                     |              |        |  |
|                      |             | CITY OR TOWN   |   | STATE<br>AZ  |                                     |              |        |  |
| First<br>Community   |             |  | iting if  |  |                                     |              |        |  |
| -                    | В           | elow is a sample for reporting commun<br>CITY OR TOWN (SAMPLE)   | ities if you report multiple ch   | STATE  | CH LINE UP                          | SUB          | 3 GRP# |  |
|                      | Ald         | · · · · ·  |   | MD   | A                                   | 305          | 1      |  |
| Sample               | -           | ance   |   | MD   | В                                   |              | 2      |  |
|                      | Gering MD B |  |   |  |                                     |              |        |  |
|                      |             |  | anima the Original Office to called   |  | information (DII)                   | 4            |        |  |
| -                    |             | ion 111 of title 17 of the United States Code auth<br>our statement of account. PII is any personal info   |   |  |                                     |              |        |  |
| numbers. By provid   | ding Pl     | , you are agreeing to the routine use of it to esta  | blish and maintain a public record,   | which includes appearin  | g in the Offce's public indexes an  | d in         |        |  |
|                      |             | or the public. The effect of not providing the PII re<br>ments of account, and it may affect the legal suff  |   | • •  | -                                   | е            |        |  |

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AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

8/29/2018

| FORM SA3E. PAGE 1b. | FORM | SA3E. | PAGE | 1b. |
|---------------------|------|-------|------|-----|
|---------------------|------|-------|------|-----|

| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>CEQUEL COMMUNICATIONS LLC   |       |            | SYSTEM ID# 010647 |                        |  |  |  |  |
|---|-------|------------|-------------------|------------------------|--|--|--|--|
| <b>Instructions:</b> List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. |       |            |                   |                        |  |  |  |  |
| <b>Note:</b> 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#          | -                      |  |  |  |  |
| KINGMAN   | AZ    |            |                   | First                  |  |  |  |  |
|   |       |            |                   | Community              |  |  |  |  |
|   |       |            |                   |                        |  |  |  |  |
|   |       |            |                   | See instructions for   |  |  |  |  |
|   |       |            |                   | additional information |  |  |  |  |
|   |       |            |                   | on alphabetization.    |  |  |  |  |
|   |       |            |                   |                        |  |  |  |  |
|   |       |            |                   |                        |  |  |  |  |
|   |       |            |                   | Add rows as necessary. |  |  |  |  |
|   |       |            |                   |                        |  |  |  |  |
|   |       |            |                   |                        |  |  |  |  |
|   |       |            |                   |                        |  |  |  |  |
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|  |      |  |

| Nama                  | LEGAL NAME OF OWNER OF CABL  | E SYSTEM:          |       |                     |            |                 |             | S              | YSTEM IC |  |
|-----------------------|--|--------------------|-------|---------------------|------------|-----------------|-------------|----------------|----------|--|
| Name                  | CEQUEL COMMUNICAT  | TIONS LLC          |       |                     |            |                 |             |                | 01064    |  |
|                       |  |                    | IBECD |                     |            |                 |             |                |          |  |
| E                     | SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES<br>In General: The information in space E should cover all categories of secondary transmission service of the cable   |                    |       |                     |            |                 |             |                |          |  |
|                       | system, that is, the retransmission  |                    |       |                     |            |                 |             |                |          |  |
| Secondary             | about other services (including p  |                    |       |                     |            |                 | hose exis   | ting on the    |          |  |
| Transmission          | last day of the accounting period  |                    |       |                     |            |                 | -1          |                |          |  |
| Service: Sub-         | 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                        |                    |       |                     |            |                 |             |                |          |  |
| scribers and<br>Rates | 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                   |                    |       |                     |            |                 |             |                |          |  |
| Rates                 | 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.  |                    |       |                     |            |                 |             |                |          |  |
|                       | <b>Block 1:</b> 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 |                    |       |                     |            |                 |             |                |          |  |
|                       | systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. <b>Note:</b> Where an individual or organization is receiving service that falls under different |                    |       |                     |            |                 |             |                |          |  |
|                       | categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential  |                    |       |                     |            |                 |             |                |          |  |
|                       | subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the  |                    |       |                     |            |                 |             |                |          |  |
|                       | first set" and would be counted once again under "Service to additional set(s)."   |                    |       |                     |            |                 |             |                |          |  |
|                       | Block 2: If your cable system has rate categories for secondary transmission service that are different from those   |                    |       |                     |            |                 |             |                |          |  |
|                       | printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is    |                    |       |                     |            |                 |             |                |          |  |
|                       | sufficient.  |                    |       |                     |            |                 |             |                |          |  |
|                       | BLO  |                    |       | BLO                 |            |                 |             |                |          |  |
|                       | CATEGORY OF SERVICE  | NO. OF<br>SUBSCRIB |       | RATE                | CAT        | EGORY OF SEI    |             | NO. OF         | RATE     |  |
|                       | Residential:   | SUBSCRIB           | EKS   | RAIL                | CAT        | EGORT OF SEI    | <b>VICE</b> | SUBSCRIBERS    | RAIE     |  |
|                       | Service to first set   |                    | 5,434 | \$ 39.99            |            |                 |             |                |          |  |
|                       | Service to additional set(s)   |                    | 0.175 | ə <u>59.99</u><br>0 |            |                 |             |                |          |  |
|                       | • FM radio (if separate rate)  |                    | 0,175 |                     |            |                 |             |                |          |  |
|                       | Motel, hotel   |                    |       |                     |            |                 |             |                |          |  |
|                       | Commercial   |                    | 111   | \$ 39.99            |            |                 |             |                |          |  |
|                       | Converter  |                    |       | φ <u>3</u> 3.33     |            |                 |             |                |          |  |
|                       | Residential  |                    |       |                     |            |                 |             |                |          |  |
|                       | Non-residential  |                    |       |                     |            |                 |             |                |          |  |
|                       | Non-residential  |                    |       |                     |            |                 |             |                |          |  |
|                       | SERVICES OTHER THAN SEC  |                    |       |                     |            |                 |             |                |          |  |
| F                     | In General: Space F calls for ra   |                    |       |                     |            |                 |             |                |          |  |
| •                     | not covered in space E, that is, those services that are not offered in combination with any secondary transmission  |                    |       |                     |            |                 |             |                |          |  |
| Services              | 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         |                    |       |                     |            |                 |             |                |          |  |
| Other Than            | amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis,   |                    |       |                     |            |                 |             |                |          |  |
| Secondary             | enter only the letters "PP" in the rate column.  |                    |       |                     |            |                 |             |                |          |  |
| Transmissions:        | Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.  |                    |       |                     |            |                 |             |                |          |  |
| Rates                 | <b>Block 2:</b> 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) descrip   |                    |       |                     | SHEU. LISU | these other ser |             |                |          |  |
|                       |  | BLO                |       |                     |            |                 |             | BLOCK 2        |          |  |
|                       | CATEGORY OF SERVICE  | RATE               |       | GORY OF SER         | VICE       | RATE            | CATEG       | ORY OF SERVICE | RATE     |  |
|                       | Continuing Services:   |                    |       | ation: Non-res      |            |                 |             |                |          |  |
|                       | • Pay cable  | \$ 17.00           | • Mc  | otel, hotel         |            |                 |             |                |          |  |
|                       | • Pay cable—add'l channel  | \$ 19.00           | • Co  | mmercial            |            |                 |             |                |          |  |
|                       | Fire protection  | [                  | •Pa   | y cable             |            | [               |             |                |          |  |
|                       | •Burglar protection  | [                  | •Pa   | y cable-add'l ch    | annel      |                 |             |                |          |  |
|                       | Installation: Residential  | [                  | • Fir | e protection        |            |                 |             |                |          |  |
|                       | • First set  | \$ 40.00           | • Bu  | rglar protection    |            |                 |             |                |          |  |
|                       | <ul> <li>Additional set(s)</li> </ul>  | \$ 25.00           |       | services:           |            | [               |             |                |          |  |
|                       | • FM radio (if separate rate)  |                    | • Re  | connect             |            | \$ 40.00        |             |                |          |  |
|                       | • Converter  |                    | • Dis | sconnect            |            |                 |             |                |          |  |
|                       |  |                    |       | tlet relocation     |            | \$ 25.00        |             |                |          |  |
|                       | 1  | 1                  | 1     |                     |            | h               |             |                |          |  |
|                       |  |                    | • Mc  | ve to new addr      | ess        | \$ 40.00        |             |                |          |  |

| carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas   | ERS: TELEVISIO       | NS LLC               |                   |                          |   | Namo  |  |  |  |
|--|----------------------|----------------------|-------------------|--------------------------|---|---|--|--|--|
| <b>n General:</b> In space G<br>carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas   |                      |                      |                   |                          | 010647                                    | Name  |  |  |  |
| carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas   | dentify ever         | ON                   |                   |                          |   |   |  |  |  |
| In General: In space G, identify every television station (including translator stations and low power television stations)<br>carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under<br>FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section:<br>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 ;<br>substitute program basis, as explained in the next paragraph<br>Substitute Pasis Stations: With respect to any distant stations carried by your cable system on a substitute program<br>pasis under specific FCC rules, regulations, or authorizations<br>'D on tils the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the<br>station was carried only on a substitute basis.<br>'L is the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe<br>basis. For further information concerning substitute basis stations, see page (v) of the general instructions located<br>in the paper SA3 form.<br>Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify<br>each multicast stream associated with a station according to its over-the-air designation. For example, report multi<br>cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example<br>WETA-simulcast).<br>Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in<br>to community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe<br>on which your cable system carried the station.<br>Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia<br>educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M |                      |                      |                   |                          |   |   |  |  |  |
|  |                      |                      |                   |                          |   |   |  |  |  |
| Column 6: Give the   | e location of ea     | ch station. Fo       | or U.S. stations, | list the communit        | y to which the station is licensed by the |   |  |  |  |
| Note: If you are utilizin  |                      |                      |                   | •                        |   |   |  |  |  |
|  |                      | CHANN                | EL LINE-UP        | AA                       |   |   |  |  |  |
| -  |                      | 3. TYPE              | 4. DISTANT?       | 5. BASIS OF              | 6. LOCATION OF STATION                    |   |  |  |  |
| SIGN   | CHANNEL<br>NUMBER    | OF<br>STATION        | (Yes or No)       | CARRIAGE<br>(If Distant) |   |   |  |  |  |
| KAET   | 8                    | E                    | YES               | 0                        | PHOENIX, AZ                               | 1   |  |  |  |
| KAET-HD  | 8                    | E-M                  | YES               | E                        | PHOENIX, AZ                               | See instructions for                        |  |  |  |
| KAET-KIDS  | 8                    | E-M                  | YES               | 0                        | PHOENIX, AZ                               | additional informati<br>on alphabetization. |  |  |  |
| KAET-LIFE  | 8                    | E-M                  | YES               | 0                        | PHOENIX, AZ                               |   |  |  |  |
| KAET-WORLD   | 8                    | E-M                  | YES               | 0                        | PHOENIX, AZ                               |   |  |  |  |
| KASW   | 49                   | 1                    | NO                |                          | PHOENIX, AZ                               |   |  |  |  |
| KASW-HD  | 49                   | I-M                  | NO                |                          | PHOENIX, AZ                               |   |  |  |  |
| KAZT-HD  | 7                    | I-M                  | NO                |                          | PRESCOTT, AZ                              |   |  |  |  |
| KAZT-METV  | 7                    | I-M                  | NO                |                          | PRESCOTT, AZ                              |   |  |  |  |
| KAZT-TV<br>KKAX-LP   | 7<br>36              | I                    | NO<br>NO          |                          | PRESCOTT, AZ<br>HILLTOP, AZ               |   |  |  |  |
| KMOH-TV  | 30<br>19             | ······!              | NO                |                          | KINGMAN, AZ                               |   |  |  |  |
| KNXV-HD  | 19                   | N-M                  | NO                |                          | PHOENIX, AZ                               |   |  |  |  |
| KNXV-TV  | 15                   | N                    | NO                |                          | PHOENIX, AZ                               |   |  |  |  |
| KPHO-HD  | 17                   | N-M                  | NO                |                          | PHOENIX, AZ                               |   |  |  |  |
| KPHO-TV  | 17                   | N                    | NO                |                          | PHOENIX, AZ                               |   |  |  |  |
| KPNX   | 12                   | N                    | NO                |                          | MESA, AZ                                  |   |  |  |  |
| KPNX-HD  | 12                   | N-M                  | NO                |                          | MESA, AZ                                  |   |  |  |  |
| KSAZ-HD  | 10                   | I-M                  | NO                |                          | PHOENIX, AZ                               |   |  |  |  |
| KSAZ-TV  | 10                   | I                    | NO                |                          | PHOENIX, AZ                               |   |  |  |  |
| KTAZ   | 39                   | I                    | NO                |                          | PHOENIX, AZ                               |   |  |  |  |
|  | 39                   | I-M                  | NO                |                          | PHOENIX, AZ                               |   |  |  |  |
| KTAZ-EXITOS  | 39                   | I-M                  | NO                |                          | PHOENIX, AZ                               |   |  |  |  |
|  |                      |                      | NO                | l                        | PHOENIX, AZ                               |   |  |  |  |
| KTAZ-HD  | 24                   | <u> </u>             |                   |                          |   |   |  |  |  |
| KTAZ-HD<br>KTVK  | 24<br>24             | I<br>I-M             | NO                |                          | PHOENIX, AZ                               |   |  |  |  |
| KTAZ-HD<br>KTVK<br>KTVK-HD<br>KTVW-DT  | 24<br>33             | I-M<br>I             | NO                |                          | PHOENIX, AZ                               |   |  |  |  |
| KTAZ-HD<br>KTVK<br>KTVK-HD<br>KTVW-DT<br>KTVW-HD   | 24<br>33<br>33       | I-M                  | NO<br>NO          |                          | PHOENIX, AZ<br>PHOENIX, AZ                |   |  |  |  |
| KTAZ-EXITOS<br>KTAZ-HD<br>KTVK<br>KTVK-HD<br>KTVW-DT<br>KTVW-HD<br>KUTP  | 24<br>33<br>33<br>26 | I-M<br>I<br>I-M<br>I | NO<br>NO<br>NO    |                          | PHOENIX, AZ<br>PHOENIX, AZ<br>PHOENIX, AZ |   |  |  |  |
| KTAZ-HD<br>KTVK<br>KTVK-HD<br>KTVW-DT<br>KTVW-HD   | 24<br>33<br>33       | I-M<br>I<br>I-M      | NO<br>NO          |                          | PHOENIX, AZ<br>PHOENIX, AZ                |   |  |  |  |

| Number         CECQUEL COMMUNICATIONS LLC         Of 0647           PRIMARY TRANSMITTERS: RADIO         In Genera: List expression for the assentate and discrete basis and list those PM stations carried on an all-barb basis whose signals were "generally researable" by your cable system during the accounting paried.         Image: Transmitters           Primary         Transmitters:         Recircle         Transmitters         Transmitters <t< th=""><th>Name</th><th>LEGAL NAME OF (</th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th>SYSTEM ID#</th></t<>   | Name                     | LEGAL NAME OF (  |   |  |   |                                |  |   |   | SYSTEM ID#   |
|--|--------------------------|--|---|--|---|--------------------------------|--|---|---|--|
| <ul> <li>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.</li> <li>Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, 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.</li> <li>Column 1: Identify the call sign of each station carried.</li> <li>Column 2: State whether the station is AM or FM.</li> <li>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.</li> <li>Column 4: Give the station's location (the community to which the station is identified).</li> </ul>   |                          |  |   | TIONS  | LLC   |                                |  |   |   | 010647   |
| CALL SIGN       AM or FM       S/D       LOCATION OF STATION       CALL SIGN       AM or FM       S/D       LOCATION OF STATION         Image: Sign of   | Primary<br>Transmitters: | In General: Lis<br>all-band basis v<br>Special Instruct<br>receivable if (1)<br>on the basis of<br>For detailed info<br>located in the p<br>Column 1: lo<br>Column 2: S<br>Column 3: If<br>signal, indicate<br>Column 4: C | t every radio s<br>whose signals of<br>ctions Concer<br>it is carried by<br>monitoring, to<br>prmation about<br>aper SA3 form<br>dentify the call<br>tate whether the<br>the radio stati<br>this by placing<br>Sive the station | tation ca<br>were "ge<br>rning All<br>the sys"<br>be receive<br>t the the<br>sign of e<br>he statio<br>on's sigr<br>a check<br>s's locatio | <b>Band FM Carriage:</b> Under Catern whenever it is received a ved at the headend, with the seconyright Office regulations of each station carried.<br>In is AM or FM.<br>That was electronically process is mark in the "S/D" column. | abl<br>Co<br>t tl<br>sys<br>on | le system during<br>ppyright Office re<br>he system's hea<br>stem's FM anter<br>this point, see p<br>d by the cable sy<br>station is license | the accounting<br>egulations, an<br>adend, and (2)<br>ana, during ce<br>bage (vi) of the<br>ystem as a sep<br>ed by the FCC | ng period<br>FM sign<br>it can b<br>rtain sta<br>genera<br>genera | d.<br>al is generally<br>e expected,<br>ted intervals.<br>al instructions<br>nd discrete |
| CALL SIGN         AM or FM         SID         LOCATION OF STATION         CALL SIGN         AM or FM         SID         LOCATION OF STATION           Image: Side         Image: Side </th <th></th>   |                          |  |   |  |   |                                |  |   |   |  |
|  |                          | CALL SIGN  | AM or FM  | S/D  | LOCATION OF STATION   |                                | CALL SIGN  | AM or FM  | S/D   | LOCATION OF STATION  |
|  |                          |  |   |  |   |                                |  |   |   |  |
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| CEQUEL COMMUNICA   |   |   |   |   | 5  | 010647          | Name       |
|--|---|---|---|---|--|-----------------|------------|
| SUBSTITUTE CARRIAGE  | : SPECIA  |   | IT AND PROGRAM LOG  | 1   |  |                 | -          |
| In General: In space I, identi<br>substitute basis during the ac<br>explanation of the programm  | counting pe   | eriod, under spe  | cific present and former FC   | C rules, regula   | ations, or authorizations. F   | or a further    | Substitute |
| 1. SPECIAL STATEMENT   |   |   |   | generalmea  |  |                 | Carriage:  |
| During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program  |   |   |   |   |  |                 |            |
| Note: If your answer is "No'<br>log in block 2.<br>2. LOG OF SUBSTITUTE  |   |   | je blank. If your answer is '   | 'Yes," you mu   | ist complete the program   | 1               |            |
| period, was broadcast by a<br>under certain FCC rules, res<br>SA3 form for futher informat<br>titles, for example, "I Love L<br>Column 2: If the program<br>Column 3: Give the call s<br>Column 4: Give the broat<br>the case of Mexican or Can<br>Column 5: Give the mon<br>first. Example: for May 7 giv<br>Column 6: State the time<br>to the nearest five minutes.<br>stated as "6:00–6:30 p.m."<br>Column 7: Enter the letted<br>to delete under FCC rules a<br>gram was substituted for pro- | ce, please a<br>of every no<br>distant stat<br>gulations, o<br>tion. Do no<br>ucy" or "NE<br>n was broad<br>sign of the s<br>dcast static<br>dadian static<br>th and day<br>re "5/7."<br>as when the<br>Example: a<br>er "R" if the<br>ind regulatic<br>ogramming | attach additiona<br>nnetwork televi<br>ion and that your<br>authorizationa<br>t use general of<br>A Basketball:<br>dcast live, enter<br>station broadca<br>on's location (thons, if any, the<br>when your syster<br>substitute pro<br>a program carrier<br>listed program<br>ons in effect du | al pages.<br>ision program (substitute p<br>ur cable system substitute<br>s. See page (vi) of the gen<br>categories like "movies", or<br>76ers vs. Bulls."<br>r "Yes." Otherwise enter "N<br>asting the substitute progra<br>the community to which the<br>community with which the<br>tem carried the substitute p<br>gram was carried by your of<br>ed by a system from 6:01:"<br>was substituted for progra<br>uring the accounting period | rogram) that,<br>d for the prog<br>eral instructio<br>"basketball".<br>lo."<br>m.<br>station is licen<br>station is iden<br>brogram. Use<br>cable system.<br>15 p.m. to 6:2<br>mming that yo<br>; enter the let | during the accounting<br>ramming of another stati<br>ns located in the paper<br>List specific program<br>nsed by the FCC or, in<br>tified).<br>numerals, with the mont<br>List the times accurately<br>8:30 p.m. should be<br>our system was required<br>ter "P" if the listed pro | h<br>,          |            |
| effect on October 19, 1976.  |   |   |   |   | EN SUBSTITUTE  | 7. REASON       |            |
| 1. TITLE OF PROGRAM  | 2. LIVE?<br>Yes or No   | E PROGRAM<br>3. STATION'S<br>CALL SIGN  | 4. STATION'S LOCATION   | 5. MONTH<br>AND DAY   | IAGE OCCURRED<br>6. TIMES<br>FROM — TO   | FOR<br>DELETION |            |
|  | 100 01 110  | ON LEE OTOT   |   |   |  |                 |            |
|  |   |   |   |   |  |                 |            |
|  |   |   |   |   |  |                 |            |
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|  |   |   |   |   |  |                 |            |

## ACCOUNTING PERIOD: 2018/1

SYSTEM ID#

LEGAL NAME OF OWNER OF CABLE SYSTEM:

FORM SA3E. PAGE 6.

| Name                              | LEGAL NAME OF C   | OWNER OF CABLE |              |             |      |               |       |                | SYSTEM ID#<br>010647 |  |
|-----------------------------------|---|----------------|--------------|-------------|------|---------------|-------|----------------|----------------------|--|
| J<br>Part-Time<br>Carriage<br>Log | <ul> <li>PART-TIME CARRIAGE LOG</li> <li>In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages.</li> <li>Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G.</li> <li>Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period.</li> <li>Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10."</li> <li>State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m 3:15 a.m. app."</li> <li>You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m 12:00 p.m."</li> </ul> |                |              |             |      |               |       |                |                      |  |
|                                   |   |                | DATES        | AND HOURS C | )F P | PART-TIME CAR | RIAGE |                |                      |  |
|                                   | WHEN CARRIAGE OCCURRED  |                |              |             |      |               | WHEN  | I CARRIAGE OCC | URRED                |  |
|                                   | CALL SIGN   | DATE           | HOUR<br>FROM | S<br>TO     |      | CALL SIGN     | DATE  | HOL<br>FROM    | JRS<br>TO            |  |
|                                   |   |                | 1            |             |      |               |       |                | -                    |  |
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|                                   |   |                |              |             |      |               |       |                |                      |  |
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|                                   |   |                |              |             |      |               |       |                | <u>.</u>             |  |
|                                   |   |                | 1 1          |             |      |               |       |                |                      |  |
|                                   |   |                | _            |             |      |               |       | _              | -                    |  |
|                                   |   |                |              |             |      |               |       |                |                      |  |
|                                   |   |                |              |             |      |               |       |                |                      |  |
|                                   |   |                |              |             |      |               |       |                | :                    |  |

| FORM   | SA3E. PAGE 7.   |   |                            |  |
|--|---|---|----------------------------|--|
| LEGA   | AL NAME OF OWNER OF CABLE SYSTEM:   | :   | SYSTEM ID#                 | Name   |
| CE   | QUEL COMMUNICATIONS LLC   |   | 010647                     | Name   |
| Inst<br>all a<br>(as<br>page   | DSS RECEIPTS<br>ructions: The figure you give in this space determines the form you fle and the amoun<br>mounts (gross receipts) paid to your cable system by subscribers for the system's second<br>dentifed in space E) during the accounting period. For a further explanation of how to be<br>(vii) of the general instructions.<br>Gross receipts from subscribers for secondary transmission service(s)<br>during the accounting period.<br>ORTANT: You must complete a statement in space P concerning gross receipts.   | ondary transmission so<br>ompute this amount, s         | ervice<br>see<br>00,388.83 | <b>K</b><br>Gross Receipts                           |
|  |   |   |                            |  |
| <ul> <li>Instru</li> <li>Con</li> <li>Con</li> <li>If you feet</li> <li>If you according to the second seco</li></ul> | <b>'RIGHT ROYALTY FEE</b><br><b>ctions</b> : Use the blocks in this space L to determine the royalty fee you owe:<br>nplete block 1, showing your minimum fee.<br>nplete block 2, showing whether your system carried any distant television stations.<br>nur system did not carry any distant television stations, leave block 3 blank. Enter the an<br>from block 1 on line 1 of block 4, and calculate the total royalty fee.<br>nur system did carry any distant television stations, you must complete the applicable prompanying this form and attach the schedule to your statement of account.<br>art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b | arts of the DSE Sched                                   |                            | L<br>Copyright<br>Royalty Fee                        |
| bloc   | k 3 below.  |   |                            |  |
|  | rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be<br>slow.  | entered on line 2 in blo                                | ock                        |  |
| ▶ If pa  | Inv.<br>Int 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho<br>block 4 below.   | uld be entered on line                                  |                            |  |
|  | <b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.   | e is 1.064 percent of the                               | ne                         |  |
|  | Line 1. Enter the amount of gross receipts from space K<br>Line 2. Multiply the amount in line 1 by 0.01064   | \$ 1,9  | 00,388.83                  |  |
|  | Enter the result here.  |   |                            |  |
|  | This is your minimum fee.   | \$  | 20,220.14                  |  |
| 2<br>Block   | <ul> <li>DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block.</li> <li>Did your cable system carry any distant television stations during the accounting peri Yes—Complete the DSE schedule.</li> <li>No—Leave block 3 below blank and c</li> <li>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</li> </ul>  | nn 4, you must check<br>od?<br>omplete line 1, block 4. | n<br>20,220.14             |  |
| 3  | Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero  |   | 0.00                       |  |
|  | Line 3. Add lines 1 and 2 and enter here  | \$  | 20,220.14                  |  |
| Block<br>4   | <ul> <li>Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger</li> <li>Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7</li> </ul>   | \$  | 20,220.14                  | Cable systems submitting                             |
|  | (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente<br>zero.   |   | 0.00                       | additional<br>deposits under                         |
|  | Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9<br>(Interest Worksheet)  |   | 0.00                       | Section 111(d)(7)<br>should contact<br>the Licensing |
|  | Line 4. FILING FEE  | \$  | 725.00                     | additional fees.<br>Division for the<br>appropriate  |
|  | TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.         Add Lines 1, 2 and 3 of block 4 and enter total here   | \$  | 20,945.14                  | form for<br>submitting the<br>additional fees.       |
|  | Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (<br>general instructions located in the paper SA3 form for more information.)   | See page (i) of the                                     |                            |  |

| ACCOUNTING | PERIOD: | 2018/1 |
|------------|---------|--------|
|------------|---------|--------|

| ACCOUNTING PERI                                   | FORM SA3E. PAG  |  |
|---|---|--|
| Name  | LEGAL NAME OF OWNER OF CABLE SYSTEM:     SYSTEM       CEQUEL COMMUNICATIONS LLC     0106  |  |
| M<br>Channels                                     | CHANNELS         Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.         1. Enter the total number of channels on which the cable system carried television broadcast stations   |  |
| N<br>Individual to<br>Be Contacted<br>for Further | INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)         Name       SARAH BOGUE         Telephone       903-579-3121   |  |
| Information                                       | Address 3015 S SE LOOP 323<br>(Number, street, rural route, apartment, or suite number)<br>TYLER, TX 75701<br>(City, town, state, zip)  |  |
|   | Email SARAH.BOGUE@ALTICEUSA.COM Fax (optional)  |  |
| O<br>Certifcation                                 | <ul> <li>CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.</li> <li>I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.)</li> <li>(Owner other than corporation or partnership)   am the owner of the cable system as identifed in line 1 of space B; or</li> </ul>  |  |
|   | <ul> <li>(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</li> <li>(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.</li> <li>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)]</li> </ul>  |  |
| Briuggy Act Motion                                | Image: State of the back to be back |  |
|   | 2: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on the cess your statement of account. PII is any personal information that can be used to identify or trace an individual such as name, address and telephor.  |  |

form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephor numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in th completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law

| FORM | SA3E  | PAGE9  |
|------|-------|--------|
|      | JAJL. | I AULS |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>CEQUEL COMMUNICATIONS LLC  | SYSTEM ID#<br>010647   | Name                                      |
|--|--|---|
| SPECIAL STATEMENT CONCERNING GROSS RECEIF<br>The Satellite Home Viewer Act of 1988 amended Title 17, section 11<br>lowing sentence:<br>"In determining the total number of subscribers and the gross<br>service of providing secondary transmissions of primary broad<br>scribers and amounts collected from subscribers receiving sec | 1(d)(1)(A), of the Copyright Act by adding the fol-<br>amounts paid to the cable system for the basic<br>lcast transmitters, the system shall not include sub- | P<br>Special<br>Statement                 |
| For more information on when to exclude these amounts, see the not paper SA3 form.   |  | Concerning<br>Gross Receipts<br>Exclusion |
| During the accounting period did the cable system exclude any amou<br>made by satellite carriers to satellite dish owners?   | nts of gross receipts for secondary transmissions  |   |
| YES. Enter the total here and list the satellite carrier(s) below  | <u>\$</u>  |   |
|  | ameailing Address  |   |
| INTEREST ASSESSMENTS   |  |   |
| You must complete this worksheet for those royalty payments submit<br>For an explanation of interest assessment, see page (viii) of the gene   |  | Q   |
| Line 1 Enter the amount of late payment or underpayment  | x  | Interest<br>Assessment                    |
| Line 2 Multiply line 1 by the interest rate* and enter the sum here  | <u>-</u>   |   |
| Line 3 Multiply line 2 by the number of days late and enter the sum l  | here   |   |
| Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)   |  |   |
| * To view the interest rate chart click on www.copyright.gov/licens<br>contact the Licensing Division at (202) 707-8150 or licensing@l   |  |   |
| ** This is the decimal equivalent of 1/365, which is the interest as   | sessment for one day late.   |   |
| NOTE: If you are filing this worksheet covering a statement of accour<br>please list below the owner, address, first community served, accoun<br>filing.   |  |   |
| OwnerAddress   |  |   |
| First community served       Accounting period       ID number   |  |   |
| Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyri  | ght Offce to collect the personally identifying information (PII) requested or   | n th                                      |

form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

### INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerica value given by the Copyright Act to each distant television station carriec 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 LISTEE IN SPACE G OF SA3E (LONG FORM)

**Step 1**: Determine the station's type-value. For purposes of computing DSEs, the Copyright Act gives different values to distant stations depending upon their type. If, as shown in space G of your statement of accoun (page 3), a distant station is:

| • Independent: its type-value is                                   | 1.00 |
|--|------|
| • Network: its type-value is                                       | 0.25 |
| Noncommercial educational: its type-value is                       | 0.25 |
| Note that local stations are not counted at all in computing DSEs. |      |

**Step 2:** Calculate the station's basis of carriage value: The DSE of 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 sover the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

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

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

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

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

Step 2: Divide the result of step 1 by the total number of days in the calendar year (365—or 366 in a leap year). This gives you the particula station's DSE for the accounting period.

### TOTAL OF DSEs

In part 5 of this schedule you are asked to add up the DSEs for all of the distant television stations your cable system carried during the accounting period. This is the total sum of all DSEs computed by the basic formula and by the special formula.

### THE ROYALTY FEE

The total royalty fee is determined by calculating the minimum fee anc the base rate fee. In addition, cable systems located within certain television market areas may be required to calculate the 3.75 fee and/or the Syndicated Exclusivity Surcharge. Note: Distant multicast streams are not subject to the 3.75 fee or the Syndicated Exclusivity Surcharge. Distant simulcast streams are not subject to any royalty payment

The 3.75 Fee. If a cable system located in whole or in part within  $\varepsilon$  television market added stations after June 24, 1981, that would not have been permitted under FCC rules, regulations, and authorizations (hereafter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge

The Syndicated Exclusivity Surcharge. Cable systems located in whole or in part within a major television market, as defined by FCC rules and regulations, must calculate a Syndicated Exclusivity Surcharge for the carriage of any commercial VHF station that places a grade B contour, 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 sys-

tems 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, noncommercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)] in effect on June 24, 1981.

4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.

5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

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

Substitution of Grandfathered Stations. Under section 76.65 of the former FCC rules, a cable system was not required to delete any statior that it was authorized to carry or was lawfully carrying prior to March 31 1972, even if the total number of distant stations carried exceeded the market quota imposed for the importation of distant stations. Carriage of these grandfathered stations is not subject to the 3.75 percent rate but is subject to the Base Rate, and where applicable, the Syndicatec Exclusivity Surcharge. The Copyright Royalty Tribunal has stated its view that, since section 76.65 of the former FCC rules would not have permitted substitution of a grandfathered station, the 3.75 percent Rate applies to a station substituted for a grandfathered station if carriage of the station exceeds the market quota imposed for the importation of distant stations.

# COMPUTING THE 3.75 PERCENT RATE—PART 6 OF THE DSE SCHEDULE

- Determine which distant stations were carried by the system pursuan to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/o part-time basis only and complete the log to determine the portion of the DSE exempt from the 3.75 percent rate.
- Subtract the number of DSEs resulting from this carriage from the number of DSEs reported in part 5 of the DSE Schedule. This is the total number of DSEs subject to the 3.75 percent rate. Multiply these DSEs by gross receipts by .0375. This is the 3.75 fee.

### COMPUTING THE SYNDICATED EXCLUSIVITY SURCHARGE— PART 7 OF THE DSE SCHEDULE

- Determine if any portion of the cable system is located within a top 100 major television market as defined by the FCC rules and regulations in effect on June 24, 1981. If no portion of the cable system is located ir a major television market, part 7 does not have to be completed.
- Determine which station(s) reported in block B, part 6 are commercial VHF stations and place a grade B contour, in whole, or in part, over the cable system. If none of these stations are carried, part 7 does not have to be completed.
- Determine which of those stations reported in block b, part 7 of the DSE Schedule were carried before March 31,1972. These stations are exempt from the FCC's syndicated exclusivity rules in effect on June 24 1981. If you qualify to calculate the royalty fee based upon the carriage of partially-distant stations, and you elect to do so, you must compute the surcharge in part 9 of this schedule.
- Subtract the exempt DSEs from the number of DSEs determined in block B of part 7. This is the total number of DSEs subject to the Syndicated Exclusivity Surcharge.
- Compute the Syndicated Exclusivity Surcharge based upon these DSEs and the appropriate formula for the system's market position.

### DSE SCHEDULE. PAGE 11.

### COMPUTING THE BASE RATE FEE-PART 8 OF THE DSE SCHEDULE

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

· If none of the stations were partially distant, calculate your base rate fee according to the following rates—for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable. First DSF 1.064% of gross receipts

Each of the second, third, and fourth DSEs 0.701% of gross receipts The fifth and each additional DSE

# 0.330% of gross receipts PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

If any of the stations were partially distant:

1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.

2. Identify the communities/areas represented by each subscriber group. 3. For each subscriber group, calculate the total number of DSEs of

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

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

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

TOTAL DSEs

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

CITY

Santa Rosa

Rapid City

Fairvale

Bodega Bay

DSE

1.0

1.0

0.083

0.139

0.25

2.472

Distant Stations Carried STATION In most cases under current FCC rules, all of Fairvale would be within A (independent) B (independent) the local service area of both stations C (part-time) A and C and all of Rapid City and Bo-D (part-time) dega Bay would be within the local E (network) service areas of stations B, D, and E.



| 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   |

Identification of Subscriber Groups

OUTSIDE LOCAL

Stations A and C

Stations A and C

Stations B. D. and E

TOTAL GROSS RECEIPTS

SERVICE AREA OF

Stations A, B, C, D ,E

In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

GROSS RECEIPTS

\$310,000.00

100,000.00

70,000.00

120,000.00

\$600,000.00

FROM SUBSCRIBERS

# DSE SCHEDULE. PAGE 11. (CONTINUED)

| 1                           | LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# CEQUEL COMMUNICATIONS LLC 010647  |       |                                 |             |           |     |  |  |  |  |  |
|-----------------------------|---|-------|---------------------------------|-------------|-----------|-----|--|--|--|--|--|
|                             | 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.         1.00   |       |                                 |             |           |     |  |  |  |  |  |
| 2<br>Computation            | Instructions:<br>In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5<br>of space G (page 3).<br>In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom- |       |                                 |             |           |     |  |  |  |  |  |
| of DSEs for<br>Category "O" | mercial educational station, give the DSE as ".25."<br>CATEGORY "O" STATIONS: DSEs  |       |                                 |             |           |     |  |  |  |  |  |
| Stations                    | CALL SIGN   | DSE   | CATEGORT O STATION<br>CALL SIGN | DSLS<br>DSE | CALL SIGN | DSE |  |  |  |  |  |
|                             | KAET  | 0.250 |                                 | _           |           | _   |  |  |  |  |  |
|                             | KAET-KIDS   | 0.250 |                                 |             |           |     |  |  |  |  |  |
|                             | KAET-LIFE   | 0.250 |                                 |             |           |     |  |  |  |  |  |
|                             | KAET-WORLD  | 0.250 |                                 |             |           |     |  |  |  |  |  |
| Add rows as                 |   |       |                                 |             |           |     |  |  |  |  |  |
| necessary.                  |   |       |                                 |             |           |     |  |  |  |  |  |
| Remember to copy            |   |       |                                 |             |           |     |  |  |  |  |  |
| all formula into new        |   |       |                                 |             |           |     |  |  |  |  |  |
| rows.                       |   |       |                                 |             |           |     |  |  |  |  |  |
|                             |   |       |                                 |             |           |     |  |  |  |  |  |
|                             |   |       |                                 |             |           |     |  |  |  |  |  |
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|                             |   |       |                                 |             |           |     |  |  |  |  |  |
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|                             |   |       |                                 |             |           |     |  |  |  |  |  |
|                             |   |       |                                 |             |           |     |  |  |  |  |  |
|                             |   |       |                                 |             |           |     |  |  |  |  |  |
|                             |   |       |                                 |             |           |     |  |  |  |  |  |
|                             |   |       |                                 |             |           |     |  |  |  |  |  |
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|                             |   |       |                                 |             |           |     |  |  |  |  |  |
|                             |   |       |                                 |             |           |     |  |  |  |  |  |
|                             |   |       |                                 |             |           |     |  |  |  |  |  |
|                             |   |       |                                 |             |           |     |  |  |  |  |  |
|                             |   |       |                                 |             |           |     |  |  |  |  |  |
|                             |   |       |                                 |             |           |     |  |  |  |  |  |
|                             |   |       |                                 |             |           |     |  |  |  |  |  |
|                             |   |       |                                 |             |           |     |  |  |  |  |  |

| Name   | LEGAL NAME OF  | OMMUNICATIONS L   |   |   |   |  |  | S   | 0106                 |
|--|--|---|---|---|---|--|--|---|----------------------|
| <b>3</b><br>Computation<br>of DSEs for<br>Stations<br>Carried Part<br>Time Due to<br>Lack of<br>Activated<br>Channel | Column 3<br>figure should<br>Column 3<br>be carried ou<br>Column 3<br>give the type<br>Column 4  | <ul> <li>CAPACITY<br/>ist the call sign of all dis</li> <li>For each station, give<br/>correspond with the inf</li> <li>For each station, give</li> <li>Divide the figure in contrast to the third dee</li> <li>For each independent</li> <li>-value as ".25."</li> <li>Multiply the figure in a<br/>point. This is the station</li> </ul>  | e the number o<br>formation given<br>e the total num<br>olumn 2 by the<br>cimal point. Th<br>tt station, give<br>column 4 by th   | of hours your cable systen<br>in space J. Calculate of<br>ber of hours that the sta-<br>figure in column 3, and<br>is is the "basis of carria<br>the "type-value" as "1.0<br>e figure in column 5, ar   | em carried the sta<br>only one DSE for<br>ation broadcast ou<br>I give the result in<br>ge value" for the<br>." For each netwo<br>nd give the result  | ation during the a<br>each station.<br>/er the air during<br>decimals in colu<br>station.<br>/rk or noncomme<br>in column 6. Rou                           | the accour<br>mn 4. This<br>rcial educa<br>nd to no le   | nting period.<br>s figure must<br>ational station,<br>ess than the                                      |                      |
| Capacity   |  |   | CATEGOR   | Y LAC STATIONS  | COMPUTAT  | ION OF DSE   | 8  |   |                      |
|  | 1. CALL<br>SIGN  | 2. NUMB<br>OF HC<br>CARR<br>SYSTI   | DURS<br>LIED BY<br>EM   | 3. NUMBER<br>OF HOURS<br>STATION<br>ON AIR  | 4. BASIS O<br>CARRIAC<br>VALUE  | E  | . TYPE<br>VALUE  | 6. DS   | SE                   |
|  |  |   |   | ÷<br>÷  |   |  |  | =   |                      |
|  |  |   | ÷   | •   | =   | x  |  | =   |                      |
|  |  |   | *   | •   | =   | x  |  | =   |                      |
|  |  |   |   | -   |   |  |  |   |                      |
|  |  |   |   |   |   |  |  |   |                      |
|  | Add the DSEs<br>Enter the su<br>Instructions:<br>Column 1: Giv<br>• Was carried<br>tions in effe<br>• Broadcast of<br>space I).  | s OF CATEGORY LAC<br>of each station.<br>um here and in line 2 of<br>ve the call sign of each<br>d by your system in sub<br>ect on October 19, 1976<br>one or more live, nonnet   | f part 5 of this s<br>station listed in<br>stitution for a p<br>6 (as shown by<br>work programs   | n space I (page 5, the L<br>program that your syste<br>the letter "P" in columr<br>during that optional car   | og of Substitute F<br>m was permitted<br>n 7 of space I); an<br>riage (as shown by  | to delete under F<br>d<br>v the word "Yes" in  | CC rules a   | of  |                      |
| -<br>Computation<br>of DSEs for<br>Substitute-   | Add the DSEs<br>Enter the su<br>Instructions:<br>Column 1: Giv<br>• Was carrie-<br>tions in effe<br>• Broadcast<br>space 1).<br>Column 2:<br>at your option.<br>Column 3:<br>Column 4:   | of each station.<br>um here and in line 2 of<br>ve the call sign of each and<br>d by your system in sub<br>ect on October 19, 1976  | station listed in<br>station listed in<br>stitution for a p<br>6 (as shown by<br>work programs<br>ne number of li<br>respond with th<br>rys in the calen<br>umn 2 by the fig  | n space I (page 5, the L<br>program that your syste<br>y the letter "P" in columr<br>s during that optional car<br>ive, nonnetwork program<br>ne information in space<br>idar year: 365, except in<br>gure in column 3, and g   | og of Substitute F<br>m was permitted<br>n 7 of space I); an<br>riage (as shown by<br>ns carried in subs<br>I.<br>n a leap year.<br>jive the result in c  | to delete under F<br>d<br>r the word "Yes" in<br>stitution for progra<br>olumn 4. Round f  | station:<br>CC rules a<br>a column 2 d<br>ams that w<br>to no less t   | of<br>vere deleted<br>than the third  | rm).                 |
| -<br>Computation<br>of DSEs for  | Add the DSEs<br>Enter the su<br>Instructions:<br>Column 1: Giv<br>• Was carrie-<br>tions in effe<br>• Broadcast<br>space 1).<br>Column 2:<br>at your option.<br>Column 3:<br>Column 4:   | of each station.<br>um here and in line 2 of<br>ve the call sign of each<br>d by your system in sub<br>ect on October 19, 1976<br>one or more live, nonnet<br>For each station give th<br>This figure should corr<br>Enter the number of da<br>Divide the figure in colu<br>This is the station's DS  | station listed in<br>stitution for a p<br>6 (as shown by<br>work programs<br>ne number of li<br>respond with th<br>nys in the calen<br>umn 2 by the fig<br>E (For more in   | n space I (page 5, the L<br>program that your syste<br>y the letter "P" in columr<br>s during that optional car<br>ive, nonnetwork program<br>ne information in space<br>idar year: 365, except in<br>gure in column 3, and g   | og of Substitute F<br>m was permitted<br>n 7 of space I); an<br>riage (as shown by<br>ms carried in subs<br>I.<br>n a leap year.<br>jive the result in c<br>see page (viii) of                                  | to delete under F<br>d<br>• the word "Yes" in<br>stitution for progra<br>olumn 4. Round t<br>the general instru  | station:<br>CC rules a<br>n column 2 o<br>ams that w<br>to no less f<br>uctions in t   | of<br>vere deleted<br>than the third  |                      |
| -<br>Computation<br>of DSEs for<br>Substitute-   | Add the DSEs<br>Enter the su<br>Instructions:<br>Column 1: Giv<br>• Was carrie-<br>tions in effe<br>• Broadcast<br>space 1).<br>Column 2:<br>at your option.<br>Column 3:<br>Column 4:   | of each station.<br>um here and in line 2 of<br>ve the call sign of each<br>d by your system in sub<br>ect on October 19, 1976<br>one or more live, nonnet<br>For each station give th<br>This figure should corr<br>Enter the number of da<br>Divide the figure in colu<br>This is the station's DS  | station listed in<br>stitution for a p<br>6 (as shown by<br>work programs<br>ne number of li<br>respond with th<br>nys in the calen<br>umn 2 by the fig<br>E (For more in   | n space I (page 5, the L<br>program that your syste<br>y the letter "P" in column<br>a during that optional car<br>ive, nonnetwork program<br>the information in space<br>dar year: 365, except in<br>gure in column 3, and g<br>formation on rounding,<br><u>E-BASIS STATION</u><br>BER 4. DSE   | og of Substitute F<br>m was permitted<br>n 7 of space I); an<br>riage (as shown by<br>ms carried in subs<br>I.<br>n a leap year.<br>jive the result in c<br>see page (viii) of                                  | to delete under F<br>d<br>• the word "Yes" in<br>stitution for progra<br>olumn 4. Round t<br>the general instru  | station:<br>CC rules a<br>a column 2 d<br>ams that w<br>to no less t<br>uctions in t<br>SES<br>ER                            | of<br>vere deleted<br>than the third  | ,<br>                |
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| Instructions: Bloc<br>In block A:<br>• If your answer if<br>schedule. | "Yes," leave the re  | emainder of p  | ·   | 7 of the DSE sche  | edule blank a  | nd complete p                                | art 8, (page 16) of   | the                 | 6  |
| <ul> <li>If your answer if</li> </ul>                                 | "No," complete blo   |  |   | ELEVISION M  | VDKETS   |  |                       |                     | Computation of                                   |
| Is the cable syster   | m located wholly o   |  |   |  |  | ection 76 5 of                               | FCC rules and red     | oulations in        | 3.75 Fee   |
| effect on June 24,  | 1981?  |  |   | PLETE THE REM  |  |  |                       | guiadorio in        |  |
|   | lete blocks B and  |  |   |  |  |  |                       |                     |  |
|   |  | BLOO   | CK B: CARR  | IAGE OF PERI   | MITTED DS  | SEs  |                       |                     |  |
| Column 1:<br>CALL SIGN  | under FCC rules  | and regulation of the second regreation of the second regreation of the second regreation of the | ons prior to Ju<br>dule. (Note: Tl  | part 2, 3, and 4 of<br>ne 25, 1981. For fu<br>ne letter M below r<br>Act of 2010.)                         | urther explana                                       | ation of permit                              | ted stations, see th  | he                  |  |
| Column 2:<br>BASIS OF<br>PERMITTED<br>CARRIAGE                        | (Note the FCC ru<br>A Stations carri<br>76.61(b)(c)]                                       | ules and regu<br>ed pursuant f   | lations cited b<br>to the FCC ma  | usis on which you of<br>elow pertain to tho<br>rket quota rules [7<br>76.59(d)(1), 76.61(                  | se in effect o<br>6.57, 76.59(b                      | n June 24, 19<br>), 76.61(b)(c)              | 76.63(a) referring    | ı tc                |  |
|   | C Noncommeric<br>D Grandfathered<br>instructions fo<br>E Carried pursu<br>*F A station pre | al educationa<br>d station (76.0<br>or DSE sched<br>ant to individu<br>viously carrie<br>JHF station w   | al station [76.5<br>65) (see parag<br>lule).<br>ual waiver of F<br>ed on a part-tin<br>⁄ithin grade-B | 9(c), 76.61(d), 76.<br>graph regarding su<br>CC rules (76.7)<br>ne or substitute ba<br>contour, [76.59(d)( | 63(a) referrin<br>bstitution of g<br>sis prior to Ju | g to 76.61(d)<br>randfathered<br>ine 25, 198 | stations in the       | (5)                 |  |
| Column 3:   |  | e stations ide   | ntified by the I  | n parts 2, 3, and 4<br>etter "F" in column   |  |  | worksheet on page     | e 14 of             |  |
| 1. CALL<br>SIGN   | 2. PERMITTED<br>BASIS  | 3. DSE   | 1. CALL<br>SIGN   | 2. PERMITTED<br>BASIS  | 3. DSE   | 1. CALL<br>SIGN                              | 2. PERMITTED<br>BASIS | 3. DSE              |  |
| KAET  | C  | 0.25   |   |  |  |  |                       |                     |  |
| KAET-KIDS   |  | 0.25<br>0.25   |   |  |  |  |                       |                     |  |
| KAET-WOR  |  | 0.25   |   |  |  |  |                       |                     |  |
|   |  | 0.20   |   |  |  |  |                       |                     |  |
|   |  |  |   |  |  |  |                       |                     |  |
|   |  |  | I   | I  | I  |  |                       | 1.00                |  |
|   |  | B  |   |  | - 3 75 FFF   |  |                       |                     |  |
| Line 1: Enter the   | total number of  |  |   |  | 0.10122  |  |                       | 1.00                |  |
| Line 2: Enter the   | sum of permitte  | ed DSEs from   | m block B ab  | ove  |  |  |                       | 1.00                |  |
| Line 3: Subtract<br>(If zero, l                                       |  |  |   | r of DSEs subjec<br>7 of this schedu   |  | i rate.                                      |                       | 0.00                |  |
| Line 4: Enter gro   | ess receipts from  | space K (p   | age 7)  |  |  |  | x 0.03                | 375                 | Do any of the<br>DSEs represent<br>partially     |
| Line 5: Multiply li   | ine 4 by 0.0375  | and enter su   | um here   |  |  |  |                       |                     | permited/<br>partially<br>nonpermitted           |
| Line 6: Enter tota  | al number of DS  | Es from line   | 3   |  |  |  |                       | -                   | carriage?<br>If yes, see part<br>9 instructions. |
| Line 7: Multiply li   | ine 6 by line 5 ai   | nd enter her   | e and on line   | 2, block 3, spac   | e L (page 7)   |  |                       | 0.00                |  |

DSE SCHEDULE. PAGE 13.

|                |                 | WNER OF CABLE         |       |                 |                       |          |                 | S                     | YSTEM ID# |                |
|----------------|-----------------|-----------------------|-------|-----------------|-----------------------|----------|-----------------|-----------------------|-----------|----------------|
| CE             | QUEL COM        | MUNICATION            | S LLC |                 |                       |          |                 |                       | 010647    | Name           |
|                |                 |                       | BLOCK |                 | ISION MARKET          |          |                 |                       |           |                |
|                | 1. CALL<br>SIGN | 2. PERMITTED<br>BASIS |       | 1. CALL<br>SIGN | 2. PERMITTED<br>BASIS |          | 1. CALL<br>SIGN | 2. PERMITTED<br>BASIS | 3. DSE    | 6              |
|                | 0.011           | Di toto               |       | 0.011           |                       |          | CIGIT           | Di toro               |           | Computation of |
|                |                 |                       |       |                 |                       |          |                 |                       |           | 3.75 Fee       |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
| •••••          |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 | •                     | ••••••    |                |
|                |                 |                       |       |                 |                       |          |                 | •                     |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
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|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
| •••••          |                 |                       |       |                 |                       |          |                 |                       | ••••••    |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
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|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 | •                     | ••••••    |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
| •••••          |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
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|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
| •••••          |                 |                       |       |                 |                       |          |                 |                       | ••••••    |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
| •••••          |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
| <mark> </mark> |                 |                       |       |                 |                       | <b> </b> |                 |                       |           |                |
| <mark> </mark> |                 |                       |       |                 |                       |          |                 |                       |           |                |
| <b>-</b>       |                 |                       |       | -               |                       | <u>+</u> |                 |                       |           |                |
|                |                 |                       |       |                 |                       | <b>_</b> |                 |                       |           |                |
|                |                 |                       |       |                 |                       |          |                 |                       |           |                |
|                |                 |                       |       |                 |                       | <b>.</b> |                 |                       |           |                |
|                |                 |                       |       |                 |                       | <b>.</b> |                 |                       |           |                |
| <mark> </mark> |                 |                       |       |                 |                       | <b>.</b> |                 |                       |           |                |
|                |                 |                       |       |                 |                       | <b>.</b> |                 |                       |           |                |

|   |  |   |  |  |   |   |   | DULE. PAGE 14.   |  |
|---|--|---|--|--|---|---|---|------------------|--|
| Name  | LEGAL NAME OF OWN  |   |  |  |   |   | S   | YSTEM ID#        |  |
| Name  | CEQUEL COM   | MUNICATIONS LI  | _C   |  |   |   |   | 010647           |  |
| Worksheet for<br>Computating<br>the DSE<br>Schedule for<br>Permitted<br>Part-Time and<br>Substitute<br>Carriage | stations carried pric<br>Column 1: List the<br>Column 2: Indicate<br>Column 3: Indicate<br>Column 4: Indicate<br>(Note that the Fr<br>A—Part-time sp<br>76.59)<br>B—Late-night pr<br>76.61)<br>S—Substitute ca<br>gener:<br>Column 5: Indicate<br>Column 5: Indicate<br>Column 6: Compar<br>in block   | or to June 25, 1981, u<br>call sign for each dista<br>the DSE for this stati-<br>the accounting period<br>the basis of carriage<br>CC rules and regulati-<br>ecialty programming:<br>(d)(1),76.61(e)(1), or<br>rogramming: Carriage<br>(e)(3)).<br>arriage under certain<br>al instructions in the p<br>the station's DSE for<br>the DSE figures lists<br>t B, column 3 of part 6 | nder former<br>ant station id<br>on for a sing<br>d and year in<br>on which the<br>Carriage, or<br>76.63 (referri<br>e under FCC<br>FCC rules, r<br>haper SA3 fo<br>the current a<br>ed in column<br>for this stati<br>n columns 2 | FCC rules gove<br>lentifed by the l<br>le accounting p<br>n which the carr<br>e station was ca<br>low pertain to th<br>a part-time ba<br>ing to 76.61(e)(<br>rules, sections<br>egulations, or a<br>arm.<br>accounting peri-<br>ion. | dentifed by the letter "leming part-time and su<br>etter "F" in column 2 of<br>eriod, occurring betwe<br>iage and DSE occurre-<br>tried by listing one of the<br>ose in effect on June 2<br>sis, of specialty progra<br>1)).<br>76.59(d)(3), 76.61(e)(<br>uthorizations. For further<br>od as computed in partist the smaller of the two<br>be accurate and is su | Ibstitute carriage.<br>f part 6 of the DSE si<br>en January 1, 1978<br>d (e.g., 1981/1)<br>the following letters<br>24, 1981.<br>Imming under FCC r<br>3), or 76.63 (referring<br>her explanation, see<br>ts 2, 3, and 4 of this<br>vo figures here. This | chedule<br>and June 30, 19<br>ules, sections<br>g to<br>page (vi) of the<br>schedule<br>figure should b | 981<br>e enterei |  |
|   |  |   |  |  |   |   |   |                  |  |
|   | 1. CALL  | 2. PRIOR  |  | OUNTING  | D ON A PART-TIME A<br>4. BASIS OF   | 5. PRESEN   |   | ERMITTED         |  |
|   | SIGN   | 2. PRIOR<br>DSE   |  | RIOD   | 4. BASIS OF<br>CARRIAGE   | 5. PRESEN<br>DSE  | I 6. P  | DSE              |  |
|   |  | DGE   | FE   |  | UARRIAGE  | DSE   |   | DOL              |  |
|   |  |   |  |  |   |   |   |                  |  |
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|   |  |   |  | ••••••   |   |   |   |                  |  |
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|   |  |   | ·  |  |   |   |   |                  |  |
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|   |  |   |  |  |   |   |   |                  |  |
|   |  |   |  |  |   |   |   |                  |  |
| 7<br>Computation<br>of the<br>Syndicated<br>Exclusivity<br>Surcharge  | Instructions: Block A must be completed.<br>In block A:<br>If your answer is "Yes," complete blocks B and C, below.<br>If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule.<br>BLOCK A: MAJOR TELEVISION MARKET<br>• 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? |   |  |  |   |   |   |                  |  |
|   | X Yes—Complete   | biocks b and C .  |  |  | No—Proceed  |   |   |                  |  |
|   | BLOCK B: C   | arriage of VHF/Grade  | B Contour S  | Stations   | BLOO  | CK C: Computation c   | of Exempt DSEs  | i                |  |
|   |  | ion that places a grad  | e B contour,   | in whole   | Was any station listed in block B of part 7 carried in any commu-<br>nity served by the cable system prior to March 31, 1972? (refe<br>to former FCC rule 76.159)<br>Yes—List each station below with its appropriate permitted DSE<br>X No—Enter zero and proceed to part 8.   |   |   | ? (refe          |  |
|   |  |   |  |  |   | ,   |   |                  |  |
|   | CALL SIGN  | DSE CA  | LL SIGN  | DSE  | CALL SIGN   | DSE   | CALL SIGN   | DSE              |  |
|   |  |   |  |  |   |   |   |                  |  |
|   |  |   |  |  |   |   |   |                  |  |
|   |  |   |  |  |   |   |   |                  |  |
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|   |  |   |  |  |   |   |   |                  |  |
|   |  |   |  |  |   | <b>  </b>   |   |                  |  |
|   |  | тот   | AL DSEs  | 0.00   |   | т.  | OTAL DSEs   | 0.00             |  |
|   |  |   |  | 0.00   |   |   |   | 0.00             |  |

L

| LEGAL NA      | ME OF OWNER OF CABLE SYSTEM:<br>CEQUEL COMMUNICATIONS LLC  | SYSTEM ID#<br>010647 | Name                     |
|---------------|--|----------------------|--------------------------|
|               | BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE   |                      |                          |
| Section<br>1  | Enter the amount of gross receipts from space K (page 7)   | 1,900,388.83         | 7                        |
| Section<br>2  | A. Enter the total DSEs from block B of part 7   | 0.00                 | Computation              |
|               | B. Enter the total number of exempt DSEs from block C of part 7  | 0.00                 | of the<br>Syndicated     |
|               | 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                 | Exclusivity<br>Surcharge |
| • Is an       | y portion of the cable system within a top 50 television market as defined by the FCC?  X Yes—Complete section 3 below. No—Complete section 4 below.   |                      |                          |
|               | SECTION 3: TOP 50 TELEVISION MARKET  |                      |                          |
| Section<br>3a | Did your cable system retransmit the signals of any partially distant television stations during the accounting period?     Yes—Complete part 9 of this schedule.     X No—Complete the applicable section below.  |                      |                          |
|               | If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.  | SE                   |                          |
|               | A. Enter 0.00599 of gross receipts (the amount in section1)  |                      |                          |
|               | B. Enter 0.00377 of gross receipts (the amount in section.1) * \$  |                      |                          |
|               | C. Subtract 1.000 from total permitted DSEs (the figure on   |                      |                          |
|               | line C in section 2) and enter here  | _                    |                          |
|               | D. Multiply line B by line C and enter here  |                      |                          |
|               | E. Add lines A and D. This is your surcharge.<br>Enter here and on line 2 of block 4 in space L (page 7)<br>Syndicated Exclusivity Surcharge   |                      |                          |
| Section<br>3b | If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.   |                      |                          |
|               | A. Enter 0.00599 of gross receipts (the amount in section 1)   |                      |                          |
|               | B. Enter 0.00377 of gross receipts (the amount in section 1)   |                      |                          |
|               | C. Multiply line B by 3.000 and enter here   | _                    |                          |
|               | D. Enter 0.00178 of gross receipts (the amount in section 1)   |                      |                          |
|               | E. Subtract 4.000 from total DSEs (the figure on line C in section 2) and enter here   | -                    |                          |
|               | F. Multiply line D by line E and enter here  | _                    |                          |
|               |  |                      |                          |
|               | G. Add lines A, C, and F. This is your surcharge.<br>Enter here and on line 2 of block 4 in space L (page 7)<br>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<br>4a | Yes       Complete part 9 of this schedule.       X       No       Complete the applicable section below.  |                      |                          |
|               | If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.<br>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.<br>Enter here and on line 2 of block 4 in space L (page 7)<br>Syndicated Exclusivity Surcharge   |                      |                          |
|               |  | i                    |                          |

| DSE | SCHED | ULE. | PAGE | 16 |
|-----|-------|------|------|----|

| [   | LEGAL NAM  | DSE SCHEDU<br>ME OF OWNER OF CABLE SYSTEM: S  | ILE. PAGE 16. |
|---|--|---|---------------|
| Name  |  | CEQUEL COMMUNICATIONS LLC   | 010647        |
| 7<br>Computation<br>of the<br>Syndicated<br>Exclusivity | Section<br>4b  | If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.<br>A. Enter 0.00300 of gross receipts (the amount in section 1)  |               |
| Surcharge   |  | C. Multiply line B by 3.000 and enter here  |               |
|   |  | D. Enter 0.00089 of gross receipts (the amount in section 1)  | _             |
|   |  | E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here  |               |
|   |  | F. Multiply line D by line E and enter here▶ \$   |               |
|   |  | G. Add lines A, C, and F. This is your surcharge.<br>Enter here and on line 2, block 4, space L (page 7)<br>Syndicated Exclusivity Surcharge.   |               |
| 8<br>Computation<br>of<br>Base Rate Fee                 | You m<br>6 was<br>• In blo<br>• If you<br>• If you<br>blank<br>What i<br>were lo | ctions:<br>ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of par<br>checked "Yes," use the total number of DSEs from part 5.<br>bck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.<br>ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.<br>ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below<br>c.<br>is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers<br>bocated within that station's local service area and others were located outside that area. For the definition of a station's "local<br>te area," see page (v) of the general instructions. |               |
|   |  | BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS   |               |
|   | • Did y  | our cable system retransmit the signals of any partially distant television stations during the accounting period?  |               |
|   | [  | Yes—Complete part 9 of this schedule. X No—Complete the following sections.   |               |
|   |  | BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE   |               |
|   | Section<br>1   | Enter the amount of gross receipts from space K (page 7)  | 3             |
|   | Section<br>2   | Enter the total number of permitted DSEs from block B, part 6 of this schedule.<br>(If block A of part 6 was checked "Yes,"<br>use the total number of DSEs from part 5.)   | 0             |
|   | Section<br>3   | If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.<br>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>1</u>      |
|   |  | B. Enter 0.00701 of gross receipts (the amount in section 1)▶ \$ 13,321.73  |               |
|   |  | 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<br>and in block 3, line 1, space L (page 7)   | 20,220.14     |
|   |  | Base Rate Fee   | <u></u> .     |

| LEGAL N   | AME OF OWNER OF CABLE SYSTEM: SYSTEM SYSTEM   |                          |  |  |  |  |  |
|---|---|--------------------------|--|--|--|--|--|
| CEQU  | IEL COMMUNICATIONS LLC 010  | 647 <sup>Name</sup>      |  |  |  |  |  |
| Section   | If the figure in section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.   |                          |  |  |  |  |  |
| 4   |   | 8                        |  |  |  |  |  |
|   | A. Enter 0.01064 of gross receipts  | O                        |  |  |  |  |  |
|   | (the amount in section 1) <b>&gt; \$</b>  |                          |  |  |  |  |  |
|   | 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) <b>§</b>  |                          |  |  |  |  |  |
|   | E. Subtract 4.000 from total DSEs   |                          |  |  |  |  |  |
|   | (the figure in section 2) and enter here  |                          |  |  |  |  |  |
|   | F. Multiply line D by line E and enter here   |                          |  |  |  |  |  |
|   | G. Add lines A, C, and F. This is your base rate fee.   |                          |  |  |  |  |  |
|   | Enter here and in block 3, line 1, space L (page 7)   |                          |  |  |  |  |  |
|   | Base Rate Fee S 0.0   | 0                        |  |  |  |  |  |
|   |   | L - U                    |  |  |  |  |  |
|   | TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals so be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in  |                          |  |  |  |  |  |
| Space   |   | 9                        |  |  |  |  |  |
|   | eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude  | this                     |  |  |  |  |  |
|   | s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of<br>on, you must:  | Base Rate Fee            |  |  |  |  |  |
| Eirot: [  | ivide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same  | and                      |  |  |  |  |  |
|   | or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number  | of Syndicated            |  |  |  |  |  |
|   | and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group   | Exclusivity<br>Surcharge |  |  |  |  |  |
| Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.   |   |                          |  |  |  |  |  |
|   | 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 n mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, the subscriber group is the subscriber group in the statement of the subscriber group. |                          |  |  |  |  |  |
|   | cable system is wholly located outside all major television markets, complete block A only.   | Stations, and            |  |  |  |  |  |
| How to  | Identify a Subscriber Group for Partially Distant Stations  | for Partially            |  |  |  |  |  |
| -   | For each community served, determine the local service area of each wholly distant and each partially distant station you   | Permitted<br>Stations    |  |  |  |  |  |
| carried to that community.  |   |                          |  |  |  |  |  |
| Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by |   |                          |  |  |  |  |  |
| the same token, the station is distant to the subscriber.)  |   |                          |  |  |  |  |  |
| 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 system will have only one subscriber group when the distant stations it carried have local service areas that coincide.                     |   |                          |  |  |  |  |  |
| Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber   |   |                          |  |  |  |  |  |
| groups.   |   |                          |  |  |  |  |  |
| In each section:  |   |                          |  |  |  |  |  |
| Identify the communities/areas represented by each subscriber group.     Cive the call sign for each of the attrians in the subscriber group's complement, that is each station that is distant to all of the   |   |                          |  |  |  |  |  |
| • 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,  |   |                          |  |  |  |  |  |
| and 4 of this schedule; or,<br>2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B   |   |                          |  |  |  |  |  |
| <ol> <li>any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B,<br/>part 6 of this schedule.</li> </ol>   |   |                          |  |  |  |  |  |
| Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.   |   |                          |  |  |  |  |  |
| Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions   |   |                          |  |  |  |  |  |
| in the paper SA3 form.  |   |                          |  |  |  |  |  |
| • Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total  |   |                          |  |  |  |  |  |
| DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your actual calculations on the form.  |   |                          |  |  |  |  |  |

|      | LEGAL NAME OF OWNER OF CABLE SYSTEM:   | STEM I |
|------|--|--------|
| Name | CEQUEL COMMUNICATIONS LLC  | 0106   |
|      | 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.<br>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  | 9      |
|      | 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.  |        |
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| LEGAL NAME OF OWNER                            |          |                 |                                    |  |                | SY        | STEM ID#<br>010647 | Name                    |
|--|----------|-----------------|------------------------------------|--|----------------|-----------|--------------------|-------------------------|
| BL   | OCK A: ( | COMPUTATION OF  | BASE RA                            | TE FEES FOR EACH                                   | SUBSCRI        | BER GROUP |                    |                         |
| FIRST SUBSCRIBER GROUP                         |          |                 |                                    | SECOND SUBSCRIBER GROUP                            |                |           |                    | 0                       |
|  |          |                 | 0                                  | COMMUNITY/ AREA 0                                  |                |           |                    | <b>9</b><br>Computation |
| CALL SIGN                                      | DSE      | CALL SIGN       | DSE                                | CALL SIGN  | DSE            | CALL SIGN | DSE                | of                      |
|  |          |                 |                                    |  |                |           |                    | Base Rate Fee           |
|  |          |                 |                                    |  |                |           |                    | and                     |
|  |          |                 |                                    |  |                | -         |                    | Syndicated              |
|  |          |                 |                                    |  | <mark>.</mark> |           |                    | Exclusivity             |
|  |          |                 |                                    |  |                |           |                    | Surcharge<br>for        |
|  | •••••    | -               |                                    |  | ·•             |           |                    | Partially               |
|  |          |                 |                                    |  |                |           |                    | Distant                 |
|  |          | -               |                                    |  |                |           |                    | Stations                |
|  |          |                 |                                    |  |                | _         |                    |                         |
|  |          |                 |                                    |  |                | -         |                    |                         |
|  |          |                 |                                    |  |                |           |                    |                         |
|  |          |                 |                                    |  | <mark></mark>  |           |                    |                         |
|  |          |                 |                                    |  | •              |           |                    |                         |
| Total DSEs                                     | II       |                 | 0.00                               | Total DSEs   |                |           | 0.00               |                         |
| Gross Receipts First Gr                        | oup      | \$              | 0.00                               | Gross Receipts Secor                               | nd Group       | \$        | 0.00               |                         |
|  |          |                 |                                    |  |                |           |                    |                         |
| Base Rate Fee First Gr                         |          | \$              | 0.00                               | Base Rate Fee Second Group         \$         0.00 |                |           |                    |                         |
|  | THIRD    | SUBSCRIBER GROU |                                    | FOURTH SUBSCRIBER GROUP                            |                |           |                    |                         |
| COMMUNITY/ AREA 0                              |          |                 | 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             |          | 0.00            | Gross Receipts Fourth              | n Group  | \$             | 0.00      |                    |                         |
| Base Rate Fee Third Group \$ 0.00              |          | 0.00            | Base Rate Fee Fourth Group \$ 0.00 |  |                | 0.00      |                    |                         |
|  |          |                 |                                    | 11   |                |           |                    |                         |
| Base Rate Fee: Add the Enter here and in block |          |                 | iber group                         | as shown in the boxes a                            | above.         | \$        | 0.00               |                         |

# Nonpermitted 3.75 Stations

| LEGAL NAME OF OWN                                   |             |                      |                    |                      |            | S                                     | 010647 | Name                |
|---|-------------|----------------------|--------------------|----------------------|------------|---------------------------------------|--------|---------------------|
| B   | LOCK A:     | COMPUTATION OF       | BASE RA            | ATE FEES FOR EAG     | CH SUBSCF  | RIBER GROUP                           |        |                     |
|   | FIRST       | SUBSCRIBER GROU      |                    | <u> </u>             |            | SUBSCRIBER GRO                        | UP     | 9                   |
| COMMUNITY/ AREA 0                                   |             |                      | 0                  | COMMUNITY/ ARE       | A          |                                       | 0      | -                   |
| CALL SIGN   | DSE         | CALL SIGN            | DSE                | CALL SIGN            | DSE        | CALL SIGN                             | DSE    | Computation<br>of   |
| CALL SIGN   | DSL         | CALL SIGN            | DOL                |                      | DGL        | CALL SIGN                             | DSL    | Base Rate Fe        |
|   |             |                      | · ·····            |                      |            |                                       |        | and                 |
|   |             |                      |                    |                      |            |                                       |        | Syndicated          |
|   |             |                      |                    |                      |            |                                       |        | Exclusivity         |
|   |             |                      |                    |                      |            |                                       |        | Surcharge           |
|   |             |                      |                    |                      |            |                                       |        | for                 |
|   |             |                      |                    |                      |            |                                       |        | Partially           |
|   |             |                      |                    |                      |            | •                                     |        | Distant<br>Stations |
|   |             |                      |                    | •                    |            |                                       |        | Stations            |
|   |             |                      |                    |                      |            | •                                     |        |                     |
|   |             |                      |                    |                      |            |                                       |        |                     |
|   |             |                      |                    |                      |            |                                       |        |                     |
|   |             |                      |                    |                      |            |                                       |        |                     |
|   |             |                      |                    |                      |            |                                       |        |                     |
| Total DSEs  |             |                      | 0.00               | Total DSEs           |            |                                       | 0.00   |                     |
| Gross Receipts First G                              | Group       | \$                   | 0.00               | Gross Receipts Sec   | cond Group | \$                                    | 0.00   |                     |
|   |             | - <u>-</u>           |                    |                      |            | · · · · · · · · · · · · · · · · · · · |        |                     |
| Base Rate Fee First G                               | Group       | \$                   | 0.00               | Base Rate Fee Sec    | cond Group | \$                                    | 0.00   |                     |
|   | THIRD       | SUBSCRIBER GROU      | JP                 |                      | FOURTH     | I SUBSCRIBER GRO                      | UP     |                     |
| COMMUNITY/ AREA                                     |             |                      | 0                  | COMMUNITY/ ARE       | Α          |                                       | 0      |                     |
| CALL SIGN   | DSE         | CALL SIGN            | DSE                | CALL SIGN            | DSE        | CALL SIGN                             | DSE    |                     |
|   |             |                      |                    |                      |            |                                       |        |                     |
|   |             |                      |                    |                      | ·····      |                                       |        |                     |
|   |             |                      |                    |                      |            |                                       |        |                     |
|   |             |                      |                    | •                    | ·····      |                                       |        |                     |
|   |             |                      | · ·····            |                      |            |                                       |        |                     |
|   |             |                      |                    |                      |            |                                       |        |                     |
|   |             |                      |                    |                      |            |                                       |        |                     |
|   |             |                      |                    |                      |            |                                       |        |                     |
|   |             |                      |                    |                      |            |                                       |        |                     |
|   |             |                      |                    |                      |            |                                       |        |                     |
|   |             |                      |                    |                      | ·····      |                                       |        |                     |
|   |             |                      | <b>.</b>           |                      |            | 1                                     |        |                     |
|   |             |                      |                    |                      |            |                                       |        |                     |
| Total DSEs  |             |                      | 0.00               | Total DSEs           |            |                                       | 0.00   |                     |
| Gross Receipts Third Group \$ 0.00                  |             | 0.00                 | Gross Receipts Fou | urth Group           | \$         | 0.00                                  |        |                     |
|   |             | - <u>-</u>           |                    |                      |            | <u>-</u>                              |        |                     |
| Base Rate Fee Third Group \$                        |             | \$                   | 0.00               | Base Rate Fee Fou    | ırth Group | \$                                    | 0.00   |                     |
|   |             |                      |                    | 11                   |            |                                       |        |                     |
| Bass Bots Free Add 1                                | ho <b>h</b> | to food for each and | ribor              |                      | a above    |                                       |        |                     |
| Base Rate Fee: Add the<br>Enter here and in bloc    |             |                      | nder group         | as snown in the boxe | es above.  | \$                                    | 0.00   |                     |
| Enter here and in block 3, line 1, space L (page 7) |             |                      |                    |                      |            | т                                     |        |                     |

| Name   | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>CEQUEL COMMUNICATIONS LLC   | SYSTEM ID#<br>010647  |  |  |  |  |  |  |
|--|---|---|--|--|--|--|--|--|
|  | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY 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 mustalso 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<br>of  | First 50 major television market  | Second 50 major television market   |  |  |  |  |  |  |
| Base Rate Fee  | INSTRUCTIONS:<br>Step 1: In line 1, give the total DSEs by subscriber group for commercia   | al VHE Grade B contour stations listed in block A part 9 of   |  |  |  |  |  |  |
| and<br>Syndicated<br>Exclusivity<br>Surcharge<br>for<br>Partially<br>Distant<br>Stations | y       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 |   |  |  |  |  |  |  |
|  | FIRST SUBSCRIBER GROUP  | SECOND SUBSCRIBER GROUP   |  |  |  |  |  |  |
|  |   | SECOND SUBSCRIBER GROUP   |  |  |  |  |  |  |
|  | Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs  |  |  |  |  |  |  |
|  | Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs   |  |  |  |  |  |  |
|  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation  | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation                                  |  |  |  |  |  |  |
|  | SYNDICATED EXCLUSIVITY SURCHARGE First Group  | SYNDICATED EXCLUSIVITY SURCHARGE Second Group   |  |  |  |  |  |  |
|  | THIRD SUBSCRIBER GROUP  | FOURTH SUBSCRIBER GROUP   |  |  |  |  |  |  |
|  | Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs  |  |  |  |  |  |  |
|  | Line 2: Enter the Exempt DSEs<br>Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | Line 2: Enter the Exempt DSEs<br>Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |  |  |  |  |  |  |
|  | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Third Group  | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>Fourth Group   |  |  |  |  |  |  |
|  | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each in the boxes above. Enter here and in block 4, line 2 of space L (page 7)  |   |  |  |  |  |  |  |
|  |   |   |  |  |  |  |  |  |