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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY							
DATE RECEIVED	AMOUNT						
08/29/2019	\$ ALLOCATION NUMBER						

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:										
Accounting Period	2019/1										
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the business of the cable system If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.										
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM										
	Atlantic Broadband (Penn) LLC										
		01044320191									
				010443 2019/1							
	2 Batterymarch Park, Suite 205										
	Quincy, MA 02169										
С	INSTRUCTIONS: In line 1, give any business or trade names used to id										
C	names already appear in space B. In line 2, give the mailing address of	the system, if diffe	erent from the address give	n in space B.							
System	1 IDENTIFICATION OF CABLE SYSTEM:										
	Atlantic Broadband										
	MAILING ADDRESS OF CABLE SYSTEM:										
	2 (Number, street, rural route, apartment, or suite number)										
	Johnstown, PA 15905										
	(City, town, state, zip code)										
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and rel	ist on page 1b							
Area	with all communities.										
Served	CITY OR TOWN	STATE									
First	Benson	PA									
Community	Below is a sample for reporting communities if you report multiple cha	nnel line-ups in S	pace G.								
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#							
Sample	Alda	MD	Α	1							
-	Alliance	MD	В	2							
	Gering	MD	В	3							

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

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 010443 Atlantic Broadband (Penn) LLC Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# **Benson** PA **First Brownstown** PA Community Conemaugh Township (Cambria) PA Conemaugh Township (Somerset) PA Daisytown PA 2 Dale PA See instructions for **East Taylor** PA additional information on alphabetization. 2 **Ferndale** PA Franklin PA Geistown PA 2 2 PA Jackson Add rows as necessary. PA Jenner PA Johnstown Lorain PA 2 PA **Lower Yoder** PA Middle Taylor Paint (Somerset) PA Quemahoning PA Richland PA Southmont PA 2 Stonycreek PA **Upper Yoder** PA **West Taylor** PA PA Westmont

1	

Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:

Atlantic Broadband (Penn) LLC

SYSTEM ID#

010443

Ε

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

Secondary Transmission Service: Subscribers and Rates **In General:** The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).

Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service).

Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.

Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. **Note:** Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)."

Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BL	OCK 1		BLOCK 2					
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	
Residential:								
 Service to first set 	15,313	\$	42.49	Expanded Basic	13,136	\$	59.67	
 Service to additional set(s) 				Value	28,449	\$	102.16	
 FM radio (if separate rate) 				Digital Value	1,625	\$	81.99	
Motel, hotel	29	\$	42.49	Digital Plus	-	\$	99.99	
Commercial	695	\$	42.49					
Converter								
Residential	80	\$	6.99			Ī		
Non-residential								

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2						
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RA	CATEGORY OF SERVICE	F	RATE	
Continuing Services:		Installation: Non-residential					
Pay cable	7.99 - 19.99	Motel, hotel			нво	\$	19.99
 Pay cable—add'l channel 		Commercial			Showtime	\$	19.99
Fire protection		Pay cable			Cinemax	\$	19.99
Burglar protection		Pay cable-add'l channel			Movie Ples	\$	9.00
Installation: Residential		Fire protection			2 Premium	\$	34.95
First set	\$ 50.00	Burglar protection			3 Premium	\$	49.95
 Additional set(s) 	\$ 40.00	Other services:			NFL Red Zone	\$	49.99
• FM radio (if separate rate)		Reconnect	\$ 4	40.00		Ī	
Converter		Disconnect				Ī	
		Outlet relocation	-	40.00		Ī	
		Move to new address	\$ 4	40.00		†	
						1	

FORM SA3E. PAGE 3.						•	
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Namo	
Atlantic Broadl	band (Penn)	LLC			010443	Italiio	
PRIMARY TRANSMITTI In General: In space (carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic	ERS: TELEVISIC G, identify even system during the ions in effect or 6.61(e)(2) and (sis, as explaine stations: With I CC rules, regula I here in space only on a subs and also in spa iformation conc irm. It station's call associated with I ca'. Simulcast is channel numb	y television st he accounting of June 24, 19 4), or 76.63 (I d in the next respect to any attons, or auth G—but do listitute basis. ace I, if the stateming substitute sign. Do not in a station acts at the statement of the station. Whether the statement of the station.	g period, except 81, permitting the referring to 76.6 paragraph. of distant stations orizations: t it in space I (the attion was carried tute basis station report origination coording to its own be reported in of an as assigned to annel 4 in Wash attion is a network etwork), "N-M" (I I educational), of	(1) stations carried ecarriage of certal (e)(2) and (4))]; as carried by your of the Especial Statement of both on a substitute, see page (v) of the program service er-the-air designation of the television statington, D.C. This work station, an indefer network multion "E-M" (for noncontribute)	s and low power television stations) ed only on a part-time basis under tain network programs [sections and (2) certain stations carried on a cable system on a substitute program tent and Program Log)—if the tute basis and also on some other of the general instructions located as such as HBO, ESPN, etc. Identify ation. For example, report multi- th stream separately; for example tion for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial cast), "I" (for independent), "I-M" commercial educational multicast). the paper SA3 form.	Primary Transmitters: Television	
For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the							
Note: If you are utilizing		nnel line-ups,	use a separate	space G for each	h which the station is identifed. channel line-up.		
	l		EL LINE-UP			-	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
WATM	12	N	No		Altoona, PA		
WJAC	6	N	No		Johnstown, PA	See instructions for	
WKBS	5	I	No		Altoona, PA	additional information on alphabetization.	
WPCW	15	I	No		Jeanette, PA	on arphabetization.	
WPSU	3	E	No		Clearfield, PA		
WQED	13	E	No		Pittsburgh, PA		
WTAE	4	N	No		Pittsburgh, PA		
WTAJ	10	N	No		Altoona, PA		
WWCP	8	N	No		Johnstown, PA		
WHVL	2	l	Yes	0	State College, PA		
WINP	22	<u> </u>	No		Pittsburgh, PA		

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Atlantic Broadband (Penn) LLC 010443 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. · List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your

cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AB	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WATM	12	N	No		Altoona, PA
WJAC	6	N	No		Johnstown, PA
WKBS	5	I	No		Altoona, PA
WPCW	15	I	Yes	0	Jeanette, PA
WPSU	3	E	No		Clearfield, PA
WQED	13	E	No		Pittsburgh, PA
WTAE	4	N	No		Pittsburgh, PA
WTAJ	10	N	No		Altoona, PA
WWCP	8	N	No		Johnstown, PA
WHVL	2	I	Yes	0	State College, PA
WINP	22	I	No		Pittsburgh, PA

FORM SA3E. PAGE 3.					Account	NGT EMOD. 2013/1	
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Atlantic Broadl	oand (Penn)	LLC			010443	Name	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs (sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "E" (for independent), "I-M" (for							
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.		
	ı	CHANN	EL LINE-UP	AC			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.					Account	NGT EMOD. 2013/1	
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name	
Atlantic Broadl	oand (Penn)	LLC			010443	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independe							
FCC. For Mexican or 0	Canadian statio	ns, if any, giv	e the name of th	ne community with	which the station is identifed.		
Note: If you are utilizing	ig multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.		
	T	CHANN	EL LINE-UP	AD			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
				•			

FORM SA3E. PAGE 3.					ACCOUNT	NG PERIOD: 2019/1	
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Atlantic Broadl	band (Penn)	LLC			010443	Name	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e							
substitute program bas Substitute Basis S				carried by your c	able system on a substitute program	Transmitters: Television	
basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the							
	and also in spa formation cond	ace I, if the sta			ute basis and also on some other f the general instructions located		
Column 1: List each	ch station's call	•		. •	s such as HBO, ESPN, etc. Identify		
cast stream as "WETA WETA-simulcast).	-2". Simulcast	streams must	be reported in o	column 1 (list each	tion. For example, report multi- n stream separately; for example		
its community of licens on which your cable sy	se. For example stem carried th	e, WRC is Cha ne station.	annel 4 in Wash	ington, D.C. This	on for broadcasting over-the-air in may be different from the channel		
educational station, by	entering the le	tter "N" (for n	etwork), "N-M" (for network multic	ependent station, or a noncommercial ast), "I" (for independent), "I-M" ammercial educational multicast).		
For the meaning of the	ese terms, see	page (v) of the	e general instruc	ctions located in th	,		
	ave entered "Y	es" in column	4, you must cor	mplete column 5, s	e paper SA3 form. stating the basis on which your sering "LAC" if your cable system		
carried the distant stat For the retransmiss	ion on a part-tir sion of a distant	me basis beca multicast stre	ause of lack of a eam that is not s	ctivated channel outpet to a royalty	capacity. payment because it is the subject		
the cable system and	a primary trans	mitter or an a	ssociation repre	senting the primar	stem or an association representing ry transmitter, enter the designa-		
explanation of these th	ree categories	, see page (v)	of the general i	instructions locate	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the		
FCC. For Mexican or One: If you are utilizing		, ,, ,		,	which the station is identifed. channel line-up.		
		CHANN	EL LINE-UP	AE			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)			
	NOMBER	CIATION		(II Distant)			

FORM SA3E. PAGE 3.				7.555	NG 1 EMOD. 2013/1			
LEGAL NAME OF OWNER OF CABLE SY	STEM:			SYSTEM ID#	Name			
Atlantic Broadband (Penn)	LLC			010443	Name			
PRIMARY TRANSMITTERS: TELEVISIO)N							
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for inde								
Note: If you are utilizing multiple char	nnel line-ups, use a s	separate space (G for each cha	annel line-up.				
	CHANNEL LI	NE-UP AF						
1. CALL 2. B'CAST CHANNEL NUMBER		or No) CAI	SIS OF 6. RRIAGE Distant)	LOCATION OF STATION				

FORM SA3E. PAGE 3.					ACCOUNT	NG PERIOD: 2019/1		
	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#							
Atlantic Broadl	band (Penn)	LLC			010443	Name		
PRIMARY TRANSMITTE	ERS: TELEVISIO	N						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a								
substitute program bas	. , . ,		•	1(C)(Z) and (+))], a	and (2) certain stations carried on a	Primary Transmitters:		
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the								
station was carried	•		t it iii space i (tii	ie Speciai Staterii	ent and Program Log)—It the			
	 List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located 							
Column 1: List each	ch station's call	•		. •	s such as HBO, ESPN, etc. Identify			
			•	•	tion. For example, report multi- n stream separately; for example			
Column 2: Give the					on for broadcasting over-the-air in may be different from the channel			
on which your cable sy Column 3: Indicate			tation is a netwo	ork station, an inde	pendent station, or a noncommercial			
educational station, by	entering the le	etter "N" (for n	etwork), "N-M" (for network multic	ast), "I" (for independent), "I-M" mmercial educational multicast).			
For the meaning of the	ese terms, see	page (v) of the	e general instruc	ctions located in th	,			
planation of local servi	ce area, see pa	age (v) of the	general instructi	ions located in the	paper SA3 form.			
					stating the basis on which your tering "LAC" if your cable system			
carried the distant stat	•				capacity. payment because it is the subject			
of a written agreement	entered into o	n or before Ju	une 30, 2009, be	etween a cable sys	stem or an association representing			
,			•	• .	ry transmitter, enter the designa- her basis, enter "O." For a further			
explanation of these th	ree categories	, see page (v)) of the general i	instructions locate	d in the paper SA3 form.			
				•	which the station is identifed.			
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.			
		CHANN	EL LINE-UP	AG				
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE				
	NUMBER	STATION		(If Distant)				
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Form SA3E Long Form (Rev. 05-17) U.S. Copyright Office

FORM SA3E. PAGE 3.					Account	NGT EMOD. 2013/1
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
Atlantic Broadl	oand (Penn)	LLC			010443	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
carried by your cable s	system during to ons in effect or i.61(e)(2) and (he accounting n June 24, 19 4), or 76.63 (r	period, except 81, permitting th referring to 76.6	(1) stations carrie	and low power television stations) ad only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary Transmitters:
Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For e explanation of these the	catations: With a CC rules, regular here in space only on a subsum and also in spate formation concurn. In station's call associated with associated with associated with associated with a channel numbers for each case we entering the least), "E" (for noise terms, see part of the concurrence of the distant station on a part-tilicion of a distant entered into of a primary trans simulcasts, also ree categories	respect to any ations, or auth G—but do listitute basis. ace I, if the staterning substitute basis. The state of the station ace streams must be the station. The station ace streams must be the station. The station whether the station accommercial page (v) of the the local servage (v) of the es" in column on during the sme basis becar multicast stream or before Jumitter or an accommet en accommendation of the station.	distant stations or distant stations or distant stations: It it in space I (the station was carried tute basis station report origination cording to its over the reported in order of the station is a network of the station is	de Special Statement of both on a substitute, see page (v) on program service: er-the-air designation of the television statistington, D.C. This bork station, an indefor network multicute of "E-M" (for noncontrollor of "E-M" (for noncontrollor of the television located in the mplete column 5, so the desired of the television of the te	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	Television
Note: If you are utilizing		nnel line-ups,	use a separate	space G for each	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	АП		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					Account	NGT EMOD. 2013/1	
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Atlantic Broad	oand (Penn)	LLC			010443	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e							
Note: If you are utilizing	g multiple char			·	channel line-up.		
	ı	CHANN	EL LINE-UP	Al			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.					Account	NG 1 EMOD. 2013/1
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
Atlantic Broadl	oand (Penn)	LLC			010443	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
carried by your cable s FCC rules and regulati	system during the ons in effect or i.61(e)(2) and (he accounting n June 24, 19 4), or 76.63 (r	period, except 81, permitting th referring to 76.6	(1) stations carrie	and low power television stations) ad only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary Transmitters:
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Note: If you are utilizing		nnel line-ups,	use a separate	space G for each	which the station is identifed. channel line-up.	
	1	CHANN	EL LINE-UP	AJ		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.					Accoonti	14G 1 EMOD. 2013/1	
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Atlantic Broadl	band (Penn)	LLC			010443	Name	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4)); and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network multi							
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.		
	1	CHANN	EL LINE-UP	AK			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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FORM SA3E. PAGE 3.						•
LEGAL NAME OF OWN					SYSTEM ID#	Name
Atlantic Broadl	pand (Penn)	LLC			010443	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)/2) and (4), 76.61(e)/2) and (4), or 76.63 (referring to 76.61(e)/2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as associated with a station according to its over-the-air designation. For example, report multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as associated with a station according to its over-the-air designation for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast),						
Note: If you are utilizing				•		
		CHANN	EL LINE-UP	AL		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						NG / EMOD. 2013/1
LEGAL NAME OF OWN					SYSTEM ID# 010443	Name
Atlantic Broad	•				010443	
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		CHANN	EL LINE-UP	AM		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3. LEGAL NAME OF OWN	NED UE CADI E CA	/STEM:			SYSTEM ID#	
Atlantic Broad					010443	Name
PRIMARY TRANSMITT		<u>'</u>				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76	system during the tions in effect or 6.61(e)(2) and (he accounting n June 24, 19 4), or 76.63 (r	period, except 81, permitting the referring to 76.6	(1) stations carrie	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary Transmitters:
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4.0011	2 PICACT		4. DISTANT?		C LOCATION OF STATION	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
				•		

FORM SA3E. PAGE 3.						,	
LEGAL NAME OF OWN					SYSTEM ID#	Name	
Atlantic Broadl	pand (Penn)	LLC			010443		
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—If the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of ilcnese. For example, WRG is channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "E" (for independent), "I-M" (for ind							
Note: If you are utilizing	ig multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.		
		CHANN	EL LINE-UP	AO			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
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FORM SA3E. PAGE 3.						NG 1 EMOD. 2013/1
LEGAL NAME OF OWN					SYSTEM ID# 010443	Name
Atlantic Broad					010443	
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you had cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	G, identify even by stem during the ions in effect or ions. With in CC rules, regular here in space only on a substand also in spatformation concirm. In the station's call associated with example in each case with example in each case with energy in each case with example ion on a part-time ion of a distant static ion on a part-time ion of a distant in entered into on a primary trans is included in each case, also incree categories in canadian station of each canadian station in each case, also increed categories in canadian station in each categories in categories in each cate	y television standard and accounting in June 24, 194, or 76.63 (in d in the next respect to any ations, or auth G—but do listitute basis. In the standard area in a station acceptable with the station acceptable with the station. In the station acceptable with the local service and the station acceptable with the local service and the station. In during the service in column and unring the service in column and unring the service in the station and the station are basis becamulational station or before Jumitter or an acceptable with the station. For the station are page (v) of the service in column are basis becamulational station or before Jumitter or an acceptable with the station. For the station are page (v) of	g period, except 81, permitting the ferring to 76.6 paragraph. It is in space I (the fitting the ferring to 76.6 paragraph. It is in space I (the fitting the fitting that is a satisfied to the fitting that is a satisfied to the fitting that is a network of the fitting that is not some some fitting that is not some 30, 2009, be some fitting the fitting that is not some 30, 2009, be some fitting that is not some 30, 2009, be some fitting that is not some 30, 2009, be some fitting that is not some 30, 2009, be some fitting that is not some 30, 2009, be some fitting that is not some 30, 2009, be some fitting that is not some 30, 2009, be some fitting that is not some fitt	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on a program services the television statification, D.C. This work station, an indefor network multicar "E-M" (for noncontions located in the special statement of the statemen	paper SA3 form. stating the basis on which your sering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing the basis, enter "O." For a further d in the paper SA3 form. To which the station is licensed by the which the station is identifed.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	AP		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN					SYSTEM ID#	Name		
Atlantic Broadb	and (Penn)	LLC			010443			
PRIMARY TRANSMITTE	RS: TELEVISIO	ON						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as esociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for i								
	· ·	CHANN	EL LINE-UP	40	·			
4.0011	2 D'CAST				C LOCATION OF STATION			
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
	NUMBER	STATION	(10001110)	(If Distant)				

FORM SA3E. PAGE 3.						101 ENIOD: 2013/1
LEGAL NAME OF OWN					SYSTEM ID# 010443	Name
Atlantic Broad					010443	
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and at tion "E" (exempt). For explanation of these th Column 6: Give the	G, identify even by system during the ions in effect or ions. With in CC rules, regular here in space only on a substand also in spation and also in spation and also in spation and ions in effect of ions ions ions ions ions ions ions ions	y television standard and accounting in June 24, 194, or 76.63 (in d in the next respect to any ations, or auth G—but do listitute basis. In the standard area in a station acceptable with the station acceptable with the station. In the station acceptable with the local service and the station acceptable with the local service and the station. In during the service in column and unring the service in column and unring the service in the station and the station are basis becamulational station or before Jumitter or an acceptable with the station. For the station are page (v) of the service in column are basis becamulational station or before Jumitter or an acceptable with the station. For the station are page (v) of	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations for izations: It it in space I (the station was carried that basis station report origination cording to its own be reported in origination in the station is a network etwork), "N-M" (I educational), or egeneral instructive area, (i.e. "or general instruction is an excounting period accounting period in 30, 2009, be sesociation repreyou carried the of the general in U.S. stations, ethe name of the	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the special Statement of both on a substitution, see page (v) on a program services the television station of the television of the televisio	es". If not, enter "No". For an expaper SA3 form. stating the basis on which your dering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing the transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form. To which the station is licensed by the which the station is identifed.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	AR		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN					SYSTEM ID#	Name
Atlantic Broads					010443	
PRIMARY TRANSMITTE In General: In space of carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 for Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens	RS: TELEVISIO G, identify every ystem during the ons in effect or identify every estimates a explaine in the control of the co	television stane accounting a June 24, 1964), or 76.63 (rd in the next) respect to any actions, or auth G—but do list titute basis. Ince I, if the state rning substitute sign. Do not real a station accept reams must be the FCC hear, WRC is Characteristics.	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: tit in space I (the tition was carried ute basis station eport origination coording to its over be reported in or as assigned to	(1) stations carried the carriage of certain (e)(2) and (4))]; as carried by your cone Special Statement of both on a substitution, see page (v) on program services er-the-air designal column 1 (list each the television statisms).	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television
educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servic Column 5: If you ha cable system carried the carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	in each case vertically entering the less than the less th	whether the st tter "N" (for no concommercial cage (v) of the the local servage (v) of the es" in column on during the a multicast street nor before Justice or an a column or derived in the potenter "E". If the see page (v) ch station. Fo nons, if any, givennel line-ups,	etwork), "N-M" (I educational), of the general instruct of the general incomplete of the general in the general in the general incomplete of the general in	for network multic. or "E-M" (for noncoctions located in the distant"), enter "Ye ions located in the mplete column 5, sod. Indicate by entactivated channel of subject to a royalty etween a cable system of the primary of the primary of the community in the community with space G for each	se.". If not, enter "No". For an expaper SA3 form. stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form. To which the station is licensed by the which the station is identifed.	
		CHANN	EL LINE-UP	AS		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					Account	NGT EMOD. 2013/1		
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name		
Atlantic Broadl	oand (Penn)	LLC			010443	Name		
PRIMARY TRANSMITTE	RS: TELEVISIO	ON						
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the pa								
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.			
		CHANN	EL LINE-UP	AT				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	IER OF CABLE SY	'STEM:			SYSTEM ID#	Name		
Atlantic Broadl	band (Penn)	LLC			010443			
PRIMARY TRANSMITTE	ERS: TELEVISIO	N						
In General: In space of carried by your cable is FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multice For the meaning of the Column 4: If the station is substitution of the column 4: If the station is substitution in the station of the column 4: If the station is substitution in the station of the column 4: If the station is substitution in the station of the column 4: If the station is substituted in the station is substituted in the station of the column 4: If the station is substituted in the station is substituted	G, identify even system during the consistency of t	y television state accounting in June 24, 194, or 76.63 (r d in the next prespect to any attons, or auth G—but do list titute basis. ace I, if the state ace I, if the FCC heart account a	period, except 81, permitting the referring to 76.6 paragraph. or distant stations orizations: to the station was carried ute basis station eport origination cording to its own be reported in common as assigned to annel 4 in Wash ation is a netwoetwork), "N-M" (I educational), or egeneral instructice area, (i.e. "co	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of the special Statement of the	s". If not, enter "No". For an ex-	G Primary Transmitters: Television		
planation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.								
Note: If you are utilizing	.9		EL LINE-UP	<u>'</u>				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.						101 ENIOD. 2013/1
LEGAL NAME OF OWN Atlantic Broadl					SYSTEM ID# 010443	Name
PRIMARY TRANSMITTE					010410	
In General: In space of carried by your cable is FCC rules and regulating 76.59(d)(2) and (4), 76.59(d)(2) and regulative Basis Substitute Basi	G, identify even by stem during the ions in effect or ions. With in CC rules, regular here in space only on a substand also in spatformation concirm. In the station's call associated with example in each case with example in each case with energy in each case with example ion on a part-time ion of a distant static ion on a part-time ion of a distant in entered into on a primary trans is included in each case, also incree categories in canadian station of each canadian station in each case, also increed categories in canadian station in each categories in categories in each cate	y television standard and accounting in June 24, 194, or 76.63 (in d in the next respect to any ations, or auth G—but do listitute basis. In the standard area in a station acceptable with the station acceptable with the station. In the station acceptable with the local service and the station acceptable with the local service and the station. In during the service in column and unring the service in column and unring the service in the station and the station are basis becamulational station or before Jumitter or an acceptable with the station. For the station are page (v) of the service in column are basis becamulational station or before Jumitter or an acceptable with the station. For the station are page (v) of	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations for izations: It it in space I (the station was carried that basis station report origination cording to its own be reported in origination in the station is a network etwork), "N-M" (I educational), or egeneral instructive area, (i.e. "or general instruction is an excounting period accounting period in 30, 2009, be sesociation repreyou carried the of the general in U.S. stations, ethe name of the	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the special Statement of both on a substitution, see page (v) on a program services the television station of the television of the televisio	es". If not, enter "No". For an expaper SA3 form. stating the basis on which your dering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing the transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form. To which the station is licensed by the which the station is identifed.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	AV		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					Account	NG 1 EMOD. 2013/1	
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name	
Atlantic Broadl	oand (Penn)	LLC			010443	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	ON					
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76	ystem during the ons in effect or i.61(e)(2) and (he accounting n June 24, 19 4), or 76.63 (r	period, except 81, permitting th referring to 76.6	(1) stations carrie	and low power television stations) ad only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary Transmitters:	
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute program basis, as explained in the next paragraph. To not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes"							
Note: If you are utilizing		nnel line-ups,	use a separate	space G for each			
		CHANN	EL LINE-UP	AVV			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 010443 Atlantic Broadband (Penn) LLC PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.							ACCOUNTING	PERIOD: 2019/1		
LEGAL NAME OF OWNER OF Atlantic Broadband (P							SYSTEM ID# 010443	Name		
	•		IT AND DOODAM LOC				010440			
SUBSTITUTE CARRIAGE	: SPECIA	LSIAIEME	I AND PROGRAM LOG					1		
In General: In space I, identi substitute basis during the ad explanation of the programm	counting pe	eriod, under spe	ecific present and former FC	C rules, regula	ations, or a	authorizatio	ns. For a further	Substitute		
explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE										
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?										
Note: If your answer is "No	", leave the	rest of this pag	ge blank. If your answer is	'Yes," you mι	ıst comple			Program Log		
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the program Column 3: Give the call Column 4: Give the broathe case of Mexican or Can Column 5: Give the monfirst. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	itute progra ce, please a of every no distant stati gulations, o tion. Do no ucy" or "NE n was broad sign of the s idcast static adian static th and day /e "5/7." es when the Example: a er "R" if the ind regulatic ogramming	am on a separa attach addition nnetwork televion and that your authorization t use general of BA Basketball: dcast live, ente station broadca on's location (thons, if any, the when your syste a substitute pro a program carri	al pages. ision program (substitute pur cable system substitute s. See page (vi) of the gencategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the tem carried the substitute program was carried by your ged by a system from 6:01: was substituted for programing the accounting period	rogram) that, d for the progeral instructio "basketball". lo." m. station is lice station is idenorogram. Use cable system. 15 p.m. to 6:2 mming that ye; enter the let	during the ramming ons located List specures of the tiffied). In the time of time of the time of time of the time of the time of the time of time of the time of t	e accounting another so in the papific programme FCC or, with the number accurate should be an was require listed programme.	g station per n in nonth ately ired			
s	UBSTITUT	E PROGRAM	1		EN SUBS	TITUTE CURRED	7. REASON			
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN		5. MONTH AND DAY		TIMES T	FOR DELETION			
						_				
						_				
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ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 6.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Atlantic Broadband (Penn) LLC

PART-TIME CARRIAGE LOG

SYSTEM ID#

010443

J

Part-Time Carriage Log

In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and

hours your system carried that station. If you need more space, please attach additional pages.

Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in

column 5 of space G.

Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period.

- curred during the accounting period.

 Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give
- State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.—3:15 a.m. app."
- You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.-12:00 p.m."

DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS HOURS** DATE **FROM** TO DATE **FROM** TO

	AL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#				
	antic Broadband (Penn) LLC			010443	Name			
Ins all a (as pag	OSS RECEIPTS tructions: The figure you give in this space determines the form you fle and the amount amounts (gross receipts) paid to your cable system by subscribers for the system's seccidentified in space E) during the accounting period. For a further explanation of how to be (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. FORTANT: You must complete a statement in space P concerning gross receipts.	ndary	transmi: te this an	ssion service	K Gross Receipts			
• Cor • Cor • If your fee • If your	COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.							
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b $\!$	e ente	red on lir	ne 1 of				
-	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.	entere	d on line	2 in block				
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be	entered	on line				
Block 1	MINIMUM FEE: 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.			ent of the				
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.	3,224,776.26						
	This is your minimum fee.	\$		34,311.62				
Block 2	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. • Did your cable system carry any distant television stations during the accounting peri X Yes—Complete the DSE schedule. No—Leave block 3 below blank and columns.	nn 4, y od?	ou must	check				
Block 3	Line 1. BASE RATE FEE : Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero		\$	44,728.17				
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero			0.00				
	Line 3. Add lines 1 and 2 and enter here	\$		44,728.17				
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE : Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger		\$	44,728.17	Cable systems			
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.			0.00	submitting additional deposits under			
	Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)			0.00	Section 111(d)(7) should contact			
	Line 4. FILING FEE		\$	725.00	additional fees. Division for the			
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$		45,453.17	appropriate form for submitting the additional fees.			
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See pa	age (i) of	the				

Name	LEGAL NAME OF OWNER OF CAR	LE SYSTEM:	SYSTEM ID#								
Name	Atlantic Broadband (Po	enn) LLC	010443								
	CHANNELS										
M	Instructions: You must g	ive (1) the number of channels on which the cable system carried television broadcast stations									
	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.										
Channels	1 Enter the total number	of channels on which the cable									
		n broadcast stations	11								
	,										
	2. Enter the total number	of activated channels									
	=	em carried television broadcast stations	238								
	and nonbroadcast service	ces									
N	INDIVIDUAL TO BE CON	ITACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual									
	we can contact about this statement of account.)										
Individual to											
Be Contacted for Further	Name Patrick Bra	tton Telephone 617-786	i-8800								
Information											
	Address 2 Batterym	arch Park, Suite 205									
		rral route, apartment, or suite number)									
	Quincy, MA (City, town, state, z										
	(City, town, state, 2										
	Email pbr	atton@atlanticbb.com Fax (optional)									
	CERTIFICATION (This stat	rement of account must be certifed and signed in accordance with Copyright Office regulations.									
0											
Certifcation	• I, the undersigned, hereby	certify that (Check one, but only one, of the boxes.)									
	(Owner other than cor	poration or partnership) I am the owner of the cable system as identifed in line 1 of space B; or									
	(Owner other than corp	or particles in particles in process of the cable system as declined in line 1 or space B, or									
	(Agent of owner other	than corporation or partnership) I am the duly authorized agent of the owner of the cable system a	s identified								
	in line 1 of space B	and that the owner is not a corporation or partnership; or									
	X (Officer or partner) a	m an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of the	cable system								
	in line 1 of space B.										
	I have examined the state	ment of account and hereby declare under penalty of law that all statements of fact contained herein									
	are true, complete, and cor [18 U.S.C., Section 1001(1)	rect to the best of my knowledge, information, and belief, and are made in good faith.									
	[10 0.0.0., 000.011 1001(1	3007									
	>	/s/ Patrick Bratton									
	Ente	r an electronic signature on the line above using an "/s/" signature to certify this statement.									
	(e.g.	, /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibi									
	ΓZ	button, then type /s/ and your name. Pressing the P button will avoid enabling excers compatible	illy settings.								
	Тур	ed or printed name: Patrick Bratton									
	Title										
		(Title of official position held in corporation or partnership)									
	Date	e: August 28, 2019									
	Date										

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID	Namo						
Atlantic Broadband (Penn) LLC 01044	3						
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.	Special Statement Concerning Gross Receipts Exclusion						
During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?							
X NO							
YES. Enter the total here and list the satellite carrier(s) below							
Name Mailing Address Mailing Address Mailing Address							
INTEREST ASSESSMENTS							
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q						
Line 1 Enter the amount of late payment or underpayment	Interest Assessment						
Line 2 Multiply line 1 by the interest rate* and enter the sum here	_						
Line 3 Multiply line 2 by the number of days late and enter the sum here	_						
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)							
(interest charge)							
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.							
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.							
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.							
Owner Address							
First community served Accounting period ID number							

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

ACCOUNTING PERIOD: 2019/1

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerica value given by the Copyright Act to each distant television station carried by a cable system during an accounting period. Your system's total number of DSEs determines the royalty you owe. For the full definition, see page (v) of the General Instructions in the paper SA3 form.

FORMULAS FOR COMPUTING A STATION'S DSE

There are two different formulas for computing DSEs: (1) a basic formula for all distant stations listed in space G (page 3), and (2) a special formula for those stations carried on a substitute basis and listed in space I (page 5). (Note that if a particular station is listed in both space G and space I, a DSE must be computed twice for that station: once under the basic formula and again under the special formula. However, a station's total DSE is not to exceed its full type-value. If this happens, contact the Licensing Division.)

BASIC FORMULA: FOR ALL DISTANT STATIONS LISTED IN SPACE G OF SA3E (LONG FORM)

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

Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that be all the control of the control of the control of the BOT.	

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 C of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number or hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

The Syndicated Exclusivity Surcharge. Cable systems located in whole or in part within a major television market, as defined by FCC rules and regulations, must calculate a Syndicated Exclusivity Surcharge for the carriage of any commercial VHF station that places a grade B contour, ir whole or in part, over the cable system that would have been subject to the FCC's syndicated exclusivity rules in effect on June 24, 1981

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

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

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

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

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

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

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

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

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

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

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

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

Each of the second, third, and fourth DSEs 0.701% of gross receipts The fifth and each additional DSE 0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

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

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

EXAMPLE:

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

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



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

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

		40,0000			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

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

ACCOUNTING PERIOD: 2019/1

DSE SCHEDULE. PAG	E 11. (CONTINUED)					
4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			S	STEM ID#
	Atlantic Broadband (Pe	nn) LLC				010443
	SUM OF DSEs OF CATEGOR		S:	I		I
	Add the DSEs of each station		o .			
	Enter the sum here and in line		schedule.		2.00	
						1
2	Instructions: In the column headed "Call	Sian": list the call	eigne of all dietant etations	identified by t	he letter "O" in column 5	
_	of space G (page 3).	Sign . list the call	signs of all distant stations	identified by t	ne letter O in column 3	
Computation	In the column headed "DSE"	: for each indepe	ndent station, give the DSE	as "1.0"; for	each network or noncom-	
of DSEs for	mercial educational station, given	ve the DSE as ".2	5."			
Category "O"			CATEGORY "O" STATION	IS: DSEs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	WPCW	1.000				
	WHVL	1.000				
Add rows as		· 				l
necessary.		· 				
Remember to copy		. <mark>.</mark>				
all formula into new						
rows.						
		·				
		·				
		·				
		·				l
						
		·				
		.				
		·				
]		

Nome	LEGAL NAME OF C	OWNER OF CABLE SYSTEM:						SYSTEM ID#
Name	Atlantic Broa	adband (Penn) LLC						010443
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	figure should of Column 3 Column 4 be carried out Column 5 give the type-v	at the call sign of all distates: For each station, give to correspond with the information: For each station, give to include the figure in column at least to the third decirition.	the number of he mation given in the total number umn 2 by the fig mal point. This is station, give the following 4 by the figure 1	ours your cable syste space J. Calculate or of hours that the stature in column 3, and s the "basis of carriag "type-value" as "1.0." gure in column 5, and	m carried the sta nly one DSE for ion broadcast or give the result in e value" for the ' For each netwo	ation during the accou each station. ver the air during the a decimals in column 4 station. ork or noncommercial in column 6. Round to	accounting period. This figure must educational station, no less than the	
Capacity		C	ATEGORY I	LAC STATIONS:	COMPUTAT	ION OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	R JRS ED BY M	3. NUMBER OF HOURS STATION ON AIR	4. BASIS O CARRIAC VALUE	F 5. TYI GE VAI	LUE	DSE
					= 	x		
						x x	= =	
						x		
			÷		=	x	=	
			<u>.</u>		_	<u>x</u>		
			÷			x	= =	
	Add the DSEs	OF CATEGORY LAC Sof each station. m here and in line 2 of p		edule,		0.	00	
Computation of DSEs for Substitute-Basis Stations	Was carried tions in effe Broadcast o space I). Column 2: I at your option. Column 3: I Column 4: I	e the call sign of each st by your system in subst ct on October 19, 1976 (ne or more live, nonnetw For each station give the This figure should corresenter the number of days Divide the figure in colunt This is the station's DSE	itution for a program shown by the ork programs du number of live, spond with the is in the calendan n 2 by the figur (For more inforri	gram that your systen e letter "P" in column ring that optional carr nonnetwork program nformation in space I r year: 365, except in e in column 3, and gi mation on rounding, s	n was permitted 7 of space I); an iage (as shown by s carried in subs a leap year. we the result in c ee page (viii) of	to delete under FCC r d v the word "Yes" in colu stitution for programs t olumn 4. Round to no the general instructior	ules and regular- mn 2 of that were deleted less than the third	form).
				BASIS STATION				
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBE OF DAYS IN YEAR	S	1. CALL SIGN	2. NUMBER OF PROGRAM	3. NUMBER OF DAYS IN YEAR	8
		•••••••••••••••••••••••••••••••••••••••		=			÷	
		-	+	=			÷	
		-					÷	=
		-	-	=			÷	=
	Add the DSEs	OF SUBSTITUTE-BAS of each station. m here and in line 3 of p		edule,	▶	0.	00	
5 Total Number of DSEs	number of DSEs 1. Number of 2. Number of	FR OF DSEs: Give the arms applicable to your system To DSEs from part 2 ● To DSEs from part 3 ● To DSEs from part 4 ● R OF DSEs		ooxes in parts 2, 3, and	4 of this schedul	e and add them to prov	2.00 0.00 0.00	2.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2019/1

	OWNER OF CABLE						S'	YSTEM ID# 010443	Name
In block A: • If your answer if schedule.	ck A must be com	emainder of p		7 of the DSE scho	edule blank aı	nd complete pa	art 8, (page 16) of	the	6
• If your answer If	"No," complete blo			ELEVISION M	ARKETS				Computation of
effect on June 24,	m located wholly o , 1981? nplete part 8 of the plete blocks B and	outside of all r	major and sma	aller markets as de	efined under s			gulations in	3.75 Fee
		BLOC	CK B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	s of distant sta and regulatione DSE Sche	ations listed in ons prior to Jui dule. (Note: TI	part 2, 3, and 4 o ne 25, 1981. For fo ne letter M below r	f this schedule urther explana	e that your sys	ed stations, see the	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rt. A Stations carri- 76.61(b)(c)] B Specialty stati C Noncomeric D Grandfathered instructions fc E Carried pursus *F A station pre	ules and regued pursuant to on as defined all educations of station (76.6) or DSE sched ant to individuationally carries JHF station w	lations cited boothe FCC mad in 76.5(kk) (7 al station [76.565) (see paragule). Lal waiver of Fed on a part-tinithin grade-Boothe in the first parage-Boothe	76.59(d)(1), 76.61(9(c), 76.61(d), 76. graph regarding sure (76.7) ne or substitute bacontour, [76.59(d)(ose in effect of 6.57, 76.59(b) (e)(1), 76.63(a) (63(a) referring (bstitution of g) (asis prior to Ju	n June 24, 198 b), 76.61(b)(c), a) referring to 7 g to 76.61(d) irandfathered s	76.63(a) referring 76.61(e)(1 stations in the		
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on page	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
WHVL	A	1.00	0.0						=
WPCW	D	1.00							
							 		
			<u> </u>						-
								2.00	
		В	LOCK C: CO	MPUTATION OF	F 3.75 FEE				
Line 1: Enter the	e total number of	DSEs from	part 5 of this	schedule			<u>, </u>		
Line 2: Enter the	e sum of permitte	d DSEs fror	n block B ab	ove					
	line 2 from line 1 leave lines 4–7 b			•		rate.			
Line 4: Enter gro	oss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply I	line 4 by 0.0375	and enter su	ım here				. x		permited/ partially nonpermitted carriage?
Line 6: Enter tot	al number of DS	Es from line	3						If yes, see part 9 instructions.
Line 7: Multiply I	line 6 by line 5 ar	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00	

tlantic Broa	adband (Penn) l	LC						7STEM ID# 010443	Name
		BLOCK	A: TELEVIS	ION MARKET	S (CONTIN	UED)			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation of 3.75 Fee
		•••••			• • • • • • • • • • • • • • • • • • • •				0.707
		• • • • • • • • • • • • • • • • • • • •			•				
		• • • • • • • • • • • • • • • • • • • •			•				
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Name	LEGAL NAME OF OWN								S	YSTEM ID#				
	Atlantic Broads	Jana (Penn	i) LLC							010443	<u>; </u>			
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage. Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1).76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designater statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL													
		PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS												
	1. CALL													
	SIGN													
					••••						•••			
7 Computation of the	,	"Yes," comple	ete blocks B and C locks B and C blar	k and complete	•	art 8 of the DSE sched								
Syndicated			BLOC	K A: MAJOR	TI	ELEVISION MARK	ET							
Exclusivity Surcharge	a lo any portion of the	aabla avatam v	uithin a tan 100 mai	or tolovicion mar	·ko	t as defned by section 7	'6 E of ECC	ruloo in offoot l	uno 24	10012				
Surcharge	l , ``	•		or television mai	ĸe	_		iules ili ellect s	une 24,	1901!				
	Yes—Complete	DIOCKS D and	10.			No—Proceed to	part o							
	BLOCK B: Ca	arriage of VHI	F/Grade B Contou	Stations		BLOCK	C: Compu	tation of Exem	pt DSEs	;				
	Is any station listed in commercial VHF stati or in part, over the ca	ion that places				Was any station listed nity served by the cab to former FCC rule 76	le system p .159)	orior to March 3	31, 1972	? (refe				
	Yes—List each si		th its appropriate per part 8.	mitted DSE		Yes—List each st X No—Enter zero a			ate permi	tted DSE				
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	iN	DSE				
			-											
							 							
							 							
		<u> </u>												
			TOTAL DSEs	0.00				TOTAL DS	Es	0.00				

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC	SYSTEM ID# 010443	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	3,224,776.26	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	• Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Yes—Complete part 9 of this schedule.		
	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. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
- "			
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge.		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	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. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here	_	
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name			STEM ID#
		Atlantic Broadband (Penn) LLC	010443
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$	
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)	
Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ \$	
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here	
		F. Multiply line D by line E and enter here	
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)	
		Syndicated Exclusivity Surcharge	<u></u> .
8 Computation of Base Rate Fee	You mi 6 was 6 In blo If you If you blank What i	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below to be a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers cocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ _\$	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.).	
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1)	
		B. Enter 0.00701 of gross receipts (the amount in section 1)	
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	-
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	
		Base Rate Fee	0.00
	1		

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2019/1

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC	SYSTEM ID# 010443	Name
Section If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.		_
A. Enter 0.01064 of gross receipts (the amount in section 1) **State		8
B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$		Computation of Base Rate Fee
C. Multiply line B by 3.000 and enter here \$		base Kale Fee
D. Enter 0.00330 of gross receipts (the amount in section 1)		
E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here		
F. Multiply line D by line E and enter here		
G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$	0.00	
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of to instead be reported on a community-by-community basis (subscriber groups) if the cable system reported space C	· ·	9
Space G. In General: If any of the stations you carried were partially distant, the statute allows you, in computing y receipts from subscribers located within the station's local service area, from your system's total gross re exclusion, you must:		Computation of Base Rate Fee
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable sy DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for	stem. Determine the number of base rate fee for each group.	and Syndicated Exclusivity Surcharge
NOTE: If any portion of your cable system is located within the top 100 television market and the station also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both if your cable system is wholly located outside all major television markets, complete block A only.		for Partially Distant Stations, and
How to Identify a Subscriber Group for Partially Distant Stations Step 1: For each community served, determine the local service area of each wholly distant and each partial to that community.	artially distant station you	for Partially Permitted Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of your su outside the station's local service area. A subscriber located outside the local service area of a station is 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 subscriber group must consist entirely of subscribers who are distant to exactly the same complement of system will have only one subscriber group when the distant stations it carried have local service areas t	stations. Note that a cable	
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for groups.	each of your system's subscriber	
In each section:		
 Identify the communities/areas represented by each subscriber group. Give the call sign for each of the stations in the subscriber group's complement—that is, each station the subscribers in the group. 	nat is distant to all of the	
 If: 1) your system is located wholly outside all major and smaller television markets, give each station's DSI and 4 of this schedule; or, 	E as you gave it in parts 2, 3,	
2) any portion of your system is located in a major or smaller televison market, give each station's DSE a part 6 of this schedule.	s you gave it in block B,	
Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
• Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vi in the paper SA3 form.	i) of the general instructions	
 Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this page. In making this computation, use the DSE and gross receipts figure applicable to the particular sub DSEs for that group's complement of stations and total gross receipts from the subscribers in that group) actual calculations on the form. 	scriber group (that is, the total	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 010443 Atlantic Broadband (Penn) LLC Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNER OF CABLE Atlantic Broadband (Penn) I					SY	O10443	Name
	OMPUTATION OF B		TE FEES FOR EAC				
	UBSCRIBER GROUP				SUBSCRIBER GROU	P	9
COMMUNITY/ AREA Johnston	wn		COMMUNITY/ ARE	A Benson			Computation
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
WHVL 1.00			WHVL	1.00			Base Rate Fee
			WPCW	1.00			and
							Syndicated
						<u> </u>	Exclusivity
				····		<u></u>	Surcharge for
						<u></u>	Partially
				••••		<u> </u>	Distant
							Stations
Total DCFa		1.00	Total DCCs			2.00	
Total DSEs Gross Receipts First Group \$	1,738,8		Total DSEs Gross Receipts Sec	and Group	\$ 1,48	2.00 5,955.36	
Gross (Cocipis i list Group	1,700,0	20.50	Oross Receipts occ	ond Group	1,40	.0,500.00	
Base Rate Fee First Group		01.05	Base Rate Fee Sec			6,227.11	
	UBSCRIBER GROUP				SUBSCRIBER GROU	Р	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u></u>	
						<u></u>	
						<u> </u>	
				····		<u></u>	
					•••••	<u> </u>	
						<mark></mark>	
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group	3	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third Group \$	S	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
i	-		11				
			<u> </u>				

	NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Otic Broadband (Penn) LLC O10443								
		COMPUTATION OF SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP	UP		
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	4		0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee and	
								Syndicated Exclusivity	
								Surcharge	
								for Partially	
								Distant	
								Stations	
Total DSEs			0.00	Total DSEs		Ш	0.00		
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00		
COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			<u></u>						
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$			

LEGAL NAME OF OWN Atlantic Broadba						S	YSTEM ID# 010443	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO				1 SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
		-	<u></u>					and Syndicated
		 		·				Exclusivity
								Surcharge
								for
		H	<u></u>					Partially Distant
		H	···					Stations
		H	···					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Croup	•	0.00	Base Rate Fee Sec	and Croup	\$	0.00	
		\$		Dase Nate i ee occ				
		SUBSCRIBER GRO	OUP 0	COMMUNITY/ADE		SUBSCRIBER GROU	UP 0	
COMMUNITY/ AREA				COMMUNITY/ ARE	Α			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-	<u></u>		·····			
		-	<u></u>					
		H	···					
		<u> </u>						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Dana Bata E . Titi	0		0.00	Dana Bat 5 5	ath Oar			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rın Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN Atlantic Broadbar						S	YSTEM ID# 010443	Name
				TE FEES FOR EAC				
	RTEENTH	SUBSCRIBER GRO		i i		SUBSCRIBER GROU	JP 0	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	_			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
Office of offi	DOL	O/ILL GIGIT	DOL	OTTLE GIGIT	BOL	O'NEE O'O'Y	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
						-		Surcharge
			<u></u>					for
	···	-	<u></u>		·····			Partially Distant
						-		Stations
		-				-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FI	FTEENTH	SUBSCRIBER GRO	UP		SIXTEENTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
			<mark></mark>		·····	-		
			<u></u>		·····	-		
			<u> </u>					
			<u></u>			-		
			<u> </u>			-		
						1		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

	AL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# antic Broadband (Penn) LLC 010443									
E	BLOCK A: (COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP				
		SUBSCRIBER GRO		H		SUBSCRIBER GROU		9		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0	Computation				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fe		
								and		
		 	<u></u>					Syndicated		
	····						<u></u>	Exclusivity Surcharge		
		H		1				for		
								Partially		
		_						Distant		
								Stations		
			<u></u>							
		_								
••••••		_	···							
Total DSEs		-	0.00	Total DSEs			0.00			
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00			
·	•				·					
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00			
N	INTEENTH	SUBSCRIBER GRO	UP		TWENTIETH	I SUBSCRIBER GRO	UP			
COMMUNITY/ AREA			0	COMMUNITY/ ARE						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	<u>.</u>		<u></u>							
				-	·····					
		-					····			
	<u>.</u>		<u></u>							
										
				·						
		_								
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	Group	<u> </u>	0.00	Gross Receipts Fou	orth Group	\$	0.00			
Cioss receipts illiu	Стоир	\$	0.00	1033 Receipts Fou	iiii Gioup	*	3.00			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00			
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER GROUP SUBSCRIBER GROU	JP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<u></u>							Base Rate Fee
	····							and Syndicated
								Exclusivity
	<u></u>							Surcharge for
								Partially
	<u></u>							Distant
	····							Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
		SUBSCRIBER GROU		ii —	Y-FOURTH	SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	 							
	<u></u>							
	<u> </u>							
	<u></u>							
	<u></u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
E	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	NTY-FIFTH	SUBSCRIBER GRO	UP	H		I SUBSCRIBER GRO	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
			<u></u>					and
	<u></u>							Syndicated Exclusivity
							····	Surcharge
								for
								Partially
								Distant
	<u></u>		<u></u>	-	·····			Stations
				·				
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TWENTY	SEVENTH	SUBSCRIBER GRO	UP	TWE	NTY-EIGHTH	I SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	···	-	<u></u>		••••			
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	<u></u>		···		•••••			
	<u></u>			-	····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	- 1				F	<u>-</u>		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	he base ra t	te fees for each subs		Base Rate Fee Fou		\$	0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
				ATE FEES FOR EAC				
		SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
				-				Exclusivity Surcharge
		-	····				·····	for
								Partially
		-						Distant
								Stations
			····					
			····					
Total DSEs		-	0.00	Total DSEs			0.00	
ross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THI	RTY-FIRST	SUBSCRIBER GRO	OUP	THIR	TY-SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-			<u> </u>	
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		-	····					
		-	••••					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
·					-			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
[BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
	<u></u>							and
								Syndicated
								Exclusivity Surcharge
								for
	<u></u>							Partially
								Distant
	····			·				Stations
			···					
						- -		
Total DSEs			0.00	Total DSEs		-11	0.00	
	_						•	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THI	RTY-FIFTH	SUBSCRIBER GRO	UP	TI	HIRTY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	·····		···					
	<u>.</u>							
	····			·				
		_	<u></u>					
	····							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
								
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
E	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
		-						Syndicated
								Exclusivity
		-	···	·				Surcharge for
		-						Partially
								Distant
								Stations
								
	····				•••••		·····	
Total DSEs			0.00	Total DSEs			0.00	
iross Receipts First Group \$ 0.0			0.00	Gross Receipts Second Group \$ 0.00				
		·				·		
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THIF	RTY-NINTH	SUBSCRIBER GRO)UP		FORTIETH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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		-						
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		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
C.000 Receipts Tillu	Эгоир	*	0.00	Si Soo Receipte Fou	.a. Group	*	0.50	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in blood			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN Atlantic Broadbar						S	YSTEM ID# 010443	Name
				TE FEES FOR EAC				
	RTY-FIRST	SUBSCRIBER GRO		l l		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
			<u></u>		·····			Exclusivity Surcharge
	•••••••••••••••••••••••••••••••••••••••						••••	for
								Partially
								Distant
			<u></u>					Stations
			<u></u>					
T D			0.00	T			0.00	
Total DSEs 0.00				Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	TY-THIRD	SUBSCRIBER GRO		Ti .		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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			<u></u>		·····			
		-	. 		••••			
			-			-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Foun	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
				TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO		1		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α	0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fe
	<u></u>							and
	<mark>.</mark>							Syndicated
				-	·····			Exclusivity Surcharge
	·····	-	····				·····	for
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Total DSEs		-	0.00	Total DSEs			0.00	
ross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FORTY	-SEVENTH	SUBSCRIBER GRO	DUP	FO	RTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
·	•				•			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
[BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
	<u>.</u>		<u></u>		·····			Syndicated Exclusivity
					•••••		••••	Surcharge
								for
								Partially
	<u></u>		<u></u>					Distant Stations
	····	-		·	·····		····	Stations
	<u></u>		<u></u>					
	<u>.</u>			-	·····			
Total DCCs			0.00	Total DOFa		11	0.00	
Total DSEs	_		0.00	Total DSEs			3	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FI	FTY-FIRST	SUBSCRIBER GRO	UP	ii		SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<mark></mark>		<u></u>					
		 						
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		-		·			····	
	<u></u>	-	<u></u>		·····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN Atlantic Broadba						S	YSTEM ID# 010443	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		ii e		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
	·····	<u> </u>	<u></u>					and Syndicated
		 						Exclusivity
								Surcharge
								for
								Partially Distant
		 	···					Stations
	<u>.</u>				·····	-		
Total DSEs			0.00	Total DSEs			0.00	
			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO		li		1 SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	-				•			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
[BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAG	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO	DUP			I SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
		ļ						and
	<u>.</u>							Syndicated
								Exclusivity Surcharge
	••••	-	····				·····	for
								Partially
								Distant
	<u></u>							Stations
	····		····		·····			
	····	-	····					
Total DSEs			0.00	Total DSEs			0.00	
Fross Receipts First Group \$ 0.00			0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FI	FTY-NINTH	SUBSCRIBER GRO	DUP		SIXTIETH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	····	-	····		•••••			
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	<u></u>	-						
	····	-	····		······			
	••••		••••					
	<u></u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
·					•			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
				TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	XTY-FIRST	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
			<u></u>					and
	<u></u>							Syndicated Exclusivity
							<u> </u>	Surcharge
								for
								Partially
	<u></u>				·····			Distant Stations
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Total DSEs			0.00	Total DSEs		+	0.00	
	Croup.	•			and Craun	•	0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SIX	(TY-THIRD	SUBSCRIBER GRO	UP	Ħ		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>		<u></u>					
				1				
			<u></u>					
				1				
	<u></u>							
				1				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				<u> </u>				
Base Rate Fee: Add t Enter here and in bloo			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN Atlantic Broadba						S	YSTEM ID# 010443	Name
				TE FEES FOR EAC				
	XTY-FIFTH	SUBSCRIBER GRO		ii —		H SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
	<u></u>							and
								Syndicated
						-		Exclusivity Surcharge
	···	-	···			•		for
								Partially
								Distant
	<u></u>							Stations
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	···	 	···					
	•••	-						
Total DSEs			0.00	Total DSEs			0.00	
			0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SIXTY	-SEVENTH	SUBSCRIBER GRO)UP	SIX	XTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
		H	<u></u>		••••			
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		-		-				
	···	 	···					
			<u></u>	-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
C.000 Receipts Tillu	Oroup	<u>*</u>	0.00	- Coo Receipts i oui	ат Отоир	Ψ	0.50	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t			scriber group	as shown in the boxes	s above.	\$		

NI	YSTEM ID# 010443	S						LEGAL NAME OF OWNE Atlantic Broadban
				TE FEES FOR EACH				
9	JP 0	SUBSCRIBER GROU	VENTIETH	SE COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	TY-NINTH	SIXT COMMUNITY/ AREA
Computation								
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and Syndicated	<u> </u>							
Exclusivity				***************************************		······	<u>'</u>	••••••
Surcharge								
for								
Partially Distant								
Stations								
-								
	<u></u>						<u> </u>	
1								
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	-SECOND	SEVENT	JP	SUBSCRIBER GRO	TY-FIRST	SEVEN ⁻
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	<u></u>						<u> </u>	
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-								
1	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
				i i				

Name	910443	S						LEGAL NAME OF OWNE Atlantic Broadban
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	Y-FOURTH			SUBSCRIBER GRO	TY-THIRD	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and Syndicated								
Exclusivity						-		
Surcharge								
for								
Partially Distant	<u></u>							
Stations							<u></u>	
							<u>-</u>	
_	0.00			Total DSEs	0.00			Total DSEs
_	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	NTY-SIXTH	SEVE	JP	SUBSCRIBER GRO	TY-FIFTH	SEVEN
D	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
 	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	<u></u>					<u> </u>		
							<u> </u>	
	<u></u>					<u> </u>		
	0.00			Total DSEs	0.00			Total DSEs
— i		\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
_	0.00	<u>*</u>						

LEGAL NAME OF OWN Atlantic Broadba						S	YSTEM ID# 010443	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
SEVENTY	-SEVENTH	SUBSCRIBER GRO	DUP	SEVE	NTY-EIGHTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL CICIT	DOL	O/ LE CICIV	DOL	ONLE GIGIT	BOL	OALL GIGIT	DOL	Base Rate Fee
					•	-		and
								Syndicated
								Exclusivity
						<u> </u>		Surcharge
			<u></u>					for
			<u></u>			<u> </u>		Partially Distant
						 		Stations
	····	-	···		·····	-		Stations
	••••		···		····	-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
								
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVEN	NTY-NINTH	SUBSCRIBER GRO	DUP		EIGHTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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						-	<u></u>	
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						-		
					····	-		
						<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add a			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNE Atlantic Broadban						S'	010443	Name
				TE FEES FOR EACH				
	ΓY-FIRST	SUBSCRIBER GROU			/-SECOND	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
							····	and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
							····	Stations
		-						
							_	
Total DSEs	!		0.00	Total DSEs	1	 	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	Y-THIRD	SUBSCRIBER GROU		ii ii	Y-FOURTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							<u>.</u>	
							····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
	-				•			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNE Atlantic Broadban						S	O10443	Name
				TE FEES FOR EACH				
	TY-FIFTH	SUBSCRIBER GROU		Ti .	HTY-SIXTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
					<mark> </mark>			Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Secon		\$	0.00	
	SEVENTH	SUBSCRIBER GROU		11	TY-EIGHTH	SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					•	-		
					·			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Atlantic Broadban						S	YSTEM ID# 010443	Name
BI	_OCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH				
	TY-NINTH	SUBSCRIBER GROU				I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
								l
								l
								l
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Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	İ
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
NINE	TY-FIRST	SUBSCRIBER GROU	JP	NINET	Y-SECONE	SUBSCRIBER GROU	JP	İ
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	İ
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	l
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Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts Third G	Proup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	1
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	l
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN Atlantic Broadba						S	YSTEM ID# 010443	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		ii e		H SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
	<u></u>		<u></u>		·····			and
	····	 						Syndicated Exclusivity
		H						Surcharge
								for
	<u></u>							Partially
								Distant Stations
								Otations
	<u> </u>	-						
	<u></u>							
	····							
Total DSEs	- 1		0.00	Total DSEs	· ·		0.00	
	Croup	•	0.00		and Craun	•	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NIN	ETY-FIFTH	SUBSCRIBER GRO	DUP	N	INETY-SIXTH	H SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					·····			
			····		•••••			
	<u></u>				·····			
	<u></u>				·····			
		H		·				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	the base ra	te fees for each subs		as shown in the boxe		\$	0.00	

LEGAL NAME OF OWN Atlantic Broadba						S	YSTEM ID# 010443	Name
E	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC				
		SUBSCRIBER GRO		ii e		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
			<u></u>		<mark></mark>			Syndicated
	····		<u></u>		·····			Exclusivity
		 						Surcharge for
					•••••			Partially
								Distant
								Stations
	<u>.</u>		<u></u>		<u>.</u>			
	····	-	<u></u>					
					·····			
			<u></u>		·····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
					p	· ·		
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NINE	ETY-NINTH	SUBSCRIBER GRO	UP	ONE F	IUNDREDTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u>.</u>				<u>.</u>			
		-	•••					
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					<u></u>			
			0.00				0.00	
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN Atlantic Broadba						S	YSTEM ID# 010443	Name
В	LOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDF	RED FIRST	SUBSCRIBER GRO	UP	ONE HUNDR	ED SECOND	SUBSCRIBER GRO	JP	٥
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						-		Base Rate Fee
			<u> </u>					and Syndicated
								Exclusivity
								Surcharge
								for
	<u></u>		<u></u>					Partially
	<u></u>		<u></u>					Distant Stations
	···	-	. 				····	Stations
••••••	<u> </u>		···		••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDR	ED THIRD	SUBSCRIBER GRO	UP	11		I SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>		<u></u>					
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	<u> </u>	_	<u></u>					
								
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	···		<u></u>		••••		····	
	<u></u>		<u></u>					
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE Atlantic Broadbar						S	YSTEM ID# 010443	Name
В	LOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	ED FIFTH	SUBSCRIBER GRO				I SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
				-				and Syndicated
				·				Exclusivity
							•••••	Surcharge
								for
								Partially
								Distant Stations
	···		<u></u>				····	Otations
	···				·····			
Total DSEs	-	ļ.ļ.	0.00	Total DSEs		H	0.00	
	roup	¢	0.00		and Croup	¢	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED	SEVENTH	SUBSCRIBER GRO	UP	11		I SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			•••				••••	
		_						
		H		·				
			···	·				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN Atlantic Broadba						S	YSTEM ID# 010443	Name
В	LOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDR	ED NINTH	SUBSCRIBER GRO	UP	ONE HUND	RED TENTH	I SUBSCRIBER GRO	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u></u>			-		Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially
	<u></u>							Distant Stations
					·····			Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED E	LEVENTH	SUBSCRIBER GRO	UP	ONE HUNDRE	D TWELVTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···				••••			
		-						
			•••••••••••••••••••••••••••••••••••••••		•••••			
		_						
	···							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	I-				F	<u>-</u>		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE						S	YSTEM ID# 010443	Name
BI ONE HUNDRED THI				TE FEES FOR EAC		IBER GROUP SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	\ 		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
		_						Syndicated
								Exclusivity
								Surcharge for
								Partially
						-		Distant Stations
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	FTEENTH	SUBSCRIBER GROU		Ħ		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u> </u>							
		-						
						-		
Total DOFa			0.00	Total DOFa			0.00	
Total DSEs	roun	•	0.00	Total DSEs	th Croup	•	0.00	
Gross Receipts Third C	οιυαμ	4	0.00	Gross Receipts Four	ui Gioup	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
				11				
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE						S	YSTEM ID# 010443	Name
В	LOCK A: (COMPUTATION O	BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED SEVE	NTEENTH	SUBSCRIBER GRO	UP	H .		I SUBSCRIBER GROU	UP	٥
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	<u></u>				<mark>.</mark>			and
				-	·····			Syndicated Exclusivity
			<u> </u>		·····		<u></u>	Surcharge
	···				•••••		····	for
								Partially
								Distant
								Stations
					<mark></mark>			
	<u></u>				·····			
			···	·	·····			
Total DSEs		.1	0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED NI	NTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	TWENTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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							•••••	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	•		1		•			
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE Atlantic Broadbar						S	YSTEM ID# 010443	Name
BI	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED TWEE				11		SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DSL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	Base Rate Fee
						-		and
								Syndicated
								Exclusivity
								Surcharge
						-		for
			<u>.</u>		·····			Partially Distant
								Stations
			<u>.</u>			-		Stations
					•••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWEN	NTY-THIRD	SUBSCRIBER GROUP	•	H		SUBSCRIBER GROUP	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u> </u>					
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
				11				
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		
or note and in block	, 1, (cpace = (page 1,				7		

LEGAL NAME OF OWN Atlantic Broadba						S	YSTEM ID# 010443	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GROU		H		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	····							Base Rate Fe
			<u></u>					and
					·····			Syndicated Exclusivity
	····	 						Surcharge
								for
								Partially
		_						Distant
	····							Stations
			···					
	<u>.</u>							
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NE HUNDRED TWENT	Y-SEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRED TW	ENTY-EIGHTH	SUBSCRIBER GROUF)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····							
	••••		···					
		-						
	<u>.</u>	 	<u></u>					
		-						
	••••						····	
	····		<u></u>					
	····		···					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN Atlantic Broadba						S	YSTEM ID# 010443	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED TWE	NTY-NINTH	SUBSCRIBER GROU		ii .		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
	····							Exclusivity Surcharge
••••••		_			••••			for
								Partially
								Distant
								Stations
		-						
	····	-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TH	IRTY-FIRST	SUBSCRIBER GROU	Р	ONE HUNDRED THI	RTY-SECONE	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			···	-				
	····				••••			
		-						
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		_			••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
,	•				r	-		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN Atlantic Broadba						S	YSTEM ID# 010443	Name
Е	SLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	RTY-THIRD	SUBSCRIBER GROU		i i		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<u> </u>		···					Base Rate Fe
	···	-						Syndicated
	···				••••			Exclusivity
								Surcharge
								for
								Partially
	<u></u>	<u> </u>			·····			Distant Stations
		-						Stations
					•••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TH	IRTY-FIFTH	SUBSCRIBER GROU	Р	ONE HUNDRED	THIRTY-SIXTH	SUBSCRIBER GROUP	1	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
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	···		···				····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Pena Pata Fan Thind	Crour		0.00	Rose Reta Fee Fee	rth Crave		0.00	
Base Rate Fee Third	υυρ 	\$	0.00	Base Rate Fee Fou	iiii Gioup	\$	0.00	
Base Rate Fee: Add t Enter here and in bloo			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN						S	YSTEM ID# 010443	Name
В	LOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED THIRTY	'-SEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRED TH	IIRTY-EIGHTH	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u></u>	-				Base Rate Fee
			···		·····			Syndicated
					••••			Exclusivity
								Surcharge
		-						for
				-	·····			Partially Distant
				·				Stations
					·····			
			···	·				
Total DSEs	_		0.00	Total DSEs	!		0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	0.00	
	RTY-NINTH	SUBSCRIBER GROU		ii		I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Foun	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN Atlantic Broadba						S	YSTEM ID# 010443	Name
	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
ONE HUNDRED FO	ORTY-FIRST	SUBSCRIBER GROU	Р	ONE HUNDRED FO	RTY-SECONE	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
			<u></u>			-		and
	••••							Syndicated Exclusivity
								Surcharge
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								Partially
								Distant
								Stations
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						1		
	••••	•				<u> </u>		
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FO	ORTY-THIRD	SUBSCRIBER GROU	Р	ONE HUNDRED FO	RTY-FOURTH	I SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

OCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA OCOMMUNITY/ AREA OCOMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP Computation OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP Computation OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP OCOMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP OCOMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP OCOMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP OCOMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP OCOMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP OCOMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP OCOMPUTATION OCOMP
O COMMUNITY/ AREA O Computation DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Form and Syndicated Exclusivity Surcharge for Partially Distant
DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE of Base Rate For and Syndicated Exclusivity Surcharge for Partially Distant
DSE CALL SIGN DSE CALL SIGN DSE OF Base Rate Formand Syndicated Exclusivity Surcharge for Partially Distant
and Syndicated Exclusivity Surcharge for Partially Distant
Syndicated Exclusivity Surcharge for Partially Distant
Exclusivity Surcharge for Partially Distant
for Partially Distant
Partially Distant
Distant
0.00
roup \$ 0.00 Gross Receipts Second Group \$ 0.00
roup \$ 0.00 Base Rate Fee Second Group \$ 0.00
SEVENTH SUBSCRIBER GROUP ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP
O COMMUNITY/ AREA O
DSE CALL SIGN DSE CALL SIGN DSE

0.00 Total DSEs
\$ 0.00 Gross Receipts Fourth Group \$ 0.00
Froup \$ 0.00 Base Rate Fee Fourth Group \$ 0.00

LEGAL NAME OF OWN Atlantic Broadba						S	YSTEM ID# 010443	Name
				ATE FEES FOR EAC				
ONE HUNDRED FOR	RTY-NINTH	SUBSCRIBER GRO		Ħ		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
								Syndicated Exclusivity
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								Partially
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T + 1 DOF		Щ	0.00	T 1 1 DOE		Ц	0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	FTY-FIRST	SUBSCRIBER GRO				SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add to Enter here and in blood			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE Atlantic Broadbar						S	YSTEM ID# 010443	Name
BI ONE HUNDRED FIF				TE FEES FOR EAC		IBER GROUP SUBSCRIBER GROU	UP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					····			Base Rate Fee and
								Syndicated
								Exclusivity
						-		Surcharge for
								Partially
					····			Distant Stations
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						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO		Ħ		SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	<i></i>		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DOEs			0.00	Total DOFa			0.00	
Total DSEs	· roun	•	0.00	Total DSEs	th Croun	•	0.00	
Gross Receipts Third (oroup	Ψ	0.00	Gross Receipts Four	ωι σιουρ	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				Ш				
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWN Atlantic Broadba						S	YSTEM ID# 010443	Name
E	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED FIFT	Y-SEVENTH	SUBSCRIBER GROU	Р			H SUBSCRIBER GROUF)	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
	···		···					Syndicated Exclusivity
		 		1				Surcharge
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								Partially
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	••••••••••							
	<u></u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED F	IFTY-NINTH	SUBSCRIBER GROU	Р	ONE HUNDI	RED SIXTIETH	H SUBSCRIBER GROUF)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	•	-	0.00	Total DSEs	•	-	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee Third Base Rate Fee: Add the Enter here and in block	he base ra	te fees for each subs				\$	0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 910443								
В		COMPUTATION OF		TE FEES FOR EACH		RIBER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		own		COMMUNITY/ AREA				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								Syndicated
					<u></u>			Exclusivity Surcharge
								for
								Partially Distant
								Stations
			-					
		-						
			<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 1,738	3,820.90	Gross Receipts Seco	nd Group	\$ 1,48	35,955.36	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	THIRD	SUBSCRIBER GRO				SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-	<u></u>					
								
							<u> </u>	
		-						
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th	ne base rat	te fees for each subs	criber aroun	as shown in the boxes	above			
Enter here and in block						\$	0.00	

Name	YSTEM ID# 010443	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
				TE FEES FOR EACH				BL		
9	JP 0	SUBSCRIBER GROU	SIXTH	COMMUNITY/ ADEA		SUBSCRIBER GROU	FIFTH			
Computation				COMMUNITY/ AREA	0			COMMUNITY/ AREA		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
Base Rate Fe										
and										
Syndicated Exclusivity		-								
Surcharge										
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	0.00	<u> </u>	<u> </u>	Total DSEs	0.00		<u> </u>	Total DSEs		
		_			_	_				
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G		
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First Gr		
	JP	SUBSCRIBER GROU	EIGHTH		JP	SUBSCRIBER GROU	SEVENTH	5		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
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	0.00			Total DSEs	0.00			Total DSEs		
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G		
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G		

	010443	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443									
=				TE FEES FOR EACH				BL			
9		SUBSCRIBER GROU	TENTH	COMMUNITY ASS		SUBSCRIBER GRO	NINTH				
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA			
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
Base Rate Fe											
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Syndicated Exclusivity											
Surcharge	<u></u>						<u>-</u>				
for											
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	0.00			Total DSEs	0.00			Total DSEs			
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G			
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr			
	JP	SUBSCRIBER GROU	TWELVTH		JP	SUBSCRIBER GROU	EVENTH	El			
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA			
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
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-	0.00			Total DSEs	0.00			Total DSEs			
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Broup	Gross Receipts Third G			
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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443									
				TE FEES FOR EACH						
9	IP 0	SUBSCRIBER GROU	RTEENTH	FOL COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTEENTH	THIF COMMUNITY/ AREA		
Computation				COMMUNITY AREA				COMMUNITY AREA		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
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and Syndicated										
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Surcharge										
for										
Partially Distant										
Stations								••••••		
	0.00			Total DSEs	0.00			Total DSEs		
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First G		
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gi		
	IP	SUBSCRIBER GROU	IXTEENTH	S	JP	SUBSCRIBER GROU	TEENTH	FIF		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
							1			
	0.00			Total DSEs	0.00			Total DSEs		
	0.00	\$	Group		0.00	\$	roup			
		\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	roup	Total DSEs Gross Receipts Third G		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	HTEENTH			SUBSCRIBER GRO	NTEENTH		
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00			Total DSEs	0.00			Γotal DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G	
									
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr	
	IP	SUBSCRIBER GROU	VENTIETH	T\	JP	SUBSCRIBER GRO	NTEENTH	NIN	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
									
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	0.00			Total DSEs	0.00			Fotal DSEs	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	s	Group	Total DSEs Gross Receipts Third G	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443									
				TE FEES FOR EACH						
0	JP	SUBSCRIBER GROU	-SECOND	TWENTY		SUBSCRIBER GROU	TY-FIRST	TWENT		
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
Base Rate Fe										
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	0.00			Total DSEs	0.00		'	Total DSEs		
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr		
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr		
	JP	SUBSCRIBER GROU	-FOURTH	TWENTY	JP	SUBSCRIBER GRO	ΓY-THIRD	TWENT		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
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• -	0.00			Total DSEs	0.00			Total DSEs		
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G		

Name	YSTEM ID# 010443	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
				TE FEES FOR EACH						
9	JP	SUBSCRIBER GROU	ITY-SIXTH	TWEN		SUBSCRIBER GRO	TY-FIFTH	TWEN		
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
Base Rate Fe										
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	0.00			Total DSEs	0.00			Total DSEs		
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G		
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	3ase Rate Fee First G		
	JP	SUBSCRIBER GROU	Y-EIGHTH	TWENT	JP	SUBSCRIBER GRO	SEVENTH	TWENTY-S		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
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	0.00			Total DSEs	0.00			Total DSEs		
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third (

O Computation O SE IGN DSE Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations 0.00 0.00 0.00 BER GROUP 0	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443									
O Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations O.00 O.00 O.00 BER GROUP O			TE FEES FOR EACH							
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations 0.00 0.00 0.00 BER GROUP 0	SUBSCRIBER	THIRTIETH			SUBSCRIBER GRO	Y-NINTH				
IGN DSE of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations 0.00 0.00 0.00 BER GROUP 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA			
and Syndicated Exclusivity Surcharge for Partially Distant Stations 0.00 0.00 0.00 0.00	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
Syndicated Exclusivity Surcharge for Partially Distant Stations 0.00 0.00 0.00 BER GROUP 0										
Exclusivity Surcharge for Partially Distant Stations 0.00 0.00 0.00 BER GROUP 0	<u> </u>				-					
O.00 O.00 O.00 BER GROUP O						<u> </u>				
for Partially Distant Stations 0.00 0.00 0.00 BER GROUP 0						·				
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	SUBSCRIBER	Y-SECOND	THIRTY	JP	SUBSCRIBER GRO	TY-FIRST	THIR			
IGN DSE			COMMUNITY/ AREA	0			COMMUNITY/ AREA			
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0.00	-		Total DSEs	0.00			Total DSEs			
0.00	\$	n Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G			
0.00	\$	ı Group	Base Rate Fee Fourth	0.00	\$	roup	Base Rate Fee Third G			

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443									
				TE FEES FOR EACH					
	ry-THIRD	SUBSCRIBER GRO			Y-FOURTH	SUBSCRIBER GRO	UP	9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
			<u> </u>		<u> </u>			and	
					<mark></mark>			Syndicated	
			<u> </u>		<mark></mark>		<u> </u>	Exclusivity	
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					<u> </u>			Partially	
		-						Distant	
								Stations	
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Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00		
THIR	TY-FIFTH	SUBSCRIBER GRO	UP	THII	RTY-SIXTH	I SUBSCRIBER GRO	JP.		
COMMUNITY/ AREA			0	COMMUNITY/ AREA		- COBOONIBEN ONO	0		
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00		
									
Base Rate Fee Third G	Froup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
				TE FEES FOR EAC				
	SEVENTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
			<u> </u>					and
			<u> </u>					Syndicated
			<mark></mark>		····	-		Exclusivity
		-	<mark></mark>				<u></u>	Surcharge
			<u> </u>		····		·····	for Partially
			···					Distant
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		-	•••••••••••				•••••	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
THIR	TY-NINTH	SUBSCRIBER GRO	UP		FORTIETH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
								
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	\$		

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443									
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	SUBSCRIBER GROU	'-SECOND			SUBSCRIBER GRO	TY-FIRST			
			COMMUNITY/ AREA				COMMUNITY/ AREA		
DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
									
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0.00		!	Total DSEs	0.00		!	Total DSEs		
0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G		
0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G		
	SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GRO	ry-third			
0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
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0.00			Total DSEs	0.00			Total DSEs		
0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group			
	\$				\$ \$		Total DSEs Gross Receipts Third G		
	0.00 0.00 0.00	IBER GROUP SUBSCRIBER GROUP CALL SIGN DSE CALL SIGN O O O O O O O O O O O O O O O O O O O	SUBSCRIBER GROUP	TE FEES FOR EACH SUBSCRIBER GROUP FORTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE Total DSEs Gross Receipts Second Group Base Rate Fee Second Group FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O TOMMUNITY/ AREA O TOMMUNITY/ AREA O TOMMUNITY/ AREA O TOMMUNITY/ AREA O	## BASE RATE FEES FOR EACH SUBSCRIBER GROUP O	COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CAL	OCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP TY-FIRST SUBSCRIBER GROUP O COMMUNITY/ AREA		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443									
BL	OCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCE	RIBER GROUP			
FOR 1	ΓY-FIFTH	SUBSCRIBER GRO	UP	F	ORTY-SIXTH	SUBSCRIBER GRO	UP	9	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fe	
								and	
								Syndicated	
								Exclusivity	
		-						Surcharge	
								for Partially	
								Distant	
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			···						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
FORTY-S	EVENTH	SUBSCRIBER GRO	UP	FO	RTY-EIGHTH	SUBSCRIBER GRO	UP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
						-	,		
Base Rate Fee: Add the		e fees for each subs space L (page 7)	scriber group	as shown in the boxe	s above.	\$			

LEGAL NAME OF OWNE Atlantic Broadban						S	010443	Name
				TE FEES FOR EAC				
	TY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	······		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
		-						Syndicated
								Exclusivity
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	<u>.</u>				·····			Stations
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FIF	TY-FIRST	SUBSCRIBER GRO	UP	FIF.	TY-SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	·		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs		-II	0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
C. 300 Rootpio Tima C	очр	-		S. CCC Procepts 1 Out	Croup	*		
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	s above.	\$		

	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 0104							
				TE FEES FOR EAC				
	TY-THIRD	SUBSCRIBER GRO		FIFTY-FOURTH SUBSCRIBER GROUP				9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
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Total DSEs			0.00	Total DSEs			0.00	
ross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	0.00	
COMMUNITY/ AREA	I Y-FIF I H	SUBSCRIBER GRO	<u>0</u> P	COMMUNITY/ AREA		I SUBSCRIBER GRO	0P	
COMMUNITY AREA				COMMONITY AREA	······································			
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F-4-1 DOF			0.00	T-4-1 DOE			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	eroup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxe	s above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GROU	SEVENTH		
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe									
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Exclusivity		-							
Surcharge for									
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	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	3ase Rate Fee First Gr	
	JP	SUBSCRIBER GROU	SIXTIETH		JP	SUBSCRIBER GROU	Y-NINTH	FIFT	
	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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-	0.00			Total DSEs	0.00			Fotal DSEs	
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	11 1111	\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G	

Nonpermitted 3.75 Stations

Name	EGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	'-SECOND			SUBSCRIBER GRO	TY-FIRST		
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe									
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Exclusivity					-				
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	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G	
	JP	SUBSCRIBER GROU	/-FOURTH	SIXT	UP	SUBSCRIBER GRO	TY-THIRD	SIX	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
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	0.00			Total DSEs	0.00			Total DSEs	
	0.00			Total DSEs	0.00		Proup		
	0.00	\$		Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third C	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	TY-SIXTH			SUBSCRIBER GRO	TY-FIFTH		
Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fo									
and									
Syndicated									
Exclusivity							- 		
Surcharge for							·		
Partially						-	·		
Distant		-					 		
Stations						-			
									
									
	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	3ase Rate Fee First Gr	
	JP	SUBSCRIBER GROU	Y-EIGHTH	SIXT	JP	SUBSCRIBER GRO	SEVENTH	SIXTY-S	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
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	0.00			Total DSFs	0.00			Total DSFs	
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	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	VENTIETH			SUBSCRIBER GRO	TY-NINTH		
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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Syndicated									
Exclusivity					-				
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	0.00			Total DSEs	0.00			Total DSEs	
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G	
	JP	SUBSCRIBER GROU	/-SECOND	SEVENT	UP	SUBSCRIBER GRO	TY-FIRST	SEVEN	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
		I CALL CION				CALL SIGN	DSE	CALL SIGN	
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	DSE	CALL SIGN	DSE	CALL SIGN	DSE		332		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	3,122 3,31			
	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
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	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
		CALL SIGN	DSE					Total DSTs	
	0.00	CALL SIGN		Total DSEs	0.00			Total DSEs	
		\$				\$		Total DSEs Gross Receipts Third C	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
BI	LOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	TY-THIRD	SUBSCRIBER GRO		SEVENT	ΓY-FOURTH	I SUBSCRIBER GRO	UP	۵
COMMUNITY/ AREA			0	COMMUNITY/ AREA			9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
							<u></u>	Exclusivity
		-						Surcharge
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Total DSEs	-		0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	-	\$	0.00	Base Rate Fee Seco		\$	0.00	
	I Y-FIF I H	SUBSCRIBER GRO		İ		I SUBSCRIBER GROU	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
ase Rate Fee: Add the nter here and in block			criber group	as shown in the boxes	above.	\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
				TE FEES FOR EACH					
۵	JP	SUBSCRIBER GROU	Y-EIGHTH	SEVENT		SUBSCRIBER GRO	SEVENTH	SEVENTY-S	
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe									
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Syndicated									
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	0.00			Total DSEs	0.00		 	Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr	
	JP	SUBSCRIBER GROU	IGHTIETH	E	JP	SUBSCRIBER GRO	TY-NINTH	SEVENT	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00			Total DSEs	0.00			Total DSEs	
	0.00		Group	Total DSEs	0.00				
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G	

Nonpermitted 3.75 Stations

EGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443									
				TE FEES FOR EACH					
	Y-FIRST	SUBSCRIBER GROU		H	-SECOND	SUBSCRIBER GROUI		9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
								Syndicated	
							<u> </u>	Exclusivity	
								Surcharge	
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					<u> </u>		1		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00		
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Second		\$	0.00		
	Y-THIRD	SUBSCRIBER GROU		İ	/-FOURTH	SUBSCRIBER GROUP	_		
COMMUNITY/ AREA			0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00		
ase Rate Fee: Add the			riber group	as shown in the boxes a	above.	\$			

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	ITY-SIXTH			SUBSCRIBER GROU	TY-FIFTH		
Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fo									
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Syndicated									
Exclusivity									
Surcharge for									
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	0.00			Total DSEs	0.00	_		Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr	
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First Gr	
	JP	SUBSCRIBER GROU	Y-EIGHTH	EIGHT	JP	SUBSCRIBER GROU	SEVENTH	EIGHTY-S	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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		I I	1	Total DSEs	0.00			Total DSEs	
	0.00			. 010. 2 0 2 0					
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G	

	EGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	NINTIETH			SUBSCRIBER GROU	ry-ninth		
Computation				COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe									
and						-			
Syndicated	<u></u>								
Exclusivity Surcharge	<u></u>						<u> </u>		
for	<u></u>					-	 		
Partially									
Distant							<u> </u>		
Stations						-			
							 		
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	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr	
	JP	SUBSCRIBER GROU	'-SECOND	NINETY	JP	SUBSCRIBER GROU	TY-FIRST	NINE	
	COMMUNITY/ AREA 0							COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00			Total DSEs	0.00	_		Total DSEs	
		¢	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G	
	0.00	<u>•</u>	Cioup						

LEGAL NAME OF OWNE Atlantic Broadban						S	010443	Name	
				TE FEES FOR EAC					
	ry-third	SUBSCRIBER GRO		NINE		9			
COMMUNITY/ AREA			0	COMMUNITY/ AREA	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fe	
								and	
			<u> </u>		····			Syndicated	
			-					Exclusivity Surcharge	
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Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00		
NINE	TY-FIFTH	SUBSCRIBER GRO	UP	NII	NETY-SIXTH	SUBSCRIBER GRO	UP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
	Р				F	·			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	s above.	\$			

Name	O10443	S			•			LEGAL NAME OF OWNE Atlantic Broadban
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GROU	SEVENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	IP	SUBSCRIBER GROU	NDREDTH	ONE HU	JP	SUBSCRIBER GROU	ΓΥ-NINTH	NINET
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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				T-t-I DC5	0.00			T-4-1 DOT
	0.00			Total DSEs	0.00			Total DSEs
	0.00							
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G

LEGAL NAME OF OWNE Atlantic Broadban						S	943 O10443	Name
BL	OCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCE	RIBER GROUP		
ONE HUNDRE	D FIRST	SUBSCRIBER GRO	UP	ONE HUNDR	ED SECONE	SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
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							0.00	
Total DSEs			0.00	Total DSEs				
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRE	D THIRD	SUBSCRIBER GRO	UP	ONE HUNDR	ED FOURTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
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Total DSEs	1		0.00	Total DSEs		11	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
S. 300 P. Goodpia Tilliu G	. Jup	-	<u> </u>	Si oco i recorpto i ou	.a. Oroup	*		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
				TE FEES FOR EACH					
0	IP	SUBSCRIBER GROU	ED SIXTH	ONE HUNDF	JP	SUBSCRIBER GRO	ED FIFTH	ONE HUNDRE	
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe									
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	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr	
	IP	SUBSCRIBER GROU	D EIGHTH	ONE HUNDRE	JP	SUBSCRIBER GRO	SEVENTH	ONE HUNDRED S	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00			Total DSEs	0.00			Total DSEs	
	0.00		Group	Total DSEs	0.00		Proup		
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRE	D NINTH	SUBSCRIBER GROU	JP	ONE HUNDR	ED TENTH	SUBSCRIBER GROU	JP	Ω
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts First G	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
							 	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED EL	EVENTH	SUBSCRIBER GROU	JP	ONE HUNDRED	TWELVTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	<u> </u>		0.00	Total DSEs	<u> </u>		0.00	
Gross Receipts Third G	roup	•	0.00		Group	•	0.00	
Orosa Necelhia IIIII G	Jup	\$	0.00	Gross Receipts Fourth	Group	Ψ		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
	e fees for ea			Base Rate Fee Fourth	· .	\$	0.00	

H SUBSCRIBER GRO	JRTEENTH	TE FEES FOR EACH ONE HUNDRED FOR COMMUNITY/ AREA CALL SIGN		SUBSCRIBER GRO	RTEENTH	ONE HUNDRED THIR
		COMMUNITY/ AREA	0			
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	•	Total DSEs	0.00		-	Total DSEs
\$	nd Group	Gross Receipts Seco	0.00	\$	roup	Gross Receipts First Gr
\$	nd Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gro
H SUBSCRIBER GRO	SIXTEENTH	ONE HUNDRED S	JP	SUBSCRIBER GRO	TEENTH	ONE HUNDRED FIF
		COMMUNITY/ AREA	0			COMMUNITY/ AREA
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	•	Total DSEs	0.00			Total DSEs
\$	n Group	Gross Receipts Fourt	0.00	\$	Group	Gross Receipts Third G
\$	n Group	Base Rate Fee Fourt	0.00	\$	Group	Base Rate Fee Third G
CALL SIGN CALL SIGN \$	SE	DS DS DS DS DS DS DS DS DS DS DS DS DS D		ONE HUNDRED SIXTE O COMMUNITY/ AREA DSE CALL SIGN DS O COMMUNITY/ AREA TO COMMUNITY/ AREA DSE CALL SIGN DS Total DSES O COMMUNITY/ AREA	SUBSCRIBER GROUP ONE HUNDRED SIXTE COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs Gross Receipts Fourth Gro	TEENTH SUBSCRIBER GROUP ONE HUNDRED SIXTE COMMUNITY/ AREA DSE CALL SIGN DSE CALL SIGN DS CALL SIGN DSE CALL SIGN DS Total DSEs Gross Receipts Fourth Gro

	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL	
_		SUBSCRIBER GROUP	GHTEENTH	ONE HUNDRED EI		SUBSCRIBER GROUP	NTEENTH	ONE HUNDRED SEVE	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00		<u> </u>	Total DSEs	0.00			Total DSEs	
- -	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr	
	IP	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED TV	JP	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
.	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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 	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group		
		<u> </u>	Group			\$	Group	Total DSEs Gross Receipts Third G	

LEGAL NAME OF OWNER Atlantic Broadbane			•			S	YSTEM ID# 010443	Name
			BASE RA	TE FEES FOR EACH				
ONE HUNDRED TWEN	TY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED TWENT	Y-SECONE	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							<u></u>	Base Rate Fee
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								Syndicated Exclusivity
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWENT	Y-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Dana Bata Fac Till 10			0.00	Bass Bata E. S. "	Constitution		0.00	
Base Rate Fee Third G	ioup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the		te fees for each subsc space L (page 7)	riber group	as shown in the boxes a	above.	\$		

	010443						d (Penn)	
				TE FEES FOR EACH				
9	0	SUBSCRIBER GROUP	INTY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROUP	NIY-FIFIH	ONE HUNDRED TWE
Computati				OGWINGTON TO THE PARTY OF THE P				JOINIMONT 17 THE
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (Penn) LLC 010443								
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL	
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-	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	Y-FIFTH	ONE HUNDRED THIRT	
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-	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	Y-FIFTH	ONE HUNDRED THIRT	
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	Y-FIFTH	ONE HUNDRED THIRT	
-	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	Y-FIFTH	ONE HUNDRED THIRT	
-	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	Y-FIFTH	ONE HUNDRED THIRT	
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	Y-FIFTH	ONE HUNDRED THIRT	
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	0.00 JP 0 DSE 0.00 0.00 0.00	SUBSCRIBER GROU	d Group	Dase Rate Fee Second ONE HUNDRED THI COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Fourth	0.00 JP	SUBSCRIBER GROU	DSE DSE	Total DSEs Gross Receipts Third G	
	0.00 DSE	SUBSCRIBER GROU	d Group	Dase Rate Fee Second ONE HUNDRED THI COMMUNITY/ AREA CALL SIGN	O.00	SUBSCRIBER GROU	DSE DSE	CALL SIGN CALL SIGN Total DSEs	

LEGAL NAME OF OWNER Atlantic Broadbane						S	93TEM ID# 010443	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	RIBER GROUP		
ONE HUNDRED THIRTY-	SEVENTH	SUBSCRIBER GROUP	,	ONE HUNDRED THIS	RTY-EIGHTH	I SUBSCRIBER GROUP		Ω
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED THIRT	Y-NINTH	SUBSCRIBER GROU	JP	ONE HUNDRED	FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	<u> </u>		0.00	Total DSEs	1		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
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Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
e Rate Fee: Add the			criber group	as shown in the boxes	above.	\$		

Name	YSTEM ID# 010443	S			•			LEGAL NAME OF OWNE Atlantic Broadban
<u> </u>		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
_		SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED FORT		SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED FOR
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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		SUBSCRIBER GROUP	Y-FOURTH	ONE HUNDRED FORT		SUBSCRIBER GROUP	ONE HUNDRED FOR	
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Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER Atlantic Broadbane			ро.			SY	STEM ID# 010443	Name
			BASE RA	TE FEES FOR EACH				
	TY-FIFTH	SUBSCRIBER GROUP		i i	RTY-SIXTH	SUBSCRIBER GROUP	0	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	<u>'</u>	
ONE HUNDRED FORTY-	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FOR	TY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
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Total DSEs	<u> </u>		0.00	Total DSEs	<u>I</u>	11	0.00	
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Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
ase Rate Fee: Add the			riber group	as shown in the boxes a	above.	\$		

Name	YSTEM ID# 010443	S						LEGAL NAME OF OWNER Atlantic Broadbane
		IBER GROUP	SUBSCRI	E FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
9	ONE HUNDRED FIFTIETH SUBSCRIBER GROUP					SUBSCRIBER GROU	Y-NINTH	ONE HUNDRED FORT
_	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computatio of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	IP	SUBSCRIBER GROU	-SECOND	ONE HUNDRED FIFTY	JP	SUBSCRIBER GROU	ΓY-FIRST	ONE HUNDRED FIFT
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	iroup	Gross Receipts Third G

LEGAL NAME OF OWNE Atlantic Broadban						S	YSTEM ID# 010443	Name
				TE FEES FOR EACH				
ONE HUNDRED FIFT	Y-THIRD	SUBSCRIBER GROU		ONE HUNDRED FIFT	Y-FOURTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					<u>.</u>	<u> </u>		Base Rate Fee
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Total DSEs	!		0.00	Total DSEs		Į.Į	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GROU	JP	ONE HUNDRED FIR	TY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
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Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes a	above.	\$		

Name	YSTEM ID# 010443	S'						LEGAL NAME OF OWNE Atlantic Broadban
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (BL
0		SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FIR	1	SUBSCRIBER GROUP	-SEVENTH	ONE HUNDRED FIFTY-
9 Computation	COMMUNITY/ AREA 0							COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	\$	d Group	Base Rate Fee Secor	0.00	\$	roup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	SIXTIETH	ONE HUNDRED	JP	SUBSCRIBER GRO	TY-NINTH	ONE HUNDRED FIFT
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Atlantic Broadband (Penn) LLC 010443 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 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 First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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