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	2019/1							
Period								
Bowner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the busine If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire accounting conducts the system's first filing. If not, enter the system's ID	ss of the cable system on the last day of the counting perion	em the accounting period should s					
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM							
	MEDIACOM ILLINOIS LLC							
				02838020191				
				028380 2019/1				
				2010/1				
	ONE MEDIACOM WAY							
	MEDIACOM WAY							
	MEDIACOM FARR, NT 10918							
С	INSTRUCTIONS: In line 1, give any business or trade names used to it							
	names already appear in space B. In line 2, give the mailing address of	the system, ii dili	erent from the address give	л III space в.				
System	1 IDENTIFICATION OF CABLE SYSTEM:							
	MEDIACOM ILLINOIS LLC							
	MAILING ADDRESS OF CABLE SYSTEM:							
	1102 N. Fourth Street 2 (Number, street, rural route, apartment, or suite number)							
	Chillicothe, IL 61523-0334							
	(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	Lacon	IL						
Community	Below is a sample for reporting communities if you report multiple cha	innel line-ups in S	pace G.					
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#				
Sample	Alda	MD	A	1				
Campio	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.

FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 028380 **MEDIACOM ILLINOIS 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# Lacon IL AA First ΪĹ Roanoke AA Community **Bayview Gardens** IL AA **Benson** IL AA El Paso IL AA 1 Eureka AA See instructions for ΪL **Germantown Hills** AA additional information on alphabetization. 1 Metamora IL AA Minonk IL AA IL 1 Secor AA 2 IL AA **Spring Bay** Add rows as necessary. Toluca ĪĹ AA ΪL Washburn AA Wenona IL AA 4 **Woodford County** IL AA Hopedale IL AA Mackinaw IL AA **Mackinaw TRLR** IL AA Minier AA ΪL Stanford AA **Danvers** IL AA **Deer Creek** IL AΑ AA Goodfield IL Hudson IL AA Lamplighter IL AA 1 Towanda ΪL AA ΪL AA Lexington **Timber Ridge** IL AA 1 **Apollo Acres** IL AA Chatsworth IL AA 3 IL 3 **Forrest** AA ĪĹ Chenoa AA **Fairbury** IL 3 AA Varna IL AA 2 **Far Hills** IL AA

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

MEDIACOM ILLINOIS LLC

SYSTEM ID#

028380

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLO	OCK 1		BLOC	K 2	
	NO. OF			NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:					
 Service to first set 	5,483	29.95-76.49			
 Service to additional set(s) 					
 FM radio (if separate rate) 					
Motel, hotel					
Commercial	8	29.95-76.49			
Converter					
Residential					
Non-residential					
		1		1	

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2				
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
Pay cable	PP	Motel, hotel		Family Cable	\$ 80.49
 Pay cable—add'l channel 	PP	Commercial			
Fire protection		Pay cable			
 Burglar protection 		Pay cable-add'l channel			
Installation: Residential		Fire protection			
First set	\$ 99.99	Burglar protection			
 Additional set(s) 	15.00-29.00	Other services:			
• FM radio (if separate rate)		Reconnect	\$ 29.00		
Converter	\$ 10.50	Disconnect			
		Outlet relocation	15.00-29.00		
		Move to new address			

FORM SA3E. PAGE 3.						I
LEGAL NAME OF OWN		YSTEM:			SYSTEM ID#	Name
MEDIACOM ILL					028380	
PRIMARY TRANSMITTE						
carried by your cable s FCC rules and regulati	ystem during toons in effect or	he accounting n June 24, 19	g period, except 81, permitting th	(1) stations carrie	s and low power television stations) ed only on a part-time basis under ain network programs [sections	G
substitute program bas	sis, as explaine	d in the next	paragraph.		and (2) certain stations carried on a cable system on a substitute program	Primary Transmitters: Television
basis under specifc FC	CC rules, regula	ations, or auth	norizations:		,	relevision
station was carried • List the station here,	only on a subs and also in spa	titute basis. ace I, if the sta	ation was carried	d both on a substi	ent and Program Log)—if the tute basis and also on some other	
in the paper SA3 for		cerning substi	tute basis statio	ns, see page (v) o	of the general instructions located	
		-			s such as HBO, ESPN, etc. Identify	
			•	•	tion. For example, report multi- h stream separately; for example	
WETA-simulcast). Column 2: Give the	e channel numl	ber the FCC h	nas assigned to	the television stat	ion for broadcasting over-the-air in	
•	•		annel 4 in Wash	nington, D.C. This	may be different from the channel	
on which your cable sy Column 3: Indicate			tation is a netwo	ork station, an inde	ependent station, or a noncommercial	
, ,	0	,	,,		east), "I" (for independent), "I-M" ommercial educational multicast).	
For the meaning of the	se terms, see	page (v) of th	e general instru	ctions located in t	ne paper SA3 form.	
Column 4: If the sta planation of local service				•	es". If not, enter "No". For an ex-	
					stating the basis on which your	
	an distant static	on during the	accounting period	od. Indicate by en	tering "LAC" if your cable system	
•		•	auga af lagic af a	lancada batavita	, ,	
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FORM SA3E. PAGE 3.					evetem ID#	
		YSTEM:				Name
		ON.			02000	
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 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 multi For the meaning of the Column 4: If the si planation of local servi Column 5: If you h cable system carried ti carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these th Column 6: Give the	ERS: TELEVISION G., identify ever system during the control of the	y television state accounting in June 24, 19 (4), or 76.63 (4) and the next respect to any ations, or auth G—but do listitute basis. In the state of the station account of the station account of the station account of the station. Whether the station whether the station. Whether the station account of the station account of the station of the station. The station of the station of the station of the station of the station. For each of the station of the station of the station of the station of the station. For each of the station of the sta	g period, except 981, permitting the referring to 76.6 paragraph. It is paragraph. It is the ation was carried tute basis station report origination coording to its own to be reported in the ation is a network as assigned to remain as assigned to remain as assigned to remain a sample of the general instruction of the general instruction.	in (1) stations carried e carriage of cert (1(e)(2) and (4))]; in the carriage of cert (1(e)(2) and (4))]; in the special Statem of	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the	G Primary Transmitters: Television
FCC. For Mexican or (Note: If you are utilizir		. ,		•	n which the station is identifed. channel line-up.	
		CHANN	IEL LINE-UP	AA Cont.	·	
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	
WAOE-DT3 Light		I	No	(ii Dietailt)	PEORIA, IL	

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	ER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
MEDIACOM ILL	INOIS LLC				028380	Nume	
PRIMARY TRANSMITTE	RS: TELEVISIO)N					
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 Pasis 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 as swciated 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)," (f							
explanation of these the	ree categories e location of ea	, see page (v) ch station. Fo	of the general in U.S. stations, I	nstructions locate	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.		
Note: If you are utilizing	g multiple char	nel 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		

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 028380 MEDIACOM ILLINOIS 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		EM:					SYSTEM ID#	Name
MEDIACOM ILLINOIS	LLC						028380	
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEN	NT AND PROGRAM LOG					_
In General: In space I, ident	ifv every nor	network televis	sion program broadcast by a	distant statio	n that your	cable syster	n carried on a	
substitute basis during the a	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regula	ations, or a	uthorizations	s. For a further	.
explanation of the programm				e general instr	ructions loc	ated in the p	aper SA3 form.	Substitute Carriage:
1. SPECIAL STATEMENTDuring the accounting per				s any nonne	twork telev	ision progra	ım	Special
broadcast by a distant sta				o, a,		☐Yes	X No	Statement and Program Log
Note: If your answer is "No	", leave the	rest of this pag	ge blank. If your answer is "	'Yes," you mι	ust comple	te the progra	am	
log in block 2. 2. LOG OF SUBSTITUTE	PROGRA	MS						
In General: List each subst	titute progra	ım on a separa		wherever pos	sible, if the	eir meaning i	is	
clear. If you need more spa			ai pages. ision program (substitute p	rogram) that,	during the	accounting		
period, was broadcast by a	distant stat	ion and that yo	our cable system substituted	d for the prog	ramming o	of another st	ation	
under certain FCC rules, re SA3 form for futher informa							r	
titles, for example, "I Love I			76ers vs. Bulls." r "Yes." Otherwise enter "N	0."				
Column 3: Give the call	sign of the s	station broadca	asting the substitute prograi	m.				
Column 4: Give the broathe case of Mexican or Car			ne community to which the			e FCC or, in		
Column 5: Give the mor	nth and day		tem carried the substitute p			with the mo	onth	
first. Example: for May 7 giv		substitute pro	gram was carried by your o	able system.	List the tir	nes accurat	elv	
to the nearest five minutes.							,	
stated as "6:00–6:30 p.m." Column 7: Enter the lett	er "R" if the	listed program	was substituted for progra	mming that v	our svstem	n was requir	ed	
to delete under FCC rules a	and regulation	ons in effect du	iring the accounting period	enter the let	ter "P" if th	e listed pro		
gram was substituted for prefect on October 19, 1976.		that your syste	em was permitted to delete	under FCC r	ules and re	egulations in	i	
				\/\L	EN SUBST	TITLITE		
S	SUBSTITUT	E PROGRAM	1		IAGE OC		7. REASON FOR	
1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH		TIMES	DELETION	
	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM	— то		
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ACCOUNTING PERIOD: 2019/1 FORM SA3E, PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 028380 MEDIACOM ILLINOIS LLC **PART-TIME CARRIAGE LOG** J 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

Part-Time Carriage

Log

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.

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

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

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

	AL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	
	DIACOM ILLINOIS LLC			028380	Name
all a (as pag	COSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amoun mounts (gross receipts) paid to your cable system by subscribers for the system's secidentified in space E) during the accounting period. For a further explanation of how to ce (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	ondary	transmite this a	ission service	K Gross Receipts
ConConIf youIf youIf you	TRIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. Our system did not carry any distant television stations, leave block 3 blank. Enter the alternative block 1 on line 1 of block 4, and calculate the total royalty fee. Our system did carry any distant television stations, you must complete the applicable prompanying this form and attach the schedule to your statement of account.				L Copyright Royalty Fee
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b $$ k 3 below.	e ente	ered on li	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	e 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	I 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 fe system's gross receipts for the accounting period.		064 perd	cent of the	
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.		\$	1,264,996.12	
	This is your minimum fee.	\$		13,459.56	
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 period Yes—Complete the DSE schedule. No—Leave block 3 below blank and column.	nn 4, y od?	you mus	t check	
Block	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		\$	3,312.75	
	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	\$		3,312.75	
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		\$	13,459.56	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, ente zero.	r		0.00	submitting additional deposits under
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)			0.00	Section 111(d)(7) should contact the Licensing
	Line 4. FILING FEE		\$	725.00	additional fees. Division for the appropriate
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$		14,184.56	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) o	f the	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
11441110	MEDIACOM ILLINOIS LLC	028380
	CHANNELS	
M	Instructions: You must give (1) the number of channels on which the cable system carried television broadca	
Channels	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	·
	Enter the total number of channels on which the cable	27
	system carried television broadcast stations	
	2. Enter the total number of activated channels	
	on which the cable system carried television broadcast stations	70
	and nonbroadcast services	
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual	
	we can contact about this statement of account.)	
Individual to Be Contacted		
for Further	Name Kenneth J. Kohrs Telephone	e 845-443-2762
Information		
	Address One Mediacom Way (Number, street, rural route, apartment, or suite number)	
	Mediacom Park, NY 10918	
	(City, town, state, zip)	
	Email Copyrights@mediacomcc.com Fax (optional)	
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office r	egulations.
0		
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of spa	ace B; or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the ca in line 1 of space B and that the owner is not a corporation or partnership; or	ble system as identified
		500 110 1
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as in line 1 of space B.	owner of the cable system
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contains.	ained herein
	are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	
	[10 0.0.0., Section 1001(1900)]	
	V	
	X /s/ Kenneth J. Kohrs	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement.	par in the hay and procee the
	(e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your curs "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lo	
	Typed or printed name: Kenneth J. Kohrs	
	.,,	
	Title: Vice President, Financial Reporting	
	(Title of official position held in corporation or partnership)	
	Date: August 40, 2040	
	Date: August 16, 2019	

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

U.S. Copyright Office

LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC 028380	Namo
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	Special Statement Concerning Gross Receipts
paper SA3 form. 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.	Exclusion
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)	
 * 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	

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	SE 11. (CONTINUED)					
4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			S'	STEM ID#
1	MEDIACOM ILLINOIS LI	_C				028380
	SUM OF DSEs OF CATEGOR	EV "O" STATIO	NS·	T		1
	Add the DSEs of each station					
	Enter the sum here and in line		is schedule.		1.50	
				<u>[</u>		1
2	Instructions: In the column headed "Call S	Sian": list the co	all cians of all distant stations	identified by t	he letter "∩" in column 5	
_	of space G (page 3).	igii . iist tile ca	ili sigris or all distant stations	identified by t	ne letter O in column 3	
Computation	In the column headed "DSE"	: for each indep	endent station, give the DSE	as "1.0"; for	each network or noncom-	
of DSEs for	mercial educational station, give	e the DSE as ".				
Category "O"			CATEGORY "O" STATION			
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	WILL/WILL(HD) PBS	0.250	WTVP/WTVP(HD) PB	0.250		
	WILL-DT2 World	0.250	WTVP-DT2 World	0.250		
	WILL-DT3 Create	0.250	WTVP-DT3 Create	0.250		
Add rows as						
necessary.						
Remember to copy						
all formula into new					•••••••••••••••••••••••••••••••••••••••	
rows.						
					••••••	

Name	MEDIACOM I	LLINOIS LLC					S	028380
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2: figure should c Column 3: Column 4: be carried out Column 5: give the type-v Column 6:	t the call sign of all distar For each station, give to correspond with the information For each station, give to Divide the figure in coluat least to the third decirate action and pendent alue as ".25." Multiply the figure in column in the call signs and the call signs are called a signs and the called a signs and the called a signs are called a signs and the called a signs are called a signs are called a signs and the called a signs are called	the number of himation given in the total number umn 2 by the figmal point. This station, give the following 4 by the following 4 by the following 4 by the following 4 by the figure 1 by the figure 1 by the figure 1 by the figure 2 by the	nours your cable system space J. Calculate or or of hours that the statement of the column 3, and is the "basis of carriage "type-value" as "1.0."	m carried the sta nly one DSE for ion broadcast or give the result in the value" for the 'For each netwo	ation during the accountin each station. wer the air during the acco decimals in column 4. Th	ounting period. his figure must cational station, less than the	
Capacity		C	ATEGORY	LAC STATIONS:	COMPUTAT	ION OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	JRS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAC VALUE			SE
						<u>x</u>		
						x x		
			÷	:	=	x	=	
			÷		=	x	=	
						x	=	
			÷	:	=	x	=	
	Add the DSEs o	OF CATEGORY LAC S f each station. n here and in line 2 of p		nedule,		0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in effections in effections in effections. Broadcast or space I). Column 2: Fat your option. TColumn 3: EColumn 4: DColumn	by your system in substant on October 19, 1976 (ne or more live, nonnetword each station give the figure should correstinter the number of days bivide the figure in columbis is the station's DSE	itution for a pro (as shown by the ork programs do number of live spond with the s in the calenda nn 2 by the figu (For more infor	ogram that your system letter "P" in column uring that optional carre, nonnetwork program information in space I ar year: 365, except in tre in column 3, and girmation on rounding, s	n was permitted 7 of space I); an iage (as shown by s carried in subs a leap year. ve the result in c ee page (viii) of	y the word "Yes" in column is stitution for programs that column 4. Round to no les the general instructions in	2 of were deleted s than the third	rm).
				BASIS STATION			1	1
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBE OF DAY IN YEAF	'S	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
			-	=		÷		=
		-	-	=		÷		=
		-		=		÷		=
		-	-	=		÷		=
	Add the DSEs o	OF SUBSTITUTE-BAS f each station. n here and in line 3 of p	IS STATIONS:			0.00		-
5		R OF DSEs: Give the am applicable to your syster		boxes in parts 2, 3, and	4 of this schedul	le and add them to provide	the tota	
Total Number	1. Number of	DSEs from part 2 ●				>	1.50	
of DSEs	2. Number of	DSEs from part 3 ●				<u> </u>	0.00	
	3. Number of	DSEs from part 4 ●				<u> </u>	0.00	
	TOTAL NUMBER	R OF DSEs						1.50

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

LEGAL NAME OF O		SYSTEM:					S	YSTEM ID# 028380	Name
Instructions: Block In block A: If your answer if 's schedule. If your answer if 's	"Yes," leave the re	emainder of _l		7 of the DSE sche	edule blank an	d complete pa	art 8, (page 16) of	the	6
	, <u>, , , , , , , , , , , , , , , , , , </u>			ELEVISION M.	ARKETS				Computation of
I =	1981?	schedule—I	•	ller markets as de				gulations in	3.75 Fee
		BLO	CK B: CARR	IAGE OF PERI	MITTED DS	Es			
Column 1: CALL SIGN	under FCC rules	and regulati ne DSE Sche	ons prior to Jur edule. (Note: Th	part 2, 3, and 4 of the 25, 1981. For full the letter M below r Act of 2010.)	urther explana	tion of permitt	ed stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rd A Stations carri 76.61(b)(c)] B Specialty stati C Noncommerio D Grandfathered instructions fo E Carried pursua *F A station pre	ules and regued pursuant on as define tal education (76. or DSE scheo ant to individ eviously carrie JHF station v	ulations cited be to the FCC man d in 76.5(kk) (7 al station [76.59 65) (see paragi dule). ual waiver of Fr ed on a part-tim vithin grade-B c	ne or substitute ba contour, [76.59(d)(ose in effect on '6.57, 76.59(b) (e)(1), 76.63(a) 63(a) referring bstitution of gr	June 24, 198 , 76.61(b)(c), referring to 7 to 76.61(d) andfathered s	76.63(a) referring 6.61(e)(1 stations in the		
Column 3:		e stations ide	entified by the le	parts 2, 3, and 4 etter "F" in column			vorksheet on pag	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	
WILL/WILL	С	0.25	WTVP/WTV	С	0.25				
WILL-DT2 V		0.25	WTVP-DT2	С	0.25				
WILL-DT3 (С	0.25	WTVP-DT3	С	0.25		<u> </u>		
·····									
								1.50	
			OCK C: CO	MPUTATION OF	E 2 75 EEE			<u> </u>	
			BLOCK C. CO	WIFUTATION OF	7 3.73 FEE				
Line 1: Enter the							•		
Line 2: Enter the	sum of permitte	ed DSEs fro	m block B abo	ove			·		
Line 3: Subtract (If zero, le				of DSEs subject of this schedu		rate.	<u>.</u>		
Line 4: Enter gro	ss receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375	and enter s	um here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DS	Es from line	3				·		carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 ar	nd enter he	re and on line	2, block 3, spac	e L (page 7)			0.00	

	028380										IACOM IL	
				UEC	(CONTIN	N MARKETS	ISI	A: TELEVIS	BLOCK			
6	3. DSE	RMITTED ASIS	CALL		3. DSE	PERMITTED BASIS	2	1. CALL SIGN	3. DSE	2. PERMITTED BASIS	. CALL SIGN	
Computatio 3.75 Fee												
0.70100			 									
	•••••		 								•••••	
			 									•••
			 									-
			 								•••••	
			 									-

Name	LEGAL NAME OF OWN MEDIACOM ILL								S	YSTEM ID# 028380	
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identified 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 designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED										
		PERMITTI	ED DSE FOR STA	ATIONS CARRI	ED	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS			
	1. CALL SIGN	2. PRIC		COUNTING ERIOD		4. BASIS OF CARRIAGE		RESENT DSE	6. P	ERMITTED DSE	
									••••••		
7 Computation of the	•	"Yes," comple	ete blocks B and C ocks B and C blan	k and complete		urt 8 of the DSE schedu					
Syndicated			BLOC	K A: MAJOR	ΙĿ	ELEVISION MARK	<u>EI</u>				
Exclusivity Surcharge	Is any portion of the or	cable system w	vithin a top 100 maj	or television mar	rket	as defned by section 7	6.5 of FCC	rules in effect J	une 24,	1981?	
	X Yes—Complete	blocks B and	C .			No—Proceed to	part 8				
	BLOCK B: Ca	arriage of VHF	-/Grade B Contour	Stations		BLOCK	C: Compu	ıtation of Exem	pt DSE	<u> </u>	
	Is any station listed in commercial VHF stati or in part, over the ca	on that places				Was any station listed nity served by the cab to former FCC rule 76	le system p				
	Yes—List each s X No—Enter zero a		h its appropriate per part 8.	mitted DSE		Yes—List each st			ate permi	itted DSE	
	CALL SIGN	DSE	CALL SIGN	DSE	$ \ $	CALL SIGN	DSE	CALL SIG	SN	DSE	
					$ \ $						
		-			$ \ $						
					$ \ $						
		·	TOTAL DSEs	0.00				TOTAL DS	SEs	0.00	

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC	SYSTEM ID# 028380	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,264,996.12	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the 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 defned 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. X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ \$		
	C. Multiply line B by 3.000 and enter here	_	
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)		
	Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the 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			YSTEM ID#
	!	MEDIACOM ILLINOIS LLC	028380
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. A. Enter 0.00300 of gross receipts (the amount in section 1). B. Enter 0.00189 of gross receipts (the amount in section 1). C. 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	6 was 6 In blo If you If you blank What i	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. bck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. Ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. Ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		Yes—Complete part 9 of this schedule. 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.).	<u> </u>
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1). 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

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC	SYSTEM ID# 028380 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)	8
B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$	Computati of Base Rate
C. Multiply line B by 3.000 and enter here	
D. Enter 0.00330 of gross receipts (the amount in section 1) \$	
E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here	
F. Multiply line D by line E and enter here >	
G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee	0.00
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of televi- instead be reported on a community-by-community basis (subscriber groups) if the cable system reported mu	
Space G. In General: If any of the stations you carried were partially distant, the statute allows you, in computing your receipts from subscribers located within the station's local service area, from your system's total gross receipt exclusion, you must:	pase rate fee, to exclude ss. To take advantage of this of
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your	Determine the number of erate fee for each group. Surchard
NOTE: If any portion of your cable system is located within the top 100 television market and the station is no also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both bloc if your cable system is wholly located outside all major television markets, complete block A only.	
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 partiall carried to that community.	y distant station you for Partia Permitte Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscroutside the station's local service area. A subscriber located outside the local service area of a station is distant the same token, the station is distant to the subscriber.)	
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stati system will have only one subscriber group when the distant stations it carried have local service areas that or	ons. Note that a cable
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each groups. In each section:	of your system's subscriber
 Identify the communities/areas represented by each subscriber group. Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is subscribers in the group. 	distant to all of the
 If: 1) your system is located wholly outside all major and smaller television markets, give each station's DSE as and 4 of this schedule; or, 2) any portion of your system is located in a major or smaller televison market, give each station's DSE as yo 	
part 6 of this schedule. • Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
 Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of in the paper SA3 form. 	the general instructions
 Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this sche page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscrib DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You 	er group (that is, the total

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

actual calculations on the form.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 028380 **MEDIACOM ILLINOIS 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 OWNE MEDIACOM ILLING		E SYSTEM:				S	YSTEM ID# 028380	Name
BL				ATE FEES FOR EACH				
	FIRST	SUBSCRIBER GROU	IP		SECOND	SUBSCRIBER GROU	JP	•
	All Othe	er Communities		COMMUNITY/ AREA				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			_	WILL/WILL(HD) PE	+			Base Rate Fee
		-		WILL-DT2 World	0.25			and
		-		WILL-DT3 Create	0.25			Syndicated
	ļ		ļ				 	Exclusivity
		-						Surcharge
		-	-				<u></u>	for
			_					Partially Distant
							····	Stations
								Otations
	†		†					
	†	-				-		
	<u> </u>		<u></u>					
Total DSEs			0.00	Total DSEs			0.75	
Gross Receipts First Gr	oup	\$ 849	,863.95	Gross Receipts Second	d Group	\$ 2	23,561.87	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	1,784.02	
	THIRD	SUBSCRIBER GROU	IP		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA				COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
WTVP/WTVP(HD) I	0.25							
WTVP-DT2 World	0.25							
WTVP-DT3 Create	0.25							
		-						
		-				-	<u>.</u>	
	 				 		<u></u>	
	 				 			
	 		1					
	 							
	†	-	†					
	†							
Total DSEs			0.75	Total DSEs			0.00	
Gross Receipts Third G	roup	<u>\$ 191</u>	,570.30	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$ 1	,528.73	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes at	oove.	\$	3,312.75	

SYSTEM ID# 028380 Name	S				E SYSTEM:		LEGAL NAME OF OWNE
	IBER GROUP	SUBSCRI	E FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	Bl
<u> </u>	SUBSCRIBER GROU	SIXTH			SUBSCRIBER GRO	FIFTH	
0 Computation			COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE of	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F							
and							
Syndicated Exclusivity		-					
Surcharge							
for							
Partially							
Distant							
Stations							
	<u> </u>						
					-		
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	\$	oup	3ase Rate Fee First G
GROUP	SUBSCRIBER GROU	EIGHTH		JP	SUBSCRIBER GRO	SEVENTH	5
<u> </u>			COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
					-		
······	<u> </u>						
					-		
					-		
	_						
0.00			Total DSEs	0.00	l		Fotal DSEs
, l		Groun	Gross Receipts Fourth	0.00	\$	iroup	Gross Receipts Third G
0.00	\$	Cioup	•				
-	\$	Group				лоцр	

DF BASE RAOUP O DSE	COMMUNITY/ ARE	TENTH	RIBER GROUP I SUBSCRIBER GROU CALL SIGN	JP 0 DSE	9 Computation of Base Rate Fee
0		Α		0	Computation of Base Rate Fee
······			CALL SIGN		Computation of Base Rate Fee
DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee and
					and
					Syndicated Exclusivity
					Surcharge
				····	for
					Partially
					Distant Stations
					Stations
·····				<u></u>	
0.00	Total DCFs		11	0.00	
0.00	Gross Receipts Sec	ond Group	\$	0.00	
0.00	Base Rate Fee Sec	ond Group	\$	0.00	
OUP		TWELVTH	I SUBSCRIBER GROU	JP	
0	COMMUNITY/ ARE				
DSE	CALL SIGN	DSE	CALL SIGN	DSE	
·····				<u></u>	
•••••				<u></u>	
·····					
0.00	Total DSEs			0.00	
0.00	Gross Receipts Fou	rth Group	\$	0.00	
0.00	Base Rate Fee Fou	rth Group	\$	0.00	
ecriber group	as shown in the house	e above			
	OUP	0.00 Gross Receipts Sec	0.00 Gross Receipts Second Group 0.00 Base Rate Fee Second Group OUP TWELVTH COMMUNITY/ AREA DSE CALL SIGN DSE CALL SIGN DSE 0.00 Total DSEs Gross Receipts Fourth Group Base Rate Fee Fourth Group	0.00 Base Rate Fee Second Group \$ OUP TWELVTH SUBSCRIBER GROU O COMMUNITY/ AREA DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN O COMMUNITY/ AREA Base Rate Fee Second Group TWELVTH SUBSCRIBER GROUN O COMMUNITY/ AREA CALL SIGN DSE CALL SIGN O COMMUNITY/ AREA Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee Fourth Group \$	0.00 Gross Receipts Second Group \$ 0.00

LEGAL NAME OF OWNE			•			S	YSTEM ID# 028380	Name
BI				TE FEES FOR EACH			10	
		SUBSCRIBER GROU	JP			SUBSCRIBER GROU		9
COMMUNITY/ AREA		er Communities		COMMUNITY/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
		_						Surcharge
								for
								Partially
					ļ			Distant
		_						Stations
		_						
		-						
					ļ			
Total DSEs		-	0.00	Total DSEs		-	0.00	
Gross Receipts First G	roup	<u>\$</u> 849,	863.95	Gross Receipts Second Group \$ 223,561.87				
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA				COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DOE	
		-					<u> </u>	
		L						
		H					······································	
		-					••••	
	<u> </u>	_						
					[
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$ 191,	570.30	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Group	\$	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	ibove.	\$	0.00	

LEGAL NAME OF OWN		LE SYSTEM:	•			S	028380	Name
В				TE FEES FOR EAC		RIBER GROUP		
OOMMUNUTY : 555	FIFTH	SUBSCRIBER GRO		000000000000000000000000000000000000000		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
	<u></u>				····			Syndicated Exclusivity
								Surcharge
								for
								Partially
	···							Distant Stations
	<u></u>		······································				••••	Otations
	<u> </u>				····			
Total DSEs			0.00	Total DSEs		Ц	0.00	
Gross Receipts First G	Broup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO	UP					
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u> </u>	<u> </u>	
	···					<u> </u>		
		-						
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	<u></u>		······································				••••	
			·					
Total DSEs			0.00	Total DSEs		11	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Group \$ 0. the base rate fees for each subscriber k 3, line 1, space L (page 7)	e fees for each subscriber			Base Rate Fee Four	th Group	\$	0.00	

		.E SYSTEM:	•			S	EGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC 928380								
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP									
	NINTH	SUBSCRIBER GROU	JP		TENTH	SUBSCRIBER GRO	UP	0							
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	9 Commutation							
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	DGL	Base Rate Fee							
			 					and							
					••••	•		Syndicated							
					••••			Exclusivity							
					••••			Surcharge							
		-	1		••••			for							
			1					Partially							
		-						Distant							
		-	1		••••			Stations							
		-	1												
		-													
			1												
			1												
			1												
					••••										
Total DSEs	 		0.00	Total DSEs			0.00								
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00								
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00								
EL	EVENTH	SUBSCRIBER GROU	JP		TWELVTH	SUBSCRIBER GRO	UP								
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0										
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE								
		07.122.07071				0.120.011									
			·····		••••										
			·		·····										
															
	 		N. Control of the Con		····										
Total DSEs			0.00	Total DSEs			0.00								
Total DSEs Gross Receipts Third G	roup	\$	0.00	Total DSEs Gross Receipts Four	th Group	\$	0.00								
Gross Receipts Third G	·		0.00	Gross Receipts Four		\$	0.00								
	·	\$				\$									

ACCOUNTING PERIOD: 2019/1

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MEDIACOM ILLINOIS LLC 028380 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 computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2019/1

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CARLE SYSTEM: SYSTEM ID# Name MEDIACOM ILLINOIS LLC 028380 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. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

LEGAL NAME OF OWN MEDIACOM ILLIN						S	YSTEM ID# 028380	Name
				TE FEES FOR EAC		RIBER GROUP	ID	
COMMUNITY/ AREA		SUBSCRIBER GRO	0	COMMUNITY/ ARE	9			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
						- 		and Syndicated
								Exclusivity
	<mark></mark>	 	<u>.</u>			-		Surcharge
		-				-		for Partially
								Distant
	<u></u>		<u></u>			-		Stations
	·····	-	···			 		
	<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	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
F	IFTEENTH	SUBSCRIBER GRO)UP		SIXTEENTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	·····		<u>.</u>			-		
						-		
						 		
						-		
			···			-		
						1		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	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 OWNE MEDIACOM ILLINO		E SYSTEM:				S	YSTEM ID# 028380	Name
				TE FEES FOR EACH				
	ITEENTH	SUBSCRIBER GROU		Ti .		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>	-	<u></u>	Exclusivity
						-		Surcharge for
						-		Partially
						-		Distant
								Stations
						-		
						-		
					···	-		
							<u></u>	
Total DSEs			0.00	Total DSEs	-		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
NIN	ITEENTH	SUBSCRIBER GROU	JP	Т	WENTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
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 G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN MEDIACOM ILLII		LE SYSTEM:				S	YSTEM ID# 028380	Name
[BLOCK A: (COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
TWE	NTY-FIRST	SUBSCRIBER GRO	DUP	TWEN	٥			
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				9 Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					·····			Base Rate Fo
	····	-	····					Syndicated
	••••		····				·····	Exclusivity
								Surcharge
		<u> </u>						for
	<u></u>	-						Partially
	····		····	-	·····			Distant Stations
		-		1				Stations
	••••						•	
	<u></u>							
						1		
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	
TWE	NTY-THIRD	SUBSCRIBER GRO	DUP	TWEN	ITY-FOURTH	I SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>			-				
	····		····					
	••••	-						
			····				<u></u>	
•••••••	····	-	····					
	<u></u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
-	•				•			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee Third Base Rate Fee: Add Enter here and in bloo	the base ra	te fees for each sub		as shown in the boxe		\$	0.00	

LEGAL NAME OF OWI MEDIACOM ILLI						S	YSTEM ID# 028380	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		TW	JP 0	9		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
						-		Syndicated
					·····			Exclusivity Surcharge
	·····		····			-		for
	•••••					-		Partially
								Distant
			<u></u>					Stations
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec				
·	·				•			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TWENTY	'-SEVENTH	SUBSCRIBER GRO	DUP	TWE	NTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
	•••••	-	····			-		
						-		
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	πn Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OW MEDIACOM ILLI						S	YSTEM ID# 028380	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO			JP 0	9		
COMMUNITY/ AREA	Α		0	COMMUNITY/ ARE	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
			<u></u>					Syndicated
	<u></u>					-	<u></u>	Exclusivity
	·····					-	<u> </u>	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	
TH	IRTY-FIRST	SUBSCRIBER GRO	OUP	THIR	TY-SECOND	SUBSCRIBER GRO	JP	
COMMUNITY/ AREA	Α		0	COMMUNITY/ ARE				
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	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN MEDIACOM ILLIN						S	YSTEM ID# 028380	Name
E	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
		SUBSCRIBER GRO		H		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07122 01011	502	OFFICE STORY	DOL	OF ILLE CICIT	502	OF ILLE STORY	502	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
		_						for
								Partially
	<u>.</u>		<u></u>					Distant
			<u></u>					Stations
			 			-	····	
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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	
THI	RTY-FIFTH	SUBSCRIBER GRO	DUP	Ti	HIRTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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	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 t Enter here and in bloc			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN MEDIACOM ILLII						S	YSTEM ID# 028380	Name
	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL CICIT	502	O'ALL STOTA	DOL	OF ILLE STOTE	502	ON ILL STORY	502	Base Rate Fee
								and
								Syndicated
								Exclusivity
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								Partially
						<u> </u>		Distant
	·····	_						Stations
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Total DSEs		<u> </u>	0.00	Total DSEs		!!	0.00	
Gross Receipts First	Groun	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Grood Rossipte Filet	Стоир	•		l cross resorpts ess	ona Group			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THII	RTY-NINTH	SUBSCRIBER GRO	DUP		FORTIETH	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 blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC 928380								
				ATE FEES FOR EACH				
		SUBSCRIBER GROU	JP 0	FORT COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
COMMUNITY/ AREA			<u>U</u>	COMMUNITY AREA			U	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
					-			Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROU		II		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					-			
				-				
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	I Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN MEDIACOM ILLIN						S	YSTEM ID# 028380	Name
В	LOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	RTY-FIFTH	SUBSCRIBER GRO		tt -		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O/ IEE O/O/I	DOL	OFFICE STORY	DOL	OF ILLE CICIT	502	O/ILL GIGIT	502	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
		-	<u></u>					Partially
								Distant
		-				-		Stations
						-		
	····	+	···		•••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
·	•				·			
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FORTY-	SEVENTH	SUBSCRIBER GRO	UP	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	l .		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 t Enter here and in bloc			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWI MEDIACOM ILLI						S	YSTEM ID# 028380	Name
				TE FEES FOR EAC				
		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
							<u> </u>	Exclusivity Surcharge
	····	-	••••					for
								Partially
								Distant
	<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	
F	IFTY-FIRST	SUBSCRIBER GRO	DUP	FIF	TY-SECONE	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
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	••••	-	••••				····	
	<u></u>	 						
		H		1				
	<u></u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l 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.	\$		

ATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP					E SYSTEM:		LEGAL NAME OF OWNE MEDIACOM ILLING
	SCRIBER	R EACH S	ATE FEES F	BASE RA	COMPUTATION OF	OCK A: C	BL
<u> </u>	JRTH SUB				SUBSCRIBER GROU	Y-THIRD	
0 COMMUNITY/ AREA 0 Computatio		/ AREA	COMMUNI	0			COMMUNITY/ AREA
				DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fo							
and							
Syndicated Exclusivity							
Surcharge						·····	
for							
Partially							
Distant Stations				<u> </u>			
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						·	
0.00 Total DSEs 0.00	**		Total DSEs	0.00		! 	Total DSEs
0.00 Gross Receipts Second Group \$ 0.00	\$	ts Second (\$	oun.	Gross Receipts First Gr
Sister Research Sessonal Great	Ψ <u>Ψ</u>	io cocona c	0.0001100			очр	Croop recorpto rinot Cr
0.00 Base Rate Fee Second Group \$ 0.00	up \$	e Second C	Base Rate	0.00	\$	oup	Base Rate Fee First Gr
	IXTH SUB		#		SUBSCRIBER GROU	TY-FIFTH	
0 COMMUNITY/ AREA 0		/ AREA	COMMUNI	0			COMMUNITY/ AREA
SIGN DSE CALL SIGN DSE CALL SIGN DSE	E C		CALL SIG	DSE	CALL SIGN	DSE	CALL SIGN
				<u> </u>			
				-			
						····	
						 	
				<u>-</u>			
			Total DSEs	0.00			Total DSEs
II .	р <u></u> \$	ts Fourth G	Gross Rec	0.00	\$	roup	Gross Receipts Third G
0.00 Gross Receipts Fourth Group \$ 0.00							

LEGAL NAME OF OWNE MEDIACOM ILLINO		E SYSTEM:				S	YSTEM ID# 028380	Name
				TE FEES FOR EAC				
	SEVENTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	١		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
3.122.51511								Base Rate Fee
								and
								Syndicated
					····	-		Exclusivity
						-	····	Surcharge for
						-	•••••	Partially
		-						Distant
		-						Stations
		-				-		
						-		
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
FIFT	Y-NINTH	SUBSCRIBER GRO	JP			SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						<u> </u>		
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		-						
						-		
					····	-		
		-						
						<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	th 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 MEDIACOM ILLINO		E SYSTEM:				SY	STEM ID# 028380	Name
				TE FEES FOR EACH				
	Y-FIRST	SUBSCRIBER GROU		i i	-SECOND	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
								and Syndicated
						-		Exclusivity
								Surcharge
								for
								Partially
							<u>.</u>	Distant Stations
								Stations
Total DSEs			0.00	Total DSEs			0.00	
	oun	¢	0.00		d Croup	¢	0.00	
Gross Receipts First Gr	oup	<u> </u>	0.00	Gross Receipts Second	и Стоир	\$	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			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							<u> </u>	
							<u> </u>	
							<u></u>	
								
Total DSEs	<u>. </u>		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	
				11				
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWN MEDIACOM ILLIN						S	YSTEM ID# 028380	Name
E	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO	OUP	1		SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<u></u>							Base Rate F
	<u>.</u>							and
	••••							Syndicated Exclusivity
			····	1	······			Surcharge
								for
								Partially
	<u></u>							Distant
	····			-	·····			Stations
	····			1				
	••••							
Total DSEs		-	0.00	Total DSEs		-	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SIXTY	-SEVENTH	SUBSCRIBER GRO	OUP	SI	XTY-EIGHTH	SUBSCRIBER GROU	UP	
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>							
	····				·····			
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	the base ra	te fees for each sub				\$	0.00	

NI	928380 O28380	S				LE SYSTEM:		LEGAL NAME OF OWNE
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
9		SUBSCRIBER GROU	VENTIETH			SUBSCRIBER GRO	Y-NINTH	
O Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicate								
Exclusivity Surcharge								
for								
Partially								
Distant								
Stations								
<u>) </u>	0.00			Total DSEs	0.00			Total DSEs
<u> </u>	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	-SECOND	SEVENT	JP	SUBSCRIBER GRO	TY-FIRST	SEVEN
0	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		<u> </u>						
		-						
•••••								
,	0.00			Total DSEs	0.00			Γotal DSEs
_	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	iroup	Gross Receipts Third G
) [*	Sicup	2.000 Reocipio i outil	3.00		. 546	c. soc recouple filled G
<u> </u>								

LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC 928380								
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER GROUP I SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
				-				Exclusivity Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROU	JP 0	II		I SUBSCRIBER GROU		
COMMUNITY/ AREA			U	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
T D.C							2.55	
Total DSEs	Croun		0.00	Total DSEs	h Croup	•	0.00	
Gross Receipts Third	Эгоир	\$	0.00	Gross Receipts Fourt	ιι	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in blood			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN MEDIACOM ILLIN						S	YSTEM ID# 028380	Name
E	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO		H		SUBSCRIBER GROU	JP	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
		H	••••					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	cond 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	
				·	·····			
			••••		•••••			
		H	••••					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
	17	<u>·</u>				<u>·</u>		
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 MEDIACOM ILLII						S	YSTEM ID# 028380	Name
	BLOCK A: (COMPUTATION C	F BASE RA	TE FEES FOR EAG	CH SUBSCR	RIBER GROUP		
		SUBSCRIBER GRO		tt -		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
ONLE GIGIT	DOL	O/ALL GIGIT	DOL	ONLE CICIT	BOL	OALL GIGIT	DOL	Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
						<u> </u>		for
		 				<u> </u>		Partially
						<u> </u>		Distant
							<u></u>	Stations
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						-	<u></u>	
						-	<u></u>	
			····					
						 		
Total DSEs		<u> </u>	0.00	Total DSEs		Į.	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	
EIGI	HTY-THIRD	SUBSCRIBER GRO	OUP	EIGH	ITY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<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	
							$\neg \neg $	
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.	\$		

ASE RATE FEES FOR EACH SUBSCRIBER GROUP						OIS LLC	MEDIACOM ILLIN
FIGURE ON THE OUR CORRESPONDED	RIBER GROUP	H SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	_OCK A: (BI
——————————————————————————————————————	I SUBSCRIBER GE				SUBSCRIBER GRO	TY-FIFTH	
0 COMMUNITY/ AREA 0 Computation			COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE CALL SIGN DSE CALL SIGN DSE of	1.1			DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe							
and							
Syndicated		<u> </u>					
Exclusivity Surcharge		<u></u>		<u>.</u>			
for		<u>-</u>		<u>-</u>			
Partially							
Distant							
Stations							
		······································					
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0.00 Total DSEs 0.00			Total DSEs	0.00	_		Total DSEs
0.00 Gross Receipts Second Group \$ 0.00	\$	nd Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
0.00 Base Rate Fee Second Group \$ 0.00	\$	nd Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
EIGHTY-EIGHTH SUBSCRIBER GROUP	I SUBSCRIBER GF	TY-EIGHTH	EIGH'	UP	SUBSCRIBER GRO	SEVENTH	EIGHTY-
0 COMMUNITY/ AREA 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE CALL SIGN DSE CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		<u> </u>					
		<u> </u>		<u> </u>			
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		······································			-		
		<u> </u>			-		
		<u></u>		<u>.</u>		<u></u>	
		<u></u>		<u>.</u>		<u></u>	
	-	<u>-</u>		·		<u>'</u>	
0.00 Total DSEs 0.00			Total DSFs	0.00			Total DSEs
	•	h Crous			•	rous	
0.00 Gross Receipts Fourth Group \$ 0.00	3	і Сіоир	потова кесеіріз ғойпі Потова кесеіріз ғойпі	0.00	\$	σιυυμ	Gross Receipts Third C
	\$		Base Rate Fee Fourtl	0.00	\$	Proup	Base Rate Fee Third G

NI	YSTEM ID# 028380	S				LE SYSTEM:		LEGAL NAME OF OWNE
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	NINTIETH			SUBSCRIBER GROU	Y-NINTH	
O Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
••••	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and		_						
Syndicated								
Exclusivity Surcharge	<u> </u>							
for								
Partially						-		
Distant								
Stations						-		
			<u> </u>				-	
		-						
)	0.00			Total DSEs	0.00			Total DSEs
<u> </u>	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr
-		·*						
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	/-SECOND	NINETY	JP	SUBSCRIBER GRO	TY-FIRST	NINE
<u>0</u>	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
							·	
		_						
						-		
			······					
		=				-		
	0.00			Total DSEs	0.00			Total DSEs
)	0.00							
_	0.00			Gross Receipts Fourth				race Hagginto Third C
_	0.00	\$	Group		0.00	\$	roup	Gross Receipts Third G

Com SIGN DSE CALL SIGN DSE CALL SIGN DSE Base	9
O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA BIGN DSE CALL SIGN DSE CALL SIGN DSE Base	0
Com SIGN DSE CALL SIGN DSE CALL SIGN DSE Base	
SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base	ع omputati
	of
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Communication of the communica	and
	Syndicate
	Exclusivit Surcharg
	for
	Partially
Di	Distant
St	Stations
Es 0.00 Total DSEs 0.00	
seceipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	
South a local transfer of the state of the s	
te Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00	
NINETY-FIFTH SUBSCRIBER GROUP NINETY-SIXTH SUBSCRIBER GROUP	
NITY/ AREA 0 COMMUNITY/ AREA 0	
SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	
Es <u>0.00</u> Total DSEs <u>0.00</u>	
ceipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	
te Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	

LEGAL NAME OF OWNE		E SYSTEM:				S'	YSTEM ID# 028380	Name
				ATE FEES FOR EACH				
	SEVENTH	SUBSCRIBER GROU		it .	Y-EIGHTH	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
								Stations
							<u></u>	
Total DSEs		!	0.00	Total DSEs		!!	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	ΓY-NINTH	SUBSCRIBER GROU		ii —	NDREDTH	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	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Froup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				Ш				
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

MEDIACOM ILLIN		E SYSTEM:				S	YSTEM ID# 028380	Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH	1 SUBSCF	RIBER GROUP		
	ED FIRST	SUBSCRIBER GROU		III		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
					<u></u>			and
	<mark></mark>							Syndicated Exclusivity
	<u></u>					 		Surcharge
								for
	<mark></mark>							Partially
	<u></u>	-			<u></u>			Distant Stations
	···							Stations
	<mark></mark>				<u></u>			
					<u>-</u>			
Total DSEs		!	0.00	Total DSEs		!!	0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
·				·				
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	ED THIRD	SUBSCRIBER GROU		II		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>							
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourth	า Group	\$	0.00	
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Fourti	ո Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN MEDIACOM ILLIN						S	YSTEM ID# 028380	Name
				TE FEES FOR EAC				
	RED FIFTH	SUBSCRIBER GRO		1		SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<u></u>		<u></u>					Base Rate Fe
	<u></u>			-	·····			and Syndicated
	···			·	·····			Exclusivity
								Surcharge
								for
								Partially
			<u></u>					Distant
	<u></u>		 	·	·····			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 0	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED	SEVENTH	SUBSCRIBER GRO)UP	ONE HUND	RED EIGHTH	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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	<u></u>		<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
C. SOO TOOOIPIO TIIIIU	Cioab	·		l coo recorpto i ou	O. Jup	<u>*</u>	3.00	
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			scriber group	as shown in the boxe	es above.	\$		

MEDIACOM ILLIN		E SYSTEM:				S	YSTEM ID# 028380	Name
				ATE FEES FOR EACH			ID.	
COMMUNITY/ AREA		SUBSCRIBER GROL	0	COMMUNITY/ AREA		I SUBSCRIBER GROU	0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
								and
		-			······································			Syndicated
								Exclusivity
								Surcharge
					<mark></mark>			for Partially
					<u></u>			Distant
		-			······································			Stations
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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	
ONE HUNDRED E	ELEVENTH	SUBSCRIBER GROU	JP	ONE HUNDRED	TWELVTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····				<u> </u>			
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					<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			riber group	as shown in the boxes	above.	\$		

MEDIACOM ILLING		LE SYSTEM:				S	YSTEM ID# 028380	Name
BI ONE HUNDRED THIS				ATE FEES FOR EACH		RIBER GROUP	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-				Base Rate Fee and
		-						Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant Stations
		-						1
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Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	1
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	FTEENTH	SUBSCRIBER GROU		II		I SUBSCRIBER GROU		1
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	l
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	İ
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Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	İ
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN MEDIACOM ILLIN		LE SYSTEM:				S	YSTEM ID# 028380	Name
В	SLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED SEVE	NTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED E	IGHTEENTH	I SUBSCRIBER GRO	JP	٥
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
	<u></u>		<u>-</u>		•••••			Exclusivity
								Surcharge
								for
	<u></u>		<u></u>					Partially
	<u></u>		<u></u>					Distant Stations
	···	-	. 					Stations
	<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	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED N	NTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	TWENTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	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>		<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 t Enter here and in bloo			criber group	as shown in the boxe	s above.	\$		

	928380	J					ER OF CABI	MEDIACOM ILLIN
		IBER GROUP	SUBSCR	TE FEES FOR EACH				
9		SUBSCRIBER GROUP	TY-SECOND	ONE HUNDRED TWEN		SUBSCRIBER GRO	NTY-FIRST	ONE HUNDRED TWEI
Comput	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rat								
and					<u> </u>			
Syndica Exclusi					<u>.</u>		<u></u>	
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						-		
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	nd Group	Gross Receipts Secon	0.00	\$	Group	Gross Receipts First G
	0.00	\$	nd Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G
	,	SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED TWEN	•	SUBSCRIBER GROU	NTY-THIRD	ONE HUNDRED TWEN
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
					<u>.</u>		<u></u>	
			······································					
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	n Group	Total DSEs Gross Receipts Fourt	0.00	\$	Group	otal DSEs

BLOCK A: COMPUTATION OF ONE HUNDRED TWENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA				3	928380	Name
	BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
COMMUNITY/ AREA		1		SUBSCRIBER GROUP		9
	0	COMMUNITY/ ARE	Α		0	Computa
CALL SIGN DSE CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						Base Rate
						and Syndica
						Exclusiv
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Fotal DSEs	0.00	Total DSEs		!!	0.00	
	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	
E HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP		ONE HUNDRED TW	ENTY-EIGHTH	I SUBSCRIBER GROUP	,	
COMMUNITY/ AREA	0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		1				
······		1				
Total DSEs	0.00	Total DSEs			0.00	
	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	
Fotal DSEs Gross Receipts Third Group \$ Base Rate Fee Third Group \$			·	\$		

MEDIACOM ILLIN						S	YSTEM ID# 028380	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED TWE		SUBSCRIBER GROU		ONE HUNDRI	ED THIRTIETH	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
	<u> </u>		<u></u>				<u></u>	Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
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	····		···		••••			
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	IIRTY-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	
			<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 Enter here and in bloo			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN MEDIACOM ILLIN		LE SYSTEM:				S	YSTEM ID# 028380	Name
В	LOCK A: (COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	RTY-THIRD	SUBSCRIBER GROU	IP	H		H SUBSCRIBER GROUF)	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Computatio			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			····				·····	Base Rate F
				1		•		Syndicated
								Exclusivity
								Surcharge
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		-	···		•••••			
		-						
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5-4-L DOE-			0.00	T-t-I DOE-		1	0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TH	IRTY-FIFTH	SUBSCRIBER GROU	IP	ONE HUNDRED	THIRTY-SIXTH	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	ırth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
Base Rate Fee Third of the Base Rate Fee: Add to	Group	\$	0.00		irth Group			

MEDIACOM ILLIN		LE SYSTEM:				S	YSTEM ID# 028380	Name
				ATE FEES FOR EACH				
ONE HUNDRED THIRT		SUBSCRIBER GROUP		TI .		1 SUBSCRIBER GROUP	0	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
				-				and Syndicated
					····			Exclusivity
								Surcharge
	<u></u>							for Partially
					···			Distant
								Stations
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
		SUBSCRIBER GROUP		II		SUBSCRIBER GROU	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	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 Enter here and in bloo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN MEDIACOM ILLIN		LE SYSTEM:				S	YSTEM ID# 028380	Name
В	LOCK A: (COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED FO	RTY-FIRST	SUBSCRIBER GROU	IP	ONE HUNDRED FO	RTY-SECONE	SUBSCRIBER GROUP)	٥
COMMUNITY/ AREA			0	COMMUNITY/ ARE	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u></u>					Base Rate F and
			····	·				Syndicated
		-	···					Exclusivity
								Surcharge
								for
	····							Partially Distant
		-	····	·				Stations
		-	···					
				·				
F-4-L DOE-			0.00	T-t-I DOE-		1	0.00	
Fotal 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	
ONE HUNDRED FO	RTY-THIRD	SUBSCRIBER GROU	IP	ONE HUNDRED FO	RTY-FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
			····				<u> </u>	
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		-						
Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
								
3ase Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee Third of the Base Rate Fee: Add to Enter here and in bloc	he base ra t	te fees for each subs				\$	0.00	

LEGAL NAME OF OWI MEDIACOM ILLI						S	YSTEM ID# 028380	Name
	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED F	ORTY-FIFTH	SUBSCRIBER GROU	IP	ONE HUNDRED	FORTY-SIXTH	SUBSCRIBER GROUP)	^
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						-		and
	<u>.</u>					-		Syndicated
	<u> </u>						<u></u>	Exclusivity Surcharge
	·····					-		for
•••••	····		···			-		Partially
								Distant
								Stations
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		-						
	·····		····					
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 FORT	TV_SE\/ENTH	SUBSCRIBER GROU	ID.	ONE HUNDRED E		I SUBSCRIBER GROUP)	
COMMUNITY/ AREA		ODDOCKIDEN GROO	0	COMMUNITY/ ARE		- CODOCINDEN GROOT	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	I Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNE						S	YSTEM ID# 028380	Name
В	LOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED FOR	TY-NINTH	SUBSCRIBER GRO	UP	ONE HUNDR	ED FIFTIETH	I SUBSCRIBER GRO	JP	٥
COMMUNITY/ AREA			0	COMMUNITY/ ARE	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	<u></u>		<u> </u>					and
			<u></u>					Syndicated Exclusivity
		H						Surcharge
								for
		-						Partially
	<u></u>		<u></u>					Distant
			<u> </u>					Stations
	···	<u> </u>	<u>-</u>		•••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Froup	\$	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 FIF	TY-FIRST	SUBSCRIBER GRO	UP	ONE HUNDRED FIF	TY-SECONE	SUBSCRIBER GRO	JP	
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>					
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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	
	F							
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 MEDIACOM ILLIN		LE SYSTEM:				S	YSTEM ID# 028380	Name
E	SLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED FIF	TY-THIRD	SUBSCRIBER GRO		i i		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 Syndicated
	•••							Exclusivity
								Surcharge
								for
	<u></u>							Partially
	<u></u>				·····			Distant Stations
	•••							Otations
				.				
T			0.00			11	0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FI	FTY-FIFTH	SUBSCRIBER GRO)UP	ONE HUNDRED	FIFTY-SIXTH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
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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 t			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN MEDIACOM ILLIN		LE SYSTEM:				S	YSTEM ID# 028380	Name
E	SLOCK A: (COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED FIFT	Y-SEVENTH	SUBSCRIBER GROU	IP	H .		SUBSCRIBER GROUP)	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computatio
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Γotal 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	
	IFTY-NINTH	SUBSCRIBER GROU		†i		SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
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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	
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Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee Third Base Rate Fee: Add t Enter here and in bloc	he base ra t	te fees for each subs				\$	0.00	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC 028380								
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	Р	SUBSCRIBER GROU	XTEENTH	S	JP	SUBSCRIBER GRO	TEENTH	FIF	
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		\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G	

LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC SYSTEM ID# 028380								Name
				TE FEES FOR EAC				
	NTEENTH	SUBSCRIBER GRO		11		I SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
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	NTEENTH	SUBSCRIBER GRO		11		SUBSCRIBER GRO	_	
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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	
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Dade Nate I CC HIIIU	Jioup	\$	0.00	Dase Nate i ee Fou	iai Gioup	\$	3.00	

MEDIACOM ILLING		E SYSTEM:				S	YSTEM ID# 028380	Name
BL	OCK A: C	OMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	RIBER GROUP		
	Y-FIRST	SUBSCRIBER GROU		i i		SUBSCRIBER GRO	JP	۵
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Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
TWENT	Y-THIRD	SUBSCRIBER GROU	JP	TWEN	TY-FOURTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	i i	TWENTY-FOURTH SUBSCRIBER GROUP 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	
	roup	\$	0.00	Total DSEs Gross Receipts Fourt	th Group	\$	0.00	
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LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC 928380								Name
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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	
TWENT	Y-SEVENTH	SUBSCRIBER GRO	OUP	TWE	NTY-EIGHTH	SUBSCRIBER GRO	UP	
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Total DSEs			0.00	Total DSEs			0.00	
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Gross Receipts Third			0.00	Gross Receipts Fou			0.00	
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Name	YSTEM ID# 028380	S'						MEDIACOM ILLIN
				TE FEES FOR EACH				
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Name	YSTEM ID# 028380					LE SYSTEM:		MEDIACOM ILLIN
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Name	028380	S'						MEDIACOM ILLING
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Name	O28380					.E SYSTEM:		MEDIACOM ILLING
				TE FEES FOR EACH				
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	Р	SUBSCRIBER GROU	Y-EIGHTH	FORT	JP	SUBSCRIBER GRO	SEVENTH	FORTY-S
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Name	YSTEM ID# 028380	S				E SYSTEM:	R OF CABL	MEDIACOM ILLIN
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GRO	SEVENTH	
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	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	SIXTIETH		UP	SUBSCRIBER GRO	TY-NINTH	FIF
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	COMMUNITY/ AREA	O DSE	CALL SIGN	DSE	COMMUNITY/ AREA CALL SIGN
		CALL SIGN	DSE			CALL SIGN	DSE	
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	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN		CALL SIGN Total DSEs	DSE			CALL SIGN Total DSEs
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MEDIACOM ILLI	NER OF CAB						028380	Name
				TE FEES FOR EAC				
SOMMUNITY/ AREA		SUBSCRIBER GRO		SIX COMMUNITY/ ARE		SUBSCRIBER GRO	UP 0	9
COMMUNITY AREA	١		0	COMMUNITY/ ARE	Α		U	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						<u> </u>		Base Rate F
								and
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			····		•••••	+		Surcharge
								for
								Partially
								Distant Stations
			····					Stations
Total DSEs			0.00	Total DSEs		!!	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		iii —		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	4		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	
Total DSEs Gross Receipts Thire	1 Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	
Gross Receipts Third			0.00	Gross Receipts Fou			0.00	
		\$				\$		

	028380					LE SYSTEM:		MEDIACOM ILLIN
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	TY-SIXTH	ii		SUBSCRIBER GROU	TY-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and		_						
Syndicated								
Exclusivity Surcharge								
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 Second	0.00	\$	oup	Base Rate Fee First G
	IP	SUBSCRIBER GROU	Y-EIGHTH	SIXT	JP	SUBSCRIBER GRO	SEVENTH	SIXTY-S
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
							4	
	0.00			Total DSEs	0.00			Total DSEs
		\$					roup	
	0.00	\$		Total DSEs Gross Receipts Fourth	0.00	\$	roup	Total DSEs Gross Receipts Third G

	ER OF CABI	L STSTEWI.					028380	Name
				TE FEES FOR EAC				
SIX COMMUNITY/ AREA	TY-NINTH	SUBSCRIBER GRO	OUP 0	COMMUNITY/ ARE		SUBSCRIBER GRO	UP 0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						<u> </u>		Base Rate F and
						-		Syndicated
								Exclusivity
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			···			<u> </u>		
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	
SEVEN	ITY-FIRST	SUBSCRIBER GRO	DUP	SEVEN	TY-SECOND	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Δ		0	
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		CALL SIGN			DSE	CALL SIGN	DSE	
Total DSEs Gross Receipts Third	Group	\$	0.00	Total DSEs Gross Receipts Fou	DSE	\$	DSE	
Total DSEs	Group		0.00	Total DSEs	DSE		DSE	

Name	YSTEM ID# 028380	5 `					R OF CABL	MEDIACOM ILLIN
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (Bl
9	JP	SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GRO	TY-THIRD	
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		•	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 G
	JP	SUBSCRIBER GROU	ITY-SIXTH	SEVEN	UP	SUBSCRIBER GRO	TY-FIFTH	SEVEN
	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

	LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC SYSTEM ID# 028380								
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL	
•	IP	SUBSCRIBER GROU	Y-EIGHTH	SEVENT		SUBSCRIBER GROU	SEVENTH	SEVENTY-S	
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
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	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	Base Rate Fee First Gr	
	IP	SUBSCRIBER GROU	IGHTIETH	E	JP	SUBSCRIBER GROU	Y-NINTH	SEVENT	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
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				Total DSEs	0.00			Total DSEs	
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	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G	

N1	LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC SYSTEM ID# 028380								
-				TE FEES FOR EACH					
9	<u>JP</u> 0	SUBSCRIBER GROU	r-SECOND	EIGHTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	I Y-FIRST	EIGH' COMMUNITY/ AREA	
Computati				COMMONT TO TAKE T				OCIVINIOI VITTI / / INCE/ V	
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	
	JP	SUBSCRIBER GROU	/-FOURTH	EIGHT	JP	SUBSCRIBER GROU	Y-THIRD	EIGHT	
	JP 0	SUBSCRIBER GROL	/-FOURTH	EIGHT' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-THIRD		
	_	SUBSCRIBER GROU	/-FOURTH	İ		SUBSCRIBER GROU	Y-THIRD DSE		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
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	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	0			COMMUNITY/ AREA	0			CALL SIGN	
	DSE		DSE	CALL SIGN	DSE		DSE	CALL SIGN CALL SIGN Total DSEs	
	0.00	CALL SIGN	DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	0 DSE	CALL SIGN	DSE	COMMUNITY/ AREA	
	0.00	CALL SIGN	DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	0 DSE	CALL SIGN	DSE	CALL SIGN CALL SIGN Total DSEs	

LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC SYSTEM ID# 028380								
				TE FEES FOR EACH				
	TY-FIFTH	SUBSCRIBER GRO			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 Fe
					<u> </u>			and
					<u></u>	-	<u>.</u>	Syndicated
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		-					•••••	Distant
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Total DSEs			0.00	Total DSEs		ĮĮ	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
G. 666 . 1666.pts	Cup			or out it to the plan of the second	.u 0.0up	<u>·</u>		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
EIGHTY-S	SEVENTH	SUBSCRIBER GRO	UP	EIGH1	TY-EIGHTH	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			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
	e fees for each su	ıbs	0.00	Base Rate Fee Fourth	n Group	\$	0.00	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC 928380								
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	NINTIETH			SUBSCRIBER GROU	ΓY-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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	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	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00	11	1	Total DSEs	0.00			Total DSEs	
	-	•	Croun		0.00	\$	roun	Gross Receipts Third G	
	0.00	*	Group	Gross Receipts Fourth	0.00	<u>*</u>	лоир	Croco recoupto rima C	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC SYSTEM ID# 028380								
	ID	IBER GROUP SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GRO			
9	0	SUBSCRIBER GROU	I-FOURTH	COMMUNITY/ AREA	0	SUBSCRIBER GRO	T-INIKU	COMMUNITY/ AREA	
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate F									
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Exclusivity Surcharge									
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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	\$	oup	Base Rate Fee First Gi	
	IP	SUBSCRIBER GROU	ETY-SIXTH	NINE	JP	SUBSCRIBER GRO	TY-FIFTH	NINE	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
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	0.00			Total DSEs	0.00			Total DSEs	
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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: MEDIACOM ILLINOIS LLC SYSTEM ID# 028380								
				TE FEES FOR EACH					
9	IP	SUBSCRIBER GROU	Y-EIGHTH	NINET		SUBSCRIBER GRO	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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for Partially									
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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	Base Rate Fee First Gr	
	IP	SUBSCRIBER GROU	NDREDTH	ONE HU	JP	SUBSCRIBER GRO	TY-NINTH	NINET	
	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 DSFs	0.00			Total DSFs	
	0.00		Group	Total DSEs Gross Receipts Fourth	0.00		Group		
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G	

Name	O28380	Sì				LE SYSTEM:		LEGAL NAME OF OWNER MEDIACOM ILLINO
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	SECOND			SUBSCRIBER GROU	ED FIRST	
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	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	Р	SUBSCRIBER GROU	FOURTH	ONE HUNDREI	JP	SUBSCRIBER GROU	D THIRD	ONE HUNDRE
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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			I	Total DSEs	0.00		1 1	Total DSEs
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	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G

	LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC SYSTEM ID# 028380								
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	RED SIXTH			SUBSCRIBER GROU	ED FIFTH		
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr	
	IP.	SUBSCRIBER GROU	D FIGHTH	ONE HUNDRE	IP	SUBSCRIBER GROU	FVFNTH	ONE HUNDRED S	
-	0		<u> </u>	COMMUNITY/ AREA	0			COMMUNITY/ AREA	
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	0.00	<u>*</u>	•						

LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC SYSTEM ID# 028380								
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRE	D NINTH	SUBSCRIBER GRO	JP	ONE HUNDR	ED TENTH	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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Name	YSTEM ID# 028380					_E 3131EW.	R OF CABL DIS LLC	MEDIACOM ILLING
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	EGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC SYSTEM ID# 028380								
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: 0	BL	
•	1	SUBSCRIBER GROUP	GHTEENTH	ONE HUNDRED E)	SUBSCRIBER GROUP	NTEENTH	ONE HUNDRED SEVE	
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LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC 028380								
BL	OCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED TWEN	ITY-FIRST	SUBSCRIBER GROU	IP	ONE HUNDRED TWE	NTY-SECONE	SUBSCRIBER GROU	Р	0
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Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROU	IP	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROU	P	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
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Total DSEs			0.00	Total DSEs			0.00	
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Raca Rata Foo Third C	roup	¢	0.00	Rasa Pata Foo Foo	rth Group	¢	0.00	
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LEGAL NAME OF OWNER OF MEDIACOM ILLINOIS		E SYSTEM:				s	YSTEM ID# 028380	Name
				TE FEES FOR EACH	H SUBSCR	RIBER GROUP		
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NE HUNDRED TWENTY-SE	VENTH :	SUBSCRIBER GROUP		ONE HUNDRED TWEN	NTY-EIGHTH	I SUBSCRIBER GROUP		
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ABLE SYSTEM: .C				S	028380	Name		
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H SUBSCRIBER GRO	OUP	ONE HUNDRED T	HIRTY-SIXTH	SUBSCRIBER GRO	UP			
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LEGAL NAME OF OWNE		LE SYSTEM:				S	028380	Name
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Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FOR	RTY-THIRD	SUBSCRIBER GROU	Р	ONE HUNDRED FO	RTY-FOURTH	SUBSCRIBER GROUP)	
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Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add th	e base rat	te fees for each subs	scriber aroun	as shown in the boxe	s above			

LEGAL NAME OF OWNE MEDIACOM ILLING		LE SYSTEM:				S	YSTEM ID# 028380	Name	
BL	OCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP			
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Total DSEs			0.00	Total DSEs	•		0.00		
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		ļ*	5.50		p	Ļ*	0.00		
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LEGAL NAME OF OWNE MEDIACOM ILLING		LE SYSTEM:				S	028380	Name
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Gross Receipts First G	roup	\$ 0.00			eceipts Second Group \$ 0.00			
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-FIRST	SUBSCRIBER GRO	UP	ONE HUNDRED FIF	TY-SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
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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 Four	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxe	s above.	\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC 028380								
				E FEES FOR EACH					
9 Computatio		SUBSCRIBER GROU	-FOURTH	ONE HUNDRED FIFT	T I		Y-THIRD		
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Name	7STEM ID# 028380	S				LE SYSTEM:		MEDIACOM ILLING
				TE FEES FOR EACH				
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	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MEDIACOM ILLINOIS LLC 028380 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. NINTH SUBSCRIBER GROUP TENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group **ELEVENTH SUBSCRIBER GROUP** TWELVTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CARLE SYSTEM: SYSTEM ID# Name MEDIACOM ILLINOIS LLC 028380 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. NINETY-THIRD SUBSCRIBER GROUP NINETY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group NINETY-FIFTH SUBSCRIBER GROUP NINETY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MEDIACOM ILLINOIS LLC 028380 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. ONE HUNDERED FIRST SUBSCRIBER GROUP ONE HUNDERED SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group ONE HUNDERED THIRD SUBSCRIBER GROUP ONE HUNDERED FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 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 Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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