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							
8/29/2019	\$ ALLOCATION NUMBER						

Return completed workbook by email to:

coplicsoa@copyright.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:								
Accounting Period	2019/1								
B	List any other name or names under which the owner conducts the business of the cable system  If there were different owners during the accounting period, only the owner on the last day of the accounting period should submi a single statement of account and royalty fee payment covering the entire accounting period  Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.  631  LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM  Armstrong Utilities, Inc.								
				6316720191					
				63167 2019/1					
	One Armstrong Place Butler, PA 16001								
	INSTRUCTIONS: In line 1, give any business or trade nam	nes used to identify the busines	s and operation of the syst	em unless these					
С	names already appear in space B. In line 2, give the mailin								
System	1 IDENTIFICATION OF CABLE SYSTEM: Rising Sun Head End								
	MAILING ADDRESS OF CABLE SYSTEM:  122 South Queen Street (Number, street, rural route, apartment, or suite number) Rising Sun, MD 21911 (City, town, state, zip code)								
D	Instructions: For complete space D instructions, see page	e 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	Abingdon	MD							
Community	Below is a sample for reporting communities if you report	· · · · · · · · · · · · · · · · · · ·							
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#					
Sample	Alla	MD	A	1					
	Alliance	MD MD	B B	2					
	Gering	MD	B	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: 63167 Armstrong Utilities, Inc. 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# **Abingdon** AD MD First **Bel Air North** MD AD 4 Community Cardiff MD AD Castleton MD AD 4 **CECIL COUNTY** MD **AB** 2 3 **CHANCEFORD TOWNSHIP** PA AC See instructions for **CROSS ROADS BOROUGH** 3 PA AC additional information on alphabetization. Darlington MD AD 4 **DELTA BOROUGH** PA AC 3 4 Dublin MD AD **EAST HOPEWELL TOWNSHIP** 3 PA AC Add rows as necessary. **EAST NOTTINGHAM TOWNSHIP** PA AA **ELK TOWNSHIP** PA AA **FAWN GROVE BOROUGH** PA AC 3 **FAWN TOWNSHIP** PA 3 AC 4 **Forest Hills** MD AD PA **HIGHLAND TOWNSHIP** AA **HOPEWELL TOWNSHIP** PA 3 AC AD 4 **Jarrettsville** MD LONDONDERRY TOWNSHIP PA AA LOWER CHANCEFORD TOWNSHIP PA AC 3 LOWER OXFORD TOWNSHIP PA AA **Norrisville** MD AD 4 NORTH HOPEWELL TOWNSHIP PA AC 3 OXFORD BOROUGH PA AA PEACH BOTTOM BOROUGH PA AC 3 4 MD AD **Pylesville** SHREWSBURY BOROUGH PA AC 3 3 STEWARTSTOWN BOROUGH PA AC Street MD AD 4 **TOWN OF RISING SUN** MD AB **UPPER OXFORD TOWNSHIP** PA AA WEST FALLOWFIELD TOWNSHIP PA AA WEST NOTTINGHAM TOWNSHIP PA AA Whiteford MD AD 4 3 WINTERSTOWN BOROUGH PA AC

FORM SA3E. PAGE 2. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 63167 Armstrong Utilities, Inc. SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES Ε 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 Secondary

Transmission Service: Subscribers and Rates

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.

BLOCK 1					BLOCK 2			
	NO. OF					NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS		RATE		CATEGORY OF SERVICE	SUBSCRIBERS	RATE	
Residential:								
<ul> <li>Service to first set</li> </ul>	17,225	\$	33.45					
<ul> <li>Service to additional set(s)</li> </ul>								
FM radio (if separate rate)								
Motel, hotel								
Commercial								
Converter								
Residential								
Non-residential								
				1 ľ		1	T	

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	\$ 20.95	Motel, hotel			
<ul> <li>Pay cable—add'l channel</li> </ul>	7.95, \$14.95	Commercial			
Fire protection		Pay cable			
Burglar protection		<ul> <li>Pay cable-add'l channel</li> </ul>			
Installation: Residential		Fire protection			
• First set		Burglar protection			
Additional set(s)		Other services:			
• FM radio (if separate rate)		Reconnect	\$ 20.00		
Converter		Disconnect			
		Outlet relocation			
		Move to new address			

FORM SA3E. PAGE 3.					0)/07514 ID								
LEGAL NAME OF OW		/STEM:			SYSTEM ID#	Namo							
Armstrong Uti					63167								
PRIMARY TRANSMIT	TERS: TELEVISIO	ON											
carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program by	system during that ations in effect or 6.61(e)(2) and ( asis, as explaine	he accounting n June 24, 199 4), or 76.63 (r d in the next p	period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie te carriage of cert 1(e)(2) and (4))];	s and low power television stations) ed only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	Primary Transmitters: Television							
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:													
station was carried • List the station here basis. For further in the paper SA3 f	d only on a subs , and also in spa information conc form.	titute basis. ace I, if the sta erning substit	ation was carried tute basis station	d both on a substins, see page (v) c	ent and Program Log)—if the tute basis and also on some other if the general instructions located								
		-			s such as HBO, ESPN, etc. Identify tion. For example, report multi-								
cast stream as "WET			•	•	h stream separately; for example								
					ion for broadcasting over-the-air in may be different from the channel								
on which your cable s	system carried th	ne station.			ependent station, or a noncommercial								
(for independent multi- For the meaning of the Column 4: If the sign planation of local sern Column 5: If you cable system carried the distant state For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these	ticast), "E" (for no nese terms, see pastation is outside vice area, see pastave entered "You the distant statio ation on a part-tire ssion of a distant of the entered into out a primary trans or simulcasts, also three categories	oncommercial page (v) of the the local servage (v) of the es" in column on during the ame basis becar multicast streen or before Jumitter or an action enter "E". If , see page (v)	l educational), o e general instruct vice area, (i.e. "c general instructi 4, you must cor accounting peric ause of lack of a eam that is not s ane 30, 2009, be association repre you carried the of the general i	or "E-M" (for nonco- ctions located in the distant"), enter "Ye- ions located in the mplete column 5, od. Indicate by en- ictivated channel or subject to a royalty tween a cable sy- senting the prima channel on any of instructions located	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. / 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.								
	Canadian statio	ns, if any, given nnel line-ups,	e the name of thuse a separate	ne community with space G for each	y to which the station is licensed by the n which the station is identifed. channel line-up.	-							
		CHANN	EL LINE-UP	AA		_							
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								
KJW	2.1	ı	No		Phildelphia, PA								
KJW-HD	2.1	I	No		Phildelphia, PA	Coo instructions for							
KYW	3	N	No	•	Pittsburgh, PA	See instructions for additional information							
KYW-HD	3.1	N	No		Pittsburgh, PA	on alphabetization.							
KYW-DT2	3.2	N	No		Baltimore, MD	-							
	••••••••				·								
	···			WCAU 34 N No Lancaster, PA									
	WCAU-DT2 10.2 I-M No Lancaster, PA												
WCAU-HD 10.1 N No Lancaster, PA													
	10.1	N	No		Lancaster, PA Lancaster, PA								
WHYY	10.1 12	N E	No No		Lancaster, PA Lancaster, PA Wilmington, DE								
WHYY WHYY-DT2	10.1 12 12.2	N E E-M	No No No		Lancaster, PA Lancaster, PA Wilmington, DE Wilmington, DE								
WHYY WHYY-DT2 WHYY-DT3	10.1 12 12.2 12.3	N E E-M E	No No No No		Lancaster, PA Lancaster, PA Wilmington, DE Wilmington, DE Wilmington, DE								
WHYY WHYY-DT2 WHYY-DT3 WHYY-HD	10.1 12 12.2 12.3 12.1	N E E-M E	No No No No		Lancaster, PA Lancaster, PA Wilmington, DE Wilmington, DE Wilmington, DE Wilmington, DE								
WHYY WHYY-DT2 WHYY-DT3 WHYY-HD WMPB	10.1 12 12.2 12.3 12.1 29	N E E-M E	No No No No No		Lancaster, PA Lancaster, PA Wilmington, DE Wilmington, DE Wilmington, DE Wilmington, DE Baltmore, MD								
WHYY WHYY-DT2 WHYY-DT3 WHYY-HD WMPB WPHL	10.1 12 12.2 12.3 12.1 29	N E E-M E E	No No No No No No		Lancaster, PA Lancaster, PA Wilmington, DE Wilmington, DE Wilmington, DE Wilmington, DE Baltmore, MD Philadelphia, PA								
WHYY WHYY-DT2 WHYY-DT3 WHYY-HD WMPB WPHL WPHL-DT2	10.1 12 12.2 12.3 12.1 29 17 17.2	N E E-M E	No No No No No		Lancaster, PA Lancaster, PA Wilmington, DE Wilmington, DE Wilmington, DE Wilmington, DE Baltmore, MD Philadelphia, PA Philadelphia, PA								
WHYY WHYY-DT2 WHYY-DT3 WHYY-HD WMPB WPHL	10.1 12 12.2 12.3 12.1 29	N E E-M E E	No No No No No No		Lancaster, PA Lancaster, PA Wilmington, DE Wilmington, DE Wilmington, DE Wilmington, DE Baltmore, MD Philadelphia, PA Philadelphia, PA Philadelphia, PA								
WHYY WHYY-DT2 WHYY-DT3 WHYY-HD WMPB WPHL WPHL-DT2	10.1 12 12.2 12.3 12.1 29 17 17.2	N E E-M E E I	No No No No No No		Lancaster, PA Lancaster, PA Wilmington, DE Wilmington, DE Wilmington, DE Wilmington, DE Baltmore, MD Philadelphia, PA Philadelphia, PA								

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Armstrong Utilities, Inc.

SYSTEM ID#
Name

#### PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

**Substitute Basis Stations:** With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

**Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

**Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

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

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

		CHANN	EL LINE-UP	AA	
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
NPPX	31	I	No		Phildelphia, PA
WPPX-HD	31.1	I	No		Phildelphia, PA
NPSG	57	I	No		Philadelphia, PA
WPSG-HD	57.1	I	No		Philadelphia, PA
WPVI	6	N	No		Philadelphia, PA
WPVI-DT2	6.2	I-M	No		Philadelphia, PA
WPVI-DT3	6.3	I-M	No		Philadelphia, PA
WPVI-HD	6.1	N	No		Philadelphia, PA
NTXF	29	I	No		Baltimore, MD
NTXF-DT2	29.2	I-M	No		Baltimore, MD

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Armstrong Utilities, Inc.

SYSTEM ID#
Name

#### PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

**Substitute Basis Stations:** With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

**Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

**Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

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

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

		CHANN	EL LINE-UP	AB	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBAL	11	N	No		Baltimore, MD
WBAL-DT2	11.2	I-M	No		Baltimore, MD
WBAL-HD	11.1	N	No		Baltimore, MD
WBFF	46	I-M	No		Baltimore, MD
WBFF-HD	46.1	I-M	No		Baltimore, MD
WGAL	8	N	No		Landcaster, PA
WGAL-HD	8.1	N	No		Landcaster, PA
WHYY	12	E	No		Wilmington, DE
WHYY-DT2	12.2	E-M	No		Wilmington, DE
WHYY-DT3	12.3	E	No		Wilmington, DE
WHYY-HD	12.1	E	No		Wilmington, DE
WJZ	13	N	No		Lancaster, PA
WJZ-HD	13.1	N	No		Lancaster, PA
WMAR	2	N	No		Baltimore, MD
WMAR-HD	2.1	N	No		Baltimore, MD
WMPB	29	E	No		Baltmore, MD
WMPB-DT2	29.2	E-M	No		Baltmore, MD
WMPB-DT3	29.3	E-M	No		Baltmore. MD

G

Primary Transmitters: Television

FORM SA3E. PAGE 3.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Armstrong Utilities, Inc.

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

**Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast)

**Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

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

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

		CHANN	EL LINE-UP	AB	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WMPB-HD	29.1	E	No		Baltmore, MD
WNUV	40	I	No		Baltimore, MD
WNUV-DT2	40.2	I-M	No		Baltimore, MD
WNUV-DT3	40.3	I-M	No		Baltimore, MD
WNUV-HD	40.1	I	No		Baltimore, MD
WPVI	6	N	No		Philadelphia, PA
WPVI-HD	6.1	N	No		Philadelphia, PA
WTXF	29	I	No		Baltimore, MD
WTXF-HD	29.1	I	No		Baltimore, MD
WUTB	41	I	No		Baltimore, MD
WUTB-HD	41.1	I			Baltimore, MD
	<u> </u>				
	-	1			

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Armstrong Utilities, Inc.

SYSTEM ID#
Name

#### PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

**Substitute Basis Stations:** With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

**Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

**Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

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

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

		CHANN	EL LINE-UP	AC			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
WGAL	8	N	No		Landcaster, PA		
WGAL-DT2	8.2	I-M	No		Landcaster, PA		
WGAL-HD	8.1	N	No		Landcaster, PA		
WGCB	30	l	No		Harrisburg PA		
WHP	21	N	No		Harrisburg, PA		
WHP-DT2	21.2	I-M	No		Harrisburg, PA		
WHP-DT3	21.3	I-M	No		Harrisburg, PA		
WHP-DT3-HD	21.3	I-M	No		Harrisburg, PA		
WHP-HD	21.1	N	No		Harrisburg, PA		
WHTM	27	N	No		Harrisburg, PA		
WHTM-DT3	27.3	I-M	No		Harrisburg, PA		
WHTM-DT4	27.4	I-M	No		Harrisburg, PA		
WHTM-HD	27.1	N	No		Harrisburg, PA		
WITF	36	N	No		Lancaster, PA		
WJZ	13	N	No		Lancaster, PA		
WJZ-HD	13.1	N	No		Lancaster, PA		
WLHY-DT3	23.1	I-M	No		Baltmore, MD		
WPMT	43	ı	No		York, PA		

G

Primary Transmitters: Television

FORM SA3E. PAGE 3.						,
LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYSTEM ID#	Name
Armstrong Util	ities, Inc.				63167	Nume
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bases as substitute program bases is under specific FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 of Column 1: List each 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 multifor the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried the distant stat For the retransmiss	G, identify even system during the inested with associated wit	y television standard programment of the station and s	period, except 81, permitting the referring to 76.6 paragraph. It is in space I (the tition was carried ute basis station eport origination coording to its over be reported in the tition was assigned to annel 4 in Wash attion is a network), "N-M" (I educational), control of the eigeneral instruct 4, you must contact of lack of a seam that is not searce.	(1) stations carried to carriage of cert 1(e)(2) and (4))]; as a carried by your of the Special Statement of both on a substime, see page (v) of the seep pa	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	G Primary Transmitters: Television
					y payment because it is the subject stem or an association representing	
the cable system and	a primary trans	mitter or an as	ssociation repre	senting the prima	ry transmitter, enter the designa- ther basis, enter "O." For a further	
explanation of these th	ree categories	, see page (v)	of the general	instructions locate	d in the paper SA3 form.	
					to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AC		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
WDMT DT2	NUMBER	STATION	No	(If Distant)	Verde DA	
WPMT-DT2	43.2	I-M	No		York, PA	
WPMT-HD	43.1	<u> </u>	No		York, PA	
	•					
	<b>†</b>			<b></b>	<b>†</b>	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Armstrong Utilities, Inc. 63167 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.

**Primary** Transmitters: Television

G

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- · List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

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

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

		CHANN	EL LINE-UP	AD	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBAL	11	N	No		Baltimore, MD
WBAL-DT2	11.2	I-M	No		Baltimore, MD
WBAL-HD	11.1	N	No		Baltimore, MD
WBFF	46	I-M	No		Baltimore, MD
WBFF-HD	46.1	I-M	No		Baltimore, MD
WJZ	13	N	No		Lancaster, PA
WJZ-HD	13.1	N	No		Lancaster, PA
WMAR	2	N	No		Baltimore, MD
WMAR-HD	2.1	N	No		Baltimore, MD
WMPB	29	E	No		Baltmore, MD
WMPB-DT2	29.2	E-M	No		Baltmore, MD
WMPB-DT3	29.3	E-M	No		Baltmore, MD
WMPB-HD	29.1	E	No		Baltmore, MD
WNUV	40	I	No		Baltimore, MD
WNUV-DT2	40.2	I-M	No		Baltimore, MD
WNUV-DT3	40.3	I-M	No		Baltimore, MD
WNUV-HD	40.1	I	No		Baltimore, MD
WUTB	41	I	No		Baltimore, MD

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE S	YSTEM:			SYSTEMI	Namo
Armstrong Util	ities, Inc.				6316	67
PRIMARY TRANSMITTI	RS: TELEVISIO	ON				
In General: In space (carried by your cable self-CC rules and regulate 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis Self-Column 1: List the station was carried to List the station here, basis. For further in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA-Simulcast). Column 2: Give the	G, identify ever system during to ions in effect or 6.61(e)(2) and (6.61(e)(2)	y television st he accounting n June 24, 19 4), or 76.63 (noted in the next respect to any actions, or auth G—but do lis titute basis. ace I, if the state cerning substiff sign. Do not a h a station ac streams must	g period, except 81, permitting the referring to 76.6 paragraph. y distant stations iorizations: t it in space I (the ation was carried tute basis station report origination cording to its over the reported in ones assigned to	(1) stations carried carriage of cert (1(e)(2) and (4))]; as carried by your one Special Statemed both on a substitute, see page (v) on program service er-the-air designation of the television statement.	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a cable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- h stream separately; for example ion for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television
educational station, by (for independent multice For the meaning of the Column 4: If the step planation of local service Column 5: If you heable system carried the carried the distant state For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	e in each case of the entering the lecast), "E" (for notes terms, see pation is outside ce area, see prave entered "Y note distant staticition of a distant entered into of a primary transsimulcasts, also ree categories de location of each canadian static	whether the siletter "N" (for noncommercial page (v) of the the local senage (v) of the es" in column on during the me basis becar multicast stranor before Jumitter or an appendix of the end of the	etwork), "N-M" (I educational), of general instructivities area, (i.e. "of general instructivities area, vou must confuse of lack of a geam that is not sure 30, 2009, be ssociation repression are in the general of U.S. stations, the the name of the	for network multic or "E-M" (for nonce ctions located in the distant"), enter "Ye ions located in the mplete column 5, od. Indicate by en activated channel subject to a royalty etween a cable sy esenting the prima channel on any o instructions locate list the community ne community with	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 n which the station is identifed.	
rotor ii you aro aiiiiiiiii	.gap.o oa.	•	•	•	onae up.	
	1	CHANN	EL LINE-UP	AD	1	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
WUTB-HD	41.1	I	No		Baltimore, MD	

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63167 Armstrong Utilities, Inc. PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.						ACCOUNTING	6 PERIOD: 2019/1			
LEGAL NAME OF OWNER OF		TEM:			\$	SYSTEM ID#	Name			
Armstrong Utilities, Inc. 63167							Name			
SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	IT AND PROGRAM LOG				ı			
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.										
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE										
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?										
<b>Note:</b> If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.										
2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages.  Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."  Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No."  Column 3: Give the call sign of the station broadcasting the substitute program.  Column 4: Give the broadcast 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).  Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7."  Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00-6:30 p.m."  Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed pro gram was substituted for programming that your system was required to delete under FCC rules and regulations in effect on October 19, 1976.										
					EN SUBSTITUTE	7. REASON				
1. TITLE OF PROGRAM	2. LIVE? Yes or No	E PROGRAM  3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	IAGE OCCURRED  6. TIMES  FROM — TO	FOR DELETION				
	100 01 110	07122 07017	GIALLETTE EGGALLETT	7415 5711						
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ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 6.

Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:
Armstrong Utilities, Inc.
SYSTEM ID#
63167

### J

### Part-Time Carriage Log

### PART-TIME CARRIAGE LOG

**In General:** This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages.

**Column 1 (Call sign):** Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G.

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

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

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

	AL NAME OF OWNER OF CABLE SYSTEM:			SYSTE	M ID#	
Arı	nstrong Utilities, Inc.			6	3167	Name
Ins all a (as	OSS RECEIPTS tructions: The figure you give in this space determines the form you fle and the amoun amounts (gross receipts) paid to your cable system by subscribers for the system's seccidentifed in space E) during the accounting period. For a further explanation of how to be (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s)	ondary t	ransmiss	ion service		K Gross Receipts
IMF	during the accounting period.  PORTANT: You must complete a statement in space P concerning gross receipts.	3,398,193.5 f gross receipts)	54			
• Cor • Cor • If your fee • If you	YRIGHT ROYALTY FEE  uctions: Use the blocks in this space L to determine the royalty fee you owe:  mplete block 1, showing your minimum fee.  mplete block 2, showing whether your system carried any distant television stations.  bur system did not carry any distant television stations, leave block 3 blank. Enter the ar  from block 1 on line 1 of block 4, and calculate the total royalty fee.  bur system did carry any distant television stations, you must complete the applicable par  ompanying this form and attach the schedule to your statement of account.					<b>L</b> Copyright Royalty Fee
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b ${\rm ck}~3~{\rm below}.$	e enter	ed on line	e 1 of		
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.	entered	on line 2	2 in block		
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	ould be	entered o	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 fer system's gross receipts for the accounting period.  Line 1. Enter the amount of gross receipts from space K		•		54	
	Line 2. Multiply the amount in line 1 by 0.01064  Enter the result here.			0,000,100.	<u></u>	
	This is your minimum fee.	\$		36,156.7	78	
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 colun "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 of the state	nn 4, yo od?	ou must o	heck		
Block	Line 1. <b>BASE RATE FEE:</b> Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero		\$	_		
3	Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero			0.0	00_	
	Line 3. Add lines 1 and 2 and enter here	\$		_		
Block	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee					
4	from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger  Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter	r	\$	36,156.7	.00	Cable systems submitting additional
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)			0.0	00	deposits under Section 111(d)(7) should contact the Licensing
	Line 4. FILING FEE		\$	725.0	00_	additional fees.
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.  Add Lines 1, 2 and 3 of block 4 and enter total here	\$		36,881.7	78	appropriate form for submitting the additional fees.
	EFT Trace # or TRANSACTION ID #					additional lees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form and the Excel instructions to					

Name	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM:	SYSTEM ID#
Name	Armstrong Utilities, I	nc.	63167
	CHANNELS		
M	Instructions: You must	give (1) the number of channels on which the cable system carried television broadcas	st stations
	to its subscribers and (2	the cable system's total number of activated channels, during the accounting period.	
Channels	1 Enter the total number	r of channels on which the cable	
		r of channels on which the cable on broadcast stations	63
	.,		
	2. Enter the total number	r of activated channels	
	•	tem carried television broadcast stations	377
	and nonbroadcast serv	ices	<u>ı</u>
N Individual to Be Contacted		NTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual s statement of account.)	
for Further	Name Ken Proud	dfoot Telephone	(724) 283-0925
Information			
	Address One Arms	trong Place	
		rural route, apartment, or suite number)	
	Butler, PA (City, town, state		
	(City, town, state	2())	
	Email kr	roudfoot@agoc.com Fax (optional)	
	CERTIFICATION (This st	atement of account must be certifed and signed in accordance with Copyright Office re	gulations.
0			
Certifcation	• I, the undersigned, herel	by certify that (Check one, but only one, of the boxes.)	
	(Ourself of their their co	una unti an au manta un bin \ la an tha au mara af tha anbla au atam an identified in line 4 af anna	a Di av
	(Owner other than co	rporation or partnership) I am the owner of the cable system as identifed in line 1 of space	e B; or
	(Agent of owner other	r than corporation or partnership) I am the duly authorized agent of the owner of the cabl	le system as identified
		and that the owner is not a corporation or partnership; or	,
	X (Officer or partner)	am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as o	owner of the cable system
	in line 1 of space E	3.	·
	are true, complete, and co	ement of account and hereby declare under penalty of law that all statements of fact contain errect to the best of my knowledge, information, and belief, and are made in good faith.	ned herein
	[18 U.S.C., Section 1001(	1300)]	
		X /s/ Mark Rankin	
	<del>_</del>		
	(e.	ter an electronic signature on the line above using an "/s/" signature to certify this statement. g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your curso " button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotu	
	Ту	ped or printed name: Mark Rankin	
	Tit		
		(Title of official position held in corporation or partnership)	 I
	5	to: August 21, 2010	
	Da	te: August 31, 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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nama
Armstrong Utilities, Inc.	63167	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act b lowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system service of providing secondary transmissions of primary broadcast transmitters, the system she scribers and amounts collected from subscribers receiving secondary transmissions pursuant in For more information on when to exclude these amounts, see the note on page (vii) of the general inspaper SA3 form.  During the accounting period did the cable system exclude any amounts of gross receipts for secondary made by satellite carriers to satellite dish owners?  X NO	n for the basic all not include sub- o section 119." tructions in the	Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3		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	- days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,  space L, (page 7)	interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further contact the Licensing Division at (202) 707-8150 or licensing@copyright.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 Copyr please list below the owner, address, first community served, accounting period, and ID number as gifling.		
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 the electric content of the test of the post-	

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

The Syndicated Exclusivity Surcharge. Cable systems located in whole or in part within a major television market, as defined by FCC rules and regulations, must calculate a Syndicated Exclusivity Surcharge for the carriage of any commercial VHF station that places a grade B contour, 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 o	f Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
nin	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
s	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

\$ 0,00 He									
First Subscriber Group		Second Subscriber Group		Third Subscriber Group					
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)					
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00				
DSEs	2.472	DSEs	1.083	DSEs	1.389				
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03				
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80				
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23				
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03				

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

**ACCOUNTING PERIOD: 2019/1** 

DSE SCHEDULE. PAG	E 11. (CONTINUED)												
4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			SY	STEM ID#							
ı	Armstrong Utilities, Inc. 631												
	SUM OF DSEs OF CATEGOR	RY "O" STATIO	NS:										
	Add the DSEs of each station												
	Enter the sum here and in line	1 of part 5 of this	s schedule.		0.00								
	Instructions:			<u>'</u>									
2	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5												
	of space G (page 3).			= #4 O" F									
Computation of DSEs for	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."												
Category "O"	merciai educational station, giv	7C the DOL as .2	CATEGORY "O" STATION	JS: DSFs									
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE							
Giationo	37 LEE 31314	502	07 LEE 01011	502	07 ILL 01011	562							
Add rows as													
necessary.													
Remember to copy													
all formula into new													
rows.													

Name	Armstrong U	NUMBER OF CABLE SYSTEM:					S	YSTEM ID# 63167
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should of Column 3 Column 4 be carried out Column 5 give the type-v	at the call sign of all distate: For each station, give to correspond with the information: For each station, give to Divide the figure in columnt least to the third decimate as ".25."  Multiply the figure in columnt least to the third decimates the state of the columnt least to the third decimates the state of the	the number of himation given in the total number umn 2 by the figmal point. This station, give the following 4 by the following	nours your cable system space J. Calculate of cer of hours that the stangure in column 3, and is the "basis of carriage "type-value" as "1.0. figure in column 5, and	m carried the stanly one DSE for oftion broadcast or give the result in ge value" for the some cach network give the result it give the result give the result it give the result give the	ation during the accounting each station. Wer the air during the accordance of the account	ounting period.  nis figure must  acational station,	
Capacity			CATEGORY	LAC STATIONS:	COMPUTAT	ION OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	R JRS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OI CARRIAC VALUE	F 5. TYPE		SE.
						<u>x</u>		
						x		
			÷			x x	=	
			÷		=	x	=	
						x		
			÷			x	= =	
	Add the DSEs of	OF CATEGORY LAC S of each station. m here and in line 2 of p		nedule,		0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efference broadcast of space I).     Column 2: For at your option.     Column 3: Eolumn 4: I	ct on October 19, 1976 ( ne or more live, nonnetw For each station give the This figure should corres Enter the number of days Divide the figure in colun	itution for a pro (as shown by the ork programs do number of live spond with the in the calenda nn 2 by the figu	ogram that your systeme letter "P" in column uring that optional carre, nonnetwork program information in space lar year: 365, except in the in column 3, and gi	n was permitted 7 of space I); an iage (as shown by as carried in substance).  a leap year.  ve the result in c	to delete under FCC rule	2 of were deleted as than the third	·m).
		SU	BSTITUTE-	BASIS STATION	S: COMPUTA	ATION OF DSEs		
	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
		4	-	=		4		=
			-	=			+	=
		-	-	=		4	-	=
		-	-	=			-	=
	Add the DSEs of	OF SUBSTITUTE-BAS of each station. m here and in line 3 of p				0.00		
5 Total Number of DSEs	number of DSEs  1. Number of  2. Number of	R OF DSEs: Give the arms applicable to your system  DSEs from part 2 •  DSEs from part 3 •  DSEs from part 4 •		boxes in parts 2, 3, and	1 4 of this schedul	e and add them to provide	0.00 0.00 0.00	
		e						
	TOTAL NUMBE	R OF DSEs						0.00

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:  Armstrong Hilling Inc.	Name									
Armstrong Utilities, Inc. 63167										
Instructions: Block A must be completed. In block A:	6									
• If your answer if "Yes," leave the remainder of part 6 and part 7 of the DSE schedule blank and complete part 8, (page 16) of the schedule.										
If your answer if "No," complete blocks B and C below.  BLOCK A: TELEVISION MARKETS										
Is the cable system located wholly outside of all major and smaller markets as defined under section 76.5 of FCC rules and regulations in										
effect on June 24, 1981?  Yes—Complete part 8 of the schedule—DO NOT COMPLETE THE REMAINDER OF PART 6 AND 7										
X No—Complete blocks B and C below.										
BLOCK B: CARRIAGE OF PERMITTED DSEs	<u>-</u>									
Column 1: List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry	-									
CALL SIGN under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.)										
Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station  BASIS OF (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.  PERMITTED A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)]										
B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1 C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d) D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the										
instructions for DSE schedule).  E Carried pursuant to individual waiver of FCC rules (76.7)  *E. A station proviously carried on a part time or supplifying prior to June 25, 109.										
*F A station previously carried on a part-time or substitute basis prior to June 25, 198′ G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5) M Retransmission of a distant multicast stream.										
Column 3: List the DSE for each distant station listed in parts 2, 3, and 4 of the schedule.  *(Note: For those stations identified by the letter "F" in column 2, you must complete the worksheet on page 14 of this schedule to determine the DSE.)										
1. CALL 2. PERMITTED 3. DSE 1. CALL 2. PERMITTED 3. DSE 1. CALL 2. PERMITTED 3. DSE SIGN BASIS SIGN BASIS										
0.00										
BLOCK C: COMPUTATION OF 3.75 FEE	_									
	-									
Line 1: Enter the total number of DSEs from part 5 of this schedule										
Line 2: Enter the sum of permitted DSEs from block B above -										
Line 3: Subtract line 2 from line 1. This is the total number of DSEs subject to the 3.75 rate.  (If zero, leave lines 4–7 blank and proceed to part 7 of this schedule)  0.00										
Line 4: Enter gross receipts from space K (page 7) x 0.0375	Do any of the DSEs represent partially									
Line 5: Multiply line 4 by 0.0375 and enter sum here	permited/ partially nonpermitted									
Line 6: Enter total number of DSEs from line 3	carriage? If yes, see part									
	9 instructions.									

LEGAL NAME OF OWNER OF CABLE SYSTEM:  Armstrong Utilities, Inc.  SYSTEM ID# 63167										Name
BLOCK A: TELEVISION MARKETS (CONTINUED)									_	
	CALL IGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
										Computation 6
<mark></mark>									••••••	
····					 					
••••										
••••••										
									•••••	
						<b></b>				
<mark></mark>										
••••										
									•••••	
····					 					
									•••••	
									••••••	
									•••••	

Name										48TEM ID# 63167	
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.  A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections										
		PERMITTE	DSE FOR STA	TIONS CARRIE	ΞD	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS			
	1. CALL	2. PRIOR		COUNTING		4. BASIS OF		RESENT	6. P	ERMITTED	
	SIGN	DSE		ERIOD		CARRIAGE		OSE		DSE	
									••••••		
											_
7	Instructions: Block A In block A:	must be compl	eted.								
Computation	If your answer is	"Yes," complete	blocks B and C,	below.							
of the	If your answer is	"No," leave bloo	ks B and C blank	and complete	pa	art 8 of the DSE schedu	ule.				_
Syndicated Exclusivity		BLOCK A: MAJOR TELEVISION MARKET									_
Surcharge	Is any portion of the c	cable system with	hin a top 100 majo	or television mar	ket	t 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	tation of Exem	pt DSEs	1	
	Is any station listed in commercial VHF stati or in part, over the cal	on that places a					le system p	ck B of part 7 carried in any commu- em prior to March 31, 1972? (refe			
	l'	tation below with	its appropriate perr	nitted DSE		Yes—List each st  X No—Enter zero a	ation below v		ate permi	tted DSE	
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	N I	DSE	
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	OIN	DSE	
								••••••			
		<del> </del>									
		<del> </del>					<b> </b>				
		<del></del>	TOTAL DSEs	0.00			<u> </u>	TOTAL DS	SEs .	0.00	
	1				11						ı

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:  Armstrong Utilities, Inc.	SYSTEM ID# 63167	Name					
BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE								
Section 1	Enter the amount of gross receipts from space K (page 7)	3,398,193.54	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?      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 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		ME OF OWNER OF CABLE SYSTEM:  Armstrong Utilities, Inc.  6316									
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.									
8 Computation of Base Rate Fee	Instructions: You must complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part 6 was checked "Yes," use the total number of DSEs from part 5.  In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.  If your answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.  If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below blank.  What is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers were located within that station's local service area and others were located outside that area. For the definition of a station's "local service area," see page (v) of the general instructions.										
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS										
	• 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 following sections										
	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										
	Section 2	Enter the amount of gross receipts from space K (page 7)									
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.  A. Enter 0.01064 of gross receipts (the amount in section 1)									

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

	AME OF OWNER OF CABLE SYSTEM:  trong Utilities, Inc.	SYSTEM ID# 63167	Name
Section 4	If the figure in section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.		0
·	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)		Computation of
	C. Multiply line B by 3.000 and enter here <b>&gt;</b>	_	Base Rate Fee
	D. Enter 0.00330 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here▶		
	F. Multiply line D by line E and enter here <b>\$</b>		
	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	
	<b>TANT:</b> It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channels. G.	0	9
In Gen receipt	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee s from subscribers located within the station's local service area, from your system's total gross receipts. To take a		Computation of
exclusi	on, you must:		Base Rate Fee
station DSEs a	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	the number of	and Syndicated Exclusivity Surcharge for
also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in properties a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B becable system is wholly located outside all major television markets, complete block A only.		Partially Distant Stations, and
Step 1	Identify a Subscriber Group for Partially Distant Stations  For each community served, determine the local service area of each wholly distant and each partially distant state to that community.	tion you	for Partially Permitted Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were lot the station's local service area. A subscriber located outside the local service area of a station is distant to that state token, the station is distant to the subscriber.)		
subscri	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Compu	iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your sys	tem's subscriber	
In each	section:		
• Give t	fy the communities/areas represented by each subscriber group. he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to al bers in the group.	l of the	
• If:			
and 4 c	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it i of this schedule; or, portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b	·	
part	6 of this schedule.	,	
	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in paper SA3 form.	nstructions	
page. DSEs f	tute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the in making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the or that group's complement of stations and total gross receipts from the subscribers in that group). You do not necestalculations on the form.	at is, the total	

## SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63167 Armstrong Utilities, Inc. Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNI Armstrong Utilitie		LE SYSTEM:				S	YSTEM ID# 63167	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
FIRST SUBSCRIBER GROUP				SECOND SUBSCRIBER GROUP			JP	0
COMMUNITY/ AREA Lower Oxford, PA			COMMUNITY/ AREA		Sun, MD		9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-				Base Rate Fee
	····			.		-		and Syndicated
	····		···					Exclusivity
	···		<u>-</u>	-	·····	<del> </del>	···	Surcharge
								for
		_						Partially
		-						Distant
								Stations
			<u>-</u>		<u>.</u>			
						<del> </del>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$ 847	,346.99	Gross Receipts Seco	ond Group	\$ 1,10	09,497.08	
<b>Base Rate Fee</b> First G	iroup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	Fawn 0	Brove, PA		COMMUNITY/ AREA Harford, MD				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				-		
				-		H		
	····			.		-		
	······································		···					
	···		<u>-</u>	-	·····	<del> </del>	···	
		-				-		
	<del>.  </del>	-	<del>-</del>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 739,641.63		Gross Receipts Fourth Group \$ 701,707.85		01,707.85				
Base Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth Group \$ 0.00		0.00				
Base Rate Fee: Add tl	na hasa ra	ta faas for each subsc	riber group	as shown in the hoves	ahove			
Enter here and in block			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ac onown in the boxes	above.	\$	0.00	

LEGAL NAME OF OWNE Armstrong Utilitie		LE SYSTEM:				s	YSTEM ID# 63167	Name
BI				TE FEES FOR EAG				
FIRST SUBSCRIBER GROUP						SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA Lower Oxford, PA			COMMUNITY/ ARE	A Rising	y Sun, MD		Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
								Exclusivity
	······································							Surcharge for
	······································							Partially
	·				•••••	•		Distant
								Stations
				]				
Total DSEs			0.00	Total DSEs	!		0.00	
Gross Receipts First G	roup	\$ 847	7,346.99	Gross Receipts Sec	Gross Receipts Second Group \$ 1,109,497.08		09,497.08	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	Fawn G	irove, PA		COMMUNITY/ AREA Harford, MD				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
	·		<del> </del>					
Total DSEs	_		0.00	Total DSEs		11	0.00	
Gross Receipts Third Group \$ 739,641.63		Gross Receipts Fourth Group \$ 701,707.85		_				
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00		
				11				
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	es above.	\$	0.00	

ACCOUNTING PERIOD: 2019/1

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Armstrong Utilities, Inc. 63167 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 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 . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown