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						
AMOUNT						
\$						
ALLOCATION NUMBER						

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:			
Accounting Period	2019/1			
B	Instructions: Give the full legal name of the owner of the cable system. If the owner is rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the busin If there were different owners during the accounting period, only the own a single statement of account and royalty fee payment covering the entire according to the covering the covering that is the system's first filing. If not, enter the system's limited in the covering that is the system's first filing. If not, enter the system's limited in the covering that is the system's first filing. If not, enter the system's limited in the covering that is the system's first filing. If not, enter the system's limited in the covering that is the covering that is the system's first filing. If not, enter the system's limited in the covering that is the covering	ness of the cable syst neer on the last day of a counting perioa	em the accounting period should s	
	Atlantic Broadband (NH-ME), LLC			
				06373320191
				063733 2019/1
	2 Batterymarch Park, Suite 205 Quincy, MA 02169			
С	INSTRUCTIONS: In line 1, give any business or trade names used to names already appear in space B. In line 2, give the mailing address of			
System	1 IDENTIFICATION OF CABLE SYSTEM: Atlantic Broadband	or the system, if the	erent from the address give	iiii space B.
	MAILING ADDRESS OF CABLE SYSTEM: 24 Main Street (Number, street, rural route, apartment, or suite number) Bradford, PA 16701 (City, town, state, zip code)			
D	Instructions: For complete space D instructions, see page 1b. Identif	y only the frst comr	nunity served below and rel	ist on page 1b
Area	with all communities.	T		
Served First	CITY OR TOWN ROCHESTER	STATE NH		
Community	Below is a sample for reporting communities if you report multiple ch		pace G.	
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#
Sample	Alda	MD	Α	1
Gailiple	Alliance	MD	В	2
	Gering	MD	В	3

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

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 063733 Atlantic Broadband (NH-ME), LLC Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# **ROCHESTER** NH Α **First BARRINGTON** NH Α Community **FARMINGTON** NH Α MILTON NH **STRAFFORD** NH Α 1 See instructions for В **ACTON** ME additional information on alphabetization. 2 **EAST LEBANON** ME В **LEBANON** В ME **NEWFIELD** В ME 2 **SANFORD** В ME Add rows as necessary. В 2 **SHAPLEIGH** ME **DEERFIELD** NH 3 C 3 **NORTHWOOD** NH **ALTON** NΗ 4 С **BANSTEAD** NH 4 BELMONT NH C **CENTER HARBOR** NH С **GILFORD** NH C **GILMANTON** NH 4 C **LACONIA** NH 4 **MEREDITH** C NH 4 NH **NEW DURHAM** C 4 **NEW HAMPTON** NH С 4 SANBORNTON NH C **TILTON** NH 4 **EPSOM** NH **FRANKLIN** NH D 5 D NORTHFIELD 5 NH 5 **PITTSFIELD** D NH **ALEXANDRIA** NH E 6 **BRIDGEWATER** NH 6 **BRISTOL** NH 6 **HEBRON** NH Ε 6

NH

D

WOLFEBORO

1	

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

Atlantic Broadband (NH-ME), LLC

SYSTEM ID#

063733

Ε

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLC	OCK 1		BLOCK 2					
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	F	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	
Residential:								
 Service to first set 	39,413	\$	41.95	Broadcast TV Fee	39,413	\$	11.50	
 Service to additional set(s) 		<u> </u>		HD Converters	50,973	\$	9.99	
 FM radio (if separate rate) 				HD/DVR Converters	9,690	\$	17.99	
Motel, hotel	301	\$	41.95	HD DTA	36,962	\$	6.99	
Commercial	1,899	\$	41.95	Digital Converters	3,933	\$	9.99	
Converter				DTA Converters	27,098	\$	6.99	
 Residential 								
Non-residential								

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

		BLOCK 2							
CATEGORY OF SERVICE	R	ATE	CATEGORY OF SERVICE		CATEGORY OF SERVICE	F	RATE		
Continuing Services:			Installation: Non-residential						
Pay cable	7.9	9-19.99	Motel, hotel				Digital Value	\$	15.95
 Pay cable—add'l channel 			Commercial	Commercial				\$	7.95
Fire protection			• Pay cable				Expanded Service	\$	55.00
Burglar protection			 Pay cable-add'l channel 	Pay cable-add'l channel				\$	9.95
Installation: Residential			Fire protection			ĺ			
First set	\$	50.00	Burglar protection			ĺ			
Additional set(s)	\$	40.00	Other services:			ĺ			
 FM radio (if separate rate) 			Reconnect	\$	40.00	ĺ			
Converter			Disconnect			ĺ			
			Outlet relocation	\$	40.00	ı			
			Move to new address	\$	40.00	Ì			
						Ì			

					OVOTEM ID#	
	WNER OF CABLE S				SYSTEM ID#	Namo
	•	•			063733	
carried by your cable FCC rules and regul 76.59(d)(2) and (4), substitute program be Substitute Basis basis under specifc • Do not list the station station was carried • List the station here in the paper SA3 Column 1: List eeach multicast streacast stream as "WE" WETA-simulcast). Column 2: Give its community of lice on which your cable Column 3: Indicated actional station, (for independent mu For the meaning of the Column 4: If the planation of local se Column 5: If you	e G, identify ever e system during t lations in effect of 76.61(e)(2) and (pasis, as explaine is Stations: With FCC rules, regular on here in space ed only on a subset, and also in space information conform. ach station's call m associated with TA-2". Simulcast the channel numbers of the system carried the system carried the system carried the system carried the in each case to by entering the lediticast), "E" (for nothese terms, see station is outside rvice area, see par have entered "Yd the distant station.	y television state accounting an June 24, 19, 4), or 76.63 (in the next prespect to any ations, or auth G—but do list itute basis. ace I, if the state accounting substitute basis. ace I, if the state accounting substitute basis. The station accounting substitute basis. The station accounting the station accounting the station. Whether the station accounting the sta	g period, except 81, permitting the referring to 76.6 paragraph. It is distant stations for izations: It it in space I (the ation was carried tute basis station report origination cording to its over the reported in the ation is a network at it is a network to annel 4 in Wash tation is a network at it is a network in the reported in the ation is a network at it is a network in the regeneral instructive area, (i.e. "or general instruct 4, you must con accounting periods area, in the reference in	(1) stations carried e carriage of cert 1(e)(2) and (4))]; is carried by your one Special Statement of both on a substitute, see page (v) on program service er-the-air designation of the television statington, D.C. This bork station, an indefer network multiple or "E-M" (for none ctions located in the television stated in the television of the television of the television, an indefer network multiple or "E-M" (for none ctions located in the televisions located in the television of the televisions located in the televisions locat	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television
	•				y payment because it is the subject	
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ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Atlantic Broadband (NH-ME), LLC 063733 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	Α	
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
WFXT.3	31.3	ı	No		BOSTON, MA
WGBH	19	E	Yes	0	BOSTON, MA
WGME	38	N	No		PORTLAND, ME
WHDH	42	I	No		BOSTON, MA
WHDH.2	42.2	I	No		BOSTON, MA
WLVI	41	I	No		CAMBRIDGE, MA
WLVI.2	41.2	I	No		CAMBRIDGE, MA
WMEA	45	E	No		BIDDEFORD, ME
WMEA.4	45.4	E	No		BIDDEFORD, ME
WMUR	9	N	No		MANCHESTER, NH
WMUR.2	9.2	I	No		MANCHESTER, NH
WPXG	33	I	No		CONCORD, NH
WSBK	39	I	No		BOSTON, MA
WMFP	18	I	No		BOSTON, MA
•••••••	<u> </u>			†	<u> </u>

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Atlantic Broadband (NH-ME), LLC 063733 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. · List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex-

planation of local service area, see page (v) of the general instructions located in the paper SA3 form.

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

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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	В	
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
скѕн	9.1	I	Yes	0	QUEBEC, CANADA
WCSH	44	N	No		PORTLAND, ME
WCSH.2	44.2	I	No		PORTLAND, ME
WCSH.3	44.3	I	No		PORTLAND, ME
WENH	11	Е	No		DURHAM, NH
WENH.2	11.2	Е	No		DURHAM, NH
WENH.3	11.3	E	No		DURHAM, NH
WENH.4	11.4	Е	No		DURHAM, NH
WGBH	19	Е	Yes	0	BOSTON, MA
WGME	38	N	No		PORTLAND, ME
WGME.2	38.2	I	No		PORTLAND, ME
WGME.3	38.3	I	No		PORTLAND, ME
WHDH	42	I	No		BOSTON, MA
WHDH.2	42.2	I	No		BOSTON, MA
WMEA	45	E	No		BIDDEFORD, ME
WMEA.3	45.3	Е	No		BIDDEFORD, ME
WMTW	8	N	No		POLAND SPRING, ME
WMTW 2	8.2	ı	No		POLAND SPRING ME

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Atlantic Broadband (NH-ME), LLC 063733 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP B 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL OF (Yes or No) CARRIAGE SIGN NUMBER STATION (If Distant) WMTW.3 8.3 No POLAND SPRING, ME ı **WPFO** 23 Ν No WATERVILLE, ME WPFO.2 23.2 ı No WATERVILLE, ME WPFO.3 23.3 No WATERVILLE, ME **WIPL** ı 35 No PORTLAND, ME **WMFP** 18 ı No BOSTON, MA **WPXT** 43 No PORTLAND, ME WPXT.2 43.2 1 No PORTLAND, ME **WIPL** 35 No ı PORTLAND, ME WIPL.2 ı No 35.2 PORTLAND, ME WIPL.3 35.3 ı No PORTLAND, ME

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

PORTLAND, ME

WATERVILLE, ME

No

No

WPXT.3

WPME

43.3

35

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ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 063733 Atlantic Broadband (NH-ME), LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. · List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example 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.

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CHANNEL LINE-UP C									
2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION					
35	I	No		DERRY, NH					
46	N	No		BOSTON, MA					
46	l	No		BOSTON, MA					
30	N	No		BOSTON, MA					
30.2	I	No		BOSTON, MA					
44	N	No		PORTLAND, ME					
44.2	I	No		PORTLAND, ME					
44.3	I	No		PORTLAND, ME					
20	N	No		BOSTON, MA					
20.2	I	No		BOSTON, MA					
11	E	No		DURHAM, NH					
11.2	Е	No		DURHAM, NH					
11.3	E	No		DURHAM, NH					
11.4	E	No		DURHAM, NH					
31	N	No		BOSTON, MA					
31.2	I	No		BOSTON, MA					
	CHANNEL NUMBER 35 35 46 46 46 30 30.2 44 44.2 44.3 20 20.2 11 11.2 11.3 11.4 31	2. B'CAST CHANNEL NUMBER STATION 35 I 46 N 46 I 30 N 30.2 I 44 N 44.2 I 44.3 I 20 N 20.2 I 11 E 11.2 E 11.3 E 11.4 E 31 N	2. B'CAST CHANNEL NUMBER STATION STATION (Yes or No) 46 N No 46 I No 30 N No 30.2 I No 44.2 I No 44.3 I No 20 N No 20.2 I No 11 E No 11.2 E No 11.4 E No 31 N No 32 N No 34 No 35 No 36 N No 37 No 38 No 39 No 30 N N	2. B'CAST CHANNEL NUMBER STATION STATION (Yes or No) CARRIAGE (If Distant) 35 I No 46 N No 46 I No 30 N No 30.2 I No 44 N No 44.2 I No 44.3 I No 20 N No 20 N No 11 E No 11.2 E No 11.3 E No 11.4 E No 31 No No 11.4 E No 31 No No No No No No 11.4 E No 31 No No No No No No No No No No					

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Atlantic Broadband (NH-ME), LLC 063733 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP C 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL OF (Yes or No) CARRIAGE SIGN NUMBER STATION (If Distant) WFXT.3 No **BOSTON, MA** 31.3 ı **WGBH** 19 Ε Yes 0 **BOSTON, MA WGME** 38 Ν Yes 0 PORTLAND, ME 42 **WHDH** ı No **BOSTON, MA** WHDH.2 42.2 1 No **BOSTON, MA** WLVI 41 I No CAMBRIDGE, MA WLVI.2 41.2 No CAMBRIDGE, MA **WMUR** 9 Ν No MANCHESTER, NH WMUR.2 9.2 ı No MANCHESTER, NH **WPXG** ı No 33 CONCORD, NH **WSBK** 39 ı No **BOSTON, MA WMFP** 18 No **BOSTON, MA**

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Atlantic Broadband (NH-ME), LLC 063733 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP D								
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			
WBIN	35	I	No		DERRY, NH			
WBTS	46	N	No		BOSTON, MA			
WBTS.2	46	l	No		BOSTON, MA			
WBZ	30	N	No		BOSTON, MA			
WBZ.2	30.2	I	No		BOSTON, MA			
WCSH	44	N	No		PORTLAND, ME			
WCSH.2	44.2	I	No		PORTLAND, ME			
WCSH.3	44.3	I	No		PORTLAND, ME			
WCVB	20	N	No		BOSTON, MA			
WCVB.2	20.2	I	No		BOSTON, MA			
WENH	11	E	No		DURHAM, NH			
WENH.2	11.2	E	No		DURHAM, NH			
WENH.3	11.3	Е	No		DURHAM, NH			
WENH.4	11.4	E	No		DURHAM, NH			
WFXT	31	N	No		BOSTON, MA			
WFXT.2	31.2	I	No		BOSTON, MA			

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Atlantic Broadband (NH-ME), LLC 063733 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP D 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE (If Distant) NUMBER STATION WFXT.3 No **BOSTON, MA** 31.3 ı **WGBH** 19 Ε Yes 0 **BOSTON, MA WGME** 38 Ν Yes 0 PORTLAND, ME 42 No **WHDH** ı **BOSTON, MA** WHDH.2 42.2 1 No **BOSTON, MA** WLVI 41 I No CAMBRIDGE, MA WLVI.2 41.2 No CAMBRIDGE, MA **WMUR** 9 Ν No MANCHESTER, NH WMUR.2 9.2 ı No MANCHESTER, NH **WPXG** 33 ı No CONCORD, NH

No

No

BOSTON, MA

BOSTON, MA

WSBK

WMFP

39

18

ı

Primary

Transmitters:

Television

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Atlantic Broadband (NH-ME), LLC 063733 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G

carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a 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

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	E	
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
WBTS	46	N	Yes	0	BOSTON, MA
WBTS.2	46	I	Yes	0	BOSTON, MA
WBZ	30	N	Yes	0	BOSTON, MA
WBZ.2	30.2	l	Yes	0	BOSTON, MA
WCSH	44	N	No		PORTLAND, ME
WCSH.2	44.2	l	No		PORTLAND, ME
WCSH.3	44.3	ı	No		PORTLAND, ME
WCVB	20	N	Yes	0	BOSTON, MA
WCVB.2	20.2	l	Yes	0	BOSTON, MA
WENH	11	E	No		DURHAM, NH
WENH.2	11.2	E	No		DURHAM, NH
WENH.3	11.3	E	No		DURHAM, NH
WENH.4	11.4	E	No		DURHAM, NH
WFXT	31	N	Yes	0	BOSTON, MA
WFXT.2	31.2	I	Yes	0	BOSTON, MA
WFXT.3	31.3	ı	Yes	0	BOSTON, MA
WGBH	19	Е	Yes	0	BOSTON, MA

FORM SA3E. PAGE 3.					ACCOUNTI	NG PERIOD: 2019/1
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
Atlantic Broadk	oand (NH-M	E), LLC			063733	Name
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, is basis. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servin cable system carried the carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	system during the control of the con	ne accounting a June 24, 1944), or 76.63 (rd in the next prespect to any tions, or auth G—but do list titute basis. It is generally a station acceptance of the station acceptance of the station. It is station acceptance of the station acceptance of the station acceptance of the station. It is station acceptance of the station acceptance of the station. It is station acceptance of the station. For the station acceptance of the stat	g period, except 81, permitting the ferring to 76.6 paragraph. If distant stations orizations: to the ferring to 76.6 paragraph. If distant stations orizations: to the ferring to the fer	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of both on a substitute, see page (v) on a program services to a service er-the-air designatic column 1 (list each the television statifington, D.C. This lark station, an indefor network multicur "E-M" (for noncontions located in the finite that it is the column 5, so and Indicate by entitivated channel of the column 5, so and Indicate by entitivated channel of the primary channel on any of the community with the carried to the	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your ering "LAC" if your cable system capacity. expaper says the subject estem or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. et to which the station is licensed by the enter the station is identifed.	Primary Transmitters: Television
		CHANN	EL LINE-UP	E		
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	
WGME	38	N	Yes	0	PORTLAND, ME	
WHDH	42	l	No		BOSTON, MA	
WHDH.2	42.2	l	No		BOSTON, MA	
WLVI	41	l	Yes	0	CAMBRIDGE, MA	
WLVI.2	41.2	l	Yes	0	CAMBRIDGE, MA	
WMUR	9	N	No		MANCHESTER, NH	
WMUR.2	9.2	l	No		MANCHESTER, NH	
WPXG	33	I	No		CONCORD, NH	
WSBK	39	I	Yes	0	BOSTON, MA	
					ļ	

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Atlantic Broadband (NH-ME), LLC 063733 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	F	
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
WBTS	46	N	Yes	0	BOSTON, MA
WBTS.2	46	I	Yes	0	BOSTON, MA
WBZ	30	N	Yes	0	BOSTON, MA
WBZ.2	30.2	I	Yes	0	BOSTON, MA
WCSH	44	N	No		PORTLAND, ME
WCSH.2	44.2	I	No		PORTLAND, ME
WCSH.3	44.3	I	No		PORTLAND, ME
WCVB	20	N	Yes	0	BOSTON, MA
WCVB.2	20.2	I	Yes	0	BOSTON, MA
WENH	11	E	No		DURHAM, NH
WENH.2	11.2	E	No		DURHAM, NH
WENH.3	11.3	E	No		DURHAM, NH
WENH.4	11.4	E	No		DURHAM, NH
WFXT	31	N	Yes	0	BOSTON, MA
WFXT.2	31.2	I	Yes	0	BOSTON, MA
WFXT.3	31.3	I	Yes	0	BOSTON, MA
WGBH	19	E	Yes	0	BOSTON, MA
WGME	38	N	Yes	0	PORTLAND. ME

FORM SA3E. PAGE 3. LEGAL NAME OF OWN	IER OF CARLE SY	/STEM·			SYSTEM ID#	
Atlantic Broad					063733	Name
PRIMARY TRANSMITTE						
In General: In space of carried by your cable is FCC rules and regulating 76.59(d)(2) and (4), 76.59(d)(2) and regulation basis under specific FC in Do not list the station station was carried in the station here, basis. For further in in the paper SA3 for 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 multice for the meaning of the Column 4: If the step planation of local serving cable system carried the carried the distant station the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the Column 6: Give the	G, identify even by stem during the cons in effect or is, as explaine stations: With a CC rules, regular here in space only on a substand also in spatformation concern. In the station's call associated with each case with each each case with each each each each each each each eac	y television standard and accounting and June 24, 19 4), or 76.63 (Id in the next process of the sepect to any ations, or auth G—but do listitute basis. In the standard area of the station account of the station account of the station. In the station account of the station. In the local service of the service of the station on during the one basis becamulticast stream or before Jumitter or an account of the station. In the station of the station of the station of the service of the service of the station. In the station of the service of the station of the service of the station. In the station of the service of the station of the station. In the station of the station of the station of the station of the station.	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations for izations: to tit in space I (the station was carried that basis station report origination cording to its own be reported in containing the station is a network etwork), "N-M" (I educational), one general instructive area, (i.e. "Cogeneral instructive area, (i.e. "Cogeneral instructive area, (i.e. "Cogeneral instruction of lack of a seam that is not some 30, 2009, be sesociation repreyou carried the portuge of the general instruction of the general in true. Sesociations, stations, in the stations, stations, stations, stations, stations, in the stations of the general in true.	(1) stations carried to carriage of certa- tile (2) and (4))]; as a carried by your of the Special Statement of both on a substitution, see page (v) on a program service the er-the-air designation of the television statistication, D.C. This that station, an indefor network multicor "E-M" (for noncontrol located in the finite of the television statistication of the television statisticated in the television statisticated by entitle the column 5, so the television of the televisio	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	Primary Transmitters: Television
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	F		
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	
WHDH	42	ı	Yes	0	BOSTON, MA	
WHDH.2	42.2	l	Yes	0	BOSTON, MA	
WLVI	41	I	Yes	0	CAMBRIDGE, MA	
WLVI.2	41.2	l	Yes	0	CAMBRIDGE, MA	
WMUR	9	N	No	••••••	MANCHESTER, NH	
WMUR.2	9.2	<u> </u>	No		MANCHESTER, NH	
WPXG	33	<u> </u>	No		CONCORD, NH	
WSBK	39	<u> </u>	Yes	0	BOSTON, MA	
WMFP	18	l	No		BOSTON, MA	

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Atlantic Broadband (NH-ME), LLC 063733 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G

carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a 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 identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	G	
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
WBTS	46	N	Yes	0	BOSTON, MA
WBTS.2	46	I	Yes	0	BOSTON, MA
WBZ	30	N	Yes	0	BOSTON, MA
WBZ.2	30.2	I	Yes	0	BOSTON, MA
WCSH	44	N	No		PORTLAND, ME
WCSH.2	44.2	I	No		PORTLAND, ME
WCSH.3	44.3	I	No		PORTLAND, ME
WCVB	20	N	Yes	0	BOSTON, MA
WCVB.2	20.2	I	Yes	0	BOSTON, MA
WENH	11	E	No		DURHAM, NH
WENH.2	11.2	E	No		DURHAM, NH
WENH.3	11.3	E	No		DURHAM, NH
WENH.4	11.4	Е	No		DURHAM, NH
WFXT	31	N	Yes	0	BOSTON, MA
WFXT.2	31.2	I	Yes	0	BOSTON, MA
WFXT.3	31.3	I	Yes	0	BOSTON, MA
WGBH	19	Е	Yes	0	BOSTON, MA
WGMF	38	N	Yes	Ο	PORTI AND ME

Primary Transmitters: Television

FORM SA3E. PAGE 3.					ACCOUNT	ING PERIOD: 2019/1
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
Atlantic Broadk	oand (NH-M	E), LLC			063733	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
In General: In space Coarried by your cable Secorried by your cable Secorried by your cable Secorried by your cable Secorried and (4), 76 substitute program base Substitute Basis Seasis under specific FC Do not list the station station was carried List the station here, seasis. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you cable system carried the distant statis For the retransmiss of a written agreement the cable system and attion "E" (exempt). For sexplanation of these the Column 6: Give the	G, identify every system during the cons in effect or 6.61(e)(2) and (6.5is, as explaine stations: With record only on a substand also in spatformation concern. In station's call associated with explained system carried the cast), "E" (for not see terms, see pation is outside ce area, see pation on a part-tirion of a distant entered into on a primary transistem categories, elocation of ea	y television standard accounting in June 24, 194, or 76.63 (in d in the next present to any attions, or auth G—but do listitute basis. In the standard account in a station account in a station account in a station account in the local service (v) of the local service (v)	g period, except 81, permitting the ferring to 76.6 paragraph. It is in space I (the fitting the ferring to 76.6 paragraph. It is in space I (the fitting the fitting that is a satisfied to the fitting	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of both on a substitution, see page (v) of the program services er-the-air designaticolumn 1 (list each the television stationington, D.C. This for the television station of "E-M" (for noncontrol located in the distant"), enter "Ye in located in the mylete column 5, so the column 5, so the column 5, so the column 5, so the column 5 and the column 5, so the column 5 and the column 6 and t	es". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system	Primary Transmitters: Television
Note: If you are utilizin	g multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	G		
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	
WHDH	42	I	No		BOSTON, MA	
WHDH.2	42.2	l	No		BOSTON, MA	
WLVI	41	l	Yes	О	CAMBRIDGE, MA	
WLVI.2	41.2	l	Yes	О	CAMBRIDGE, MA	
WMUR	9	N	No		MANCHESTER, NH	
WMUR.2	9.2	I	No		MANCHESTER, NH	
WPXG	33	I	No		CONCORD, NH	
WSBK	39	I	Yes	0	BOSTON, MA	
WMFP	18	I	No		BOSTON, MA	

				•		

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 063733 Atlantic Broadband (NH-ME), LLC PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

							4	ACCOUNTING	PERIOD: 2019/1
LEGAL NAME OF OWNER OF							SY	STEM ID#	Name
Atlantic Broadband (N	H-ME), LL	_C						063733	
SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	NT AND PROGRAM LOG						
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.									
1. SPECIAL STATEMENT									Carriage:
 During the accounting per broadcast by a distant stat 		r cable system	n carry, on a substitute basi	s, any nonnet	twork telev	vision pro	_	☑ No	Special Statement and Program Log
Note: If your answer is "No	", leave the	rest of this pag	ge blank. If your answer is "	Yes," you mu	ıst comple	te the pr	rogram		33 3 33
log in block 2. 2. LOG OF SUBSTITUTE	PROGRA	MS							
In General: List each subst			te line. Use abbreviations v	wherever pos	sible, if the	eir mean	ing is		
clear. If you need more spa				roarom) that	during the		tina		
period, was broadcast by a			ision program (substitute p our cable system substitute					n	
under certain FCC rules, re	gulations, o	r authorization	s. See page (vi) of the gen	eral instructio	ns located	I in the p	aper		
SA3 form for futher informa titles, for example, "I Love L				"basketball".	List speci	itic progr	ram		
Column 2: If the program	n was broad	dcast live, ente	r "Yes." Otherwise enter "N						
			asting the substitute programe community to which the		nsed by th	e FCC c	or. in		
the case of Mexican or Can	adian static	ons, if any, the	community with which the	station is iden	itified).				
Column 5: Give the mon first. Example: for May 7 gives		when your sys	tem carried the substitute p	orogram. Use	numerals,	, with the	e month		
		substitute pro	gram was carried by your o	able system.	List the tir	mes acc	urately		
to the nearest five minutes.	Example: a	program carri	ed by a system from 6:01:1	5 p.m. to 6:2	8:30 p.m.	should b	ре		
stated as "6:00–6:30 p.m." Column 7: Enter the letter	er "R" if the	listed program	was substituted for progra	mming that vo	our system	n was re	guired		
to delete under FCC rules a	and regulation								
gram was substituted for pr									
effect on October 19, 1976		that your syste	em was permitted to delete						
effect on October 19, 1976.		that your syste		under FCC r	ules and re	egulatior			
			em was permitted to delete	under FCC re	ules and re	egulatior FITUTE	ns in	7. REASON	
S		TE PROGRAM 3. STATION'S	em was permitted to delete	under FCC re	ules and re	egulatior FITUTE	ns in	7. REASON FOR DELETION	
	SUBSTITUT	E PROGRAM	em was permitted to delete	under FCC re WHE CARR	EN SUBSTIAGE OCC	egulation	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	
S	SUBSTITUT	E PROGRAM 3. STATION'S	em was permitted to delete	WHE CARRI	EN SUBSTIAGE OCC	Egulation FITUTE CURRE TIMES	ns in	FOR	

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 6.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Atlantic Broadband (NH-ME), LLC

O63733

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."

		DAT	ES /	AND HOURS (OF F	PART-TIME CAF	RRIAGE			
CALL SIGN -	WHEN CARRIAGE OCCURRED					CALL SIGN	WHE	N CARRIAGE O		
07.22 0.0.1	DATE	FROM	HOURS FROM TO			07.122.01.011	DATE	HOURS FROM		TO
			_						_	
			_						_	
			=					 	-=	
			=						_=_	
			=					 		
			_						_	
			_						_	
									_	
			=-						-=-	
			=						-=-	
			=						_=_	
			=_							
			=_							
			_							

LEG	AL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	Name			
Atl	antic Broadband (NH-ME), LLC			063733				
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.								
COPY Instru • Cor • Cor • If you fee • If you	(RIGHT ROYALTY FEE actions: Use the blocks in this space L to determine the royalty fee you owe: implete block 1, showing your minimum fee. implete block 2, showing whether your system carried any distant television stations. Our system did not carry any distant television stations, leave block 3 blank. Enter the alternative block 1 on line 1 of block 4, and calculate the total royalty fee. Our system did carry any distant television stations, you must complete the applicable prompanying this form and attach the schedule to your statement of account.		of the m	ninimum	L Copyright Royalty Fee			
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b $\!$	e ente	ered on li	ne 1 of				
-	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.	entere	d on line	e 2 in block				
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be	entered	I on line				
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.		064 perd	cent of the				
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.		\$	12,025,125.42				
	This is your minimum fee.	\$		127,947.33				
2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block. • Did your cable system carry any distant television stations during the accounting peri X Yes—Complete the DSE schedule. Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	nn 4, y od?	you mus	t check				
Block 3	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE		Ψ	12,553.10				
	schedule. If none, enter zero							
	Line 3. Add lines 1 and 2 and enter here	\$		129,262.50				
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger		\$	129,262.50	Cable systems			
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente zero.	r		0.00	submitting additional deposits under			
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)			0.00	Section 111(d)(7) should contact the Licensing			
	Line 4. FILING FEE		\$	725.00	additional fees. Division for the appropriate			
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$		129,987.50	form for submitting the additional fees.			
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See pa	age (i) o	f the				

Name	LEGAL NAME OF OWNER OF CABLE		SYSTEM ID#								
	Atlantic Broadband (NH	-ME), LLC	063733								
M Channels	_	e (1) the number of channels on which the cable system carried television broadcast stations e cable system's total number of activated channels, during the accounting period.									
Ondiniois		channels on which the cable proadcast stations	29+								
		activated channels n carried television broadcast stations s	258+								
N Individual to											
Be Contacted for Further Information	Name Patrick Brati	ton Telephone 617-78	6-8800								
	Address 2 Batteryma (Number, street, rura	rch Park, Suite 205 Troute, apartment, or suite number)									
	Quincy, MA (City, town, state, zip										
	Email pbra	tton@atlanticbb.com Fax (optional)									
0	CERTIFICATION (This states	ment of account must be certifed and signed in accordance with Copyright Office regulations.									
Certifcation	_	ertify that (Check one, <i>but only one</i> , of the boxes.) Pration or partnership) I am the owner of the cable system as identifed in line 1 of space B; or									
	_										
	in line 1 of space B ar	an corporation or partnership) I am the duly authorized agent of the owner of the cable system and that the owner is not a corporation or partnership; or									
	in line 1 of space B.	an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of the	·								
		ent of account and hereby declare under penalty of law that all statements of fact contained herein ct to the best of my knowledge, information, and belief, and are made in good faith. [66]]	1								
	X	/s/ Patrick Bratton									
	(e.g., /	an electronic signature on the line above using an "/s/" signature to certify this statement. s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the boutton, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatit									
	Турес	d or printed name: Patrick Bratton									
	Title:	Chief Financial Officer (Title of official position held in corporation or partnership)									
	Date:	August 28, 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: Atlantic Broadband (NH-ME), LLC 0637	Namo						
Atlantic Broadband (NH-ME), LLC 0637	733						
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."							
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.							
During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?							
X NO							
YES. Enter the total here and list the satellite carrier(s) below							
Name Mailing Address Name Mailing Address Mailing Address							
							
INTEDECT ACCECCMENTS							
INTEREST ASSESSMENTS You must complete this workshoot for those revally payments submitted as a result of a late payment or undernayment.							
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q						
Line 1 Enter the amount of late payment or underpayment	Interest Assessment						
x <u> </u>							
Line 2 Multiply line 1 by the interest rate* and enter the sum here	<u>-</u>						
xdays	3						
Line 3 Multiply line 2 by the number of days late and enter the sum here	<u>-</u>						
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 assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.							
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.							
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filling.							
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 ε television market added stations after June 24, 1981, that would not have been permitted under FCC rules, regulations, and authorizations (hereafter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

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

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

EXAMPLE:

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

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



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

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

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

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

ACCOUNTING PERIOD: 2019/1

DSE SCHEDULE. PAG	E 11. (CONTINUED)					
4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			S'	YSTEM ID#
ı	Atlantic Broadband (NH	I-ME), LLC				063733
	SUM OF DSEs OF CATEGOR	RY "O" STATION	NS:			
	 Add the DSEs of each station 					
	Enter the sum here and in line	1 of part 5 of this	s schedule.	ļ	12.50	
	Instructions:			<u> </u>		_
2	In the column headed "Call S	Sign": list the cal	ll signs of all distant stations	identified by t	he letter "O" in column 5	
Computation	of space G (page 3). In the column headed "DSE"	each network or noncom-				
of DSEs for	mercial educational station, give					
Category "O"			CATEGORY "O" STATION	IS: DSEs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	WBTS	0.250				(
	WBTS.2	1.000				
	WBZ	0.250				
	WBZ.2	1.000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			(
Add rows as	WCVB	0.250				(
necessary.	WCVB.2	1.000				
Remember to copy	WFXT	0.250				
all formula into new	WFXT.2	1.000				
rows.	WFXT.3	1.000				
	WGBH	0.250				
	WGME	0.250				
	WLVI	1.000				
	WLVI.2	1.000				(
	WSBK	1.000				
	WHDH	1.000				
	WHDH.2	1.000				(
	CKSH	1.000				(
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			(
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		<u> </u>		<u> </u>		<u> </u>

Name		ER OF CABLE SYSTEM: Dand (NH-ME), LL	С				S	YSTEM ID# 063733
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2: For figure should correct Column 3: For Column 4: Die be carried out at I Column 5: For give the type-valu Column 6: M	ne call sign of all distator each station, give the respond with the information each station, give the reach station, give the reach independent size as ".25."	the number of hours mation given in spathe total number of himn 2 by the figure hal point. This is the station, give the "ty lumn 4 by the figur	s your cable syste ace J. Calculate or hours that the stat in column 3, and e "basis of carriag pe-value" as "1.0.' e in column 5, and	m carried the stanly one DSE for oftion broadcast over the result in the value of the standard for the result in the standard for the standard	ation during the accounting each station. Ver the air during the acco decimals in column 4. The	ounting period. his figure must cational station,	
Capacity		С	ATEGORY LA	C STATIONS:	COMPUTAT	ION OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	JRS C ED BY S M C	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAC VALUE	GE VALUI		
						x		
						X		
			÷		= =	x x	<u>-</u>	
						x		
			÷	:	=	x	=	
			÷ ÷		=	x x	=	
	Add the DSEs of e	F CATEGORY LAC S ach station. here and in line 2 of pa		le,		0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried by tions in effect controls Broadcast one space I). Column 2: For at your option. This Column 3: Enter Column 4: Divi	your system in subst on October 19, 1976 (or more live, nonnetwood each station give the s figure should correser the number of days de the figure in colum	itution for a prograi as shown by the le ork programs during number of live, no spond with the infoi in the calendar ye in 2 by the figure ir	m that your systen tter "P" in column that optional carr nnetwork program mation in space I. ar: 365, except in column 3, and gi	n was permitted of 7 of space I); an iage (as shown by as carried in substance), a leap year.	Programs) if that station: to delete under FCC rule: d r the word "Yes" in column stitution for programs that olumn 4. Round to no les the general instructions in	2 of were deleted s than the third	rm).
		SU	BSTITUTE-BAS	SIS STATION	S: COMPUTA	ATION OF DSEs	Ţ	1
	SIGN	NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷		=		-		=
		÷		=				
		÷		=		-	•	=
		÷		=		-		=
	Add the DSEs of e	F SUBSTITUTE-BAS ach station. nere and in line 3 of pa		le,	⊁	0.00		
5 Total Number of DSEs	number of DSEs ap	plicable to your systen SEs from part 2● SEs from part 3●		es in parts 2, 3, and	I 4 of this schedul	e and add them to provide	12.50 0.00 0.00	
	TOTAL NUMBER C	DF DSEs						12.50

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

LEGAL NAME OF C							SY	STEM ID# 063733	Name
Instructions: Blo In block A: • If your answer if schedule.			part 6 and par	t 7 of the DSE sche	dule blank a	nd complete pa	art 8, (page 16) of	the	6
If your answer if	"No," complete blo								0
				TELEVISION MA					Computation of 3.75 Fee
effect on June 24,	1981?	schedule—l	•	aller markets as def				iulations in	
		BLO	CK B: CARF	RIAGE OF PERM	AITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulati e DSE Sche	ons prior to Ju edule. (Note: T	n part 2, 3, and 4 of ne 25, 1981. For fu he letter M below re Act of 2010.)	ırther explana	ation of permitt	ed stations, see th	ie	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfathered instructions for E Carried pursus *F A station pre	ed pursuant on as define al education d station (76. or DSE schee ant to individ viously carri	ulations cited b to the FCC ma d in 76.5(kk) (al station [76.5 65) (see para dule). ual waiver of f ed on a part-tii vithin grade-B	me or substitute bas contour, [76.59(d)(se in effect of 6.57, 76.59(b) (1), 76.63(a) referring ostitution of g	n June 24, 198 b), 76.61(b)(c), a) referring to 7 g to 76.61(d) grandfathered s	76.63(a) referring 76.61(e)(1 stations in the		
Column 3:	List the DSE for of *(Note: For those this schedule to of	e stations ide	entified by the	n parts 2, 3, and 4 o letter "F" in column	of the schedu 2, you must	ule. complete the v	vorksheet on page	14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
WGBH	C	0.25	WCVB.2	M	1.00	WHDH	A	1.00	-
CKSH	В	1.00	WFXT	Α	0.25		M	1.00	
WGME	G	0.25	WFXT.2	М	1.00	WLVI	Α	1.00	
WBZ	A/G	0.25	WFXT.3	М	1.00	WLVI.2	M	1.00	
WBZ.2	M	1.00				WSBK	Α	1.00	
WCVB	A/G	0.25				WBTS.2	M	1.00	
								12.25	
		F	N OCK C. CC	MPUTATION OF	3 75 FFF				
Line 1: Enter the	total number of				0.70122		1		
Line 2: Enter the	sum of permitte	d DSEs fro	m block B ab	ove			,		
				er of DSEs subject t 7 of this schedul		rate.	<u>, </u>		
Line 4: Enter gro	oss receipts from	space K (p	age 7)				x 0.03	75	Do any of the DSEs represent partially
Line 5: Multiply I	ine 4 by 0.0375 a	and enter s	um here				x		permited/ partially nonpermitted carriage?
Line 6: Enter tot	al number of DSI	Es from line	: 3						If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 ar	nd enter he	re and on line	e 2, block 3, space	e L (page 7))		0.00	

Atlar	ntic Broa	dband (NH-ME), LLC						O63733	Mana
BLOCK A: TELEVISION MARKETS (CONTINUED)										
	. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
										Computation of 3.75 Fee
										3.73166
<mark></mark>										
									•••••	
									••••••	
									••••••	
									•••••	
									••••••	
									••••••	
									••••••	
									•••••	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:									SYSTEM ID#		
Name	Atlantic Broadl			063733								
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											
					ED	ON A PART-TIME AN						
	1. CALL	2. PRI		COUNTING		4. BASIS OF		RESENT	6. F	PERMITTED		
	SIGN	DSE	PI	ERIOD		CARRIAGE	I	DSE		DSE		
									•••••			
7 Computation of the Syndicated	,	"Yes," comple	ete blocks B and C locks B and C blan	k and complete		art 8 of the DSE sched						
•			BLOCK	CA: MAJOR	1 1	ELEVISION MARK	E!					
Exclusivity Surcharge	Is any portion of the or	cable system v	vithin a ton 100 maio	or television man	ket	t as defned by section 7	6.5 of ECC	rules in effect .	lune 24	1981?		
Guronargo	l <u> </u>	•		n toloviolon mai		No—Proceed to		raico iii ciicot c	uno 2 1,	1001.		
	Yes—Complete	DIOCKS D ATIC	10.			No—Proceed to	part o					
	BLOCK B: C	arriage of VHI	-/Grade B Contour	Stations		BLOCK	C: Compu	ıtation of Exem	npt DSE	s		
	Is any station listed in commercial VHF stati or in part, over the ca	ion that places				Was any station listed nity served by the cab to former FCC rule 76	le system p					
	Yes—List each s X No—Enter zero a		th its appropriate per part 8.	mitted DSE		Yes—List each st X No—Enter zero a			ate perm	itted DSE		
		,		, , , , , , , , , , , , , , , , , , , 			, , , , , , , , , , , , , , , , , , ,	1				
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	SN .	DSE		
			-	 								
				ļ								
												
				····								
		 	TOTAL DSEs	0.00			<u> </u>	TOTAL DS	SEs	0.00		

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (NH-ME), LLC	SYSTEM ID# 063733	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	12,025,125.42	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 defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	• Did your cable system retransmit the signals of any partially distant television stations during the accounting period? 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 DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ _\$		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#							
- Hamo	,	Atlantic Broadband (NH-ME), LLC	063733							
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.								
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$								
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$								
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here								
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ \$								
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here								
		F. Multiply line D by line E and enter here ▶ \$								
		G. Add lines A, C, and F. This is your surcharge.								
		Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge								
_		Syllacated Exclusivity Suicitalize.								
		ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part	art							
8	6 was	checked "Yes," use the total number of DSEs from part 5.								
Computation		ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. Ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.								
of	_	ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B bel	low							
Base Rate Fee	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?									
	L	X Yes—Complete part 9 of this schedule. No—Complete the following sections.								
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE								
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ _\$								
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.								
	2 (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.).									
	Continu	ass the total number of Bollo from part o.).								
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.								
		A. Enter 0.01064 of gross receipts (the amount in section 1) ▶ \$								
		B. Enter 0.00701 of gross receipts (the amount in section 1) ▶								
		C. Subtract 1.000 from total DSEs								
		(the figure in section 2) and enter here								
		D. Multiply line B by line C and enter here								
		E. Add lines A, and D. This is your base rate fee. Enter here								
		and in block 3, line 1, space L (page 7)	0.00							
		Base Rate Fee								

DSE SCF	HEDULE. PAGE 17. ACCOUNTING	5 PERIOD: 2019/1
LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Nome
Atlan	tic Broadband (NH-ME), LLC 063733	Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.	
4	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 ►	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 >	
	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	
	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in G.	9
In Gen	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this	Computation
	on, you must:	of Base Rate Fee and
station DSEs a	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. 3. Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Syndicated Exclusivity Surcharge
NOTE:	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must impute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, cable system is wholly located outside all major television markets, complete block A only.	for Partially Distant Stations, and
Step 1	Didentify a Subscriber Group for Partially Distant Stations: For each community served, determine the local service area of each wholly distant and each partially distant station you to that community.	for Partially Permitted Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were located the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by ne token, the station is distant to the subscriber.)	
subscr	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
Comp	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber	
•	section:	
• Give subscr	fy the communities/areas represented by each subscriber group. the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the ibers in the group.	
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, 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 block B, 6 of this schedule.	
• Add t	he 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 instructions apper SA3 form.	
page. DSEs f	bute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your calculations on the form.	

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 063733 Atlantic Broadband (NH-ME), LLC Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNE Atlantic Broadbar						S	YSTEM ID# 063733	Name
B	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EA	CH SUBSCRII	BER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GRO	JP	9
COMMUNITY/ AREA Strafford County				COMMUNITY/ AREA York County				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
WGBH	0.25			WGBH	0.25			Base Rate Fe
				СКЅН	1.00			and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.25	Total DSEs			1.25	
Gross Receipts First G	iroup	\$ 2,857	,610.98	Gross Receipts Se	cond Group	\$ 1,6	63,927.03	
Base Rate Fee First G	roup	\$ 7	,601.25	Base Rate Fee Se	cond Group	\$	20,620.22	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GRO	JP	
COMMUNITY/ AREA	Rocking	gham County		COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
WGME	0.25			WGBH	0.25			
••••••								
							<u>.</u>	
			.					
	<mark></mark>		.		<u></u>		<u></u>	
Total DSEs			0.25	Total DSEs			0.25	
Gross Receipts Third (Group	\$ 483	,531.89	Gross Receipts For	urth Group	\$ 4,6	39,444.44	
Base Rate Fee Third (Group	\$ 1	,286.19	Base Rate Fee For	urth Group	\$	12,340.92	
ne	base rat			as shown in the boxe	·		16,709.39	

er of Cable System: System II nd (NH-ME), LLC 06373	063733	Name
LOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP		
FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Marrimonic County COMMUNITY AREA Confine County	,	9
Merrimack County COMMUNITY/ AREA Grafton County		Computat
DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	DSE	of
0.25 WBTS.2 1.00	Ва	Base Rate
0.25 WBZ 0.25		and
WBZ.2 1.00	s	Syndicate
WCVB 0.25	E	Exclusiv
WCVB.2 1.00		Surcharg
WFXT 0.25		for
WFXT.2 1.00		Partially
WFXT.3 1.00		Distant
WGBH 0.25		Stations
WGME 0.25		
WHDH 1.00		
WHDH.2 1.00		
WLVI.2 1.00		
	11.25	
Total DSEs 11.25 \$ 1,041,613.31 Gross Receipts Second Group \$ 649,146.33	9,146.33	
\$ 1,041,613.31 Gross Receipts Second Group \$ 649,146.33	5,089.29	
SEVENTH SUBSCRIBER GROUP Gross Receipts Second Group \$ 649,146.33	5,089.29	
\$ 1,041,613.31 Gross Receipts Second Group \$ 649,146.33	5,089.29	
Gross Receipts Second Group \$ 649,146.33 Troup \$ 5,541.38 Base Rate Fee Second Group \$ 36,089.29 SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Carroll County COMMUNITY/ AREA	5,089.29	
STOUD \$ 1,041,613.31 Gross Receipts Second Group \$ 649,146.33	6,089.29	
SEVENTH SUBSCRIBER GROUP STAPP CALL SIGN DSE CALL SIGN	6,089.29	
SEVENTH SUBSCRIBER GROUP S	6,089.29	
SEVENTH SUBSCRIBER GROUP SEIGHTH SUBSCRIBER GROUP SEIGHTH SUBSCRIBER GROUP SEIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/	6,089.29	
SEVENTH SUBSCRIBER GROUP	6,089.29	
Seventh Subscriber Group Seventh Subscriber	6,089.29	
Seventh Subscriber Group Seventh Subscriber	6,089.29	
Seventh Subscriber Group Seventh Subscriber	6,089.29	
Serventh Subscriber Group	6,089.29	
STOUD STOU	6,089.29	
Serventh Subscriber Group	6,089.29	
Seventh Subscriber Group Seventh Subscriber	6,089.29	
Serioup \$ 1,041,613.31 Gross Receipts Second Group \$ 649,146.33	6,089.29	
Serioup \$ 1,041,613.31 Gross Receipts Second Group \$ 649,146.33	6,089.29	
Seventh Subscriber Group Seventh Subscriber	0 DSE	
Second S	6,089.29	
Second S	0 DSE	

LEGAL NAME OF OWNE Atlantic Broadbar			-			S	O63733	Name
BI		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EACH		RIBER GROUP SUBSCRIBER GROU	ID	
COMMUNITY/ AREA			Jr-	COMMUNITY/ AREA			ur	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
					<u>.</u>			and
						-		Syndicated
								Exclusivity Surcharge
	<u> </u>					-		for
								Partially
								Distant
					.	-		Stations
						-		
		-			<u>.</u>		<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 2,857	,610.98	Gross Receipts Secon	d Group	\$ 1,66	33,927.03	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA	Rockin	gham County		COMMUNITY/ AREA	Belknap	County		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					ļ			
					<u>.</u>			
		-				-		
	<u></u>					-		
					<u>.</u>	-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$ 483	,531.89	Gross Receipts Fourth	Group	\$ 4,63	39,444.44	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$ 1	2,553.10	

Name	YSTEM ID# 063733					E), LLG	d (NH-M	Atlantic Broadban
		BER GROUP	BSCRIE	ES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	Bl
0	JP	SUBSCRIBER GROU	SIXTH S		JP	SUBSCRIBER GROU	FIFTH	
9 Computati		County	afton C	MUNITY/ AREA		ack County		COMMUNITY/ AREA
of	DSE	CALL SIGN	SE	L SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I			0.25	S				
and								
Syndicate								
Exclusivit								
Surcharg							<u> </u>	
for							ļ	
Partially Distant							······	
Stations					ļ			
Stations							·	
							 	
					·····			
								•••••
	0.25			DSEs	0.00			Total DSEs
	0.20				613 31	\$ 1,041,	roun	Gross Receipts First G
	49,146.33	\$ 64	oup	Receipts Second	013.31	Ψ 1,0-11,	loup	
	_	\$ 64		Receipts Second	0.00	\$		
	49,146.33 6,085.75		oup		0.00		roup	Base Rate Fee First G
	49,146.33 6,085.75	\$	oup		0.00	\$ SUBSCRIBER GROU	roup SEVENTH	Base Rate Fee First G
	49,146.33 6,085.75	\$ SUBSCRIBER GROU	oup	Rate Fee Second	0.00	\$ SUBSCRIBER GROU	roup SEVENTH	Base Rate Fee First G
	49,146.33 6,085.75 JP 0	\$	oup (Rate Fee Second	0.00	\$ SUBSCRIBER GROU County	roup SEVENTH Carroll	Base Rate Fee First G
	49,146.33 6,085.75 JP 0	\$ SUBSCRIBER GROU	oup (Rate Fee Second	0.00	\$ SUBSCRIBER GROU County	SEVENTH Carroll	Base Rate Fee First G
	49,146.33 6,085.75 JP 0	\$ SUBSCRIBER GROU	oup (Rate Fee Second	0.00	\$ SUBSCRIBER GROU County	SEVENTH Carroll	Base Rate Fee First G
	49,146.33 6,085.75 JP 0	\$ SUBSCRIBER GROU	oup (Rate Fee Second	0.00	\$ SUBSCRIBER GROU County	SEVENTH Carroll	Base Rate Fee First Good Scool Sco
	49,146.33 6,085.75 JP 0	\$ SUBSCRIBER GROU	oup (Rate Fee Second	0.00	\$ SUBSCRIBER GROU County	SEVENTH Carroll	Base Rate Fee First Good Scool Sco
	49,146.33 6,085.75 JP 0	\$ SUBSCRIBER GROU	oup (Rate Fee Second	0.00	\$ SUBSCRIBER GROU County	SEVENTH Carroll	Base Rate Fee First Good Scool Sco
	49,146.33 6,085.75 JP 0	\$ SUBSCRIBER GROU	oup (Rate Fee Second	0.00	\$ SUBSCRIBER GROU County	SEVENTH Carroll	Base Rate Fee First Good Scool Sco
	49,146.33 6,085.75 JP 0	\$ SUBSCRIBER GROU	oup (Rate Fee Second	0.00	\$ SUBSCRIBER GROU County	SEVENTH Carroll	Base Rate Fee First G
	49,146.33 6,085.75 JP 0	\$ SUBSCRIBER GROU	oup (Rate Fee Second	0.00	\$ SUBSCRIBER GROU County	SEVENTH Carroll	Base Rate Fee First G
	49,146.33 6,085.75 JP 0	\$ SUBSCRIBER GROU	oup (Rate Fee Second	0.00	\$ SUBSCRIBER GROU County	SEVENTH Carroll	Base Rate Fee First G
	49,146.33 6,085.75 JP 0	\$ SUBSCRIBER GROU	oup (Rate Fee Second	0.00	\$ SUBSCRIBER GROU County	SEVENTH Carroll	Base Rate Fee First G
	49,146.33 6,085.75 JP 0	\$ SUBSCRIBER GROU	oup (Rate Fee Second	0.00	\$ SUBSCRIBER GROU County	SEVENTH Carroll	Base Rate Fee First G
	49,146.33 6,085.75 JP 0	\$ SUBSCRIBER GROU	oup (Rate Fee Second	0.00	\$ SUBSCRIBER GROU County	SEVENTH Carroll	Base Rate Fee First G
	49,146.33 6,085.75 JP 0	\$ SUBSCRIBER GROU	oup (Rate Fee Second	0.00	\$ SUBSCRIBER GROU County	SEVENTH Carroll	Base Rate Fee First Good Scool Sco
	49,146.33 6,085.75 JP 0	\$ SUBSCRIBER GROU	oup (Rate Fee Second	0.00	\$ SUBSCRIBER GROU County	SEVENTH Carroll	Base Rate Fee First Good Scool Sco
	49,146.33 6,085.75 JP	\$ SUBSCRIBER GROU	GHTH S	MUNITY/ AREA	DSE	SUBSCRIBER GROUCOUNTY CALL SIGN	DSE 0.25	CALL SIGN WBTS

LEGAL NAME OF OWNE Atlantic Broadban			•			SY	O63733	Name
BL				TE FEES FOR EACH				
	NINTH	SUBSCRIBER GROU			TENTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
						-		Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	roup	<u>\$</u>	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
EL	EVENTH	SUBSCRIBER GROU	ΙP		TWELVTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
		_				-	<u></u>	
						-	<u> </u>	
							<u></u>	
							<u> </u>	
							_	
							<u> </u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
		<u>·</u>				·		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
se Rate Fee: Add th ter here and in block			riber group	as shown in the boxes a	above.	\$		

Name	O63733	S			· 			LEGAL NAME OF OWNE Atlantic Broadban
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	RTEENTH			SUBSCRIBER GRO	RTEENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated								
Exclusivity	·							
Surcharge for								
Partially	····	-					·	
Distant								
Stations								
							<u> </u>	
								
	<u> </u>				ļ			
								
		<u> </u>					<u> </u>	
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	3ase Rate Fee First Gr
	IP	SUBSCRIBER GROU	XTEENTH	S	JP	SUBSCRIBER GRO	TEENTH	FIF
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	•	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G

	YSTEM ID# 063733	S`				LE SYSTEM: I E), LLC		Atlantic Broadban
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	HTEENTH			SUBSCRIBER GRO	NTEENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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Name	O63733	SY						LEGAL NAME OF OWNE Atlantic Broadban
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	-SECOND			SUBSCRIBER GRO	TY-FIRST	
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	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	Р	SUBSCRIBER GROU	-FOURTH	TWENTY	JP	SUBSCRIBER GRO	Y-THIRD	TWENT
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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LEGAL NAME OF OWNE Atlantic Broadban						S	YSTEM ID# 063733	Name
				TE FEES FOR EACH				
	TY-FIFTH	SUBSCRIBER GRO			ITY-SIXTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
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Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
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TWENTY-S	EVENTH	SUBSCRIBER GRO	UP	TWENT	Y-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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ate Fee: Add th	e base rat			as shown in the boxes a		\$	0.00	

Name	YSTEM ID# 063733	S'					R OF CABL	Atlantic Broadban
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9		SUBSCRIBER GROU	HIRTIETH			SUBSCRIBER GRO	ΓY-NINTH	
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	JP	SUBSCRIBER GROU	-SECOND	THIRTY	UP	SUBSCRIBER GRO	TY-FIRST	THIR
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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0 9 Computation	LID.	IBER GROUP						
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00	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	UP	SUBSCRIBER GROU	RTY-SIXTH	THIF	JP	SUBSCRIBER GROU	TY-FIFTH	THIR
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0 9 Computation DSE of Base Rate Fee and Syndicated Exclusivity Surcharge	IBER GROUP SUBSCRIBER GROU		TE FEES FOR EACH	BASE RA			
Computation DSE of Base Rate Fee and Syndicated Exclusivity	SUBSCRIBER GROU	Y-FIGHTH					
Computation DSE of Base Rate Fee and Syndicated Exclusivity		LIGITITI			SUBSCRIBER GROU	SEVENTH	
Base Rate Fee and Syndicated Exclusivity			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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Name	YSTEM ID# 063733	S)						LEGAL NAME OF OWNE Atlantic Broadban
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9	IP	SUBSCRIBER GROU	-SECOND	FORTY		SUBSCRIBER GRO	TY-FIRST	FOR
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Atlantic Broadban		E SYSTEM: E), LLC				S	YSTEM ID# 063733	Name
				TE FEES FOR EACH				
	ΓY-FIFTH	SUBSCRIBER GROU		t e		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
FORTY-S	EVENTH	SUBSCRIBER GROU	JP	FOR	TY-EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
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Total DSEs			0.00	Total DSEs	DSE	CALL SIGN	0.00	
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	roup		0.00	Total DSEs	h Group	\$ s	0.00	

Name	O63733	S			•			LEGAL NAME OF OWNE Atlantic Broadban
				TE FEES FOR EACH				
9	1P 0	SUBSCRIBER GROU	FIFTIETH	COMMUNITY/ADEA	JP 0	SUBSCRIBER GRO	ΓΥ-NINTH	
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	IP	SUBSCRIBER GROU	-SECOND	FIFTY	JP	SUBSCRIBER GRO	TY-FIRST	FIFT
	REA0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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Name	YSTEM ID# 063733						R OF CABL	Atlantic Broadban
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GRO	TY-THIRD	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	JP	SUBSCRIBER GROU	TY-SIXTH	FI	UP	SUBSCRIBER GRO	TY-FIFTH	FIF
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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LEGAL NAME OF OWNE Atlantic Broadbar						S	063733	Name
				TE FEES FOR EAC				
	SEVENTH	SUBSCRIBER GRO		11		SUBSCRIBER GRO		9
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Gross Receipts First G	roup	\$ 0.00		Gross Receipts Second Group		\$		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FIF	TY-NINTH	SUBSCRIBER GRO	DUP					
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Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	F	<u>.</u>	3.30		- · - · p	<u> </u> *		
Raso Pato Foo: Add th	ne hase ra t	te fees for each sub	scriber aroun	as shown in the boxe	s above			

LEGAL NAME OF OWNE Atlantic Broadban						S	YSTEM ID# 063733	Name
				TE FEES FOR EACH				
	TY-FIRST	SUBSCRIBER GRO			Y-SECOND	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fee
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		-				-		Syndicated
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Total DSEs	<u>. </u>		0.00	Total DSEs		Į.	0.00	
Gross Receipts First G	roup	\$ 0.00		Gross Receipts Second Group \$ 0.00				
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
SIX	Y-THIRD	SUBSCRIBER GRO	UP	SIXT				
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
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se Rate Fee: Add the er here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Atlantic Broadban						S	YSTEM ID# 063733	Name
				TE FEES FOR EACH				
	TY-FIFTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
SIXTY-S	SEVENTH	SUBSCRIBER GRO	UP	SIX	TY-EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
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9		SUBSCRIBER GROU	VENTIETH			SUBSCRIBER GRO	TY-NINTH		
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Name	O63733				·			LEGAL NAME OF OWNE Atlantic Broadban	
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL	
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9		SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GRO	SEVENTH	
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Name	O63733	S'			· 			LEGAL NAME OF OWNER Atlantic Broadbane	
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LEGAL NAME OF OWN Atlantic Broadba			•			S	063733	Name
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NI	YSTEM ID# 063733	S			•			LEGAL NAME OF OWNE Atlantic Broadban
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Name	YSTEM ID# 063733	S			•			LEGAL NAME OF OWNE Atlantic Broadban
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LEGAL NAME OF OWNE Atlantic Broadban			_			S	O63733	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
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Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FOR	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED FOR	TY-FOURTH	SUBSCRIBER GROUP		
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Total DSEs			0.00	Total DSEs			0.00	
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Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
roup \$ e base rate fees for each subscr 3, line 1, space L (page 7)	e fees for each subscr	r		Base Rate Fee Fourth	Group	\$	0.00	

Nonpermitted 3.75 Stations

LEGAL NAME OF OWN Atlantic Broadba						S	063733	Name
[BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED F	ORTY-FIFTH	SUBSCRIBER GROU	Р	ONE HUNDRED	9			
COMMUNITY/ AREA		0		COMMUNITY/ ARE	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FORT	Y-SEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRED FO	ORTY-EIGHTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0 COMMUNITY/ AREA 0				0	
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Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Group \$ 0.00 Gross Receipts	\$ 0.00 Gross Receipts 0.00 Base Rate Fee te fees for each subscriber group as shown in the	0.00 Gross Receipts 0.00 Base Rate Fee	Gross Receipts Base Rate Fee	Fou	rth Group	\$ \$	0.00	

LEGAL NAME OF OWNER Atlantic Broadbane			•			S	YSTEM ID# 063733	Name		
				TE FEES FOR EACH						
ONE HUNDRED FORT	Y-NINTH	SUBSCRIBER GROU		H	FIFTIETH	SUBSCRIBER GROU	JP	0		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	9 Computation					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
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Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00			
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ONE HUNDRED FIFT	Y-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIFT	/-SECOND	SUBSCRIBER GROU	JP			
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Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00			
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$				

LEGAL NAME OF OWNE Atlantic Broadban			•			S	YSTEM ID# 063733	Name
				TE FEES FOR EACH				
	ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP			ONE HUNDRED FIFT	9			
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Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GROU	JP	ONE HUNDRED FIR	TY-SIXTH	SUBSCRIBER GROU	JP	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
	\$ e fees for each su	bsc	0.00	Base Rate Fee Fourth	Group	\$ \$		

Name	YSTEM ID# 063733	S			•			LEGAL NAME OF OWNER Atlantic Broadban		
		IBER GROUP	SUBSCR	TE FEES FOR EACH						
		SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FIF		SUBSCRIBER GROUP	-SEVENTH	ONE HUNDRED FIFTY-		
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FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Atlantic Broadband (NH-ME), LLC 063733 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Atlantic Broadband (NH-ME), LLC 063733 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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