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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY						
DATE RECEIVED	AMOUNT					
2/25/2024	\$ ALLOCATION NUMBER					
2/25/2021						

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	2020/2									
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 busine if there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account covering the interest of this is the system's first filing. If not, enter the system's IEEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM CABLE ONE, INC.	ess of the cable syste or on the last day of the counting period.	m. e accounting period should su							
				00741720202						
				007417 2020/2						
	210 E. EARLL DRIVE PHOENIX, AZ 85012-2626									
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: CABLE ONE, INC. d/b/a SPARKLIGHT									
	MAILING ADDRESS OF CABLE SYSTEM: 19201 Pineville Rd - 786 Martin Luther King Blvd (Number, street, rural route, apartment, or suite number) LONG BEACH, MS 39560 - BILOXI, MS 39530 - PA		ncphelah Rd., PO Drav	ver 1818						
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	CITY OR TOWN	STATE								
First Community	GULFPORT	MS								
	Below is a sample for reporting communities if you report multiple cl CITY OR TOWN (SAMPLE)	annel line-ups in S	pace G. CH LINE UP	SUB GRP#						
	Alda	MD	A A	1						
Sample	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 this 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: 2020/2 FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 007417 CABLE ONE. INC. Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CH LINE UP SUB GRP# CITY OR TOWN STATE **GULFPORT** MS AD **First** BILOXI MS AA 3 Community **D'IBERVILLE** MS AA 3 2 **ESCATAWPA** MS AE **GAUTIER** MS ΑE 2 HARRISON COUNTY AD 3 MS See instructions for HANCOCK CO-DIAMONDHEAD MS AC 5 additional information on alphabetization. HARRISON COUNTY-DIAMONDHEAD 4 MS AD 3 **KEESLER AFB** MS AA LONG BEACH 4 MS AD **MOSS POINT** 2 MS AE Add rows as necessary. AA **NORTH BILOXI (HARRISON COUNTY)** MS 3 **NORTH BILOXI (JACKSON COUNTY)** 1 MS **AB OCEAN SPRINGS** MS AB 1 2 **PASCAGOULA** MS AE **PASS CHRISTIAN** 4 MS **AD VANCLEAVE** MS **AB** 6

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Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

007417

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1		BLOCK 2			
	NO. OF			NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE	
Residential:						
Service to first set	21,277	20.00-84.00	HOSPITALS	1,044	7.99-30.62	
Service to additional set(s)			CASINOS	1,364	6.12-28.39	
• FM radio (if separate rate)			NURSING HOMES	261	8.00-17.41	
Motel, hotel	4,719	3.31-17.41				
Commercial	1,169	18.65-94.00				
Converter						
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	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
Pay cable	15.00-44.00	Motel, hotel	COST PLUS	SHOWTIME	\$ 18.00
Pay cable—add'l channel	9.00-40.00	Commercial	COST PLUS	TIER DELUXE	\$ 44.00
Fire protection	\$ 4.00	• Pay cable	COST PLUS	DVP	\$ 15.00
•Burglar protection		Pay cable-add'l channel	\$ 4.00	CINEMAX	\$ 18.00
Installation: Residential		Fire protection		MOVIE CHANNEL	\$ 18.00
First set	0-90.00	Burglar protection		НВО	\$ 18.00
Additional set(s)	30.00-60.00	Other services:		STARZ	\$ 18.00
• FM radio (if separate rate)		Reconnect	0.00-90.00		
Converter		Disconnect			
		Outlet relocation	\$ 60.00		
		Move to new address	30.00-60.00		

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007417 CABLE ONE, INC. 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 AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER **STATION** (If Distant) WLOX-1 N-M 13 No **BILOXI, MS** See instructions for additional information WMAH-SIMUL 16 No **BILOXI, MS** Ε on alphabetization. WXXV-2-SIMUL **GULFPORT, MS** 48 N-M No WXXV-3-SIMUL 48 N-M No **GULFPORT, MS** WLOX-3 13 I-M **BILOXI, MS** No **WMAH** 16 Ε No **BILOXI, MS** WWL 0 36 Ν Yes **NEW ORLEANS, LA** WXXV-1 48 I-M No **GULFPORT, MS** WXXV-1-SIMUL 48 I-M No **GULFPORT, MS** WXXV-2 48 N-M No **GULFPORT, MS WYES** 11 Ε Yes 0 **NEW ORLEANS, LA** WXXV-2-SIMUL **GULFPORT, MS** 48 N-M No WLOX-1-SIMUL 13 **BILOXI, MS** N-M No

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#
Name

Name

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

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

CHANNEL LINE-UP AB 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER **STATION** (If Distant) WLOX-1 N-M 13 No **BILOXI, MS** WMAH-SIMUL 16 No **BILOXI, MS** Ε WXXV-2-SIMUL **GULFPORT, MS** 48 N-M No WXXV-3-SIMUL 48 N-M No **GULFPORT, MS** WLOX-3 13 I-M **BILOXI, MS** No **WMAH** 16 Ε No **BILOXI, MS** WXXV-1 48 **GULFPORT, MS** I-M No WXXV-2 48 N-M **GULFPORT, MS** No **WYES** Ε 11 Yes 0 **NEW ORLEANS, LA** WXVO-LD 13 ı No PASCAGOULA, MS WGUD-LD 51 ı No PASCAGOULA, MS WXXV-1-SIMUL **GULFPORT, MS** 48 I-M No WLOX-1-SIMUL 13 N-M **BILOXI, MS** No WXXV-2-SIMUL 48 N-M **GULFPORT. MS** No No

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#
Name
007417

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

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

CHANNEL LINE-UP AC 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER **STATION** (If Distant) **WDSU** 43 Ν No **NEW ORLEANS, LA WGNO** N **NEW ORLEANS, LA** 26 No WMAH-SIMUL 16 Ε No **BILOXI. MS** WXXV-2-SIMUL **GULFPORT, MS** 48 N-M No WXXV-3-SIMUL 48 N-M No **GULFPORT, MS** WUPL 24 ı SLIDELL, LA No **WVUE** 8 ı No **NEW ORLEANS, LA** WWL **NEW ORLEANS, LA** 36 Ν No WXXV-3 48 I-M No **GULFPORT, MS WYES** Ε 11 No **NEW ORLEANS, LA** WDSU-SIMUL 43 Ν **NEW ORLEANS, LA** No WXXV-3-SIMUL 48 N-M No **GULFPORT, MS** WPXL-SIMUL 50 No **NEW ORLEANS, LA** ı WVUE-2 8 **NEW ORLEANS, LA** No WGNO-SIMUL 26 Ν **NEW ORLEANS, LA** No WNOL-2 15 ı No **NEW ORLEANS, LA** WLOX-1-SIMUL 13 N-M No **BILOXI, MS**

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#
Name
007417

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP AD 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE **STATION** NUMBER (If Distant) **WDSU** 43 Ν No **NEW ORLEANS, LA** WDSU-SIMUL 43 N **NEW ORLEANS, LA** No WMAH-SIMUL 16 Ε **BILOXI. MS** No WXXV-2-SIMUL **GULFPORT, MS** 48 N-M No WXXV-3-SIMUL 48 N-M No **GULFPORT, MS** WLOX-1 13 N-M **BILOXI, MS** No WLOX-1-SIMUL 13 N-M No **BILOXI, MS** WLOX-2 13 **BILOXI, MS** N-M No WLOX-2-SIMUL 13 N-M No **BILOXI, MS** WLOX-3 13 I-M No **BILOXI, MS WMAH** 16 Ε No **BILOXI, MS** WWL 36 Ν No **NEW ORLEANS, LA** WXXV-1 48 I-M No **GULFPORT, MS** WXXV-1-SIMUL 48 I-M No **GULFPORT, MS** WXXV-2 48 N-M No **GULFPORT, MS WYES** 11 Ε Yes 0 **NEW ORLEANS, LA** WLOX-1-SIMUL 13 N-M No BILOXI, MS **BILOXI. MS** WMAH-SIMUL 16 Ε No

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#
Name
007417

PRIMARY TRANSMITTERS: TELEVISION

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

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- 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.

CHANNEL LINE-UP AE 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER **STATION** (If Distant) WGUD-LD 51 I No PASCAGOULA, MS WKFK-LD 7 PASCAGOULA, MS ı No WMAH-SIMUL 16 Ε No BILOXI, MS WXXV-2-SIMUL **GULFPORT, MS** 48 N-M No WXXV-3-SIMUL 48 N-M No **GULFPORT, MS** WLOX-1-SIMUL 13 N-M **BILOXI, MS** No WLOX-2 13 N-M No **BILOXI, MS** WLOX-2-SIMUL 13 **BILOXI, MS** N-M No WLOX-3 13 I-M No **BILOXI, MS WMAH** Ε **BILOXI, MS** 16 No WPMI Ν 15 No MOBILE, AL WPMI-SIMUL 15 Ν No MOBILE, AL WXXV-1 48 I-M No **GULFPORT, MS** WXXV-1-SIMUL 48 **GULFPORT, MS** I-M No WXXV-2 48 N-M No **GULFPORT, MS** WXXV-2-SIMUL 48 N-M No **GULFPORT, MS BILOXI, MS** WLOX-1-SIMUL 13 N-M No **BILOXI. MS** WMAH-SIMUL 16 Ε No

G

Primary Transmitters: Television

					ACCOUNT	ING PERIOD: 2020
FORM SA3E. PAGE 3.					SYSTEM ID#	<u> </u>
CABLE ONE, IN		STEM:			007417	Name
PRIMARY TRANSMITTE		N				
In General: In space (G, identify ever	y television st	` .		s and low power television stations) ed only on a part-time basis under	G
• •		-		` '	ain network programs [sections	
(/ (/ .	` , ` ,	,	•	1(e)(2) and (4))]; a	and (2) certain stations carried on a	Primary
	Stations: With i	respect to any	distant stations	s carried by your o	cable system on a substitute program	Transmitters: Television
basis under specifc F0Do not list the station				ne Special Statem	ent and Program Log)—if the	
station was carried	•					
	nformation cond				tute basis and also on some other of the general instructions located	
Column 1: List eac	ch station's call	-			s such as HBO, ESPN, etc. Identify	
			-	-	tion. For example, report multi- h stream separately; for example	
WETA-simulcast).				`		
			-		ion for broadcasting over-the-air in may be different from the channel	
on which your cable sy	ystem carried th	ne station.			•	
					ependent station, or a noncommercial ast), "I" (for independent), "I-M"	
	•	,	,. ,		east), T (lot independent), I-IVI ommercial educational multicast).	
For the meaning of the	ese terms, see	page (v) of the	e general instru	ctions located in t	•	
planation of local serv			,	,		
Column 5: If you h	ave entered "Y	es" in column	4, you must cor	mplete column 5,	stating the basis on which your	
cable system carried t carried the distant stat		•	٠.	•	tering "LAC" if your cable system capacity.	
For the retransmiss	sion of a distant	multicast stre	eam that is not s	subject to a royalt	y payment because it is the subject	
					stem or an association representing ry transmitter, enter the designa-	
-			•		ther basis, enter "O." For a further	
					ed in the paper SA3 form. y to which the station is licensed by the	
					which the station is identifed.	
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AF		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
WMAH-SIMUL	16	Е			BILOXI, MS	
WXXV-2-SIMUL	48	N-M			GULFPORT, MS	
WXXV-3-SIMUL	48	N-M			GULFPORT, MS	
				-		

BILOXI, MS

WLOX-1-SIMUL

13

N-M

No

FURM SAJE. PAGE 3.					0.407714 15.4	
CABLE ONE, IN		STEM:			SYSTEM ID# 007417	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	 N				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba	system during the ions in effect or 6.61(e)(2) and (sis, as explained	he accounting n June 24, 198 4), or 76.63 (r d in the next p	period, except (81, permitting the referring to 76.61 paragraph.	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	Primary Transmitters:
basis under specifc FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA-Simulcast). Column 2: Give th its community of licenson which your cable sy Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the st planation of local serv Column 5: If you he cable system carried the distant state For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	CC rules, regular here in space only on a subs and also in spanformation concorm. ch station's call associated with A-2". Simulcast e channel numbers. For example ystem carried the in each case of a concorn the concorn that is a concorn that is	ations, or auth- G—but do list ititute basis. ace I, if the sta- berning substit sign. Do not r h a station acc streams must ber the FCC h e, WRC is Cha he station. Whether the station. Whether the station. Whether the station on commercial page (v) of the the local serv age (v) of the es" in column on during the a me basis beca multicast stre n or before Ju mitter or an as o enter "E". If , see page (v) ch station. Fo ns, if any, give	orizations: It it in space I (the ation was carried tute basis station report origination cording to its over the reported in cording as assigned to the annel 4 in Wash retain is a network of I educational), or the general instruction of the general instruction.	e Special Statement of both on a substitute, see page (v) on program service er-the-air designate column 1 (list each of the television statifington, D.C. This rk station, an indefor network multicar "E-M" (for noncontrollocated in the inplete column 5, so d. Indicate by entictivated channel of subject to a royalty tween a cable system in the primary of the primary channel on any of the primary channel on any of the primary channel on any of the community with the community with	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject etem or an association representing ry transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. y to which the station is licensed by the which the station is identifed.	Television
		CHANN	EL LINE-UP	AG		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				007417	Name
PRIMARY TRANSMITTI	RS: TELEVISIO	N				
PRIMARY TRANSMITTI In General: In space carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba station was carried in the paper SA3 fc Column 1: List each multicast stream cast stream as "WETA weTA-simulcast). Column 2: Give the list community of licen on which your cable s Column 3: Indicate educational station, by (for independent multifor the meaning of the Column 4: If the signal planation of local server Column 5: If you he cable system carried the distant star For the retransmission.	G, identify every system during the constant of the constant o	y television stranger y television stranger y television stranger y television stranger y television y televi	period, except 81, permitting the referring to 76.6 paragraph. It is space I (the ation was carried tute basis station report origination cording to its own the reported in origination is a network which is a network which is a network in the report origination of the reported in origination is a network of the reported in the repor	(1) stations carried e carriage of certa 1(e)(2) and (4))]; a scarried by your complete Special Statement of both on a substitute, see page (v) or program services er-the-air designate column 1 (list each of the television station, p.C. This interest of the station, an indeference of the television station, and indeference of the television station in the te	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). The paper SA3 form. The stating the basis on which your tering "LAC" if your cable system capacity. To payment because it is the subject	G Primary Transmitters: Television
of a written agreemen the cable system and tion "E" (exempt). For explanation of these the	t entered into or a primary trans simulcasts, also hree categories	n or before Ju mitter or an a o enter "E". If , see page (v)	ne 30, 2009, be ssociation repre- you carried the of the general i	tween a cable sys senting the primar channel on any ot nstructions locate	r payment because it is the subject tem or an association representing by transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form.	
	Canadian statio	ns, if any, givennel line-ups,	e the name of th	ne community with space G for each	which the station is identifed.	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
			•			
					<u> </u>	
	<u>-</u>					
	ı	1		1		
	•					

FORM SA3E. PAGE 3. LEGAL NAME OF OWN	ER OF CABLE SYS	STEM:			SYSTEM ID#	Nama
CABLE ONE, IN	IC.				007417	Name
PRIMARY TRANSMITTE	RS: 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, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast).	system during the financial system during the financial system of the financia	ne accounting June 24, 198 June 24, 198 June 24, 198 June 26, 198 June	period, except 81, permitting the referring to 76.6° paragraph. distant stations orizations: t it in space I (the ation was carried tute basis station report origination coording to its over	(1) stations carried e carriage of certa 1(e)(2) and (4))]; as carried by your case Special Statement both on a substitus, see page (v) or program services er-the-air designal column 1 (list each	and low power television stations) d only on a part-time basis under hin network programs [sections and (2) certain stations carried on a hable system on a substitute program ent and Program Log)—if the hute basis and also on some other f the general instructions located his such as HBO, ESPN, etc. Identify hion. For example, report multi- hin stream separately; for example hon for broadcasting over-the-air in	G Primary Transmitters: Television
on which your cable sy Column 3: Indicate educational station, by for independent multicer the meaning of the Column 4: If the st clanation of local service Column 5: If you hable system carried the distant state For the retransmiss of a written agreement the cable system and ion "E" (exempt). For explanation of these the Column 6: Give the	ystem carried the in each case varieting the le cast), "E" (for no ese terms, see pation is outside ice area, see paave entered "Ye icon on a part-tirision of a distant at entered into or a primary transisimulcasts, also aree categories, e location of each canadian station.	e station. whether the stater "N" (for no commercial or the local services (v) of the local services in column or during the same basis becamulticast street or before Jumitter or an accordance of the local services in the local services of the local services of the local services of the local services (v) of the local services	ation is a networetwork), "N-M" (for educational), or egeneral instructive area, (i.e. "congeneral instructive area (i.e. "congeneral instructive accounting period accounting the second ac	rk station, an inde for network multicar "E-M" (for nonco- ctions located in the distant"), enter "Ye ions located in the mplete column 5, so do Indicate by entictivated channel couplet to a royalty tween a cable syssenting the primar channel on any ot instructions locate list the community with	s". If not, enter "No". For an expaper SA3 form. stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject tem or an association representing y transmitter, enter the designation the basis, enter "O." For a further d in the paper SA3 form. It o which the station is licensed by the which the station is identifed.	
noter in you are a amen	ig malapio onai		EL LINE-UP		shamile mile up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.										
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name				
CABLE ONE, IN	IC.				007417	Nume				
PRIMARY TRANSMITTE	RS: TELEVISIO	N								
In General: In space (G. identify ever	v television st	ation (including t	translator stations	and low power television stations)					
· ·		•	, ,		d only on a part-time basis under	G				
FCC rules and regulat	ations in effect on June 24, 1981, permitting the carriage of certain network programs [sections									
		, ,	-	I(e)(2) and (4))]; a	nd (2) certain stations carried on a	Primary				
substitute program bas				carried by your o	able system on a substitute program	Transmitters: Television				
basis under specifc FC				carried by your c	able system on a substitute program	relevision				
	-			e Special Stateme	ent and Program Log)—if the					
station was carried	only on a subs	titute basis.	. ,	·	5 6,					
	•				ute basis and also on some other					
		erning substit	ute basis statior	is, see page (v) o	f the general instructions located					
in the paper SA3 for		sian Do not r	enort origination	nrogram services	s such as HBO, ESPN, etc. Identify					
		-		. •	tion. For example, report multi-					
cast stream as "WETA	A-2". Simulcast	streams must	be reported in o	column 1 (list each	n stream separately; for example					
WETA-simulcast).										
			ū		on for broadcasting over-the-air in					
on which your cable sy	•		annei 4 in vvasn	ington, D.C. This	may be different from the channel					
			ation is a netwo	rk station, an inde	pendent station, or a noncommercial					
educational station, by	entering the le	etter "N" (for no	etwork), "N-M" (f	or network multica	ast), "I" (for independent), "I-M"					
,	,		,.	,	mmercial educational multicast).					
For the meaning of the					ne paper SA3 form. es". If not, enter "No". For an ex-					
planation of local servi										
					stating the basis on which your					
•			•	•	ering "LAC" if your cable system					
carried the distant stat	•				• •					
					payment because it is the subject					
_				•	tem or an association representing y transmitter, enter the designa-					
•			•		her basis, enter "O." For a further					
					d in the paper SA3 form.					
					to which the station is licensed by the					
Note: If you are utilizing					which the station is identifed.					
Note: II you are utilizii	ig multiple char	inei iine-ups,	use a separate s	space G for each	спаппет ппе-ир.					
		CHANN	EL LINE-UP	AJ						
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION					
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE						
	NUMBER	STATION	(**************************************	(If Distant)						
				,						
					<u> </u>	1				
						1				
					<u> </u>	1				

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
CABLE ONE, IN	IC.				007417	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space of carried by your cable is FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute program bas Substitute Program bas Substitute Program bas Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List 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 heable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify every system during the consine effect or 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(y television standard y television y televi	period, except all, permitting the seferring to 76.6 coaragraph. It is a seferring to 76.6 coaragraph. It is a seferring to 76.6 coaragraph. It is in space I (the seferring to report origination cording to its over the seferring	(1) stations carried e carriage of certa 1(e)(2) and (4))]; a carried by your context of both on a substitute, see page (v) on program services er-the-air designaticolumn 1 (list each column 1 (list each column 1). This rk station, an indefor network multicar "E-M" (for noncontions located in the first of the column 5, so the column 5, so the column 1 (listed that it is not the column 5, so the column 5, so the column 5, so the column 6, so the	is". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing		•	·	•		
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	
					ļ	

FORM SA3E. PAGE 3. LEGAL NAME OF OW	/NER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE,	INC.				007417	
PRIMARY TRANSMIT	TERS: TELEVISIO	N				
carried by your cable FCC rules and regula	e system during t ations in effect o	he accounting n June 24, 19	period, except 81, permitting th	(1) stations carried ne carriage of certa	and low power television stations) d only on a part-time basis under ain network programs [sections	G
substitute program b	asis, as explaine	d in the next	paragraph.	. , , , , , , , , , , , , , , , , , , ,	and (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
basis under specifc I				s carried by your o	able system on a substitute program	relevision
station was carrie	d only on a subs	titute basis.	. ,	•	ent and Program Log)—if the	
	information cond				ute basis and also on some other f the general instructions located	
Column 1: List ea	ach station's call	-			s such as HBO, ESPN, etc. Identify	
cast stream as "WE			•	•	tion. For example, report multi- n stream separately; for example	
WETA-simulcast). Column 2: Give t	he channel num	ber the FCC h	as assigned to	the television stati	on for broadcasting over-the-air in	
on which your cable	system carried th	ne station.			may be different from the channel	
					pendent station, or a noncommercial ast), "I" (for independent), "I-M"	
(for independent mul	ticast), "E" (for n	oncommercia	l educational), c	or "E-M" (for nonco	mmercial educational multicast).	
For the meaning of to Column 4: If the					ne paper SA3 form. es". If not, enter "No". For an ex-	
planation of local ser						
•			•	•	stating the basis on which your ering "LAC" if your cable system	
carried the distant st	•				. ,	
					r payment because it is the subject stem or an association representing	
•			•		ry transmitter, enter the designa-	
					her basis, enter "O." For a further d in the paper SA3 form.	
					to which the station is licensed by the	
Note: If you are utiliz				•	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AL		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
				<u>.</u>		
			•			
	····					
	·····			<u> </u>		
			•	<u> </u>		
				_		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				007417	
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
					and low power television stations) d only on a part-time basis under	G
	, ,	•		` '	ain network programs [sections	
(/(/	` , ` ,	,	•	1(e)(2) and (4))]; a	nd (2) certain stations carried on a	Primary
substitute program bas				carried by your o	able system on a substitute program	Transmitters: Television
basis under specifc FC				carried by your c	able system on a substitute program	relevision
 Do not list the station station was carried 	n here in space only on a subs	G—but do lis titute basis.	t it in space I (th	•	ent and Program Log)—if the	
,	•				ute basis and also on some other	
in the paper SA3 fo		erning substit	ute basis station	is, see page (v) o	f the general instructions located	
		sign. Do not r	eport origination	program services	s such as HBO, ESPN, etc. Identify	
			•	•	tion. For example, report multi-	
cast stream as "WETA WETA-simulcast).	\-2". Simulcast	streams must	be reported in o	column 1 (list each	n stream separately; for example	
,	e channel numb	per the FCC h	as assigned to t	he television stati	on for broadcasting over-the-air in	
			-		may be different from the channel	
on which your cable sy	,		_#: : .			
					pendent station, or a noncommercial ast), "I" (for independent), "I-M"	
•	-	,	, ,		mmercial educational multicast).	
For the meaning of the						
planation of local servi			•	,	es". If not, enter "No". For an ex-	
					stating the basis on which your	
•		•	٠.	•	ering "LAC" if your cable system	
carried the distant stat	•					
					r payment because it is the subject tem or an association representing	
•				•	ry transmitter, enter the designa-	
` ' '			•	•	her basis, enter "O." For a further	
					d in the paper SA3 form. to which the station is licensed by the	
				•	which the station is identified.	
Note: If you are utilizing				•		
		CHANN	EL LINE-UP	AM		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
					<u> </u>	
				1		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
CABLE ONE, IN	IC.				007417	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space of carried by your cable is FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute program bas Substitute Program bas Substitute Program bas Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List 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 heable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify every system during the consine effect or 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(y television standard y television y televi	period, except all, permitting the seferring to 76.6 coaragraph. It is a seferring to 76.6 coaragraph. It is a seferring to 76.6 coaragraph. It is in space I (the seferring to report origination cording to its over the seferring	(1) stations carried e carriage of certa 1(e)(2) and (4))]; a carried by your context of both on a substitute, see page (v) on program services er-the-air designaticolumn 1 (list each column 1 (list each column 1). This rk station, an indefor network multicar "E-M" (for noncontions located in the first of the column 5, so the column 5, so the column 1 (listed that it is not the column 5, so the column 5, so the column 5, so the column 6, so the	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing	ig munipie chai	•		•	спаппет ше-ир.	
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	
					•	
		I		1		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				007417	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
		,	, ,		and low power television stations)	^
• •		-		• •	d only on a part-time basis under	G
				•	nin network programs [sections] nd (2) certain stations carried on a	Primary
substitute program bas	. , , , , ,	,	-	(e)(2) and (4))], a	ind (2) certain stations carried on a	Transmitters:
				s carried by your c	able system on a substitute program	Television
basis under specifc FC	, 0	,		0		
station was carried	•		t it in space i (th	ie Speciai Stateme	ent and Program Log)—if the	
	,		ation was carried	d both on a substit	ute basis and also on some other	
		erning substit	tute basis station	ns, see page (v) o	f the general instructions located	
in the paper SA3 fo		aian Da nat n	onart origination	nrogram continu	a qual as HBO ESDN ata Idantify	
		-		. •	s such as HBO, ESPN, etc. Identify tion. For example, report multi-	
			•	•	n stream separately; for example	
WETA-simulcast).						
			-		on for broadcasting over-the-air in	
on which your cable sy	•		annei 4 in vvasn	ington, D.C. This	may be different from the channel	
			ation is a netwo	rk station, an inde	pendent station, or a noncommercial	
	•	•	,. ,		ast), "I" (for independent), "I-M"	
	,		,.	,	mmercial educational multicast).	
For the meaning of the Column 4: If the st					es". If not, enter "No". For an ex-	
planation of local servi			•	,		
•			•	•	stating the basis on which your	
cable system carried t carried the distant stat		_		•	ering "LAC" if your cable system	
	•				payment because it is the subject	
					tem or an association representing	
•			•		y transmitter, enter the designa-	
` '			•	•	her basis, enter "O." For a further d in the paper SA3 form.	
					to which the station is licensed by the	
				•	which the station is identifed.	
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AO		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
					 	
					<u> </u>	
	1	1			1	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
CABLE ONE, IN	IC.				007417	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space of carried by your cable is FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Subasis under specific FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 for Column 1: List 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 heable system carried the distant state For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the FCC. For Mexican or Column 6: Give the FCC.	G, identify every system during the cons in effect or 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(y television standard y television y television standard y television standard y television y television y television y television y	period, except all, permitting the seferring to 76.6 coaragraph. It distant stations orizations: to the seferring to 76.6 coaragraph. It distant stations orizations: to the seferring period as a sation is a network seferring to the seferring to the seferring the seferr	(1) stations carried e carriage of certa 1(e)(2) and (4))]; a carried by your context of both on a substitute, see page (v) on program services er-the-air designaticolumn 1 (list each column 1 (list each column 1). This rk station, an indefor network multicar "E-M" (for noncoptions located in the distant"), enter "Ye ions located in the specific program is not to the column 5, so the column 1, so the column 1 (list each column 1) and lindicate by entitivated channel of subject to a royalty tween a cable system ing the primar channel on any of instructions locate list the community with the community with	es". If not, enter "No". For an expaper SA3 form. stating the basis on which your dering "LAC" if your cable system capacity. If payment because it is the subject of the or an association representing the transmitter, enter the designation the paper SA3 form. If to which the station is licensed by the which the station is identifed.	G Primary Transmitters: Television
Note: If you are utilizing	.9	•		•		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.					CVCTEM ID#	<u> </u>
CABLE ONE, II		STEM:			SYSTEM ID# 007417	Name
PRIMARY TRANSMITT		N			007417	
			ation (including	translator stations	and law power television stations)	
In General: In space carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program be Substitute Basis basis under specifc F • Do not list the station station was carried • List the station here basis. For further i in the paper SA3 fc Column 1: List ea each multicast stream cast stream as "WETA-simulcast). Column 2: Give the its community of licen on which your cable s Column 3: Indicat educational station, b (for independent mult For the meaning of th	G, identify ever system during to the tions in effect of 6.61(e)(2) and (1) sis, as explaine Stations: With CC rules, regular neric in space 1 only on a substand also in spanformation concorm. Ch station's call nessociated with A-2". Simulcast the channel number se. For example ystem carried the in each case by entering the lecast), "E" (for nesse terms, see tation is outside	y television st he accounting n June 24, 199 4), or 76.63 (r 4), or 76.63 (r 4) do in the next respect to any ations, or auth G—but do lis titute basis. ace I, if the sta cerning substiff sign. Do not r h a station ac streams must ber the FCC he e, WRC is Chane station. whether the stater "N" (for no concommercia page (v) of the	period, except 81, permitting the seferring to 76.6 paragraph. It distant stations orizations: It it in space I (the station was carried tute basis station report origination cording to its over the service as assigned to the station is a network station is a network setwork), "N-M" (I educational), of egeneral instructice area, (i.e. "Cording to its over the service and the service area, (i.e. "Cording to its over the service area, (i.e. "Cording to its over the service area, (i.e. "Cording to 75.0").	(1) stations carried e carriage of certa (e)(2) and (4))]; a carried by your context of the carried by your carried by y	es". If not, enter "No". For an ex-	G Primary Transmitters: Television
cable system carried carried the distant sta For the retransmis of a written agreemen the cable system and tion "E" (exempt). For explanation of these t Column 6: Give the	the distant statiction on a part-tiction of a distant tentered into o a primary trans simulcasts, als hree categories te location of ea	on during the me basis becat multicast strends or before Jumitter or an aco enter "E". If , see page (v) ich station. Fo	accounting period ause of lack of a geam that is not so ane 30, 2009, be association repre- you carried the pof the general in U.S. stations,	d. Indicate by ent ctivated channel of ubject to a royalty tween a cable sys- senting the primal channel on any of instructions locate list the community	stating the basis on which your lering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designather basis, enter "O." For a further in the paper SA3 form. y to which the station is licensed by the which the station is identifed.	
Note: If you are utilizi		. ,		•		
		CHANN	EL LINE-UP	AR		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						,
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, IN	IC.				007417	Hamo
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multifor the meaning of the Column 4: If the steplanation of local server Column 5: If you he cable system carried the distant state. For the retransmission a written agreement.	G, identify every system during the constructions in effect or 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and as explained as here in space only on a substand also in spanformation concorm. The station's call associated with a system carried the in each case we are entering the leastly "E" (for not east), "e" (f	y television stane accounting in June 24, 198 4), or 76.63 (r d in the next prespect to any attions, or auth G—but do list titute basis. Ince I, if the state erning substitute sign. Do not reast a station acceptation acceptation of the station. It is station, whether the station whether the station acceptage (v) of the the local servage (v) of the est in column on during the ame basis becamulticast stream or before June 24, 198 4.	period, except al, permitting the eferring to 76.6° coaragraph. It is a special to the eferring to 76.6° coaragraph. It is a special to the eferring to 76.6° coaragraph. It is a special to the effect of the effec	(1) stations carried e carriage of certa (e)(2) and (4))]; a carried by your cast carried by your carri	es". If not, enter "No". For an ex- e paper SA3 form. estating the basis on which your ering "LAC" if your cable system capacity. expanding the payment because it is the subject etem or an association representing	G Primary Transmitters: Television
of a written agreement the cable system and tion "E" (exempt). For explanation of these th Column 6: Give the	t entered into of a primary trans simulcasts, also ree categories e location of ea Canadian statio	n or before Ju mitter or an as o enter "E". If , see page (v) ch station. Fo ns, if any, give anel line-ups,	ne 30, 2009, be ssociation repre- you carried the of the general i r U.S. stations, e the name of the	tween a cable sys senting the primar channel on any ot nstructions locate list the community the community with space G for each	tem or an association representing by transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. by to which the station is licensed by the which the station is identifed.	
	o DIGAGE		<u> </u>		a LOCATION OF STATION	
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
	NUMBER	STATION	(111111)	(If Distant)		
		i		I	1	

FORM SA3E. PAGE 3.					OVOTEM ID#	1
LEGAL NAME OF OWN		STEM:			SYSTEM ID# 007417	Name
CABLE ONE, II					007417	
PRIMARY TRANSMITT			C C L P			
In General: In space carried by your cable FCC rules and regular 76.59(d)(2) and (4), 7 substitute program basis sunder specific Found It is the station was carried List the station was carried List the station here, basis. For further in the paper SA3 found It is the station has column 1: List ear each multicast stream cast stream as "WETA-simulcast). Column 2: Give the its community of licen on which your cable such as the community of licen on which your cable such column 3: Indicated aducational station, by (for independent multifor the meaning of the Column 4: If the such planation of local server column 5: If your substitute in the column 5: If your substitute in the column 5: If your substitute in the carried by the carried	G, identify ever system during to the tions in effect of 6.61(e)(2) and (1) sis, as explaine Stations: With CC rules, regular nere in space of only on a substand also in spanformation concorm. It is station's call not associated with A-2". Simulcast the channel number of the concorn carried the in each case of yentering the lectors, "E" (for nese terms, see tation is outside rice area, see phave entered "Y	y television state accounting in June 24, 196 (4), or 76.63 (r and in the next perspect to any ations, or auth G—but do list titute basis. ace I, if the state accounting substitions in the state action account in the station account in the station. Whether the state atter "N" (for moncommercial page (v) of the action account in the local servage (v) of the es" in column	period, except 81, permitting the seferring to 76.6 paragraph. If distant stations orizations: It it in space I (the station was carried tute basis station cording to its over the service of the service as assigned to the service as a sation was assigned to the service as a service to the service as a service and I was a a service and I	(1) stations carried e carriage of certa (e)(2) and (4))]; a carried by your of e Special Statemer and both on a substitute of the second of the second of the television statistington, D.C. This rk station, an indefer network multicute of "E-M" (for noncontrolled of the television statistington), part of the station, an indefer network multicute of "E-M" (for noncontrolled of the station), enter "Yellons located in the opplete column 5, since the station of the stati	es". If not, enter "No". For an ex-	G Primary Transmitters: Television
of a written agreemen the cable system and tion "E" (exempt). For explanation of these t Column 6: Give th	sion of a distant t entered into o a primary trans simulcasts, als hree categories te location of ea	t multicast stre n or before Ju mitter or an as o enter "E". If ,, see page (v) ach station. Fo	eam that is not some 30, 2009, be association repreyou carried the form of the general in U.S. stations,	ubject to a royalty tween a cable sys senting the primal channel on any ot nstructions locate list the community	capacity. / payment because it is the subject stem or an association representing ry transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form. / to which the station is licensed by the which the station is identifed.	
Note: If you are utilizi	ng multiple chai	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AT		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name CABLE ONE, INC. 007417 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. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** 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 AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

FORM SA3E. PAGE 5.						ACCOUNTING	6 PERIOD: 2020/2
LEGAL NAME OF OWNER OF	CABLE SYS	ТЕМ:			5	SYSTEM ID#	Name
CABLE ONE, INC.						007417	Name
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEN	IT AND PROGRAM LOG				•
In General: In space I, ident substitute basis during the acexplanation of the programm	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regula	ations, or authorizations. F	or a further	Substitute
1. SPECIAL STATEMENT	CONCER	NING SUBST	ITUTE CARRIAGE				Carriage:
During the accounting per broadcast by a distant stat		ır cable systen	n carry, on a substitute bas	is, any nonne	etwork television program		Special Statement and Program Log
Note: If your answer is "No log in block 2.			ge blank. If your answer is	"Yes," you m	ust complete the progra	m	
2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system and regulations in							
effect on October 19, 1976	•			WHE	EN SUBSTITUTE	7 DEACON	
S	UBSTITUT	E PROGRAM	<u> </u>	CARR	IAGE OCCURRED	7. REASON FOR	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	DELETION	
					_		
	·						
					<u> </u>		
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_	SAJE. FAGE 1.	CVCTEM ID#						
	AL NAME OF OWNER OF CABLE SYSTEM: BLE ONE, INC.	SYSTEM ID# 007417	Name					
Inst all a (as	OSS RECEIPTS tructions: The figure you give in this space determines the form you fle and the amount yamounts (gross receipts) paid to your cable system by subscribers for the system's second identified in space E) during the accounting period. For a further explanation of how to conde (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period.	ndary transmission service	K Gross Receipts					
IMP	PORTANT: You must complete a statement in space P concerning gross receipts.	(Amount of gross receipts)						
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.								
١ ٠	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be ck 3 below.	entered on line 1 of						
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be er elow.	ntered on line 2 in block						
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoul block 4 below.	ld be entered on line						
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.	is 1.064 percent of the						
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064	\$ 6,644,734.86						
	Enter the result here. This is your minimum fee.	\$ 70,699.98						
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the ir space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period X Yes—Complete the DSE schedule. No—Leave block 3 below blank and column to the column television stations.	n 4, you must check d?						
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$ 13,439.51						
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00						
	Line 3. Add lines 1 and 2 and enter here	\$ 13,439.51						
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	\$ 70,699.98	Cable systems					
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.	0.00	submitting additional deposits under					
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	Section 111(d)(7) should contact					
	Line 4. FILING FEE	\$ 725.00	the Licensing additional fees. Division for the					
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 71,424.98	appropriate form for submitting the					
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (S general instructions located in the paper SA3 form for more information.)	See page (i) of the	additional fees.					

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name CABLE ONE, INC. 007417 PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.- 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.-12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS** HOURS DATE FROM TO DATE FROM TO

ACCOUNTING PERIOD: 2020/2

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC.		SYSTEM ID# 007417
M		of channels on which the cable system carried television bro	
Channels	Enter the total number of channels on which system carried television broadcast station	ch the cable	19
	Enter the total number of activated channel on which the cable system carried television and nonbroadcast services		282
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURT we can contact about this statement of account	THER INFORMATION IS NEEDED: (Identify an individual unt.)	
Be Contacted for Further Information	Name EMERSON YEARWOOD	Tel	ephone 602-364-6195
	Address 210 E. EARLL DRIVE (Number, street, rural route, apartment, or PHOENIX, AZ 85012-2626		
	(City, town, state, zip) Email emerson.yearwood		2-364-6013
0	CERTIFICATION (This statement of account m	nust be certifed and signed in accordance with Copyright Offi	ce regulations.)
Certifcation	I, the undersigned, hereby certify that (Check c		
	_	ship) I am the owner of the cable system as identifed in line 1 or r partnership) I am the duly authorized agent of the owner of the	
	in line 1 of space B and that the owne X (Officer or partner) I am an officer (if a corp	oration) or a partner (if a partnership) of the legal entity identife	•
		hereby declare under penalty of law that all statements of fact ny knowledge, information, and belief, and are made in good fai	
	X /s/ Raymon	nd Storck	
	(e.g., /s/ John Smith). Be	ure on the line above using an "/s/" signature to certify this stateme fore entering the first forward slash of the /s/ signature, place your your name. Pressing the "F" button will avoid enabling Excel's Lot	cursor in the box and press the "F2"
	Typed or printed name	E RAYMOND STORCK	
	Title: VICE PRES	SIDENT cial position held in corporation or partnership)	
	Date: February 25, 2	021	

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 this 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.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name
CABLE ONE, INC. 007417	114
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	Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Name Mailing Address	
INTEREST ASSESSMENTS	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
xdays	
Line 3 Multiply line 2 by the number of days late and enter the sum here	-
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,	
space L, (page 7)	
(interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.	
Owner Address	
First community served	
Accounting period	
ID number	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this 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: 2020/2

DSE SCHEDULE. PAGE 10.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerical 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 account (page 3), a distant station is:

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

Step 2: Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space G of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station 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 particular 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 a television market added stations after June 24, 1981, that would not have been permitted under FCC rules, regulations, and authorizations (hereafter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge.

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

The Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable 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 pernitted 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 station 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 Syndicated 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 pursuant to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/or
 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 in
 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.

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; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

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

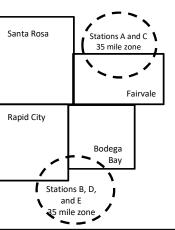
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

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 Carr	iea	identification	of Subscriber Groups	
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
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 DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00
				•

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6,384.00

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

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: 2020/2

4	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID 00741										
1											
	SUM OF DSEs OF CATEGO	ORY "O" STATION	IS:			1					
	Add the DSEs of each stati										
	Enter the sum here and in lir	ne 1 of part 5 of this	schedule.	.	0.75						
	Instructions:					-					
2	In the column headed "Cal	II Sign": list the call	signs of all distant stations	s identified by the	letter "O" in column 5						
Commutation	of space G (page 3).	E": for each indepe	endant station, give the DSI	= 00 "1 O": for 00	ah natwark ar nanaam						
Computation of DSEs for	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."										
Category "O"	CATEGORY "O" STATIONS: DSEs										
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
	WDSU	0.250									
	WKRG	0.250				•					
	WYES	0.250		<u></u>		······································					
						•					
				···							
Add rows as				···							
necessary.				···		•					
Remember to copy all				 -							
formula into new				''' 		······································					
rows.		······		 -							
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N	LEGAL NAME OF C	WNER OF CABLE SYSTEM:						;	SYSTEM ID#
Name	CABLE ONE	, INC.							007417
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should of Column 3 Column 4 be carried out Column 5 give the type-v Column 6	at the call sign of all distar : For each station, give the correspond with the inform : For each station, give th : Divide the figure in colur at least to the third decim : For each independent si	ne number of hation given in the total number of the figure of the figur	nours your cable system space J. Calculate only or of hours that the static gure in column 3, and gives the "basis of carriage e "type-value" as "1.0." For the system of	carried the station one DSE for each on broadcast over to ve the result in dec value" for the stati For each network of	during the act attention. The air during the air during timals in coluron. The representation on the column on the column of the	the accountir nn 4. This fig rcial educatio	ng period. Jure must nal station, than the	
Capacity		(CATEGOR	Y LAC STATIONS:	COMPUTATIO	ON OF DS	Es		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	JRS :D BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAGI VALUE		5. TYPE VALUE	6. DS	SE
			÷		=	X		=	
			÷ ÷		=	x x		=	
			÷		=	x		=	
			÷		=	x		=	
			÷		<u> </u>	X		=	
			÷		=	x x		=	
	Add the DSEs of	OF CATEGORY LAC ST of each station. m here and in line 2 of pa		nedule,			0.00		
Computation of DSEs for Substitute-Basis Stations	Column 1: Giv. • Was carried tions in effe • Broadcast o space I). Column 2: I at your option. Tolumn 3: I Column 4: I	e the call sign of each sta by your system in substit ct on October 19, 1976 (a ne or more live, nonnetwo For each station give the I This figure should corresp Enter the number of days Divide the figure in column 'his is the station's DSE (I	ution for a prous shown by the programs du number of live pond with the in the calendan 2 by the figu	ogram that your system of the letter "P" in column 7 ouring that optional carriage, nonnetwork programs information in space I. ar year: 365, except in a re in column 3, and give	was permitted to do of space I); and ge (as shown by the carried in substitut leap year. the result in colun	elete under Formander Form	CC rules and column 2 of ams that were ono less tha	e deleted n the third	
		Sl	JBSTITUTE	E-BASIS STATION	S: COMPUTA	TION OF D	SEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMB OF DA' IN YEA	YS	1. CALL SIGN	2. NUM OF PRO	BER GRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		4		=			÷ -		=
			+	=			÷		=
		-	÷ =						=
		=		<u>=</u>			÷		=
	Add the DSEs of	OF SUBSTITUTE-BASIS of each station. m here and in line 3 of pa	S STATIONS:		▶		0.00		-
5		R OF DSEs: Give the ame		boxes in parts 2, 3, and	4 of this schedule a	and add them	to provide the		
Total Number	1. Number of DSEs from part 2 ●								
of DSEs	2. Number of DSEs from part 3 • • • • • • • • • • • • • • • • • •								
	3. Number	of DSEs from part 4 ●						0.00	
	TOTAL NUMBE	R OF DSEs					> [0.75

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2020/2

	WNER OF CABLE S	YSTEM:					S	YSTEM ID#	Name
CABLE ONE, I	NC.							007417	Name
Instructions: Bloc In block A:	ck A must be comp	leted.							
	"Yes," leave the rer	nainder of pa	rt 6 and part 7	of the DSE schedu	ıle blank and	complete part 8	3, (page 16) of the		6
	"No," complete bloc								Communication of
Is the cable system	n located wholly ou			TELEVISION MA		ion 76 5 of EC	C rules and regula	ations in	Computation of 3.75 Fee
effect on June 24, Yes—Com	1981? oplete part 8 of the s	schedule—D0	•				o rules and regula	uons m	
X No—Comp	olete blocks B and (C below.							
		BLO	CK B: CARF	RIAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN	FCC rules and re	gulations prio e DSE Sched	r to June 25, 1 lule. (Note: Th	part 2, 3, and 4 of the 1981. For further extended to letter M below refuct of 2010.)	planation of p	ermitted station	ns, see the	·	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rul A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerica D Grandfathered instructions foi E Carried pursua *F A station prev	les and regulated pursuant to on as defined all educational station (76.6 r DSE scheduint to individuatiously carried HF station wi	ations cited be to the FCC mare in 76.5(kk) (76) I station [76.59 5) (see paragrule). all waiver of FC don a part-tim thin grade-B c	e or substitute basi ontour, [76.59(d)(5)	e in effect on a 57, 76.59(b), (1), 76.63(a) is a 3(a) referring the stitution of grass prior to June	June 24, 1981. 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] ndfathered star	.63(a) referring to 61(e)(1) tions in the		
Column 3:	*(Note: For those this schedule to d	stations ider etermine the	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2	?, you must co	mplete the wor	. °	T	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
WDSU	D	0.25							
WKRG WYES	D C	0.25 0.25							
		0.25							
								1.50	
		В	LOCK C: CC	MPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of I	OSEs from p	part 5 of this	schedule					
Line 2: Enter the	sum of permitted	DSEs from	block B abo	ve					
	line 2 from line 1. eave lines 4–7 bl					ate.			
Line 4: Enter gro	oss receipts from	space K (pa	ge 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply I	ine 4 by 0.0375 a	nd enter sur	n here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	s from line 3	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 and	d enter here	and on line	2, block 3, space	L (page 7)			0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. 00741								007417	
BLOCK A: TELEVISION MARKETS (CONTINUED)									
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
WDSU	D	0.25							Computation of 3.75 Fee
WKRG WYES	D C	0.25 0.25							J./ J / GC
WILS		0.23							

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. 007417 Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Computating 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. the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). **Permitted** Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 6. PERMITTED 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT SIGN DSE **PERIOD CARRIAGE** DSE DSE Instructions: Block A must be completed. 7 In block A Computation If your answer is "Yes" complete blocks B and C below If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. of the **Syndicated BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defned by section 76.5 of FCC rules in effect June 24, 1981? X Yes—Complete blocks B and C. No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer or in part, over the cable system? to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC.	SYSTEM ID# 007417	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	6,644,734.86	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? Yes—Complete part 9 of this schedule. X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	E	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ \$		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here	_	
	G. Add lines A, C, and F. This is your surcharge.		
	Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	Yes—Complete part 9 of this schedule. X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the 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)	E	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name		ME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC.										
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.										
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$										
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$										
Surcharge		C. Multiply line B by 3.000 and enter here										
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ <u>\$</u>										
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here										
		F. Multiply line D by line E and enter here										
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)										
		Syndicated Exclusivity Surcharge	<u></u>									
8 Computation of Base Rate Fee	6 was of In bloom of If you blank. What is were lo	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. r answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below										
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS										
	• Did yo	our cable system retransmit the signals of any partially distant television stations during the accounting period?										
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.										
	Section	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE										
	1	Enter the amount of gross receipts from space K (page 7)										
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)										
	Section 3 If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1).											
		B. Enter 0.00701 of gross receipts (the amount in section 1) ▶										
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here										
		D. Multiply line B by line C and enter here										
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	0.00									
		Base Rate Fee	0.00									

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

DSE SCH	EDULE. PAGE 17.				ACCOUNTING	9 PERIOD: 2020/2
	AME OF OWNER OF CABLE SYSTEM: E ONE, INC.				SYSTEM ID# 007417	Name
Section 4	If the figure in section 2 is more than 4.000, compute your bas	e rate fee here	and leave section 3 blank			0
	A. Enter 0.01064 of gross receipts					8
	(the amount in section 1)		<u></u> ► <u>\$</u>			
	B. Enter 0.00701 of gross receipts					Computation
	(the amount in section 1)	<u> </u>				of Base Rate Fee
	C. Multiply line B by 3.000 and enter here		<u> </u>			Dase Rate ree
	D. Enter 0.00330 of gross receipts					
	(the amount in section 1)	> _				
	E. Subtract 4.000 from total DSEs					
	(the figure in section 2) and enter here	>				
	F. Multiply line D by line E and enter here		>	\$		
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)					
	Base Rate Fee		>	\$	0.00	
	TANT: It is no longer necessary to report television signal be reported on a community-by-community basis (subscipation).	criber groups)	if the cable system repo	orted multiple chann	el line-ups in	9

In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this exclusion, you must:

First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. **Finally:** Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.

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 also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, if your cable system is wholly located outside all major television markets, complete block A only.

How to Identify a Subscriber Group for Partially Distant Stations

Step 1: For each community served, determine the local service area of each wholly distant and each partially distant station you carried to that community.

Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by the same token, the station is distant to the subscriber.)

Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable system will have only one subscriber group when the distant stations it carried have local service areas that coincide.

Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber groups.

In each section:

- Identify the communities/areas represented by each subscriber group.
- Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the subscribers in the group.
- If
- 1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, and 4 of this schedule; or,
- 2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, part 6 of this schedule.
- \bullet Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.
- Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions in the paper SA3 form.
- Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your actual calculations on the form.

Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations, and
for Partially
Permitted
Stations

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007417 CABLE ONE, INC. Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

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

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP FIRST SUBSCRIBER GROUP COMMUNITY/ AREA OCEAN SPRINGS, PORTIONS OF CALL SIGN DSE CALL SIG	# 7 Name
COMMUNITY/ AREA OCEAN SPRINGS, PORTIONS OF CALL SIGN DSE CALL SI	
CALL SIGN DSE CA	9
WYES 0.25	Computation
Total DSEs	of
Total DSEs	Base Rate Fee
	and Syndicated
	Exclusivity
	Surcharge
	for Partially
	Distant
	Stations
Base Rate Fee First Group \$ 2,627.66 Base Rate Fee Second Group \$ 0.00	
THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP]
COMMUNITY/ AREA BILOXI, HARRISON COUNTY COMMUNITY/ AREA HARRISON CO (DIAMONDHEAD), G	!
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE]
WYES 0.25 WYES 0.25	
Total DSEs	.]
Gross Receipts Third Group \$ 1,553,133.18 Gross Receipts Fourth Group \$ 2,434,626.13	-
Base Rate Fee Third Group \$ 4,131.33 Base Rate Fee Fourth Group \$ 6,476.11	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7) \$ 13,439.51	7

CABLE ONE, INC.		E SYSTEM:				\$	O07417	Name
	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACI	H SUBSCRI	BER GROUP		
		SUBSCRIBER GROU				SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA	HANCO	OCK COUNTY (DIA	MONDH	COMMUNITY/ AREA	VANCLE	AVE		Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
				WYES	0.25			and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.25	
Gross Receipts First Group \$ 207,529.81			,529.81	Gross Receipts Second Group \$ 76,844.70				
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	204.41	
	SEVENTH	SUBSCRIBER GROU	JP		EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····							
	····							
								
Total DSEs			0.00	Total DSEs			0.00	
	_							
Gross Receipts Third (roup	\$	0.00	Gross Receipts Fourt	n Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
				Ш				
Base Rate Fee: Add th	ne hase rat	e fees for each subsci	iher aroup	as shown in the hoves	ahove			
Enter here and in block			isoi gioup a	STOWN IN THE DONGS O		\$		

CABLE ONE, INC		LE SYSTEM:				5	007417	Name
				ATE FEES FOR EAC				
COMMUNITY/ AREA		SUBSCRIBER GRO)UP 0	COMMUNITY/ ARE		1 SUBSCRIBER GROU	JP 0	9
COMMONITY AREA				COMMONT IT ARE		Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and Syndicated
								Exclusivity
								Surcharge
				.				for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GRO	OUP 0	COMMUNITY/ ARE		1 SUBSCRIBER GROU	JP 0	
COMMONITY AREA				COMMONT IT ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Gross Receipts Third Group \$ 0.00			Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, IN		LE SYSTEM:				S	007417	Name
	HIRTEENTH	COMPUTATION C SUBSCRIBER GRO	UP	11	OURTEENTH	IBER GROUP I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	FIFTEENTH	SUBSCRIBER GRO)UP		SIXTEENTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	007417	Name
	'ENTEENTH	COMPUTATION O SUBSCRIBER GRO	UP	11	EIGHTEENTH	IBER GROUP I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
				.				
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GRO)UP 0	COMMUNITY/ ARE		H SUBSCRIBER GROU	JP 0	
COMMONT TO AREA			<u>U</u>	COMMONT 1/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				5	007417	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO		TI .		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		11		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	e	0.00	Base Rate Fee Fou	rth Group	e	0.00	
Dass Rate 66 Hills	Отоир	<u></u>	0.00	Just Male 1 66 1 00	.ai Gioup	\$	0.00	
			criber group	as shown in the boxes	above.			
Enter here and in blo	ck 3, line 1, s	space L (page 7)				\$		

CABLE ONE, INC.		LE SYSTEM:				S	007417	Name
				TE FEES FOR EAC				
TWEI COMMUNITY/ AREA	NTY-FIFTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ ARE		SUBSCRIBER GROU	JP 0	9
COMMUNITY AREA				COMMONT 1/ ARE	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
	<u>.</u>							for Partially
	····			-				Distant
								Stations
				.				
T-t-LDCC-			0.00	Tatal DCCa			0.00	
Total DSEs 0.00				Total DSEs 0.00				
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	-SEVENTH	SUBSCRIBER GRO		H		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
	<u>.</u>							
				-				
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	ne base rat k 3, line 1, s	te fees for each subso space L (page 7)	criber group a	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				5	007417	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO				1 SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
			0.00				0.00	
Total DSEs 0.00				Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		11		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	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	
				Н				
Base Rate Fee: Add Enter here and in block			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	007417	Name
	RTY-THIRD	COMPUTATION C SUBSCRIBER GRO	UP	11	RTY-FOURTH	IBER GROUP I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
			<u>.</u>					and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs	<u> </u>	'	0.00	Total DSEs	•		0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GRO	OUP 0	COMMUNITY/ ARE		1 SUBSCRIBER GROU	JP O	
COMMONT IT AREA				COMMONT I/ AICE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				5	007417	Name
				ATE FEES FOR EAG				
		SUBSCRIBER GRO		TI .		1 SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TH	IRTY-NINTH	SUBSCRIBER GRO)UP		FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee Third	I Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, IN		LE SYSTEM:				\$	007417	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO)UP	TI .		SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thire	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
			criber group	as shown in the boxes	above.	6		
Enter here and in blo	ик э, IINE 1, S	space L (page /)				\$		

CABLE ONE, INC		LE SYSTEM:				5	007417	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		ii —		1 SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
				-				Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO	UP			SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
							$\neg \neg $	
Base Rate Fee Third	I Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
			criber group	as shown in the boxes	above.			
Enter here and in blo	ck 3, line 1, s	space L (page 7)				\$		

CABLE ONE, INC		E SYSTEM:				S	007417	Name
				TE FEES FOR EAC				
COMMUNITY/ AREA		SUBSCRIBER GRC	0 	COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
							- 32	Base Rate Fee and
								Syndicated Exclusivity Surcharge
								for Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (-	\$	0.00	Base Rate Fee Sec		\$ SUBSCRIBER GROU	0.00	
COMMUNITY/ AREA		SUBSCRIBER GRO	0 	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in blood	the base rat	te fees for each subsequence L (page 7)	criber group a	as shown in the boxes	above.	\$		

OOK A COMPUTATION OF THE THE	007417	
OCK A: COMPUTATION OF BASE RATE FEES THIRD SUBSCRIBER GROUP	FIFTY-FOURTH SUBSCRIBER GROUP	
	TY/ AREA 0	9
U COMINIO		omput
DSE CALL SIGN DSE CALL S		of
		ase Rate
		and
	S	Syndica
	E	Exclusiv
	s	Surchar
		for
		Partial
		Distan
		Station
0.00	0.00	
0.00 Sross Re	eipts Second Group \$ 0.00	
o \$ 0.00 Base Rai	Fee Second Group \$ 0.00	
TI T		
-FIFTH SUBSCRIBER GROUP	FIFTY-SIXTH SUBSCRIBER GROUP	
	FIFTY-SIXTH SUBSCRIBER GROUP ITY/ AREA 0	
0 COMMUI	TY/ AREA 0	
	TY/ AREA 0	
0 COMMUI	TY/ AREA 0	
0 COMMUI	TY/ AREA 0	
0 COMMUI	TY/ AREA 0	
0 COMMUI	TY/ AREA 0	
0 COMMUI	TY/ AREA 0	
0 COMMUI	TY/ AREA 0	
0 COMMUI	TY/ AREA 0	
0 COMMUI	TY/ AREA 0	
0 COMMUI	TY/ AREA 0	
0 COMMUI	TY/ AREA 0	
0 COMMUI	TY/ AREA 0	
0 COMMUI	TY/ AREA 0	
0 COMMUI	TY/ AREA 0	
0 COMMUI	TY/ AREA 0	
0 COMMUI	TTY/ AREA O CALL SIGN DSE CALL SIGN DSE	
OSE CALL SIGN DSE CALL SIGN DS	TTY/ AREA O CALL SIGN DSE CALL SIGN DSE O O O O O O O O O O O O O	
OSE CALL SIGN DSE CALL SIGN DS	TTY/ AREA O SN DSE CALL SIGN DSE O O O O O O O O O O O O O	
OSE CALL SIGN DSE CALL SIGN OSE CAL	GN DSE CALL SIGN DSE CALL SIGN DSE O.000 eipts Fourth Group \$ 0.000	
OSE CALL SIGN DSE CALL SIGN OSE CAL	TTY/ AREA O CALL SIGN DSE CALL SIGN DSE O O O O O O O O O O O O O	

CABLE ONE, IN		LE SYSTEM:				5	007417	Name
				ATE FEES FOR EAG				
		SUBSCRIBER GRO		ii –		H SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			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
			·····					
			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		-		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	•	Ľ				Ŀ		
			criber group	as shown in the boxes	above.			
Enter here and in blo	ock 3, line 1, s	space L (page 7)				\$		

LEGAL NAME OF OW CABLE ONE, INC		E SYSTEM:				S	007417	Name
	SIXTY-FIRST	COMPUTATION C SUBSCRIBER GRO	UP	11	KTY-SECONE	IBER GROUP SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		TI .		I SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				.				
Total DSEs			0.00	Total DSEs			0.00	
	d Croup	•	0.00		rth Croup	•	0.00	
Gross Receipts Third	а Эгоир	\$	0.00	Gross Receipts Fou	rui Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	007417	Name
	IXTY-FIFTH	COMPUTATION O SUBSCRIBER GRO	UP	11	SIXTY-SIXTH	IBER GROUP I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
				.				Surcharge
								for Partially
								Distant
								Stations
				.				
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO)UP 0	TI .		1 SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA				COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	•		0.00	Total DSEs	•	•	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	007417	Name
				ATE FEES FOR EAC				
	XTY-NINTH	SUBSCRIBER GRO		11		I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Stations
			···					
Total DSEs		· ·	0.00	Total DSEs	'		0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
			1					
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	NTY-FIRST	SUBSCRIBER GRO		11		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE.				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	e	0.00	Base Rate Fee Fou	rth Group	¢	0.00	
Dase Nate Fee Hill(0)	отоир	\$	0.00	Dase Nate Fee Fou	ι ι ι Οιυυρ	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				5	007417	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO		TI .		1 SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		TI .		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
Base Rate Fee Third	Group	¢	0.00	Base Rate Fee Fou	orth Group	¢	0.00	
Dass Nate 66 Hills	Отоир	\$	0.00	Dusc Nate 1 66 1'00	Стоир	\$	0.00	
			criber group	as shown in the boxes	above.			
Enter here and in blo	ck 3, line 1, s	space L (page 7)				\$		

CABLE ONE, INC		E SYSTEM:				5	007417	Name
				ATE FEES FOR EAC				
	-SEVENTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			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
			····					Otations
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	
	NTY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			···					
			···					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	e	0.00	Base Rate Fee Fou	rth Group	¢	0.00	
Dase Nate i de Hillu	Отоир	\$	0.00	Dase Nate Fee Pou	rai Gioup	\$	0.00	
Base Rate Fee: Add to Enter here and in bloo			criber group	as snown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	007417	Name
	HTY-FIRST	COMPUTATION C SUBSCRIBER GRO	UP	11	HTY-SECONE	IBER GROUP SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
	••••		···	.	•••••			Distant
								Stations
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		11		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
					-			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				\$	007417	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO		1		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								Syndicated
								Exclusivity
								Surcharge
			<u></u>					for Partially
								Distant
								Stations
			<u></u>			<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00	
		SUBSCRIBER GRO		ii		SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				.				
								
			0.00				2.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			riber group a	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	007417	Name
				ATE FEES FOR EAC			ID.	
EIG COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA	JP 0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third		\$	0.00	Base Rate Fee Fou		\$	0.00	
Base Rate Fee: Add Enter here and in bloc	the base rat ck 3, line 1, s	e fees for each subsc space L (page 7)	criber group a	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	007417	Name
	IETY-THIRD	COMPUTATION C SUBSCRIBER GRO	UP	11	ETY-FOURTH	IBER GROUP I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
				.				
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GRO	OUP 0	ii –		1 SUBSCRIBER GROU	JP O	
COMMONITY AREA				COMMUNITY/ ARE	Α			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	·		0.00	Total DSEs	_		0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				5	007417	Name	
				ATE FEES FOR EAC					
		SUBSCRIBER GRO		11		H SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fee	
								and	
								Syndicated Exclusivity	
								Surcharge	
								for	
								Partially Distant	
								Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
		SUBSCRIBER GRO		11		H SUBSCRIBER GROU	UP 0		
COMMUNITY/ AREA			0	COMMUNITY/ ARE					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	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		
Dass Nate 66 Hills	Отоар	<u></u> \$	0.00	Just Male 1 66 1 00	.ai Gioup	\$	0.00		
			criber group	as shown in the boxes	above.				
Enter here and in blo	ck 3, line 1, s	space L (page 7)				\$			

CABLE ONE, INC		E SYSTEM:				5	007417	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			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
		H	····		•••••			Otations
				.				
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 HUND	RED THIRD	SUBSCRIBER GRO	UP	ONE HUNDS	RED FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			···					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC.		E SYSTEM:				S	007417	Name
				ATE FEES FOR EAC				
	RED FIFTH	SUBSCRIBER GRO		tt –		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			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
	<u></u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec		\$	0.00	
	SEVENTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
			···					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Foun	rth Group	\$	0.00	
Base Rate Fee: Add th			riber group	as shown in the boxes	above.			
Enter here and in block	3, line 1, s	space L (page 7)				\$		

CABLE ONE, INC.		E SYSTEM:				S	007417	Name	
				TE FEES FOR EAC					
	ED NINTH	SUBSCRIBER GROU		 		SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fee	
								and	
								Syndicated Exclusivity	
	···		···				·····	Surcharge	
								for	
								Partially	
								Distant	
	····		···					Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	0.00		
	LEVENTH	SUBSCRIBER GROU		H		SUBSCRIBER GROU			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	····		···						
	····		···	-					
			•••••••••••••••••••••••••••••••••••••••						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Foul	rth Group	\$	0.00		
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00		
				Ш					
Base Rate Fee: Add th Enter here and in block			riber group a	as shown in the boxes	above.	\$			

CABLE ONE, INC		E SYSTEM:				S	007417	Name
	HIRTEENTH	COMPUTATION C SUBSCRIBER GRO	UP	TI .	OURTEENTH	IBER GROUP I SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge for
			····					Partially
								Distant
								Stations
			····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED	FIFTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	SIXTEENTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	007417	Name
				ATE FEES FOR EAC				
ONE HUNDRED SEV		SUBSCRIBER GROU	<u>JP</u> 0	ONE HUNDRED I		SUBSCRIBER GROU	JP 0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
				.				Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GROU		ti -		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
			···					
			-					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

CABLE ONE, IN		LE SYSTEM:				S	007417	Name
	WENTY-FIRST	COMPUTATION C	UP	TI .	ENTY-SECONI	IBER GROUP SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
				.				Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TV	VENTY-THIRD	SUBSCRIBER GROU	Р	ONE HUNDRED TW	ENTY-FOURTI	H SUBSCRIBER GROUP)	
COMMUNITY/ AREA	Α		0	COMMUNITY/ ARE.	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
	d C	_			ndh Cana	•		
Gross Receipts Third	и отоир	\$	0.00	Gross Receipts Fou	тит Стоир	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	007417	Name
				ATE FEES FOR EAC				
	NTY-FIFTH	SUBSCRIBER GROUP		tt –		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	<u></u>							and Syndicated
								Exclusivity
	<u></u>							Surcharge
								for
								Partially
								Distant
			····				·····	Stations
	<u></u>							
							0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED TWENTY	-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED TW	ENTY-EIGHTH	SUBSCRIBER GROUP	'	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>						<u></u>	
	······································							
	<u> </u>							
	<u></u>							
	<u></u>							
			 					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group a	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				\$	007417	Name
	BLOCK A:	COMPUTATION O	BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED TW	ENTY-NINTH	SUBSCRIBER GROUP				SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
			<u> </u>					for
								Partially
								Distant
								Stations
			<u>.</u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED T	HIRTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED TH	IRTY-SECONE	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>					
			<u> </u>					
				.				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	c	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Cross Receibts Hilld	Group	\$	0.00	TOTO33 Necelbis Fou	гат Огоир	Ψ	<u> </u>	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Foun	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	007417	Name
ONE HUNDRED THE	HIRTY-THIRD	COMPUTATION C		ONE HUNDRED TH	IIRTY-FOURTI	IBER GROUP SUBSCRIBER GROUP	0	9
O O WINTER TO THE PARTY OF THE								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED T	HIRTY-FIFTH	SUBSCRIBER GROU	Р	ONE HUNDRED	THIRTY-SIXTI	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
_							2.22	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	007417	Name
ONE HUNDRED THIR	TY-SEVENTH			ONE HUNDRED TO	HIRTY-EIGHTH	IBER GROUP SUBSCRIBER GROUP	0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED T	HIRTY-NINTH	SUBSCRIBER GROU	P	ONE HUNDRE	D FORTIETH	H SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, IN		LE SYSTEM:				S	007417	Name
ONE HUNDRED	FORTY-FIRST	COMPUTATION C		ONE HUNDRED FO	ORTY-SECONI	IBER GROUP SUBSCRIBER GROUP	0	9
001111111111111111111111111111111111111								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	<u>'</u>		0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GROU		ii		SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
·	•				•			
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	007417	Name
В	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED FO	RTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED	FORTY-SIXTH	SUBSCRIBER GROUP	1	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α			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	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FORTY	-SEVENTH	SUBSCRIBER GROUP	1	ONE HUNDRED F	ORTY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			······································					
			-					
				.				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
				••				
Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes	above.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	007417	Name
				TE FEES FOR EAC				
ONE HUNDRED FOR	TY-NINTH	SUBSCRIBER GROU		 		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
			<u>.</u>				·····	Syndicated Exclusivity
			<u>-</u>				·····	Surcharge
								for
								Partially
								Distant
								Stations
			-					
	<u></u>		<u>.</u>	-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIF	TY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>					
			<u>.</u>					
			-					
			ļ			-		
	<u> </u>		<u>.</u>			-		
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block	e base rat 3, line 1, s	e fees for each subsc space L (page 7)	riber group a	as shown in the boxes	above.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	007417	Name
				ATE FEES FOR EAC				
	TY-THIRD	SUBSCRIBER GROU		II		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	<u></u>							and Syndicated
								Exclusivity
								Surcharge
								for
	<u> </u>							Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	TY-FIFTH	SUBSCRIBER GROU		ti –		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				.				
	<u></u>							
Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
_	_		_					
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e tees for each subsc space L (page 7)	riber group a	as shown in the boxes	above.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	007417	Name
				TE FEES FOR EAC	H SUBSCR	BER GROUP		
ONE HUNDRED FIFTY	-SEVENTH	SUBSCRIBER GROUP)	ONE HUNDRED	FIFTY-EIGHTH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
			<u></u>					Syndicated
	<u></u>		<u></u>				<u></u>	Exclusivity Surcharge
			 					for
			<u> </u>					Partially
								Distant
								Stations
	<u> </u>							
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	FTY-NINTH	SUBSCRIBER GROUP		 		SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
	<u> </u>		<u> </u>					
	<u></u>							
	······································							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block	e base rat 3, line 1, s	e fees for each subsc space L (page 7)	riber group a	as shown in the boxes	above.	\$		

CABLE ONE, INC.		LE SYSTEM:				\$	007417	Name
	BLOCK A:	COMPUTATION	OF BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GRO	DUP		SECON	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	OCEAN	N SPRINGS, POF	RTIONS OF	COMMUNITY/ AREA	PASCA	ASCAGOULA, ESCATAWPA, PORT		9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
							······	and
								Syndicate Exclusivit
	····						······	Surcharge
	····				•			for
								Partially
								Distant
								Stations
		.						
	<u></u>							
		Ш	0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$ 98	37,842.74	Gross Receipts Secon	d Group	\$ 1,3	384,758.30	
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	DUP		FOURTH	H SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	BILOX	I, HARRISON CO	UNTY	COMMUNITY/ AREA	HARRIS	SON CO (DIAMON	DHEAD), GI	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u>.</u>	.						
	<u></u>						······	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$ 1,55	3,133.18	Gross Receipts Fourth	Group	\$ 2,4	434,626.13	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th	ne base ra i	te fees for each subs	scriber group	as shown in the boxes at	oove.			
Enter here and in block			.s.issi gisapi	20 Shown in the boxes di		\$	0.00	I

		E SYSTEM:				\$	6YSTEM ID# 007417	Name
	3LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
	FIFTH	SUBSCRIBER GROU	JP		SIXTH	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA	HANCO	OCK COUNTY (DIA	MONDH	COMMUNITY/ AREA	VANCL	EAVE		9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<u></u>							Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
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					<u></u>			
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 207	,529.81	Gross Receipts Secon	d Group	\$	76,844.70	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	SEVENTH	SUBSCRIBER GROU	JP		EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				ii –				
	1							
Total DSEs			0.00	Total DSEs			0.00	
	Sroup				Group			
Total DSEs Gross Receipts Third (Group	\$	0.00	Total DSEs Gross Receipts Fourth	Group	\$	0.00	

							1	
				TE FEES FOR EACH				E
9		SUBSCRIBER GROU	TENTH			SUBSCRIBER GRO	NINTH	
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndicate								
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Surcharg								
for Partially								
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4								
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	nd Group	Gross Receipts Secon	0.00	\$	iroup	ross Receipts First G
	0.00	\$	nd Group	Base Rate Fee Secon	0.00	\$	roup	ase Rate Fee First G
]	JP	SUBSCRIBER GRO	TWELVTH		JP	SUBSCRIBER GRO	LEVENTH	E
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
_	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
			DOL	CALL SIGN				
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	0.00			Total DSEs	0.00			
	0.00	\$				\$		
		\$		Total DSEs	0.00	\$		Total DSEs Gross Receipts Third C
		\$	n Group	Total DSEs	0.00	\$	Group	

CABLE ONE, INC.	J. (DLL	SYSTEM:					007417	Name
				ATE FEES FOR EAC				
	THIRTEENTH SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP INITY/ AREA O COMMUNITY/ AREA					9		
COMMUNITY/ AREA			U	COMMUNITY/ AREA	4		0	Computati
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicate
								Exclusivit Surcharge
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								Partially
								Distant
								Stations
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Γotal DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts First Group	:	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
	- Г							
Base Rate Fee First Group		\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FIFTE	ENTH S	UBSCRIBER GROU	JP		SIXTEENTH	H SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			···					
			•	-				
	11			Total DSEs			0.00	
Total DSEs			0.00					
	-	•	0.00	Cross Bearints Free	rth Cro	•	0.00	
Fotal DSEs Gross Receipts Third Group	-) <u>!</u>	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	

7 Name							C.	
				TE FEES FOR EAC				
9		SUBSCRIBER GRO	GHTEENTH	H		SUBSCRIBER GRO		
Computat	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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and								
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Partially			···		···			
Distant			····		···			
Station								
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.				Total DSEs	0.00			otal DSEs
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	Group	Gross Receipts First G
1								
	0.00	\$	d Group	Base Rate Fee Seco	0.00	\$	Group	ase Rate Fee First G
-	UP	SUBSCRIBER GRO	WENTIETH		UP	SUBSCRIBER GRO	NINTEENTH	N
- -	UP 0	SUBSCRIBER GRO	WENTIETH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GRO		
		CALL SIGN	DSE			SUBSCRIBER GRO		
	0			COMMUNITY/ AREA	0		A	COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0		A	COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0		A	COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0		A	COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0		A	COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0		A	COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0		A	COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0		A	COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0		A	COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0		A	COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0		A	COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0		A	COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0		A	COMMUNITY/ AREA
	DSE			CALL SIGN	DSE		A	CALL SIGN
	0 DSE		DSE	COMMUNITY/ AREA	0 DSE		DSE	CALL SIGN CALL SIGN Cotal DSEs
	DSE		DSE	CALL SIGN	DSE		DSE	CALL SIGN CALL SIGN Total DSEs
	0 DSE	CALL SIGN	DSE	COMMUNITY/ AREA	0 DSE	CALL SIGN	DSE	COMMUNITY/ AREA
	0 DSE	CALL SIGN	DSE DSE	COMMUNITY/ AREA	0 DSE	CALL SIGN	DSE STATE OF THE PROPERTY OF T	CALL SIGN CALL SIGN Fotal DSEs

	007417	S				LE SYSTEM:	R OF CABL	LEGAL NAME OF OWNER CABLE ONE, INC.
		IBER GROUP	I SUBSCRI	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	В
0	JP	SUBSCRIBER GROU	Y-SECOND	TWENT	JP	SUBSCRIBER GRO	TY-FIRST	TWEN
9 Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
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Stations					<mark>.</mark>		<mark>.</mark>	
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	nd Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
		SUBSCRIBER GROU	Y-FOURTH	TWEN ⁻	JP	SUBSCRIBER GRO	TY-THIRD	TWEN
	COMMUNITY/ AREA 0			0		TY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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				Total DSEs	0.00			Total DSEs
	0.00			l i				
	0.00	\$	n Group	Gross Receipts Fourt	0.00	\$	Group	Gross Receipts Third G
		\$	n Group	Gross Receipts Fourt	0.00	\$	Group	Gross Receipts Third G

CABLE ONE, INC.	ABLE SYSTEM:				`	6YSTEM ID# 007417	Name
	A: COMPUTATION (П				
	TH SUBSCRIBER GRO		11		H SUBSCRIBER GRO		9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	٩			Computation
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate Fe
							and
							Syndicated Exclusivity
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							Partially
							Distant Stations
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Total DSEs		0.00	Total DSEs			0.00	
	\$ 0.00				_		
Gross Receipts First Group	*	0.00	Gross Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TWENTY-SEVEN	TH SUBSCRIBER GRO	OUP	TWE	NTY-EIGHTH	SUBSCRIBER GRO	JP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		•••••					
		0.00				0.00	
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	s	0.00	Base Rate Fee Fou	rth Group	\$	0.00	

CABLE ONE, INC.	CABLE SYSTEM:				`	007417	Name
	A: COMPUTATION		ATE FEES FOR EAC				
COMMUNITY/ AREA	NTH SUBSCRIBER GF	0	COMMUNITY/ AREA		H SUBSCRIBER GRO	0	9
							Computatio
CALL SIGN DS	E CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate F
							and
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_		2.22				2.22	
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	
THIRTY-FI	RST SUBSCRIBER GF	ROUP	THIF	RTY-SECONI	O SUBSCRIBER GRO	JP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
CALL SIGN DS	E CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		0.00	Total DSEs			0.00	
	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Gross Receipts Third Group	<u> </u>			F	·		
Gross Receipts Third Group		1	H				

CABLE ONE, INC.	ABLE SYSTEM:				•	007417	Name
	(A: COMPUTATION		П			IID.	
COMMUNITY/ AREA	IRD SUBSCRIBER GR	0	COMMUNITY/ ARE		H SUBSCRIBER GRO	0	9
	- II o.o	T ===			П		Computatio
CALL SIGN DSE	E CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fo
							and
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							Exclusivity
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Tatal DOEs		0.00	Takal BOEs			0.00	
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	<u>\$</u>	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THIRTY-FIF	TH SUBSCRIBER GR	OUP	Т	HIRTY-SIXTI	H SUBSCRIBER GRO	JP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				·····			
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Cross receipts rima Group	-			•			
Cross recorpts Time Croup							

Name	YSTEM ID# 007417	•				E SYSTEM:	ER OF CABL	CABLE ONE, INC.	
				TE FEES FOR EAC					
9		SUBSCRIBER GROU		ii		SUBSCRIBER GROU	-SEVENTH		
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe									
and					<u></u>				
Syndicated Exclusivity			····		<u>.</u>				
Surcharge					 				
for									
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Distant					<u>_</u>				
Stations					<u>.</u>				
					<u></u>				
	0.00							Total DSEs	
	0.00			Total DSEs	0.00				
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	Group	Gross Receipts First G	
	0.00	\$	nd Group	Base Rate Fee Seco	0.00	\$	Group	Base Rate Fee First G	
	JP	SUBSCRIBER GROU	FORTIETH		JP	SUBSCRIBER GROU	RTY-NINTH	THIR	
	0	COMMUNITY/ AREA 0			0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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		-							
	0.00			Total DSEs	0.00			Total DSEs	
		\$	h Group		0.00		Group		
	0.00	\$	h Group	Total DSEs Gross Receipts Fourt	0.00	\$	Group	Total DSEs Gross Receipts Third G	

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	E SYSTEM:				5	007417	Na.
E	BLOCK A:	COMPUTATION O	BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
	TY-FIRST	SUBSCRIBER GROU	JP	FOF	RTY-SECONI	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٩			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
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	···							
Total DSEs		0.00		Total DSEs				
Gross Receipts First G	roup	\$ 0.00		Gross Receipts Second Group \$ 0.00		0.00		
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FOR	TY-THIRD	SUBSCRIBER GROU	JP	FOF	RTY-FOURTH	H SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
	•			· ·	•			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	above.	\$		

				TE FEES FOR EAC				
9		SUBSCRIBER GRO	RTY-SIXTH	 		SUBSCRIBER GRO	RTY-FIFTH	
Computati				COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
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for	······							
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Stations	······		···					
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	es			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	roup	ross Receipts First G
	0.00	\$	d Group	Base Rate Fee Seco	0.00	\$	roup	ase Rate Fee First G
]		SUBSCRIBER GRO	TY-EIGHTH	FOI	UP	SUBSCRIBER GRO	SEVENTH	FORTY-
	COMMUNITY/ AREA 0							
				COMMUNITY/ AREA	0			OMMUNITY/ AREA
	DSE	CALL SIGN	DSE	COMMUNITY/ AREA	DSE	CALL SIGN	DSE	
	DSE	CALL SIGN	DSE			CALL SIGN	DSE	
- - - 	DSE	CALL SIGN	DSE			CALL SIGN	DSE	
_ - - 	DSE	CALL SIGN	DSE			CALL SIGN	DSE	
	DSE	CALL SIGN	DSE			CALL SIGN	DSE	
	DSE	CALL SIGN	DSE			CALL SIGN	DSE	
	DSE	CALL SIGN	DSE			CALL SIGN	DSE	
	DSE	CALL SIGN	DSE			CALL SIGN	DSE	
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	DSE	CALL SIGN	DSE			CALL SIGN	DSE	
	DSE	CALL SIGN	DSE			CALL SIGN	DSE	
	DSE	CALL SIGN	DSE			CALL SIGN	DSE	
	DSE	CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	0.00	CALL SIGN		CALL SIGN Total DSEs	DSE	CALL SIGN		CALL SIGN
		CALL SIGN		CALL SIGN	DSE	CALL SIGN		CALL SIGN
	0.00			CALL SIGN Total DSEs	DSE			CALL SIGN CALL SIGN Fotal DSEs Gross Receipts Third C
	0.00		ı Group	CALL SIGN Total DSEs	DSE		Group	CALL SIGN

Name	YSTEM ID# 007417					E SYSTEM:		CABLE ONE, INC.	
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	FIFTIETH			SUBSCRIBER GROU	RTY-NINTH		
Computation				COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe									
and									
Syndicated Exclusivity			···						
Surcharge									
for									
Partially									
Distant Stations									
Stations									
	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	iroup	Gross Receipts First Gr	
	0.00	\$	nd Group	Base Rate Fee Secon	0.00	\$	iroup	Base Rate Fee First Gr	
	JP	SUBSCRIBER GROU	Y-SECOND	FIF	JP	SUBSCRIBER GROU	FTY-FIRST	FIF	
	0	COMMUNITY/ AREA 0			0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
	·····								
	0.00			Total DSEs	0.00			Total DSEs	
	0.00		n Group		0.00		Group	Total DSEs Gross Receipts Third G	
	0.00	\$	n Group	Total DSEs Gross Receipts Fourt	0.00	\$	Group	Total DSEs Gross Receipts Third G	

CABLE ONE, INC.	CABLE SYSTEM:				•	007417	Name
	K A: COMPUTATION		П				
COMMUNITY/ AREA	HIRD SUBSCRIBER G	0 ROUP	COMMUNITY/ ARE		H SUBSCRIBER GRO	0	9
							Computatio
CALL SIGN DS	E CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fo
							and
							Syndicated
							Exclusivity
							Surcharge
							for
							Partially Distant
							Stations
_						2.22	
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	
FIFTY-F	FTH SUBSCRIBER G	ROUP		FIFTY-SIXTI	H SUBSCRIBER GRO	JP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
CALL SIGN DS	E CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		0.00	Total DSEs			0.00	
	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Gross Receipts Third Group	<u> </u>			up	<u>*</u>		
Gross Receipts Third Group			11				

Mana	007417					E SYSTEM:		LEGAL NAME OF OWNE
		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION O	BLOCK A:	
9		SUBSCRIBER GROU	TY-EIGHTH	ii		SUBSCRIBER GRO	-SEVENTH	
Computation				COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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and								
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Distant								
Stations								
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			іч Огочр	Cross reserve			лоцр	oroco reconpio i noi c
	0.00	\$	nd Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G
	,	SUBSCRIBER GROU	SIXTIETH		JP	SUBSCRIBER GRO	TY-NINTH	FIF
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Name	007417	•				E SYSTEM:		CABLE ONE, INC.
				TE FEES FOR EACH				
9		SUBSCRIBER GROU				SUBSCRIBER GROU	XTY-FIRST	
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and								
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	0.00			Total DSEs	0.00			Total DSEs
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	0.00	\$	nd Group	Base Rate Fee Seco	0.00	\$	Group	Base Rate Fee First G
	JP	SUBSCRIBER GROU	TY-FOURTH	SIX	JP	SUBSCRIBER GROU	KTY-THIRD	SI>
	0	COMMUNITY/ AREA 0			0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	3.00	<u>*</u>	Огоар	C. COS P. COSCIPIO P OUIT		<u>-</u>	<u>очр</u>	C. 300 Mossiple Tillu (
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CABLE ONE, INC		LE SYSTEM:				S	007417	Name
	IXTY-FIFTH	COMPUTATION C SUBSCRIBER GRO	UP	11	SIXTY-SIXTH	IBER GROUP I SUBSCRIBER GROU	JP 0	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Computation			
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								for Partially
								Distant
								Stations
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Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
			1					
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
SIXTY COMMUNITY/ AREA		SUBSCRIBER GRO	OUP 0	S COMMUNITY/ AREA		1 SUBSCRIBER GROU	JP O	
COMMUNITY AREA				COMMONT 17 ARE	Η			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
		_						
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxes	above.	\$		

A: COMPUTATION (TH SUBSCRIBER GRO		TI .				
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		11		SUBSCRIBER GROU		9
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	0.00	Total DSEs			0.00	
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\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ST SUBSCRIBER GRO	DUP	SEVEN	NTY-SECONE	SUBSCRIBER GROU	JP	
	0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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ls	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
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S FOR EACH SUBSCRIBER GROUP	TE FEES FOR EACH	F BASE RA	COMPUTATION OF	BLOCK A:	E
SEVENTY-FOURTH SUBSCRIBER GROUP	SEVENT	JP	SUBSCRIBER GROU	ITY-THIRD	SEVEN
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tate Fee Second Group \$ 0.00	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First G
SEVENTY-SIXTH SUBSCRIBER GROUP	SEVE	JP	SUBSCRIBER GROU	NTY-FIFTH	SEVEN
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Receipts Fourth Group \$ 0.00	Gross Receipts Fourth	0.00	\$	oup	Gross Receipts Third G
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				ATE FEES FOR EAC				
SEVENTY-SEVE	ENTH SUB	SCRIBER GROU	JP 0	11		1 SUBSCRIBER GRO		9
COMMUNITY/ AREA				COMMUNITY/ ARE	Α			Computation
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Gross Receipts First Group	<u>\$</u>		0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	\$		0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVENTY-N	INTH SUB	SCRIBER GROU	JP		EIGHTIETH	H SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
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	\$		0.00	Gross Receipts Fou	rth Group	\$	0.00	
Gross Receipts Third Group								
Gross Receipts Third Group			I	III				

CABLE ONE, INC.	CABLE	SYSTEM:				`	007417	Name
				ATE FEES FOR EAC				
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Total DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts First Group	<u>\$</u>		0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	\$	<u> </u>	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	HIRD SI	UBSCRIBER GROU				SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	007417							
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9		SUBSCRIBER GRO	HTY-SIXTH	H	<u>UP</u> 0	SUBSCRIBER GROU	HTY-FIFTH	
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7								
┥	UP	SUBSCRIBER GRO	TY-EIGHTH	EIG	UP	SUBSCRIBER GROU	-SEVENTH	EIGHTY-
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eceipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	
te Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00	
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NITY/ AREA 0 COMMUNITY/ AREA 0	
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te Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	

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9		SUBSCRIBER GRO	Y-FOURTH	1	OUP 0	SUBSCRIBER GRO	ETY-THIRD	
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Computation OSE of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant					Р	SUBSCRIBER GROU	RED FIRST	ONE HUNDE		
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and Syndicated Exclusivity Surcharge for Partially Distant			[CALL SIG	DSE	CALL SIGN	DSE	CALL SIGN		
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0.00	\$)	Fourth Gro	Base Rate F	0.00	\$	Group	Base Rate Fee Third C		

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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
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Base Rate Fee: Add the		e fees for each subso	criber group a	as shown in the boxes	above.	\$		

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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

Name	007417	S				E SYSTEM:	R OF CABL	LEGAL NAME OF OWNE CABLE ONE, INC.
					BASE RA	COMPUTATION OF		
9		SUBSCRIBER GROUP	SECOND			SUBSCRIBER GROUP	RTY-FIRST	
Computation	0			MUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	L SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicated Exclusivity							<u></u>	
Surcharge							-	
for								
Partially								
Distant								
Stations								
							-	
	0.00			DSEs	0.00			Total DSEs
	0.00	\$	Group	Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	Group	Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
		SUBSCRIBER GROUP	FOURTH	E HUNDRED FOR		SUBSCRIBER GROUP	RTY-THIRD	ONE HUNDRED FOR
	0			MUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	L SIGN	DSE	CALL SIGN	DSE	CALL SIGN
							<u></u>	
							<u>-</u>	
							<u></u>	
	0.00	Н		DSEs	0.00	l		Total DSEs
				2020				
		•	oun	Receints Fourth	0 00	¢	roun	Gross Receints Third C
	0.00	\$	oup	Receipts Fourth	0.00	\$	Group	Gross Receipts Third G

Name	007417	S				E SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
		BER GROUP	SUBSCRI	TE FEES FOR EACH				
9		SUBSCRIBER GROUP	ORTY-SIXTH			SUBSCRIBER GROUP	ORTY-FIFTH	
Computation				COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicate Exclusivit								
Surcharg								
for						-		
Partially								
Distant								
Stations								
			<u></u>					
			···					
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	Group	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G
		SUBSCRIBER GROUP	RTY-EIGHTH	ONE HUNDRED FO		SUBSCRIBER GROUP	Y-SEVENTH	ONE HUNDRED FORT
	0			COMMUNITY/ AREA	0		,	COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	·····		<u></u>					
								
			<u></u>					
			<u> </u>		-			
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Gross Receipts Fourt	0.00	\$	Group	Gross Receipts Third (
			•	,				,
	11			1.1		1		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	E SYSTEM:					007417	Name
E	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCR	RIBER GROUP		<u> </u>
ONE HUNDRED FOR	TY-NINTH	SUBSCRIBER GROU	JP	ONE HUNDR	ED FIFTIETH	H SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
							·····	Partially
	···						·····	Distant
								Stations
	···		···				······	
	····		······································	-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIF	TY-SECONI	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···							
	···		···					
	···		···					
	····		···	-				
	•		•					
	 							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
					-			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABL	E SYSTEM:				\$	SYSTEM ID# 007417	Name
B ONE HUNDRED FIF				ATE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	······		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								Syndicated
								Exclusivity Surcharge
								for
								Partially
			<u></u>					Distant Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	auc	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
	•				•	·		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIF COMMUNITY/ AREA	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	
COMMUNITY AREA			U	COMMONITY AREA	·			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
	•			'	•			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

Name	007417	•				E SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
		BER GROUP	I SUBSCRI	TE FEES FOR EACH	BASE RA			
0		SUBSCRIBER GROUP	IFTY-EIGHTH	ONE HUNDRED F		SUBSCRIBER GROUP	Y-SEVENTH	ONE HUNDRED FIFTY
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicate							····	
Exclusivit Surcharge								
for								
Partially								
Distant								
Stations								
			<u></u>					
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	Group	Gross Receipts First G
	0.00	\$	nd Group	Base Rate Fee Seco	0.00	\$	Group	3ase Rate Fee First G
	JP	SUBSCRIBER GROU	D SIXTIETH	ONE HUNDRE	IP	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FIF
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	·····		····				····	
			<u></u>					
	0.00			Total DSEs	0.00			Total DSEs
		<u> </u>	h Group			.	Group	Total DSEs Gross Receipts Third (
	0.00	\$	n Group	Total DSEs Gross Receipts Fourt	0.00	<u>\$</u>	Group	Total DSEs Gross Receipts Third (

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 20 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. 007417 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 must also 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 of 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. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. 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 vour 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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group First 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 Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 20 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. 007417 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 must also 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 of 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. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. 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 vour 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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group First 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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 20 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. 007417 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 must also 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 of 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. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. 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 vour actual calculations on this form. NINTH SUBSCRIBER GROUP TENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group First Group **ELEVENTH SUBSCRIBER GROUP** TWELVTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 20 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. 007417 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 must also 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 of 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. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. 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 vour actual calculations on this form. THIRTEENTH SUBSCRIBER GROUP FOURTEENTH 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 Second Group First Group SIXTEENTH SUBSCRIBER GROUP FIFTEENTH 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 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 CABLE ONE. INC. 007417 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 must also 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 of 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 vour actual calculations on this form. SEVENTEENTH SUBSCRIBER GROUP EIGHTEENTH 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 Second Group First Group NINEENTH SUBSCRIBER GROUP TWENTYTH 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 Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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