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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY							
DATE RECEIVED	AMOUNT						
08/28/24	\$ ALLOCATION NUMBER						

Return completed workbook by email to

coplicsoa@copyright.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMEN	NT:		
Accounting Period	2024/1			
B	Instructions: Give the full legal name of the owner of the cable system. If the own rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the If there were different owners during the accounting period, only the a single statement of account and royalty fee payment covering the entire Check here if this is the system's first filing. If not, enter the system	business of the cable system be owner on the last day of a creaccounting period	em the accounting period should su	
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	М		
	Northeast Telephone Company LLC			
				85592024 1 8559 2024/1
	450 Security Blvd Green Bay, WI 54313			
С	INSTRUCTIONS: In line 1, give any business or trade names use names already appear in space B. In line 2, give the mailing addre			
System	1 IDENTIFICATION OF CABLE SYSTEM: Nsight	ess of the system, if this	Signit from the address given	п зрасс В.
	MAILING ADDRESS OF CABLE SYSTEM:			
	2 (Number, street, rural route, apartment, or suite number)			

	(City, town, state, zip code)			
D	Instructions: For complete space D instructions, see page 1b. Id	lentify only the first comr	nunity served below and reli	st on page 1b
Area Served	with all communities. CITY OR TOWN	STATE		
First	Pulaski	WI		
Community	Below is a sample for reporting communities if you report multip		nace G	
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#
Sample	Alda	MD	Α	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 Office to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address, and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office'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 filing, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#								
Northeast Telephone Company LLC			8559								
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined 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 first community that you list will serve as a form											
of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses											
below the identified city or town.											
If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).											
When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below.											
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#								
Pulaski	WI	AA	1	First							
SHAWANO	WI	AA	2	Community							
LUXEMBURG	WI	AA	3								
Lakewood	WI	AA	4								
				See instructions for							
				additional information							
				on alphabetization.							
				Add rows as necessary.							
				Add Tows as necessary.							
		L		1							

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ACCOUNTING PERIOD: 2024/1 FORM SA3E. PAGE 2. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 8559 Northeast Telephone Company LLC SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES E In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information Secondary about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the Transmission last day of the accounting period (June 30 or December 31, as the case may be). Service: Sub-Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken scribers and down by categories of secondary transmission service. In general, you can compute the number of subscribers in Rates each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service). Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment. Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. Note: Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential

subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)." Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together

with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BLO	OCK 1			BLOCK 2			
	NO. OF					NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS	F	RATE		CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:							
 Service to first set 	811	\$	118.24				
Service to additional set(s)							
 FM radio (if separate rate) 							
Motel, hotel							
Commercial							
Converter							
Residential							
Non-residential							
	I	T		1 ľ		T	1

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

BLO	CK 1		BLOCK 2	
RATE	CATEGORY OF SERVICE	CATEGORY OF SERVICE	RATE	
	Installation: Non-residential			
\$ 16.95	Motel, hotel			
	Commercial			
	Pay cable			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Pay cable-add'l channel			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Fire protection			
	Burglar protection			·
	Other services:			
	Reconnect			
	Disconnect			
	Outlet relocation			
	Move to new address			
),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	RATE \$ 16.95	Installation: Non-residential • Motel, hotel • Commercial • Pay cable • Pay cable-add'l channel • Fire protection • Burglar protection Other services: • Reconnect • Disconnect • Outlet relocation	RATE CATEGORY OF SERVICE RATE Installation: Non-residential • Motel, hotel • Commercial • Pay cable • Pay cable-add'l channel • Fire protection • Burglar protection Other services: • Reconnect • Disconnect • Outlet relocation	RATE CATEGORY OF SERVICE RATE CATEGORY OF SERVICE Installation: Non-residential • Motel, hotel • Commercial • Pay cable • Pay cable-add'l channel • Fire protection • Burglar protection Other services: • Reconnect • Disconnect • Outlet relocation

FORM SA3E. PAGE 3.													
LEGAL NAME OF OWN					SYSTEM ID	Name							
Northeast Tele	phone Com	pany LLC			855	9							
PRIMARY TRANSMITT	ERS: TELEVISION	ON											
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.													
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program													
basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the													
station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located													
in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in													
its community of licens on which your cable s Column 3: Indicate	se. For example ystem carried the in each case v	e, WRC is Ch he station. whether the s	annel 4 in Wash tation is a netwo	nington, D.C. This ork station, an ind	s may be different from the channel ependent station, or a noncommercial								
(for independent multi For the meaning of the Column 4: If the st planation of local serv	cast), "E" (for nese terms, see tation is outside ice area, see page 2	oncommercia page (v) of the the local servage (v) of the	il educational), o e general instru vice area, (i.e. "o general instruct	or "E-M" (for nonce ctions located in distant"), enter "Y tions located in th	es". If not, enter "No". For an ex- e 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.													
	Canadian statio	ons, if any, giv	e the name of t	he community wit	ty to which the station is licensed by the the which the station is identified. In channel line-up.								
		CHANN	EL LINE-UP	AA									
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION								
WBAY	2	N	No	, ,	GREEN BAY, WI								
WBAY WEATHER	2.2	N-M	No	-	GREEN BAY, WI	Coo instructions for							
WBAY 2.3	2.3	I-M	No	-	GREEN BAY, WI	See instructions for additional information							
WBAY 2.4	2.4	I-M	No		GREEN BAY, WI	on alphabetization.							
WBAY 2.5	2.5	I-M	No		GREEN BAY, WI								
WFRV	5	N	No		GREEN BAY, WI								
			No										
WFRV 5.2	5.2	N-M			GREEN BAY, WI								
WFRV 5.3	5.3	I-M	No No		GREEN BAY, WI								
WFRV 5.4	5.4	I-M	No		GREEN BAY, WI								
WLUK	11	N N	No		GREEN BAY, WI								
WLUK 11.2					2 11.2 N-M No GREEN BAY, WI								
	WLUK 11.3 11.3 N-M No GREEN BAY, WI												
WCWF		-			GREEN BAY, WI								
	14	I	No		GREEN BAY, WI GREEN BAY, WI								
WCWF 14.2	14.2	I I-M	No No		GREEN BAY, WI GREEN BAY, WI GREEN BAY, WI								
		I	No		GREEN BAY, WI GREEN BAY, WI								
WCWF 14.2	14.2	I I-M	No No		GREEN BAY, WI GREEN BAY, WI GREEN BAY, WI								
WCWF 14.2 WCWF 14.3	14.2 14.3	I I-M I-M	No No		GREEN BAY, WI GREEN BAY, WI GREEN BAY, WI GREEN BAY, WI								

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM Name **Northeast Telephone Company LLC** 8559 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

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.

WETA-simulcast).

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

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

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

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

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

		CHANN	EL LINE-UP	AA	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WGBA 26.3	26.3	N-M	No		GREEN BAY, WI
WGBA 26.4	26.4	N-M	No		GREEN BAY, WI
WACY	32	I	No		APPLETON, WI
WACY 32.2	32.2	I-M	No		APPLETON, WI
WACY 32.3	32.3	I-M	No		APPLETON, WI
WACY 32.4	32.4	I-M	No		APPLETON, WI
WPNE	38	E	No		GREEN BAY, WI
WPNE 38.2	38.2	E-M	No		GREEN BAY, WI
WPNE 38.3	38.3	E-M	No		GREEN BAY, WI
WPNE 38.4	38.4	E-M	No		GREEN BAY, WI

LEGAL NAME OF OWN	IER OF CARLES	/STEM:			SYSTEM ID#				
Northeast Tele					8559	Namo			
PRIMARY TRANSMITTE	ERS: TELEVISION	ON							
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during to lons in effect of 5.61(e)(2) and (sis, as explaine	he accounting n June 24, 19 4), or 76.63 (ed in the next	g period, except 981, permitting the referring to 76.6 paragraph.	t (1) stations carrie ne carriage of cert i1(e)(2) and (4))];	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	Primary Transmitters: Television			
basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the									
basis. For further in in the paper SA3 fo Column 1: List each each multicast stream cast stream as "WETA-simulcast).	and also in spa formation cond rm. h station's call associated wit -2". Simulcast	ace I, if the stace In if the stace In it is substituted as the station action	itute basis station report origination coording to its own the reported in	ns, see page (v) c n program service rer-the-air designa column 1 (list eac	tute basis and also on some other if the general instructions located is such as HBO, ESPN, etc. Identify tion. For example, report multinistream separately; for example				
its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multion	se. For example stem carried the in each case we entering the lecast), "E" (for n	e, WRC is Ch ne station. whether the s etter "N" (for r oncommercia	nannel 4 in Wash natation is a netwo network), "N-M" (al educational), o	nington, D.C. This ork station, an inde (for network multion or "E-M" (for nonco	ion for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial east), "I" (for independent), "I-M" ommercial educational multicast).				
planation of local servi	ation is outside ce area, see pa ave entered "Y	the local ser age (v) of the es" in columr	vice area, (i.e. " general instruct a 4, you must co	distant"), enter "Ye tions located in the mplete column 5,	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your				
carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	ion on a part-tii ion of a distant entered into o a primary trans simulcasts, also ree categories e location of ea Canadian static	me basis become multicast stranger or before Jumitter or an abounter "E". If a see page (voch station. For station, givennel line-ups,	ause of lack of a eam that is not sune 30, 2009, but association representation of the general or U.S. stations, we the name of the use a separate	activated channel subject to a royalty etween a cable systematic primal channel on any or instructions locate list the community with space G for each	y 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. y to which the station is licensed by the n which the station is identifed.				
	ı	CHANN	EL LINE-UP	AC					
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				
			•						

FURM SAJE. PAGE 3.					OVOTEM ID:	
Northeast Tele					SYSTEM ID# 8559	Namo
PRIMARY TRANSMITTI	-					
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during to ions in effect of 6.61(e)(2) and (sis, as explaine	he accounting n June 24, 19 (4), or 76.63 (ed in the next	g period, except 81, permitting the referring to 76.6 paragraph.	t (1) stations carrie ne carriage of cert s1(e)(2) and (4))];	s and low power television stations) ed only on a part-time basis under ain network programs [sections and (2) certain stations carried on a cable system on a substitute program	Primary Transmitters: Television
basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List 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 multicate manning of the Column 4: If the st planation of local serving 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. For Mexican or Column 6: Give the Column 6: Give the FCC.	CC rules, regular here in space only on a substand also in spation and also in spation and associated with associated with a second and associated with a second and a second a	ations, or authorized the control of	norizations: at it in space I (the ation was carried tute basis station report origination occording to its own to be reported in the assigned to annel 4 in Wash tation is a network), "N-M" (all educational), of the general instruction of lack of a seam that is not succounting periouse of lack of a seam that is not succounting periouse of lack of a seam that is not succounting periouse of lack of a seam that is not succounting periouse of lack of a seam that is not succounting periouse of lack of a seam that is not succounting periouse of lack of a seam that is not succounting periouse of lack of a seam that is not succounting periouse of lack of a seam that is not succounting periouse of lack of a seam that is not succounting periouse of lack of a seam that is not succounting periouse of lack of a seam that is not succounting periods.	ne Special Statem d both on a substins, see page (v) or program service ver-the-air designate column 1 (list each the television stath nington, D.C. This ork station, an inde (for network multicor "E-M" (for nonce ctions located in the distant"), enter "Ytitons located in the mplete column 5, od. Indicate by enactivated channel subject to a royalty etween a cable sy essenting the prima channel on any of instructions located list the community with	ent and Program Log)—if the tute basis and also on some other of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi- the stream separately; for example ion for broadcasting over-the-air in may be different from the channel espendent station, or a noncommercial cast), "I" (for independent), "I-M" commercial educational multicast). The paper SA3 form. The paper SA3 form. The stating the basis on which your tering "LAC" if your cable system capacity. The y payment because it is the subject testem or an association representing the basis, enter "O." For a further and in the paper SA3 form. The paper SA3 form. The paper SA3 form is the subject the basis, enter "O." For a further and in the paper SA3 form. The paper SA3 form is licensed by the The paper SA3 form is identifed.	Television
Note: If you are utilizing	ig multiple cha		EL LINE-UP		channel line-up.	<u> </u> -
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.									
LEGAL NAME OF OWN					SYSTEM ID#	Name			
Northeast Tele	phone Com	pany LLC			8559				
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON							
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.									
Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "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 identifed.									
		CHANN	EL LINE-UP	AE					
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.					21/2=====	
LEGAL NAME OF OW					SYSTEM ID#	Name
Northeast Tele	phone Com	pany LLC			8559	
PRIMARY TRANSMITT	ERS: TELEVISION	ON				
In General: In space carried by your cable FCC rules and regular 76.59(d)(2) and (4), 7 substitute program basis under specific Formulation was carried to List the station was carried List the station here, basis. For further in in the paper SA3 formulation to the following station was carried to List the station here, basis. For further in in the paper SA3 formulation to List each multicast stream cast stream as "WETA-simulcast). Column 2: Give the its community of licen on which your cable some column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the splanation of local served carried the distant state of a written agreement the cable system and tion "E" (exempt). For explanation of these tecolumn 6: Give the	G, identify ever system during to tions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2	y television of the accounting of June 24, 19 (4), or 76.63 (4), or 76.63 (4), or 76.63 (5) and the next respect to any attons, or authors, or authors, or authors, or authors, or authors, in the stations, or authors, if the station accounts are also as treams must be the FCC has a station account of the station. Whether the station, whether the station, whether the station or commercial page (v) of the the local ser age (v) of the est in column on during the me basis becauthors are the formal treatment or an account of the station. For any given the station, For any, if any, given the station, given the station, given the station, for any, given the station, given the station, given the station, given the station of the station, given the station of the station, given the station of the sta	g period, except g period, except 181, permitting the referring to 76.6 paragraph. It is attained to the second of	t (1) stations carried to carriage of certifice (2) and (4))]; is a carried by your one Special Statem of both on a substitus, see page (v) on program service re-the-air designate column 1 (list each the television statington, D.C. This ork station, an indector "E-M" (for noncontions located in the distant"), enter "Yestions located in the mplete column 5, od. Indicate by enactivated channel subject to a royalty etween a cable system in the prima channel on any of instructions located list the community with the communit	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed.	Primary Transmitters: Television
Note. If you are utilize	ng muluple cha		· · · · · ·	•	Charmer inte-up.	
	1	CHANN	EL LINE-UP	AF		
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.					2)/2==== //	
LEGAL NAME OF OWN					SYSTEM ID#	Name
Northeast Tele	phone Com	pany LLC			8559	
PRIMARY TRANSMITTI	ERS: TELEVISION	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base Substitute program base Substitute Pasis Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multicate for the meaning of the Column 5: If you h cable system carried the cable system carried the cable system and tion "E" (exempt). For explanation of these the Column 6: Give t	G, identify ever system during to ions in effect on 6.61(e)(2) and (6.61(e)(2)	y television of the accounting of June 24, 19 (4), or 76.63 (4), or 76.63 (4), or 76.63 (5) and the next respect to any attons, or authors, or authors	g period, except 181, permitting the referring to 76.6 paragraph. It is pace I (the ation was carried tute basis station report origination cording to its own to be reported in the assigned to annel 4 in Wash tation is a network and the area of lack of a general instruction of lack of a general or U.S. stations, stations, stations,	t (1) stations carried to carriage of certific (2) and (4))]; is a carried by your one Special Statem of both on a substime, see page (v) on program service rer-the-air designate column 1 (list each the television statington, D.C. This pork station, an indefer network multipor "E-M" (for noncontions located in the distant"), enter "Yestions located in the implete column 5, od. Indicate by enactivated channel subject to a royalty estemen a cable sy esenting the primal channel on any of instructions located list the community.	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	Primary Transmitters: Television
Note: If you are utilizir	ng multiple chai	nnel line-ups,	use a separate	space G for each	channel line-up.	
		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	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN					SYSTEM ID#	Name
Northeast Tele	phone Com	pany LLC			8559	
PRIMARY TRANSMITTI In General: In space (carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here,	ERS: TELEVISION G., identify every system during the insurance of the identified of	y television st he accounting n June 24, 19 4), or 76.63 (ed in the next respect to any ations, or auth G—but do lis titute basis. ace I, if the sta	g period, except 81, permitting the referring to 76.6 paragraph. y distant stations porizations: t it in space I (the ation was carried	t (1) stations carried ne carriage of cert it(e)(2) and (4))]; a s carried by your of ne Special Statement d both on a substif	s and low power television stations) ed only on a part-time basis under ain network programs [sections and (2) certain stations carried on a cable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located	G Primary Transmitters: Television
each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sty planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	associated with a second control of a distant static in or a part-tilicion of a distant seminator of a primary trans simulcasts, also recetted or categories e location of ea Canadian static	h a station ac streams must ber the FCC h e, WRC is Ch ne station. whether the si etter "N" (for n oncommercial page (v) of the the local sen age (v) of the es" in column on during the me basis because multicast stream o enter "E". If , see page (v ch station. Fo	cording to its over the reported in the report in the reported	rer-the-air designal column 1 (list each column 1 (list each the television statinington, D.C. This park station, an index (for network multicon "E-M" (for noncotions located in the distant"), enter "Yestions located in the inplete column 5, so d. Indicate by emplete column 5 activated channel or activated channel or activated to a royalty etween a cable system in the primal channel on any of instructions located list 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 stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed.	
Total ii you are amizii	ig manipio ona	•	EL LINE-UP	<u> </u>	onamor ime ap.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					21/2=====	
LEGAL NAME OF OW					SYSTEM ID#	Name
Northeast Tele	phone Com	pany LLC			8559	
PRIMARY TRANSMITT	ERS: TELEVISION	ON				
carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program ba List the station here, basis. For further in in the paper SA3 for Column 1: List ear each multicast stream cast stream as "WET/ WETA-simulcast). Column 2: Give th its community of licen on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of th Column 4: If the s planation of local serv Column 5: If you h cable system carried the carried the distant sta For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these t Column 6: Give th	system during to tions in effect or 6.61(e)(2) and (sis, as explaine Stations: With CC rules, regular in here in space of only on a substandalso in spanformation conditions. Ch station's call a associated with A-2". Simulcast are channel numbers. For example ystem carried the incast, "E" (for nese terms, see paive entered "Y the distant static ision of a distant tentered into of a primary trans simulcasts, als hree categories ie location of ea Canadian static	he accounting In June 24, 19 (4), or 76.63 (4) in the next respect to any actions, or auth G—but do listitute basis. ace I, if the statement of the station actions or auth a station action of the station action of the station. Whether the setter "N" (for noncommercial page (v) of the station of the station. The station of the station of the station of the station. The station of the station of the station of the station of the station. For the station of the station	g period, except g period, except 181, permitting the referring to 76.6 paragraph. It is attained to the second of	t (1) stations carried to carriage of certifice (2) and (4))]; is a carried by your one Special Statem of both on a substitus, see page (v) on program service re-the-air designate column 1 (list each the television statington, D.C. This ork station, an indector "E-M" (for noncontions located in the distant"), enter "Yestions located in the mplete column 5, od. Indicate by enactivated channel subject to a royalty etween a cable system in the prima channel on any of instructions located list the community with the communit	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed.	Primary Transmitters: Television
Note. If you are utilize	ng muluple cha		· · · · · ·	•	Charmer inte-up.	
	1	CHANN	EL LINE-UP	Al		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	NER OF CABLE S'	YSTEM:			SYSTEM ID#	Name
Northeast Tele	phone Com	pany LLC			8559	
PRIMARY TRANSMITT	ERS: TELEVISION	ON				
In General: In space carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis s basis under specific 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 eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give th its community of licens on which your cable so 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 h cable system carried t carried the distant stat	G, identify ever system during to ions in effect of 6.61(e)(2) and (sis, as explaine Stations: With CC rules, regular here in space only on a substand also in spanformation concorm. Ch station's call associated with A-2". Simulcast e channel number carried it in each case of entering the legicast), "E" (for notes the carried it is in each case of entering the legicast), "E" (for notes e terms, see pation is outside ice area, see pave entered "Y he distant statiction on a part-ti	y television si he accounting in June 24, 19 (4), or 76.63 (4), or 76.63 (5) and in the next respect to any ations, or auth G—but do listitute basis. ace I, if the stateming substitute basis. But the station account of the station account of the station. Whether the setter "N" (for moncommercial page (v) of the the local seriage (v) of the es" in column on during the me basis bec	g period, exception of the permitting the referring to 76.6 paragraph. It is paragraph. It is paragraph. It is pace I (the ation was carried tute basis station report origination coording to its own the reported in the permitted in the period of the permitted in the permitted i	t (1) stations carried to carriage of certical (e)(2) and (4))]; as carried by your one Special Statem d both on a substitute, see page (v) on program service for the air designation of the television station of the television station of the television station of the television of the television station of the television of the television station of the television	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.	G Primary Transmitters: Television
carried the distant stat	tion on a part-ti	me basis bec	ause of lack of a	activated channel	capacity.	l
					y payment because it is the subject stem or an association representing	l
the cable system and	a primary trans	mitter or an a	ssociation repre	esenting the prima	ry transmitter, enter the designa-	1
explanation of these th	ree categories	, see page (v) of the general	instructions locate	ther basis, enter "O." For a further ed in the paper SA3 form.	l
					y to which the station is licensed by the hybrid which the station is identifed.	l
Note: If you are utilizing				•		l
		CHANN	EL LINE-UP	AJ		l
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	NER OF CABLE SY	YSTEM:			SYSTEM ID#	Name	
Northeast Tele	phone Com	pany LLC			8559		
PRIMARY TRANSMITT	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)/2) and (4), 76.61(e)/2) and (4), or 76.63 (referring to 76.61(e)/2) and (4))]; and (2) certain stations carried on a substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: **Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. **List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. **Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). **Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. **Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educationa							
		CHANN	EL LINE-UP	AK			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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FORM SA3E. PAGE 3.					2)/2=====	
LEGAL NAME OF OWN					SYSTEM ID#	Name
Northeast Tele	phone Com	pany LLC			8559	
PRIMARY TRANSMITTI	ERS: TELEVISION	ON				
In General: In space of carried by your cables of FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base Substitute Pasis Pasis Substitute Pasis Substitute Pasis P	G, identify ever system during the consistency of t	y television of the accounting of June 24, 19 (4), or 76.63 (4), or 76.63 (4), or 76.63 (5) and the next respect to any attons, or authors, or authors	g period, except 181, permitting the referring to 76.6 paragraph. It is pace I (the ation was carried tute basis station report origination cording to its own to be reported in the assigned to annel 4 in Wash tation is a network and the area of lack of a general instruction of lack of a general or U.S. stations, stations, stations,	in (1) stations carried carriage of certifice (2) and (4))]; in a carried by your of the Special Statem of the Special	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	Primary Transmitters: Television
Note: If you are utilizir	ng multiple cha	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AL		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
Northeast Tele	phone Com	pany LLC			8559	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space (carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 Column 1: List ead each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss	G, identify even system during the lons in effect or 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2	y television st he accounting in June 24, 19 4), or 76.63 (in did in the next respect to any ations, or auth G—but do lis titute basis. ace I, if the sta ærning substiff sign. Do not I h a station ac streams must ber the FCC h e, WRC is Chan e station. whether the stater "N" (for n oncommercia page (v) of the eage (v) of the	g period, except g period, except 81, permitting the referring to 76.6 paragraph. It is space I (the ation was carried tute basis station cording to its over the period of the station is a network), "N-M" (all educational), concerned in the general instructive area, (i.e. "or general instructive area, i.e. "or general instructive	to (1) stations carried to carriage of cert (1(e)(2) and (4))]; as carried by your one Special Statement of the Special S	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. py payment because it is the subject	G Primary Transmitters: Television
the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	a primary trans simulcasts, also ree categories e location of ea Canadian statio	mitter or an a o enter "E". If , see page (v ch station. Fo ons, if any, giv	ssociation repre you carried the) of the general or U.S. stations, re the name of the	esenting the prima channel on any of instructions locate list the community the community with	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed.	
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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	

LEGAL NAME OF OWNE	R OF CABLE SY	/STEM:			SYSTEM ID#			
Northeast Telep	hone Com	pany LLC			8559	Name		
PRIMARY TRANSMITTERS: TELEVISION								
carried by your cable sy	stem during t	he accounting	g period, except	(1) stations carrie	and low power television stations) and only on a part-time basis under ain network programs [sections	G		
76.59(d)(2) and (4), 76.6 substitute program basis	61(e)(2) and (s, as explaine	4), or 76.63 (d in the next	referring to 76.6 paragraph.	1(e)(2) and (4))]; a	and (2) certain stations carried on a	Primary Transmitters: Television		
basis under specifc FC0 • Do not list the station h	C rules, regula nere in space	ations, or auth G—but do lis	norizations:		ent and Program Log)—if the	T GIGVIGION		
 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 multi-								
WETA-simulcast).			·	,	h stream separately; for example ion for broadcasting over-the-air in			
its community of license on which your cable sys Column 3: Indicate i	e. For example stem carried th in each case v	e, WRC is Ch ne station. whether the s	annel 4 in Wash	nington, D.C. This ork station, an inde	may be different from the channel ependent station, or a noncommercial east), "I" (for independent), "I-M"			
(for independent multication for the meaning of these	ast), "E" (for nose terms, see	oncommercia page (v) of th	ıl educational), d e general instru	or "E-M" (for nonce ctions located in the	ommercial educational multicast).			
planation of local service				,.				
•			•	•	stating the basis on which your tering "LAC" if your cable system			
carried the distant statio	on on a part-tii	ne basis bec	ause of lack of a	activated channel	capacity.			
					v payment because it is the subject stem or an association representing			
the cable system and a	primary trans	mitter or an a	ssociation repre	esenting the prima	ry transmitter, enter the designa-			
` ' '			•	•	ther basis, enter "O." For a further ed in the paper SA3 form.			
					y to which the station is licensed by the n which the station is identifed.			
Note: If you are utilizing				•				
		CHANN	EL LINE-UP	AN				
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)				
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LEGAL NAME OF OWN	ER OF CABLE S	/STEM:			SYSTEM ID#	
Northeast Tele					8559	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S	system during to ons in effect of 6.61(e)(2) and (sis, as explaine stations: With	he accounting In June 24, 19 4), or 76.63 (In the next respect to an	g period, except 181, permitting the referring to 76.6 paragraph. y distant stations	t (1) stations carrie ne carriage of cert s1(e)(2) and (4))];	s and low power television stations) ed only on a part-time basis under ain network programs [sections and (2) certain stations carried on a cable system on a substitute program	G Primary Transmitters: Television
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FORM SA3E. PAGE 3.					21/2=====	
LEGAL NAME OF OWN					SYSTEM ID#	Name
Northeast Tele	phone Com	pany LLC			8559	
PRIMARY TRANSMITT	ERS: TELEVISION	ON				
In General: In space carried by your cable s FCC rules and regular 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis s 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 WETA-simulcast). Column 2: Give th its community of licens on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you h cable system carried t carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these th Column 6: Give th	G, identify ever system during to ions in effect of 6.61(e)(2) and (6.61(e)(2)	y television of the accounting of June 24, 19 4), or 76.63 (ad in the next respect to any attorns, or authors, or account or authors, or an authors, or an authors, or an authors, or an authors, or authors, or an authors, or authors, or an authors, or an authors, or an authors, or a	g period, except g period, except 181, permitting the referring to 76.6 paragraph. It is attained to the second of	t (1) stations carried to carriage of certicle)(2) and (4))]; is carried by your one Special Statem of both on a substitute, see page (v) on program service ver-the-air designate column 1 (list each the television statington, D.C. This park station, an inde (for network multicon "E-M" (for noncontions located in the mplete column 5, od. Indicate by enactivated channel subject to a royalty etween a cable system of the prima channel on any of instructions located list the community with the community wit	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing try transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed.	Primary Transmitters: Television
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		CHANN	EL LINE-UP	AP		
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FURM SA3E. PAGE 3.					OVOTEM ID#				
Northeast Tele					SYSTEM ID# 8559	Name			
PRIMARY TRANSMITT	ERS: TELEVISION	ON							
carried by your cable FCC rules and regular 76.59(d)(2) and (4), 7 substitute program ba	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								
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FURINI SA3E. PAGE 3.					OVOTEM ID#	I			
Northeast Tele					SYSTEM ID# 8559	Name			
PRIMARY TRANSMITT									
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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.					21/2=====		
LEGAL NAME OF OW					SYSTEM ID#	Name	
Northeast Tele	ephone Com	pany LLC			8559		
PRIMARY TRANSMIT	ERS: TELEVISION	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))); and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as swETA-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 by concommercial educational or "E-M" (for nocommercial educational with station is outside the local ser							
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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	YSTEM:			SYSTEM ID#	Name	
Northeast Tele	phone Com	pany LLC			8559		
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76,59(l)(2) and (4), 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 station set period for the station set period for the station have a substitute basis. 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 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 inetwork multicast), "E" (for independent), "I-M" (for independent), "I-M" (for independent), "I-M" (for independent multicast), "E" (for noncomme							
Note: If you are utilizing	ig multiple chai	• •	•	•	charmer inte-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		
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE S	YSTEM:			SYSTEM ID#	Name	
Northeast Tele	phone Com	pany LLC			8559		
PRIMARY TRANSMITTI	ERS: TELEVISION	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) cartain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations: * Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. * List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for indep							
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	YSTEM:			SYSTEM ID#	Name	
Northeast Tele	phone Com	pany LLC			8559		
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.63 (f)(e)(2) and (4), 07.76.63 (f)(e)(2) and (4), 07.76.63 (f)(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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, or "E-M" (for network), "N-M" (for network multicast). "I" (for independent), "I-M" (for noncommercial educational), or "E-M" (for noncommercial educational), or "E-M" (for noncommercial educational), or "							
carried the distant stat	ion on a part-tiı	me basis bec	ause of lack of a	activated channel	capacity.		
					y payment because it is the subject stem or an association representing		
•			•	• .	ry transmitter, enter the designa- ther basis, enter "O." For a further		
					ed in the paper SA3 form. y to which the station is licensed by the		
FCC. For Mexican or 0	Canadian statio	ons, if any, giv	e the name of t	he community with	n which the station is identifed.		
Note: If you are utilizing	ng multiple char	•	·	•	channel line-up.		
	1	CHANN	EL LINE-UP	AV			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
			•	•			

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
Northeast Tele	phone Com	pany LLC			8559		
PRIMARY TRANSMITTI	RS: TELEVISION	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under 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 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 multicast).							
(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	ig multiple chai	•	·	•	cnannei iine-up.		
	ı	CHANN	EL LINE-UP	AW			
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: 2024/1 FORM SA3E. PAGE 4.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 8559 **Northeast Telephone Company LLC** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.							ACCOUNTING	PERIOD: 2024/1	
LEGAL NAME OF OWNER OF	CABLE SYST	EM:					SYSTEM ID#	Nama	
Northeast Telephone (Company	LLC					8559	Name	
SUBSTITUTE CARRIAGE	: SPECIAL	STATEMEN	T AND PROGRAM LOG					ı	
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.									
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE									
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?									
Note: If your answer is "No log in block 2. 2. LOG OF SUBSTITUTE			e blank. If your answer is "	Yes," you mu	ust complet	e the progr	am	Program Log	
period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love L Column 2: If the program Column 3: Give the call s Column 4: Give the broathe case of Mexican or Can Column 5: Give the mon first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	of every nor distant static gulations, or tion. Do not ucey" or "NB n was broad sign of the s deast station adian static th and day we "5/7." es when the Example: a er "R" if the I and regulatic ogramming	anetwork televition and that your authorizations authorizations are general of A Basketball: cast live, enter tation broadcan's location (thins, if any, the owner your systimus substitute program carried isted program ons in effect du	sion program (substitute pur cable system substituteds. See page (vi) of the generategories like "movies", or 76ers vs. Bulls." "Yes." Otherwise enter "N sting the substitute programe community to which the community with which the stem carried the substitute program was carried by your ced by a system from 6:01:10 was substituted for programing the accounting period.	d for the progeral instruction "basketball". o." m. station is licenstation is idenorogram. Use table system. 5 p.m. to 6:2 mming that year enter the let	ramming or one located List specificated by the stiffied). numerals, List the tin 8:30 p.m. so our system ter "P" if the	f another sin the paper in the	tation er n onth tely		
		E PROGRAM			EN SUBST		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		TIMES — TO	DELETION		
						_			
						_			
						<u> </u>			
						_			
						_			

FORM SA3E, PAGE 6.

ACCOUNTING PERIOD: 2024/1 SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 8559 Northeast Telephone Company LLC **PART-TIME CARRIAGE LOG** J In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and 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

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

FORM	SA3E. PAGE 7.							
	AL NAME OF OWNER OF CABLE SYSTEM: rtheast Telephone Company LLC	SYS	8559	Name				
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)								
IMP	during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	\$ 660,0 (Amount of gross receipts	055.00 s)					
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: • Complete block 1, showing your minimum fee. • Complete block 2, showing whether your system carried any distant television stations. • If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. • If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.								
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be kk 3 below.	e entered on line 1 of						
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be e elow.	entered on line 2 in block						
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoublock 4 below.	ıld 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.							
	Line 1. Enter the amount of gross receipts from space K. Line 2. Multiply the amount in line 1 by 0.01064.	\$ 660,0	055.00					
	Enter the result here. This is your minimum fee.	\$ 7,0	022.99					
	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identified any stations as "distant" by stating "Yes" in colum "Yes" in this block. • Did your cable system carry any distant television stations during the accounting periodic Yes—Complete the DSE schedule. No—Leave block 3 below blank and columns of the property of the pro	nn 4, you must check						
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero.	\$						
	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.	\$	_					
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.	\$ 7,0	022.99 Ca	able 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		0.00	submitting additional				
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00 Sec	eposits under ction 111(d)(7) nould contact				
	Line 4. FILING FEE	\$ 7	725.00 ad	ne Licensing Iditional fees. vision for the				
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 7,7	747.99 sı	appropriate form for ubmitting the				
	EFT Trace # or TRANSACTION ID # 27H850N7							
	Remit this amount via electronic payment payable to Register of Copyrights. (See p.	age (i) of the						
	general instructions located in the paper SA3 form and the Excel instructions tab fo							

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM I							
Name	Northeast Telephone Company LLC 85							
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable							
	system carried television broadcast stations							
	Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services							
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)							
for Further Information	Name Amy Perkins Telephone 920-617-7026							
	Address 450 Security Blvd (Number, street, rural route, apartment, or suite number)							
	Green Bay, WI 54313							
	(City, town, state, zip)							
	Email Amy.Perkins@nsight.com Fax (optional)							
	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations.							
O Certification	• I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)							
	(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or							
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or							
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.							
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]							
	X							
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2" button will avoid enabling Excel's Lotus compatibility settings.							
	Typed or printed name: Hollie Conard							
	Title: CFO & Treasurer (Title of official position held in corporation or partnership)							
	Date:							

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

ACCOUNTING PERIOD: 2024/1

LEGAL NAME OF OWNER	R OF CABLE SYSTEM:	SYSTEM ID#	Name		
Northeast Teleph	none Company LLC	8559	Name		
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act 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 informat paper SA3 form.	ion on when to exclude these amounts, see the note on page (vii) of the general instruction	is in the	Concerning Gross Receipts Exclusion		
	ting period did the cable system exclude any amounts of gross receipts for secondary tran carriers to satellite dish owners?	smissions			
X NO					
YES. Enter the	e total here and list the satellite carrier(s) below				
Name Mailing Address	Name Mailing Address				
INTEREST AS	SESSMENTS				
	e this worksheet for those royalty payments submitted as a result of a late payment or und n of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	erpayment.	Q		
Line 1 Enter the	amount of late payment or underpayment		Interest Assessment		
	x				
Line 2 Multiply lir	ne 1 by the interest rate* and enter the sum here				
	x	days			
Line 3 Multiply lin	ne 2 by the number of days late and enter the sum here	.00274			
Line 4 Multiply lin	ne 3 by 0.00274** enter here and on line 3, block 4,	0027			
	pace L (page 7)	_			
	(intere	st charge)			
	nterest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistaticensing Division at (202) 707-8150 or licensing@copyright.gov.	nce please			
** This is the d	ecimal equivalent of 1/365, which is the interest assessment for one day late.				
	filing this worksheet covering a statement of account already submitted to the Copyright Of he owner, address, first community served, accounting period, and ID number as given in t				
Owner Address					
First community se	erved				
Accounting period					
ID number					

Privacy Act Notice: Section 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address, and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office'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 filing, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2024/1

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

Step 2: Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space C of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number 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 particula station's DSE for the accounting period.

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

- Calculate a separate base rate fee for each subscriber group, using
 the rates given above; (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:

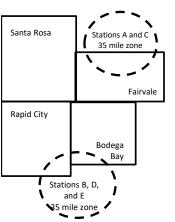
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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 Carried		Identification o	f Subscriber Groups	
				•	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
nin	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
s	B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
)-	C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
	D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
	E (network)	<u>0.25</u>	Fairvale	Stations B, D, and E	120,000.00
	TOTAL DSEs	2 472		TOTAL GROSS RECEIPTS	\$600,000,00

linimum Fee Total Gross Receipts	\$600,000.00
	x .01064
	00.004.00

Ψ0,001.00										
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: 2024/1

1	LEGAL NAME OF OWNER OF CABLE SYSTEM:									
•	Northeast Telephone Company LLC 8559									
	SUM OF DSEs OF CATEGORY "O" STATIONS:									
	Add the DSEs of each station Finter the sum bere and in line		0.00							
	Enter the sum here and in line	<u>.</u>	0.00							
2	Instructions:									
_	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3).									
Computation	In the column headed "DSE"	: for each indepe	endent station, give the DSE	as "1.0"; for ea	ach network or noncom-					
of DSEs for	mercial educational station, give the DSE as ".25."									
Category "O"	CATEGORY "O" STATIONS: DSEs									
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Add rows as										
necessary.										
Remember to copy all										
formula into new										
rows.										

Name	Northeast Telepi		LLC				S	8559
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2: For figure should correct Column 3: For Column 4: Divide carried out at less Column 5: For give the type-value Column 6: Mul	call sign of all dista- each station, give is spond with the infor- each station, give is ide the figure in col- ast to the third deci- each independent eas ".25."	the number of rmation given the total numb umn 2 by the total point. This station, give the blumn 4 by the	in space J. Calculate er of hours that the s figure in column 3, ar is is the "basis of carr ne "type-value" as "1.	stem carried the sign only one DSE for tation broadcast of the distribution of the dis	tation during the accounting each station. Ever the air during the accounting the accounting the account at the column 4.	ounting period. This figure must ucational station,	
Capacity		C	CATEGORY	LAC STATIONS	S: COMPUTAT	TION OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTE	URS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS C CARRIA VALUE			iΕ
			÷		=	x x	=	
			÷		=	x	=	
			÷			x x	<u>=</u>	
			÷		<u> </u>	x		
			÷		=	x	=	
	SUM OF DSEs OF 0 Add the DSEs of ea Enter the sum he	ch station.		chedule,		0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried by y tions in effect on Broadcast one or space I). Column 2: For e at your option. This I Column 3: Enter Column 4: Divide	our system in subsit Cotober 19, 1976 or more live, nonnetwach station give the figure should corretthe number of dayse the figure in colun	titution for a property (as shown by york programs or number of livespond with the sin the calendary by the fig	rogram that your syst the letter "P" in colun during that optional c re, nonnetwork progra e information in spac- dar year: 365, except ure in column 3, and	em was permitted in 7 of space I); a arriage (as shown b ams carried in sub e I. in a leap year. give the result in	Programs) if that station: If to delete under FCC rule and by the word "Yes" in column costitution for programs that column 4. Round to no let f the general instructions	2 of t were deleted ss than the third	orm).
		SU	BSTITUTE	BASIS STATIO		ATION OF DSEs		
	SIGN C	NUMBER OF PROGRAMS	3. NUMB OF DA' IN YEA	YS	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		-		=		-		=
				=			**************************************	
		······	-	=		-		=
		······	-	=				=
	SUM OF DSEs OF S Add the DSEs of ea Enter the sum he	ch station.		S: chedule,		0.00		
5	TOTAL NUMBER OF number of DSEs appl			e boxes in parts 2, 3, a	and 4 of this sched	ule and add them to provide	e the tota	
Total Number	1. Number of DSE	s from part 2●				>	0.00	
of DSEs	2. Number of DSE	Es from part 3●				<u> </u>	0.00	
	3. Number of DSE	Es from part 4 ●				-	0.00	
	TOTAL NUMBER OF	DSEs						0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2024/1

LEGAL NAME OF C							S'	YSTEM ID#	Name
Northeast Tele	ephone Compa	any LLC						8559	Nume
Instructions: Block A:	ck A must be com	pleted.							
 If your answer if schedule. 	"Yes," leave the re	emainder of p	part 6 and part	7 of the DSE sche	edule blank aı	nd complete pa	art 8, (page 16) of	the	6
	"No," complete blo			TELEVIOLONI M	ADVETO				Computation of
Is the cable system	m located wholly o			ELEVISION MA		ection 76.5 of l	FCC rules and red	gulations in	3.75 Fee
effect on June 24,	, 1981?		•				·	ga.a	
	iplete part 8 of the plete blocks B and		DO NOT COMI	PLETE THE REMA	AINDER OF F	PART 6 AND 7			
<u> </u>				LAGE OF DEDA	WITTED DO	NE -			
Column 1:	I ist the call signs			Part 2, 3, and 4 of			tem was nermitte	d to carry	
CALL SIGN	under FCC rules	and regulatione DSE Sche	ons prior to Jur dule. (Note: Th	ne 25, 1981. For fune letter M below r	urther explana	ation of permitte	ed stations, see th	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru	ules and regu	lations cited be	sis on which you o elow pertain to tho rket quota rules [7	se in effect o	n June 24, 198		j tα	
67 W W W 102	B Specialty stati C Noncommeric D Grandfathered	cal educational distant	al station [76.5 65) (see parag	6.59(d)(1), 76.61(d) 9(c), 76.61(d), 76.0 raph regarding sul	63(a) referrin	g to 76.61(d)	. , ,		
	•	ant to individeviously carrie	ual waiver of F ed on a part-tin	CC rules (76.7) ne or substitute ba contour, [76.59(d)(•		erring to 76.61(e)	(5)	
	M Retransmission	on of a distar	nt multicast stre	eam.	. ,	, , ,	,	. ,	
Column 3:		e stations ide	entified by the le	parts 2, 3, and 4 etter "F" in column			orksheet on page	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
								0.00	
		В	LOCK C: CO	MPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule				_	
Line 2: Enter the	e sum of permitte	ed DSEs fro	m block B abo	ove					
Line 3: Subtract (If zero, I				r of DSEs subjec 7 of this schedu		rate.		0.00	
Line 4: Enter gro	oss receipts from	ı space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply I	ine 4 by 0.0375	and enter s	um here				X		permited/ partially nonpermitted
Line 6: Enter tota	al number of DS	Es from line	3				<u> </u>		carriage? If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 ar	nd enter her	e and on line	2, block 3, space	e L (page 7)	1		0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Northeast Telephone Company LLC 8559									Name
	T			SION MARKETS				Т	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation of 3.75 Fee
									3.75 Fee

						•			
<mark></mark>									

					<u> </u>				
	<u></u>								

Na	LEGAL NAME OF OWN	NER OF CABLE	E SYSTEM:					SYSTEM ID#		
Name	Northeast Tele	phone Con	npany LLC					8559		
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections									
		DEDMITT	ED DOE EOD OTA	TIONS CADDIS		ND CLIDCTI	TUTE DAGIC			
	1. CALL SIGN	2. PRIC	OR 3. ACC	COUNTING ERIOD	4. BASIS OF CARRIAGE	5. PF	RESENT DSE	6. PERMITTED DSE		
	OIOIV	DOL		LINIOD	OARTHAGE		JOL	DOL		
7 Computation of the Syndicated	Instructions: Block A must be completed. In block A: 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. BLOCK A: MAJOR TELEVISION MARKET									
Exclusivity			2200.	(71.11.11.1001)	1222 1131314 1133 11 11	<u></u>				
Surcharge	l <u> </u>	,	, ,	or television mai	ket as defned by section		C rules in effect J	lune 24, 1981?		
	Yes—Complete	blocks B and	IC.		No—Proceed to part 8					
	BLOCK B: Ca	arriage of VHF	-/Grade B Contour	Stations	BLOC	K C: Compu	ıtation of Exemp	ot DSEs		
	Is any station listed ir commercial VHF stati or in part, over the ca	orior to March 3	,							
	Yes—List each s X No—Enter zero a		th its appropriate per part 8.	mitted DSE	Yes—List each s X No—Enter zero a			te permitted DSE		
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	N DSE				
		-								
			TOTAL DSEs	0.00			TOTAL DSE	es 0.00		

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Northeast Telephone Company LLC	SYSTEM ID# 8559	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	660,055.00	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated
	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	Exclusivity Surcharge
• Is any	/ portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE .	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ \$		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

	LEGAL NAN	ME OF OWNER OF CABLE SYSTEM: SYST	EM ID#								
Name	l	Northeast Telephone Company LLC	8559								
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		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$									
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here									
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ _ \$									
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.									
		F. Multiply line D by line E and enter here									
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)									
		Syndicated Exclusivity Surcharge	<u></u> .								
8	You m	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. bck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.									
Computation		ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.									
of											
-		ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below									
Base Rate Fee	blank										
		is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers									
	were lo	ocated within that station's local service area and others were located outside that area. For the definition of a station's "local									
	service	service area," see page (v) of the general instructions.									
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS										
	• Did y	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?									
	X Yes—Complete part 9 of this schedule. No—Complete the following sections.										
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE									
	Section 1	Enter the amount of gross receipts from space K (page 7)▶									
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes,"									
		use the total number of DSEs from part 5.)									
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.									
		A. Enter 0.01064 of gross receipts (the amount in section 1)									
		B. Enter 0.00701 of gross receipts (the amount in section 1)									
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here									
		D. Multiply line B by line C and enter here									
		E. Add lines A and D. This is your base rate fee. Enter here									
		and in block 3, line 1, space L (page 7)									
		Base Rate Fee	0.00								

DSE SCH	EDULE. PAGE 17.	ACCOUNTING	PERIOD: 2024/1
LEGAL N	AME OF OWNER OF CABLE SYSTEM:	YSTEM ID#	Name
North	east Telephone Company LLC	8559	Name
Section	If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.		
4			8
	A. Enter 0.01064 of gross receipts (the amount in section 1)		J
	(the amount in section 1) \$		
	B. Enter 0.00701 of gross receipts		Computation
	(the amount in section 1) \$		of Base Rate Fee
	C. Multiply line B by 3.000 and enter here \$		
	D. Enter 0.00330 of gross receipts		
	(the amount in section 1) \$		
	E. Subtract 4.000 from total DSEs		
	(the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here >		
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)		
	Base Rate Fee ► \$	0.00	
IMPOR	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast s	signals shall	
	be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel lir		9
•	o. eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to	exclude	Computation
receipt	s from subscribers located within the station's local service area, from your system's total gross receipts. To take adva		of
exclusi	on, you must:		Base Rate Fee and
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to th or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the		Syndicated
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for ea		Exclusivity
Finally	: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		Surcharge for
	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below		Partially Distant
	cable system is wholly located outside all major television markets, complete block A only.	. However,	Stations, and
How to	Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
-	: For each community served, determine the local service area of each wholly distant and each partially distant station to that community.	you	Stations
	For each wholly distant and each partially distant station you carried, determine which of your subscribers were located as the control of th		
	the station's local service area. A subscriber located outside the local service area of a station is distant to that station ne token, the station is distant to the subscriber.)	າ (and, by	
Step 3	: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Eac	ch	

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:

- \bullet 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 television market, give each station's DSE as you gave it in block B, part 6 of this schedule.
- Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.
- Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of 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.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 8559 **Northeast Telephone Company LLC** Guidance for Computing the Royalty Fee for Partially Permitted/Partially Nonpermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNE Northeast Telepho						S	YSTEM ID# 8559	Name
-		-	RASEDA	TE FEES FOR EACH		IRER GROUD	3303	
Ь		SUBSCRIBER GROU				SUBSCRIBER GROU	UP	
COMMUNITY/ AREA	Pulask			COMMUNITY/ AREA				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
						<u> </u>		Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
						-		
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 466	,462.00	Gross Receipts Secon	nd Group	\$ 1	54,248.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Luxem	burg		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	\$ 39	,190.00	Gross Receipts Fourth	n Group	\$	155.00	
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
				Ш				
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$	0.00	
						1		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP	
FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP	
	9
Y/ AREA 0 COMMUNITY/ AREA 0	3 Computati
N DSE CALL SIGN DSE CALL SIGN DSE	of
	ase Rate
	and
s s	Syndicate
	Exclusivi
	Surcharg
	for
	Partially Distant
	Stations
	Otations
pts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	
Sissi Sissipa	
ee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00	
SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP	
Y/ AREA 0 COMMUNITY/ AREA 0	
N DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	
pts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	

	8559	SYS						Northeast Telephon
				TE FEES FOR EACH				BLO
9		SUBSCRIBER GROUP	TENTH			SUBSCRIBER GROU	NINTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations								
		_				-		
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gro
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro
)	SUBSCRIBER GROUP	ΓWELVTH	٦	JP	SUBSCRIBER GROU	EVENTH	EL
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
			-			-		
							•	
			-					
			-			-		
			-					
	<mark>- </mark>					-		
	0.00		Group	Total DSEs Gross Receipts Fourth	0.00	\$	roup	Total DSEs Gross Receipts Third Gr

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP THIRTEENTH SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP	
THIRTEENTH SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP	
	9
AREA 0 COMMUNITY/ AREA 0	o mputati
DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	of
	se Rate I
	and
	yndicate
	xclusivit
	Surcharg for
	Partially
	Distant
	Stations
0.00 Total DSEs 0.00	
s First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	
Base Rate Fee Second Group \$ 0.00	
FIFTEENTH SUBSCRIBER GROUP SIXTEENTH SUBSCRIBER GROUP	
AREA 0 COMMUNITY/ AREA 0	
DSE CALL SIGN DSE CALL SIGN DSE	
0.00 Total DSEs 0.00	
s Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	

EGAL NAME OF OWNE Northeast Telepho						S	YSTEM ID# 8559	Name
Bl	OCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	NTEENTH	SUBSCRIBER GRO		EIGHTEENTH SUBSCRIBER GROUP				9
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				Computatio
CALL SIGN	DSE	CALL SIGN	DSE	DSE CALL SIGN DSE CALL SIGN DSE				
								of Base Rate F
								and
								Syndicated
								Exclusivity
		-						Surcharge
								for Partially
								Distant
		-						Stations
			0.00	T-4-1 DOF-		<u> </u>	0.00	
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
a se Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NII	NTEENTH	SUBSCRIBER GRO	JP		TWENTIETH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ ARE	COMMUNITY/ AREA0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u> </u>	-				<u></u>		
		-						
		-						
otal 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	Froup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	e base rat			Base Rate Fee Fou		\$	0.00	

LEGAL NAME OF OWN Northeast Teleph						S'	YSTEM ID# 8559	Name
B	LOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
13WT	NTY-FIRST	SUBSCRIBER GRO	UP	TWEN	TY-SECOND	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fed
								Syndicated
		+						Exclusivity
								Surcharge
		-						for
								Partially
		-						Distant Stations
								Otations
		-						
Total DSEs			0.00	Total DSEs		11	0.00	
Total DSEs Gross Receipts First (roup	•	0.00	Total DSEs Gross Receipts Sec	and Croup	•	0.00	
Gioss Receipts Filst (ыоир	\$	0.00	Gloss Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TWEN	ITY-THIRD	SUBSCRIBER GRO	UP	TWEN	TY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
	up	[*	3.00	300 Rate 1 66 i Oui	Стоир	[*	0.00	
Base Rate Fee: Add t Enter here and in bloo			criber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNE Northeast Telepho						S	YSTEM ID# 8559	Name
Bl	OCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	TY-FIFTH	SUBSCRIBER GRO		H		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
		-						Distant
								Stations
Γotal DSEs	•		0.00	Total DSEs	•	!!	0.00	
Gross Receipts First G	roun	\$	0.00	Gross Receipts Sec	and Group	\$	0.00	
oroso rescipto i not o	очр		0.00	Cross recorpts eee	ond Oroup	<u>*</u>		
3ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TWENTY-S	SEVENTH	SUBSCRIBER GRO	UP	TWE	NTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
	<u> </u>	-				<u></u>		
		-				n -		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
•	٠				•			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the			criber group	as shown in the boxe	es above.	\$		

MPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP BESCRIBER GROUP O COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fees and Computation Of Base Rate Fees
0 COMMUNITY/ AREA 0 Computation CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE of Base Rate For and
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE of Base Rate For and
CALL SIGN DSE CALL SIGN DSE OF Base Rate For and
Base Rate Fo
Coundinated
Syndicated
Exclusivity
Surcharge for
Partially
Distant
Stations Stations
<u> </u>
0.00 Total DSEs 0.00
0.00 Gross Receipts Second Group \$ 0.00
Siece Noscipio Second Group
0.00 Base Rate Fee Second Group \$ 0.00
BSCRIBER GROUP THIRTY-SECOND SUBSCRIBER GROUP
0 COMMUNITY/ AREA 0
CALL SIGN DSE CALL SIGN DSE
0.00
0.00 Total DSEs 0.00
0.00 Gross Receipts Fourth Group \$ 0.00
0.00 Base Rate Fee Fourth Group \$ 0.00

EGAL NAME OF OWNER Northeast Telepho						S	YSTEM ID# 8559	Name
				ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	Y-THIRD	SUBSCRIBER GROU		Ħ		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		0.122 2.011						Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge for
						<u> </u>		Partially
								Distant
								Stations
Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	auc	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
orest resolpto rillet on	эчр			0.000 1.000.p.0 0000	ona Oroap	<u>*</u>		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
THIRT	Y-FIFTH	SUBSCRIBER GROU	JP	TH	IIRTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						H		
		-				-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
,	•			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	F			
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
eceipts Third Gr	oup	\$	0.00	Gross Receipts Four	th Group	\$ \$	0.00	

LEGAL NAME OF OWN Northeast Teleph						S	YSTEM ID# 8559	Name
E	BLOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
THIRTY	-SEVENTH	SUBSCRIBER GRO	UP	THIE	RTY-EIGHTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
								Syndicated Exclusivity
		-	<u></u>					Surcharge
								for
		H				 		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	
THIF	RTY-NINTH	SUBSCRIBER GRO	UP		FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
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 boxe	es above.	\$		

LEGAL NAME OF OWNE Northeast Telepho						S	YSTEM ID# 8559	Name
BL	OCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
FOR	TY-FIRST	SUBSCRIBER GROU		FOR	TY-SECOND	SUBSCRIBER GROU	JP	٥
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
<u> </u>								Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
						u—		Stations
		-						
						1		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
s ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FOR1	Y-THIRD	SUBSCRIBER GROU	JP	FOR	TY-FOURTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				<u></u>		
		-						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE Northeast Telepho						S	YSTEM ID# 8559	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	TY-FIFTH	SUBSCRIBER GRO		H		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicate
								Exclusivit
		-						Surcharge for
								Partially
		-						Distant
								Stations
otal DSEs	1		0.00	Total DSEs			0.00	
						_	•	
iross Receipts First G	oup	\$	0.00	Gross Receipts Sec	ona Group	\$	0.00	
ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FORTY-S	SEVENTH	SUBSCRIBER GRO	JP	FOR	RTY-EIGHTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-				"		
otal DSEs			0.00	Total DSEs			0.00	
iross Receipts Third G	iroup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxe	es above.	\$		

Computation of Base Rate Figure 1	O DSE			TE FEES FOR EACH		COMPUTATION OF		5.
O COMMUNITY/ AREA	O DSE	SUBSCRIBER GROUP	FIFTIETH				OUN A. C	BL
Computation of Base Rate Fee Second Group \$ 0.00 Computation of Base Rate Fee Second Group \$ 0.00 FIFTY-FIRST SUBSCRIBER GROUP Y/AREA CALL SIGN DSE Base Rate Fee Second Group Surcharge for Partially Distant Stations Computation of Base Rate Fee Second Group Surcharge for Partially Distant Stations	DSE					SUBSCRIBER GROU	Y-NINTH	
N DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fe and Syndicates Exclusivity Surcharge for Partially Distant Stations Stat				COMMUNITY/ AREA	0			COMMUNITY/ AREA
Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations		CALL SIGN	DSE		DSE	CALL SIGN		CALL SIGN
Syndicated Exclusivity Surcharge for Partially Distant Stations				0.122.2.0.1				
Partially Distant Stations								
Surcharge for Partially Distant Stations O.00 Total DSEs O.00 Gross Receipts Second Group \$ 0.00 FIFTY-FIRST SUBSCRIBER GROUP FIFTY-FIRST SUBSCRIBER GROUP FOR Partially Distant Stations O.00 Gross Receipts Second Group \$ 0.00 FIFTY-FIRST SUBSCRIBER GROUP FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0		_				_		
for Partially Distant Stations					•			
Partially Distant Stations								
Distant Stations O.00 Total DSEs O.00 Gross Receipts Second Group FIFTY-FIRST SUBSCRIBER GROUP FIFTY-FREST SUBSCRIBER GROUP OCMMUNITY/ AREA								
0.00							• • • • • • • • • • • • • • • • • • • •	
pots First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Gross Receipts Second Group \$ 0.00								
pots First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Gross Receipts Second Group \$ 0.00								
pots First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Gross Receipts Second Group \$ 0.00								
pots First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Gross Receipts Second Group \$ 0.00								
pots First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Gross Receipts Second Group \$ 0.00								
pots First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Gross Receipts Second Group \$ 0.00								
pots First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Gross Receipts Second Group \$ 0.00	0.00			Total DSEs	0.00			otal DSEs
Base Rate Fee Second Group \$ 0.00 FIFTY-FIRST SUBSCRIBER GROUP Y/ AREA 0 COMMUNITY/ AREA 0		¢	Croup			•	oup.	
FIFTY-FIRST SUBSCRIBER GROUP Y/ AREA 0 COMMUNITY/ AREA 0	0.00	-3	Gloup	Gloss Receipts Secon	0.00	3	Jup	Bioss Receipts Filst Gi
Y/ AREA 0 COMMUNITY/ AREA 0	0.00	\$	l Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gro
)	SUBSCRIBER GROUP	SECOND	FIFT	JP	SUBSCRIBER GROU	Y-FIRST	FIFT
L DOE LONG LOOK LOOK LOOK LOOK LOOK	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE CALL SIGN DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
							•••••	
		-				-		
0.00 Total DSEs 0.00	0.00			Total DSFs	0.00			otal DSEs
		•	Group			•	oup.	Gross Receipts Third G
ots Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	3.00	<u> </u>	Огоир	Oross Neceibis Foulti	0.00	Ψ	oup	orosa izereibis itiliid Al
ee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	oup	Base Rate Fee Third G

Name	8559	SYS				.E SYSTEM: pany LLC		Northeast Telepho
				TE FEES FOR EACH				
9		SUBSCRIBER GROUP	-FOURTH			SUBSCRIBER GROU	Y-THIRD	
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I								
and								
Syndicate						-		
Exclusivit Surcharg								
for						-		
Partially								
Distant						-		
Stations						-		
						-		
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gro
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro
	1	SUBSCRIBER GROUP	TY-SIXTH	FIF	JP	SUBSCRIBER GROU	Y-FIFTH	FIFT
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		_				-		
						-		
						=		
						-		
						-		
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth		\$	oup	Total DSEs Gross Receipts Third Gr

LEGAL NAME OF OWNI Northeast Teleph						S	YSTEM ID# 8559	Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EA	CH SUBSCF	RIBER GROUP		
	SEVENTH	SUBSCRIBER GRO		t e		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicated
								Exclusivity
		-						Surcharge
								for Partially
								Distant
								Stations
			0.00	Tatal DOEs		Ш	0.00	
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FIF	TY-NINTH	SUBSCRIBER GRO	UP		SIXTIETH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						H		
		-						
		-						
		-	···			+		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
•	•				•			
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
Base Rate Fee Third (Base Rate Fee: Add the Enter here and in block	ne base rat					\$	0.00	

	BLE SYSTEM: npany LLC				S	YSTEM ID# 8559	Name
BLOCK A:	COMPUTATION O	BASE RA	ATE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
SIXTY-FIRS	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	Computati
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate I
							and
					 		Syndicate
							Exclusivit
							Surcharg for
							Partially
							Distant
							Stations
otal DSEs		0.00	Total DSEs	•		0.00	
	<u> </u>	0.00		and Group	•	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	
SIXTY-THIRE	SUBSCRIBER GRO	UP	SIX	TY-FOURTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE		DSE	CALL SIGN	DCE			
GALL GIGIT BOL	CALL SIGN	DSE		DSE	CALL SIGN	DSE	
O/LE CICIV BOL	CALL SIGN	DSE		DSE	CALL SIGN	DSE	
ONEE GIGIN BOLL	CALL SIGN	DSE		DSE	CALL SIGN	DSE	
S/ALE SIGN BOL	CALL SIGN	DSE		DSE	CALL SIGN	DSE	
	CALL SIGN	DSE		DSE	CALL SIGN	DSE	
	CALL SIGN	DSE		DSE	CALL SIGN	DSE	
	CALL SIGN	Doc		DSE	CALL SIGN	DSE	
	CALL SIGN	Doc		DSE	CALL SIGN	DSE	
	CALL SIGN	Doc		DSE	CALL SIGN	DSE	
	CALL SIGN	Doc		DSE	CALL SIGN	DSE	
	CALL SIGN	Doc		DSE	CALL SIGN	DSE	
	CALL SIGN	Doc		DSE	CALL SIGN	DSE	
	CALL SIGN			DSE	CALL SIGN	DSE	
	CALL SIGN			DSE	CALL SIGN	DSE	
	CALL SIGN	0.00	Total DSEs	DSE	CALL SIGN	DSE	
Total DSEs	S S				\$		
Fotal DSEs Gross Receipts Third Group		0.00	Total DSEs		\$	0.00	
Fotal DSEs		0.00	Total DSEs	rth Group	\$	0.00	

Northeast Telephone (CABLE SYS					S	YSTEM ID# 8559
				TE FEES FOR EAC			
	IFTH SUBS	CRIBER GRO	UP 0	Ti .		H SUBSCRIBER GRO	UP 0
COMMUNITY/ AREA			U	COMMUNITY/ AREA			U
CALL SIGN DS	SE CA	LL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs			0.00	Total DSEs			0.00
iross Receipts First Group	\$		0.00	Gross Receipts Seco	ond Group	\$	0.00
3ase Rate Fee First Group	\$		0.00	Base Rate Fee Seco	ond Group	\$	0.00
SIXTY-SEVE	ENTH SUBS	CRIBER GRO	UP	SIX	(TY-EIGHT	SUBSCRIBER GRO	UP
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0
CALL SIGN DS	SE CA	LL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs			0.00	Total DSEs			0.00
Gross Receipts Third Group	\$		0.00	Gross Receipts Four	th Group	\$	0.00
JIUSS RECEIDIS TIIIU CITTUT	*				C. 5up	<u>*</u>	3.00
Bross Receipts Trilla Group						1	

			LEGAL NAME OF OWNER OF CABLE SYSTEM: Northeast Telephone Company LLC 8559									
	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SIXTY-NINTH SUBSCRIBER GROUP SEVENTIETH SUBSCRIBER GROUP											
i I	0	OODSONDER SKOC	VEIVILIII	COMMUNITY/ AREA	0	OODGONIDEN GIVEN	1-14114111	COMMUNITY/ AREA				
Computati	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN				
Base Rate						- 11.01.11.11.11.11.11.11.11.11.11.11.11.1						
Syndicate							•					
Exclusivi												
Surcharg for												
Partially												
Distant Stations			•									
			•				•					
			•				•					
	0.00			Total DSEs	0.00			otal DSEs				
=	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	nun	Gross Receipts First Gro				
- -	0.00	*	а Огоар	Gross receipts occor	0.00	4	Jup	ross receipts i list Or				
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	ase Rate Fee First Gro				
		SUBSCRIBER GROU	-SECOND			SUBSCRIBER GROU	Y-FIRST					
J	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA				
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN				
			•									
			•			-	•					
			•			- 1111111111111111111111111111111111111	•					
			•				•					
						-						
			•				•					
_	0.00			Total DSEs	0.00			otal DSEs				
_	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third Gr				
7	0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	oup	sase Rate Fee Third Gr				

SYSTEM ID# 8559 Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Northeast Telephone Company LLC 8559									
S FOR EACH SUBSCRIBER GROUP	ACH SUBS	TE FEES FOR E	F BASE RA	COMPUTATION OF	OCK A: C	BL				
SEVENTY-FOURTH SUBSCRIBER GROUP	NTY-FOUR	SEVI	DUP	SUBSCRIBER GRO	Y-THIRD	SEVENT				
JNITY/ AREA 0 Computatio	EA	COMMUNITY/ AF	0			COMMUNITY/ AREA				
		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN				
Base Rate Fo										
and										
Syndicated										
Exclusivity										
Surcharge for										
Partially										
Distant										
Stations										
				-						
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······································										
SEs 0.00	•	Total DSEs	0.00			Total DSEs				
Receipts Second Group \$ 0.00	cond Grour		0.00	\$	oup	Gross Receipts First Gr				
<u> </u>	oona Oroa	Cross rescipto s		<u>*</u>	очр					
ate Fee Second Group \$ 0.00	cond Group	Base Rate Fee S	0.00	\$	oup	Base Rate Fee First Gr				
SEVENTY-SIXTH SUBSCRIBER GROUP	VENTY-SIX	SI	DUP	SUBSCRIBER GRO	TY-FIFTH	SEVEN				
JNITY/ AREA 0	EA	COMMUNITY/ AF	0			COMMUNITY/ AREA				
SIGN DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN				
<u></u>										
<u> </u>										
<u> </u>										
<u> </u>										
SEs <u>0.00</u>		Total DSEs	0.00			Total DSEs				
	ourth Group	Gross Receipts F	0.00	\$	roup	Gross Receipts Third G				
deceipts Fourth Group \$ 0.00		H								

	LEGAL NAME OF OWNER OF CABLE SYSTEM: Northeast Telephone Company LLC 8559									
	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP					
OMMINITY/ AREA	H SUBSCRIBER GRO		t t		SUBSCRIBER GROU		9			
		0	COMMUNITY/ ARE	Α		0	Computatio			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of			
							Base Rate F			
							and			
							Syndicated			
							Exclusivity			
							Surcharge for			
							Partially			
							Distant			
							Stations			
······································										
otal DSEs		0.00	Total DSEs	!		0.00				
Gross Receipts First Group	e	0.00	Gross Receipts Sec	eand Group	\$	0.00				
Bross Receipts First Group	\$	0.00	Gloss Receipts Sec	ond Group	3	0.00				
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00				
SEVENTY-NINTI	H SUBSCRIBER GRO	UP		EIGHTIETH	I SUBSCRIBER GROU	JP				
COMMUNITY/ AREA		0	COMMUNITY/ ARE	A		0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
······································										
······										
		0.00	Total DSEs			0.00				
otal DSEs			Gross Receipts Fou	rth Group	\$	0.00				
otal DSEs Gross Receipts Third Group	\$	0.00	•							
	\$	0.00								
	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00				

LEGAL NAME OF OWNER OF CABLE SYSTEM: Northeast Telephone Company LLC 8559									
BL	OCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCR	RIBER GROUP			
EIGH ⁻	TY-FIRST	SUBSCRIBER GRO		EIGH	TY-SECOND	SUBSCRIBER GROU	JP	0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate F	
								and	
		-						Syndicated	
								Exclusivity	
								Surcharge for	
								Partially	
								Distant	
								Stations	
		-							
		-							
		-							
otal DSEs	•		0.00	Total DSEs	'		0.00		
Gross Receipts First Gr	oup	<u> </u>	0.00	Gross Receipts Sec	and Croup	•	0.00		
Bross Receipts First Gr	oup	\$	0.00	Gloss Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
EIGHT	Y-THIRD	SUBSCRIBER GRO	JP	EIGH	ITY-FOURTH	SUBSCRIBER GROU	JP		
OMMUNITY/ AREA	***************************************		0	COMMUNITY/ ARE	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-							

		-							
		-							
		-							
		-							
otal DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third G	roun	¢	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
saso nate i ee miid G	Jup	Ψ	5.00	Last Nate ee ou	.ar Group	<u> </u>	0.00		
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxe	es above.	\$			

Base Rate Fee First Group Base Rate Fee First Group Base Rate Fee First Group COMMUNITY/ AREA O CALL SIGN DSE CALL	LEGAL NAME OF OWNER OF CABLE SYSTEM: Northeast Telephone Company LLC 8559									
COMMUNITY AREA 0 COMMUNITY AREA 0 COMPUTED AREA CALL SIGN DSE CALL SIGN					TE FEES FOR EAC	CH SUBSCF	RIBER GROUP			
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE		Y-FIFTH	SUBSCRIBER GRO		t e		SUBSCRIBER GROU		۵	
CALL SIGN DSE CA	COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0		
Base Rate Fee First Group SOMMUNITY/ AREA OCOMMUNITY/ AREA OCOMMUNITY/ AREA OCCUMENT/ AREA OCCUM		DSE	CALL SIGN	DSE	#		CALL SIGN	DSE	of	
Synding Exclusion Surch State State State See Seeing Second Group Sees Seeing Seeing Seeing Sees Sees Sees Sees Sees Sees Sees See									Base Rate F	
Exclusion of the part of the p							<u> </u>		and	
Surch for Particular Statistics of the Partic			-						Syndicated	
for particular process of the particular pro									Exclusivity	
Parti Dist Station Total DSEs			-				<u> </u>		for	
Total DSEs O.00 Total DSEs O.00 Gross Receipts First Group Base Rate Fee First Group EIGHTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE									Partially	
Total DSEs O.00 Total DSEs O.00 Gross Receipts First Group Base Rate Fee First Group EIGHTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE			-						Distant	
Gross Receipts First Group Sase Rate Fee First Group Base Rate Fee Second Group EIGHTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL S			-						Stations	
Gross Receipts First Group Sase Rate Fee First Group Sase Rate Fee First Group EIGHTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SI							<u></u>			
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 EIGHTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CAL										
Gross Receipts First Group South Strict Group										
Gross Receipts First Group South Strict Group										
Gross Receipts First Group Sase Rate Fee First Group Sase Rate Fee First Group EIGHTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SI								0.00		
Base Rate Fee First Group EIGHTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE							-	-		
EIGHTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	EIGHTY-S	EVENTH	SUBSCRIBER GRO	JP	EIGI	HTY-EIGHTH	I SUBSCRIBER GROU	JP		
	COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0		
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			-							
			-							
			-							
Tatal DCTs 0.00										
0.00 Table DOT-										
Total DSES U.00 Total DSES U.00	Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Northeast Telephone Company LLC 8559									
				ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP			
	Y-NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of	
3.12.3.3.								Base Rate Fo	
								and	
								Syndicated	
								Exclusivity	
		-						Surcharge for	
								Partially	
		_						Distant	
								Stations	
	.								
Γotal DSEs	1		0.00	Total DSEs	•	!!	0.00		
Gross Receipts First Gr	oun	\$	0.00	Gross Receipts Sec	and Group	\$	0.00		
Sioos recocipio i list Ci	оир	•	0.00	Cross rescipts see	ona Oroap		0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
NINE	ΓY-FIRST	SUBSCRIBER GRO	JP	NINE	TY-SECOND	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-							
						<u></u>			
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Page Pate For Third C	rour		0.00	Book Bata Fair F	eth Carrie		0.00		
Base Rate Fee Third G	roup	*	0.00	Base Rate Fee Four	ші Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$			

BLOCK A:		LEGAL NAME OF OWNER OF CABLE SYSTEM: Northeast Telephone Company LLC 8559										
			TE FEES FOR EA									
	SUBSCRIBER GRO		ii		SUBSCRIBER GRO							
COMMUNITY/ AREA		0	COMMUNITY/ ARE	A		0						
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
					···							
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						
NINETY-FIFTH	SUBSCRIBER GRO	UP	N	INETY-SIXTH	SUBSCRIBER GRO	UP						
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 Fou	ırth Group	\$	0.00						
Base Rate Fee Third Group	Base Rate Fee Fou	irth Group	\$	0.00								

COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SUBSCRIBER GROUP O COMMUNITY/ARFA O 9	IBER GROUP	SLIBSCR					LEGAL NAME OF OWNER OF CABLE SYSTEM: Northeast Telephone Company LLC 8559									
		OUDOCIN	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL									
	SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GROU	EVENTH										
			COMMUNITY/ AREA	0			COMMUNITY/ AREA									
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE of	CALL SIGN			DSE	CALL SIGN	DSE	CALL SIGN									
Base Rate F					0.1223131											
and																
Syndicate					-											
Exclusivity				•	-											
Surcharge for					-											
Partially					-											
Distant		•			-	•										
Stations																
					-											
					-											
<u> </u>					-											
0.00 Total DSEs 0.00			Total DSFs	0.00	•		otal DSEs									
	•	d Croup			¢	oup.	Gross Receipts First Gr									
\$ 0.00 Gross Receipts Second Group \$ 0.00	4	a Group	Gross Necelpts Secon	0.00	4	Jup	organis i list Git									
\$ 0.00 Base Rate Fee Second Group \$ 0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gro									
SUBSCRIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP	SUBSCRIBER GROU	NDREDTH	ONE HU	JP	SUBSCRIBER GROU	Y-NINTH	NINET									
O COMMUNITY/ AREA O			COMMUNITY/ AREA	0			COMMUNITY/ AREA									
CALL SIGN DSE CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN									
	_				-											
					-											
0.00 Total DSEs 0.00			Total DSEs	0.00			otal DSEs									
		0														
\$ 0.00 Gross Receipts Fourth Group \$ 0.00	\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G									
\$ 0.00 Base Rate Fee Fourth Group \$ 0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	oup	3ase Rate Fee Third G									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Northeast Telephone Company LLC 8559									
BL	OCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP			
	ED FIRST	SUBSCRIBER GROU				SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fe	
								and	
								Syndicated	
								Exclusivity	
		-						Surcharge	
								for Partially	
								Distant	
		-				n -		Stations	
		-							
						1			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
ONE HUNDRE	D THIRD	SUBSCRIBER GROU	JP	ONE HUNDRI	ED FOURTH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-							
		-				n -			
		-							
									
									
	+					" 			
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 th Enter here and in block			riber group	as shown in the boxe	s above.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM: Northeast Telephone Company LLC 8559									
		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EAC		RIBER GROUP SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fe	
								Syndicated Exclusivity	
								Surcharge	
								for Partially	
						-		Distant Stations	
								Stations	
otal DSEs	-		0.00	Total DSEs	•		0.00		
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Seco	and Group	\$	0.00		
ase Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
ONE HUNDRED SI	EVENTH	SUBSCRIBER GROL		ii		SUBSCRIBER GROU	JP		
OMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
otal DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
3ase Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
ird Gr	oup	\$	0.00	Gross Receipts Four	th Group	\$ \$	0.00		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Northeast Telephone Company LLC 8559									
BL	OCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP			
	D NINTH	SUBSCRIBER GROU				SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	_	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fe	
		-						and	
								Syndicated	
								Exclusivity Surcharge	
								for	
		-				-		Partially	
		-						Distant	
								Stations	
		-							
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
·				•	•				
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
ONE HUNDRED EL	EVENTH	SUBSCRIBER GROU	JP	ONE HUNDREI	D TWELVTH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	•	0.00	Gross Receipts Four	th Group	•	0.00		
Gross Necelpts Tillia G	ioup	\$	0.00	1000 Necelpis Pour	ит Эгоир	Ψ	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			riber group	as shown in the boxes	s above.	\$			

LEGAL NAME OF OWNER Northeast Telepho						S	YSTEM ID# 8559	Name
BL ONE HUNDRED THIR				ATE FEES FOR EAC		RIBER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	\		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								Syndicated Exclusivity
								Surcharge
		-						for Partially
								Distant Stations
		-						Otations
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	
ONE HUNDRED FIF	TEENTH	SUBSCRIBER GROU	JP 0	ONE HUNDRED		SUBSCRIBER GROU	JP 0	
OOMINIONIT IT AIREA				OOMMONT IT 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			riber group	as shown in the boxes	s above.	\$		

Northeast Telepho						S	YSTEM ID# 8559	Name
BL ONE HUNDRED SEVEN				ATE FEES FOR EAC		RIBER GROUP SUBSCRIBER GROU	JP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
		-						for Partially
								Distant Stations
		-						Otations
		-						
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED NIN	ITEENTH	SUBSCRIBER GROU	JP 0	ONE HUNDRED T		SUBSCRIBER GROU	JP O	
COMMUNITY/ AREA				COMMONTT / AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				-		
		- 1111111111111111111111111111111111111						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Northeast Telepho						S	YSTEM ID# 8559	Name
				ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED TWE	NTY-FIRST	SUBSCRIBER GRO		1		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge for
	<u> </u>	+						Partially
								Distant
								Stations
	<u></u>	-						
	<u> </u>							
Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
·	·				·			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROUP		1		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>	-						
		-						
Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxe	es above.	\$		

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MUNITY/ AREA 0 COMMUNITY/ AREA 0 Comp	^
Comp	u
	9 nutatio
L SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	of
	Rate Fe
	and
	dicated
	lusivity charge
	for
<u> </u>	rtially
Di:	istant
Sta	ations
DSEs	
Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	
Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00	
NDRED TWENTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED TWENTY-EIGHTH SUBSCRIBER GROUP	
MUNITY/ AREA 0 COMMUNITY/ AREA 0	
L SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	
0.00	
DSEs 0.00 Total DSEs 0.00	
Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	

Northeast Teleph						S	YSTEM ID# 8559	Name
B	LOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED TWE	NTY-NINTH	SUBSCRIBER GROUP)	ONE HUNDRE	D THIRTIETH	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
		-						Syndicated
								Exclusivity
		-						Surcharge
						-		for
								Partially
		-						Distant Stations
								Stations
		H						
						Į į		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED TH	IRTY-FIRST	SUBSCRIBER GROUP)	ONE HUNDRED THIS	RTY-SECOND	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		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	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxes	s above.	\$		

EGAL NAME OF OWNE Northeast Telepho						S	YSTEM ID# 8559	Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAG	CH SUBSCF	RIBER GROUP		
	RTY-THIRD	SUBSCRIBER GROU		t t		I 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 F
		-						and
								Syndicated
								Exclusivity
								Surcharge for
						<u> </u>		Partially
								Distant
								Stations
otal DSEs		!	0.00	Total DSEs	•		0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED THI	RTY-FIFTH	SUBSCRIBER GROU	Р	ll .		I SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				n -		
		-						
otal 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	rth Group	\$	0.00	
Base Rate Fee Third O	ne base rat					\$	0.00	

LEGAL NAME OF OWNE Northeast Telepho						S	YSTEM ID# 8559	Name
BL ONE HUNDRED THIRTY-				ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GROUP	1	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
		- 1111111111111111111111111111111111111						
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		\$	0.00	Base Rate Fee Seco		\$	0.00	
ONE HUNDRED THIR COMMUNITY/ AREA	TY-NINTH	SUBSCRIBER GROUP	0	COMMUNITY/ AREA		SUBSCRIBER GROU)P	
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	rth 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			riber group	as shown in the boxe	s above.	\$		

		SYSTEM: any LLC				S	8559
				ATE FEES FOR EAC	H SUBSCF	RIBER GROUP	
ONE HUNDRED FORTY-F	IRST S	UBSCRIBER GROUP				SUBSCRIBER GROUP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0
CALL SIGN DS	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	H						
Total DSEs	_		0.00	Total DSEs			0.00
Gross Receipts First Group	<u> </u>	5	0.00	Gross Receipts Seco	nd Group	\$	0.00
Base Rate Fee First Group	4	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00
ONE HUNDRED FORTY-T	HIRD S	UBSCRIBER GROUP	ı	ONE HUNDRED FOR	RTY-FOURTH	I SUBSCRIBER GROUP)
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0
CALL SIGN DS	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DS	SE .	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DS	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DS	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DS	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DS	SE .	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DS	SE .	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DS	SE .	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DS	SE .	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DS	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DS	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DS	SE .	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DS	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DS	SE	CALL SIGN	DSE	Total DSEs	DSE	CALL SIGN	DSE
						CALL SIGN	
Total DSEs			0.00	Total DSEs			0.00

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP E HUNDRED FORTY-FIFTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 GOMMUNITY/ AREA 0 GOMUNITY/ AREA 0 GOMMUNITY/ AREA 0 G
UNITY/ AREA O COMMUNITY/ AREA O Computa SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate and Syndica Exclusive Surchar for Partial Distan Stattor SES O.00 Total DSEs O .000
Computa SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate and Syndica Exclusive Surchar for Partial Distan Station SES 0.00 Total DSEs
SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate and Syndica Exclusive Surchar for Partial Distant Station SES D.00 Total DSES ALL SIGN DSE CALL SIGN DSE
Base Rate and Syndical Exclusive Surchar for Partial Distant Station SES 0.00 Total DSEs 0.00
SES 0.00 Total DSEs 0.00
Exclusive Surchar for Partial Distant Station SES O.00 Total DSEs D.00
Surchar for Partial Distant Station SES 0.00 Total DSEs 0.00
SES 0.00 Total DSEs 0.00
Partial Distant Station SES 0.00 Total DSEs 0.00
Station Station Station Station Total DSEs 0.00
SES 0.00 Total DSES 0.00
Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00
tate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00
JNDRED FORTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP
UNITY/ AREA 0 COMMUNITY/ AREA 0
SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE
SEs <u>0.00</u> Total DSEs <u>0.00</u>
Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00
tate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00

LEGAL NAME OF OWNE Northeast Telepho						Sì	STEM ID# 8559	Name
BI	LOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED FOR	TY-NINTH	SUBSCRIBER GROU	JP	ONE HUNDRE	D FIFTIETH	SUBSCRIBER GROU	Р	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
		-						Stations
			<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 FIFT	TY-SECOND	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		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	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	s above.	\$		

Northeast Telepho						SY	8559	Name
BL ONE HUNDRED FIF				TE FEES FOR EACH		IBER GROUP SUBSCRIBER GROUF)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
								Syndicated Exclusivity
								Surcharge
		-						for
								Partially
		-				-		Distant
		-						Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GROU	JP	ONE HUNDRED FI	FTY-SIXTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
Total DSEs			0.00	Total DSEc			0.00	
Total DSEs				Total DSEs			_	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	above.	\$		

	npany LLC					8559
			ATE FEES FOR EACH			
ONE HUNDRED FIFTY-SEVENTE COMMUNITY/ AREA	1 SUBSCRIBER GROUP	0	ONE HUNDRED FIF	TY-EIGHTH	SUBSCRIBER GROUP	0
OMMUNITY/ AREA		<u> </u>	COMMUNITY/ AREA			U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
					_	
					_	
				ļ.		0.00
otal DSEs	-	0.00	Total DSEs			0.00
oss Receipts First Group	\$	0.00	Gross Receipts Secon	d Group	\$	0.00
se Rate Fee First Group	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00
ONE HUNDRED FIFTY-NINTI	1 SUBSCRIBER GROUE)	ONE HUNDRE	D SIXTIETH	SUBSCRIBER GROUP	
MMUNITY/ AREA		0	COMMUNITY/ AREA			
						0
						U
ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
	CALL SIGN	DSE	Total DSEs	DSE	CALL SIGN	
tal DSEs	CALL SIGN				CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			DSE
CALL SIGN DSE CALL SIGN DSE Otal DSEs ross Receipts Third Group ase Rate Fee Third Group		0.00	Total DSEs	Group		DSE

LEGAL NAME OF OWNE Northeast Telepho			•			S	STEM ID# 8559	Name
Bl		COMPUTATION OF SUBSCRIBER GRO		TE FEES FOR EACH		RIBER GROUP SUBSCRIBER GROU	P	_
COMMUNITY/ AREA	Pulask	i		COMMUNITY/ AREA	Shawar	10		9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated Exclusivity
								Surcharge
		-				-		for
						-		Partially
								Distant
						-		Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 466	,462.00	Gross Receipts Secon	d Group	<u>\$</u> 15	54,248.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA	Luxem	burg		COMMUNITY/ AREA	Liberty	Grove		
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 (Proup	¢ 20	,190.00	Gross Receipts Fourth	Group	•	155.00	
oross Naceibis IIIII (лоир	\$ 39	, 130.00	Oross Neceipis Fourth	Эгоир	\$	133.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
			.,					
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	apove.	\$	0.00	

Nonpermitted 3.75 Stations

Name	STEM ID# 8559	SY			•			LEGAL NAME OF OWNER Northeast Telepho
				TE FEES FOR EACH				BL
9	0	SUBSCRIBER GROUP	SIXTH			SUBSCRIBER GRO	FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and						-	-	
Syndicated						-	.	
Exclusivity Surcharge								
for								
Partially						-	-	
Distant						-		
Stations						-		
							<u> </u>	
						-	 	
						-		
							 	
	0.00	П		Total DSEs	0.00		<u> </u>	Γotal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr
				·				·
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
)	SUBSCRIBER GROUP	EIGHTH		JP	SUBSCRIBER GRO	SEVENTH	S
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		1—1111111111111111111111111111111111111						
						-		
			•			-		
		-	•			-	-	
			•			-		
		-						
							 	
							 	
			•					
	0.00			Total DSEs	0.00			Fotal DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	<u> </u>	roup	Fotal DSEs Gross Receipts Third G

	IBER GROUP SUBSCRIBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	OMBUTATION OF		
Computatio of	SUBSCRIBER GROUP						BL
Computatio of		TENTH			SUBSCRIBER GRO	NINTH	
	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA
	CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe							
and							
Syndicated Exclusivity	<u> </u>						
Surcharge							
for					-		
Partially	——————————————————————————————————————						
Distant							
Stations							
					-		
00	0.00		Total DSEs	0.00	Į.		Total DSEs
	\$ 0.00	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
<u> </u>							
00	\$ 0.00	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	SUBSCRIBER GROUP	TWELVTH		JP	SUBSCRIBER GRO	LEVENTH	El
0	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA
SE	CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
					-		
					-		
	+ 111111111111111111111111111111111111						
					-		
					-		
00	0.00	1	Total DSEs	0.00			Total DSEs
00	\$ 0.00	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
<u> </u>							
11	\$ 0.00	Group	Base Rate Fee Fourth	0.00	\$	Froup	Base Rate Fee Third G

LEGAL NAME OF OWN Northeast Teleph						S	8559	Name
				TE FEES FOR EAC				
	IRTEENTH	SUBSCRIBER GRO		i i		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate F
								and
		-						Syndicated
								Exclusivity Surcharge
								for
		-						Partially
		-						Distant
		-						Stations
		-						
		-						
otal DSEs			0.00	Total DSEs			0.00	
	_							
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
F	IFTEENTH	SUBSCRIBER GRO	UP		SIXTEENTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		_						
		-						
		_						
		-						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Groun	\$	0.00	Base Rate Fee Four	th Group	s	0.00	
	ap	[*	5.50		C.Oup	[*	0.00	
		e fees for each subs space L (page 7)	criber group	as shown in the boxes	s above.			

Name	YSTEM ID# 8559					pany LLC		LEGAL NAME OF OWNE Northeast Telepho
				TE FEES FOR EAC				
9	IP	SUBSCRIBER GROU	HTEENTH	El		SUBSCRIBER GROU	NTEENTH	SEVE
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		-				-		
Exclusivity Surcharge								
for						-		
Partially						-		
Distant								
Stations								
						-		
						-		
		Ц	<u> </u>		<u> </u>			
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Seco	0.00	\$	roup	Base Rate Fee First G
	'	SUBSCRIBER GROU				SUBSCRIBER GROU		
	'	SUBSCRIBER GROU						NII
	JP	SUBSCRIBER GROU		Т	UP			NII
	JP 0		VENTIETH	T COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA
	JP 0		VENTIETH	T COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA
	JP 0		VENTIETH	T COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA
	JP 0		VENTIETH	T COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA
	JP 0		VENTIETH	T COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA
	JP 0		VENTIETH	T COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA
	JP 0		VENTIETH	T COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA
	JP 0		VENTIETH	T COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA
	JP 0		VENTIETH	T COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA
	JP 0		VENTIETH	T COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA
	JP 0		VENTIETH	T COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA
	JP 0		VENTIETH	T COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	NTEENTH	COMMUNITY/ AREA
	JP 0		VENTIETH	T COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA
	DSE		VENTIETH	CALL SIGN	DSE	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA
	DSE O.00	CALL SIGN	DSE	CALL SIGN CALL SIGN Total DSEs	DSE O.00	SUBSCRIBER GROU	DSE	CALL SIGN CALL SIGN Total DSEs
	DSE		DSE	CALL SIGN	DSE	SUBSCRIBER GROU	DSE	CALL SIGN

Nonpermitted 3.75 Stations

EGAL NAME OF OWN Northeast Teleph						S	8559	Name
				TE FEES FOR EA				
	NTY-FIRST	SUBSCRIBER GRO		1		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
						<u> </u>		and
								Syndicat
								Exclusiv
								Surcharg for
								Partially
								Distant
		-						Station
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (- Froun	\$	0.00	Gross Receipts Sec	and Group	\$	0.00	
noss rescipts i not e	лоцр	<u> </u>	0.00	Cross recorpts occ	ona Group		0.00	
ase Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TWEN	ITY-THIRD	SUBSCRIBER GRO	DUP	TWEN	ITY-FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						H		
		-	····			·		
		-						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
,	•				·F			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t	he base rat	e fees for each subspace L (page 7)	scriber group	as shown in the boxe	es above.			

_	8559	SY			•			LEGAL NAME OF OWNEI Northeast Telepho
				TE FEES FOR EACH				
9		SUBSCRIBER GROUP	TY-SIXTH			SUBSCRIBER GROU	TY-FIFTH	
Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F						-		
and						-		
Syndicated Exclusivity								
Surcharge								
for						-	-	
Partially								
Distant								
Stations						-		
						-		
						-		
					<u> </u>			
_	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr
- 1			•	·				
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	Р	SUBSCRIBER GROUP	Y-EIGHTH	TWENT	JP	SUBSCRIBER GROU	SEVENTH	TWENTY-S
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						-		
						-		
						-		
						-		
					0.00			Total DSEs
	0.00			Total DSEs	0.00			
- -		<u> </u>	Group			\$	roup	Gross Receipts Third G
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP TWENTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN D	0 DSE	Q Computation of Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant Stations
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN DSE CALL SIGN Total DSEs Gross Receipts First Group COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN Total DSEs Gross Receipts Second Group \$ Gross Receipts Second Group \$	DSE	Computation of Base Rate Fand Syndicated Exclusivity Surcharge for Partially Distant
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN DSE CALL SIGN CALL S	DSE	Computation of Base Rate Fand Syndicated Exclusivity Surcharge for Partially Distant
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN DSE	0.00	of Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$	0.00	and Syndicated Exclusivity Surcharge for Partially Distant
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$	-	Syndicated Exclusivity Surcharge for Partially Distant
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$	-	Exclusivity Surcharge for Partially Distant
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$	-	Surcharge for Partially Distant
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$	-	Partially Distant
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$	-	Distant
Gross Receipts First Group Gross Receipts Second Group	-	
Gross Receipts First Group Gross Receipts Second Group	-	Glations
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$	-	
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$	-	
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$	-	
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$	-	
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$	-	
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$	-	
	0.00	
Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	0.00	
THIRTY-FIRST SUBSCRIBER GROUP THIRTY-SECOND SUBSCRIBER GROUP		
COMMUNITY/ AREA COMMUNITY/ AREA	0	
CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE	
Total DSEs Total DSEs	0.00	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$	0.00	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$	0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.		

Base Rate Fee Second Group \$ 0.00 D.00 Base Rate Fee Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 COMMUNITY/ AREA 0	LEGAL NAME OF OWNE Northeast Telepho						S'	YSTEM ID# 8559	Name
O COMMUNITY/ AREA O Computation of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations O COMMUNITY/ AREA									
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 COMMUNITY/ AREA 0		Y-THIRD	SUBSCRIBER GROU		1		SUBSCRIBER GROU		۵
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations O.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 THIRTY-SIXTH SUBSCRIBER GROUP O COMMUNITY/ AREA O	COMMUNITY/ AREA			0				0	_
and Syndicated Exclusivity Surcharge for Partially Distant Stations 1 0.00	CALL SIGN	DSE	CALL SIGN	DSE			CALL SIGN	DSE	
Syndicated Exclusivity Surcharge for Partially Distant Stations O.00 Total DSEs O.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 THIRTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA 0									Base Rate Fe
Exclusivity Surcharge for Partially Distant Stations 1.000 0.000 Gross Receipts Second Group 0.000 Base Rate Fee Second Group THIRTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA									
			-						
Partially Distant Stations O.00 Total DSEs O.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 THIRTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA 0									
Distant Stations Distant Stations Distant Stations Distant Stations									
0.00 Total DSEs 0.00 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP THIRTY-SIXTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA 0									
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP THIRTY-SIXTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA 0									Stations
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP THIRTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA 0									
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP THIRTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA 0									
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP THIRTY-SIXTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA 0									
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP THIRTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA 0									
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP THIRTY-SIXTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA 0									
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP THIRTY-SIXTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA 0			<u> </u>				Ц		
0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP THIRTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA 0	Total DSEs			0.00	Total DSEs			0.00	
BSCRIBER GROUP THIRTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA 0	Gross Receipts First G	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
BSCRIBER GROUP THIRTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA 0									
0 COMMUNITY/ AREA 0	Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	THIR	TY-FIFTH	SUBSCRIBER GROU	JP	THII	RTY-SIXTH	SUBSCRIBER GROU	JP	
CALL SIGN DSE CALL SIGN DSE	COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			-						
			-						
			-			<u> </u>			
			-						
0.00 Total DSEs	Total DSEs			0.00	Total DSEs			0.00	
0.00 Gross Receipts Fourth Group \$ 0.00	Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
	,					•			
0.00 Base Rate Fee Fourth Group \$ 0.00	Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	

LEGAL NAME OF OWNE Northeast Telepho			•			S	YSTEM ID# 8559	Name
				TE FEES FOR EACH				
	SEVENTH	SUBSCRIBER GRO				I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
		-						Syndicated
						.		Exclusivity Surcharge
								for
	•							Partially
								Distant
								Stations
	.	-						
	 							
	 							
Total DSEs			0.00	Total DSEs		Н	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
·					•			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
THIRT	Y-NINTH	SUBSCRIBER GRO	JP	ii –		SUBSCRIBER GROU	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 G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	

LEGAL NAME OF OWN Northeast Teleph						S	8559	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		t e		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						<u> </u>		Base Rate Fe
								and
						H		Syndicated Exclusivity
								Surcharge
		-	····					for
		+						Partially
								Distant
						<u> </u>		Stations
Total DSEs		III	0.00	Total DSEs		ļļ.	0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
•					•			
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FOR	RTY-THIRD	SUBSCRIBER GRO	UP	FOR	TY-FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						<u> </u>		
		-						
		-				+		
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				II				
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxe	s above.	\$		

	STEM ID# 8559							Northeast Telepho
				TE FEES FOR EACH				
9	Р	SUBSCRIBER GROUP	RTY-SIXTH	FOF		SUBSCRIBER GRO	TY-FIFTH	FOR
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			Γotal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	Р	I SUBSCRIBER GROUP	Y-EIGHTH	FORT	UP	SUBSCRIBER GRO	SEVENTH	FORTY-S
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						-		
	0.00			Total DSEs	0.00			Fotal DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

LEGAL NAME OF OWN Northeast Teleph						S	YSTEM ID# 8559	Name
				TE FEES FOR EACH				
		SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA		0		COMMUNITY/ AREA		0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
		-						and
								Syndicated Exclusivity
						.		Surcharge
		-						for
		+						Partially
								Distant
								Stations
Total DSEs		ĮĮ	0.00	Total DSEs		ļļ.	0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
FI	FTY-FIRST	SUBSCRIBER GRO	DUP	FIFT	Y-SECONE	SUBSCRIBER GROU	UP	
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 Fourt	h Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
				II				
Base Rate Fee: Add t Enter here and in bloo			scriber group	as shown in the boxes	above.	s		

Nonpermitted 3.75 Stations

		BER GROUP SUBSCRIBER GROUP		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GROU		
Compu	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
o	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Ra						_		
and Syndic								
Exclus								
Surch fo						-		
Parti						-		
Dista						-		
Statio								
						-		
						_		
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	nun	Gross Receipts First Gro
	0.00	·	•				Jup	oroso recocipio i iisi ore
	0.00		·				σup	orosa recocipio i il se Gre
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	dase Rate Fee First Gro
	0.00	\$ SUBSCRIBER GROUP	l Group	FIF	JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gro
	0.00		l Group				oup	lase Rate Fee First Gro
	0.00		l Group	FIF	JP		oup	Base Rate Fee First Gro
	0.00	SUBSCRIBER GROUP	I Group	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-FIFTH	FIFT
	0.00	SUBSCRIBER GROUP	I Group	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-FIFTH	FIFT
	0.00	SUBSCRIBER GROUP	I Group	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-FIFTH	Base Rate Fee First Gro FIFT COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	I Group	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-FIFTH	Base Rate Fee First Gro FIFT COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	I Group	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-FIFTH	Base Rate Fee First Gro FIFT COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	I Group	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-FIFTH	Base Rate Fee First Gro FIFT COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	I Group	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-FIFTH	Base Rate Fee First Gro FIFT COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	I Group	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-FIFTH	Base Rate Fee First Gro FIFT COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	I Group	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-FIFTH	Base Rate Fee First Gro FIFT COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	I Group	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-FIFTH	Base Rate Fee First Gro FIFT COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	I Group	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-FIFTH	Base Rate Fee First Gro FIFT COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	I Group	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-FIFTH	FIFT COMMUNITY/ AREA CALL SIGN
	0.00	SUBSCRIBER GROUP	DSE	FIF COMMUNITY/ AREA	DSE	SUBSCRIBER GROU	Y-FIFTH DSE	FIFT COMMUNITY/ AREA CALL SIGN Total DSEs
	0.00	SUBSCRIBER GROUP CALL SIGN	DSE	CALL SIGN CALL SIGN Total DSEs	DSE DSE	SUBSCRIBER GROU	Y-FIFTH DSE	Base Rate Fee First Gro FIFT COMMUNITY/ AREA

LEGAL NAME OF OWI Northeast Telepl			-			S	8559	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		Ħ		SUBSCRIBER GRO	UP 0	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
		-						and
		-						Syndicated Exclusivity
								Surcharge
		-						for
								Partially
								Distant
								Stations
		-						
Total DSEs		<u>II</u>	0.00	Total DSEs		ļļ.	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	
FI	FTY-NINTH	SUBSCRIBER GRO	OUP		SIXTIETH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		H						
		-						
						-		
		-						
		-						
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
			scriber group	as shown in the boxe	es above.			
Enter here and in blo	ck 3, line 1,	space L (page 7)				\$		

LEGAL NAME OF OWI Northeast Telepl						S	YSTEM ID# 8559	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		ti .		SUBSCRIBER GROU	UP 0	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Computatio			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicated
						H		Exclusivity Surcharge
								for
		-				n - 11111111111111111111111111111111111		Partially
								Distant
		-						Stations
		-						
		-						
Total DSEs	1		0.00	Total DSEs	ļ		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SI	XTY-THIRD	SUBSCRIBER GRO		SIX				
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				n=		
Total DSEs	L.		0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
			0.00					
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	tn Group	\$	0.00	
		_						
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	s above.	\$		

Name	STEM ID# 8559							Northeast Telepho
				TE FEES FOR EACH				
9	Р	I SUBSCRIBER GROU	(TY-SIXTH			SUBSCRIBER GROU	TY-FIFTH	SIX
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								
Exclusivity Surcharge		H						
for		H						
Partially		n -					•	
Distant								
Stations								
							 	
							 	
	0.00	11		T	0.00			F
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	D	I SUBSCRIBER GROU	V EIGHTH	SIX	LID	SUBSCRIBER GROU	SEV/ENTH	QIYTV (
	0	1 30B3CNBEN GNOO	1-LIGITITI	COMMUNITY/ AREA	0	SOBSCRIBER GROU	DEVENTION	COMMUNITY/ AREA
				COMMONT IT AIRLA				SOMMONT I/ AILA
	DSF	CALL SIGN	DSF	CALL SIGN	DSF	CALL SIGN	DSF	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE O.00	CALL SIGN	DSE	Total DSEs	DSE	CALL SIGN	DSE	CALL SIGN Total DSEs
	0.00			Total DSEs	0.00			Total DSEs
		CALL SIGN				CALL SIGN		

LEGAL NAME OF OWN Northeast Teleph						S	YSTEM ID# 8559	Name
				TE FEES FOR EAC				
	TY-NINTH	SUBSCRIBER GRO		ii ee		SUBSCRIBER GROU	JP 0	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Computatio			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
		-						and
								Syndicated
						H		Exclusivity Surcharge
						H		for
		-				n -		Partially
		-						Distant
		-						Stations
Γotal DSEs		Į <u>I</u>	0.00	Total DSEs		11	0.00	
		_				_	-	
Gross Receipts First C	iroup	\$	0.00	Gross Receipts Seco	na Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
SEVE	NTY-FIRST	SUBSCRIBER GRO)UP	SEVENT	Y-SECONE	SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u> </u>		
						<u> </u>		
						" 		
Γotal 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 Fourt	th Group	\$	0.00	
Base Rate Fee: Add t			criber group	as shown in the boxes	s above.			

TION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SEVENTY-FOURTH SUBSCRIBER GROUP O COMMUNITY/ AREA O Computation OF Base Rate Fees and Syndicated Exclusivity Surcharge for Partially
0 COMMUNITY/ AREA 0 Computation ON DSE CALL SIGN DSE CALL SIGN DSE of Base Rate Form and Syndicated Exclusivity Surcharge for
Computatio Computatio Computatio Of Base Rate Form and Syndicated Exclusivity Surcharge for
SN DSE CALL SIGN DSE CALL SIGN DSE of Base Rate For and Syndicated Exclusivity Surcharge for
and Syndicated Exclusivity Surcharge for
Syndicated Exclusivity Surcharge for
Exclusivity Surcharge for
Surcharge for
for
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Distant
Stations Stations
0.00 Total DSEs
0.00 Gross Receipts Second Group \$ 0.00
0.00 Base Rate Fee Second Group \$ 0.00
ER GROUP SEVENTY-SIXTH SUBSCRIBER GROUP
0 COMMUNITY/ AREA 0
SN DSE CALL SIGN DSE CALL SIGN DSE
••••••••••••••••••••••••••••••••••••••
0.00 Total DSEs
0.00 Gross Receipts Fourth Group \$ 0.00
0.00 Base Rate Fee Fourth Group \$ 0.00

LEGAL NAME OF OWN Northeast Teleph						S	YSTEM ID# 8559	Name
				TE FEES FOR EAC				
	SEVENTH	SUBSCRIBER GRO		†		I SUBSCRIBER GROU	JP 0	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
		-						and
		-						Syndicated
								Exclusivity Surcharge
						H		for
		-				n =		Partially
								Distant
		-						Stations
		-						
		-						
Total DSEs			0.00	Total DSEs		++	0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SEVEN	ITY-NINTH	SUBSCRIBER GRO	UP		EIGHTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		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	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				<u>II</u>				
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxes	s above.	\$		

Name	STEM ID# 8559							Northeast Telepho
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	-SECOND	T .		SUBSCRIBER GROU	TY-FIRST	
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								
			1					
		-						
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	oup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First G
	Р	SUBSCRIBER GROU	/-FOURTH	EIGHT	UP	SUBSCRIBER GROU	Y-THIRD	EIGH ⁻
					0			
	0			COMMUNITY/ AREA	U			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	COMMUNITY/ AREA CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
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	DSE	CALL SIGN		CALL SIGN	DSE	CALL SIGN		CALL SIGN

LEGAL NAME OF OWNER Northeast Telepho			ТОПРО			Sì	STEM ID# 8559	Name
				TE FEES FOR EACH				
	Y-FIFTH	SUBSCRIBER GROU		1	ITY-SIXTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
						H		Surcharge
								for
								Partially
								Distant
								Stations
		-						
					<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
EIGHTY-S	EVENTH	SUBSCRIBER GROU	JP	EIGHT	Y-EIGHTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						-		
Total DSEs			0.00	Total DSEs	<u> </u>	П	0.00	
							-	
Gross Receipts Third Gi	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
ee: Add the	base rat	e fees for each subsc	riber group	as shown in the boxes a	above.	s		

LEGAL NAME OF OWNE Northeast Telepho						SY	STEM ID# 8559	Name
				TE FEES FOR EACH				
	TY-NINTH	SUBSCRIBER GRO		†	NINTIETH	SUBSCRIBER GROU	Р	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
		-						Syndicated
								Exclusivity Surcharge
								for
		-						Partially
		-						Distant
		-						Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
								
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
NINE	TY-FIRST	SUBSCRIBER GRO	UP	NINETY	-SECONE	SUBSCRIBER GROUP	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		=						
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						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee Third G Base Rate Fee: Add th Enter here and in block	e base rat	e fees for each subsc		Base Rate Fee Fourth		\$	0.00	

Computation of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations SES 0.00 Receipts Second Group \$ 0.00	NINETY-FOUI COMMUNITY/ AREA	COMPUTATION OF BASE RASUBSCRIBER GROUP CALL SIGN DSE	ry-third	
UNITY/ AREA O Computation SIGN DSE CALL SIGN DSE Base Rate Form and Syndicated Exclusivity Surcharge for Partially Distant Stations SES 0.00 Receipts Second Group \$ 0.00	COMMUNITY/ AREA	0		COMMUNITY/ AREA
Computatio of Base Rate Form and Syndicated Exclusivity Surcharge for Partially Distant Stations SES 0.00 Receipts Second Group Computatio of Base Rate Form and Syndicated Exclusivity Surcharge for Partially Distant Stations				
SIGN DSE CALL SIGN DSE Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations SES 0.00 Receipts Second Group \$ 0.00		CALL SIGN DSE		
and Syndicated Exclusivity Surcharge for Partially Distant Stations SES 0.00 Receipts Second Group \$ 0.00				
Syndicated Exclusivity Surcharge for Partially Distant Stations SES 0.00 Receipts Second Group \$ 0.00				
Exclusivity Surcharge for Partially Distant Stations SES 0.00 Receipts Second Group				
Surcharge for Partially Distant Stations SES 0.00 Receipts Second Group \$ 0.00				
SES 0.00 Receipts Second Group \$ 0.00				
SES 0.00 Receipts Second Group \$ 0.00				
Stations Stations Stations Stations				
SES 0.00 Receipts Second Group \$ 0.00				
Receipts Second Group \$ 0.00		H	-	
Receipts Second Group \$ 0.00				
Receipts Second Group \$ 0.00		H	-	
Receipts Second Group \$ 0.00				
Receipts Second Group \$ 0.00	·			
Receipts Second Group \$ 0.00				
	Total DSEs	0.00		Total DSEs
Date For Count Craws	Gross Receipts Second Grou	\$ 0.00	roup	Gross Receipts First Gro
Note For Second Crown				
Rate Fee Second Group \$ 0.00	Base Rate Fee Second Grou	\$ 0.00	roup	Base Rate Fee First Gro
NINETY-SIXTH SUBSCRIBER GROUP		SUBSCRIBER GROUP	TY-FIFTH	NINET
UNITY/ AREA 0	COMMUNITY/ AREA	0		COMMUNITY/ AREA
SIGN DSE CALL SIGN DSE	CALL SIGN DSE	CALL SIGN DSE	DSE	CALL SIGN
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		- I		
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		- 		
		H		
SEs	Total DSEs	0.00		Total DSEs
Receipts Fourth Group \$ 0.00	Gross Receipts Fourth Group	\$ 0.00	Group	Gross Receipts Third Gr
	· '		*	
Rate Fee Fourth Group \$ 0.00	Base Rate Fee Fourth Group	\$ 0.00	Group	Base Rate Fee Third Gr

Name	YSTEM ID# 8559	3				pany LLC	ne Com	Northeast Telepho
						COMPUTATION OF		
9		SUBSCRIBER GROL	Y-EIGHTH			SUBSCRIBER GROU	EVENTH	
Computa	0			COMMUNITY/ ARE	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndicat						-		
Exclusiv Surchar								
for						-		
Partiall								
Distant		_				-		
Station								
						-		
						-		
					<u> </u>			
	0.00			Total DSEs	0.00			otal DSEs
					0.00	\$	nun	Fross Receipts First Gr
	0.00	\$	nd Group	Gross Receipts Sec			Jup	
	_	\$	nd Group	Gross Receipts Sec			oup	
	_	\$		Base Rate Fee Second		\$		
	0.00		d Group	Base Rate Fee Seco	0.00		oup	ase Rate Fee First Gr
	0.00	\$	d Group	Base Rate Fee Seco	0.00	\$	oup	Base Rate Fee First Gr
	0.00 0.00	\$	d Group	Base Rate Fee Seco	0.00	\$	oup	iase Rate Fee First Gr
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Seco	0.00 JP	\$ SUBSCRIBER GROU	Y-NINTH	NINET
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Seco	0.00 JP	\$ SUBSCRIBER GROU	Y-NINTH	ase Rate Fee First Gr NINET OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Seco	0.00 JP	\$ SUBSCRIBER GROU	Y-NINTH	NINET
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Seco	0.00 JP	\$ SUBSCRIBER GROU	Y-NINTH	NINET
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Seco	0.00 JP	\$ SUBSCRIBER GROU	Y-NINTH	Base Rate Fee First Gr NINET COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Seco	0.00 JP	\$ SUBSCRIBER GROU	Y-NINTH	Base Rate Fee First Gr NINET COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Seco	0.00 JP	\$ SUBSCRIBER GROU	Y-NINTH	Base Rate Fee First Gr NINET COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Seco	0.00 JP	\$ SUBSCRIBER GROU	Y-NINTH	Base Rate Fee First Gr NINET COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Seco	0.00 JP	\$ SUBSCRIBER GROU	Y-NINTH	Base Rate Fee First Gr NINET COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Seco	0.00 JP	\$ SUBSCRIBER GROU	Y-NINTH	Base Rate Fee First Gr NINET COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Seco	0.00 JP	\$ SUBSCRIBER GROU	Y-NINTH	Base Rate Fee First Gr NINET COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Seco	0.00 JP	\$ SUBSCRIBER GROU	Y-NINTH	Base Rate Fee First Gr NINET COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Seco	0.00 JP	\$ SUBSCRIBER GROU	Y-NINTH	NINET COMMUNITY/ AREA CALL SIGN
	0.00 0.00 DSE 0.00	SUBSCRIBER GROUND CALL SIGN	DSE	ONE H COMMUNITY/ ARE/ CALL SIGN Total DSEs	0.00 JP	SUBSCRIBER GROUND CALL SIGN	Y-NINTH DSE	NINET COMMUNITY/ AREA CALL SIGN Total DSEs
	0.00 0.00 DSE	\$ SUBSCRIBER GROU	DSE	ONE H COMMUNITY/ AREA CALL SIGN	0.00	\$ SUBSCRIBER GROU	Y-NINTH DSE	Base Rate Fee First Gr NINET COMMUNITY/ AREA

	Wher of Cable System: SYSTEM ID:							Name
				TE FEES FOR EACH				
	RED FIRST	SUBSCRIBER GRO		1		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fee
		-						and
		-						Syndicated
						H		Exclusivity Surcharge
		-						for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDR	ED THIRD	SUBSCRIBER GRO	JP	ONE HUNDRE	D FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
						H		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
		e fees for each subso	riber group	as shown in the boxes	above.	\$		

Nonpermitted 3.75 Stations

	8559							
				TE FEES FOR EACH				
9		SUBSCRIBER GROUP	ED SIXTH			SUBSCRIBER GROU	D FIFTH	
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and Syndicate						-		
Exclusivi								
Surcharg	•	=						
for						-	-	
Partially								
Distant Stations								
		=				-		
						-		
						-		
	0.00		'	Total DSEs	0.00		'	Γotal DSEs
	0.00	\$		Gross Receipts Second	0.00	\$		One of Decision Final Co.
	0.00	4	i Group	Oross receipts occorn		Ψ	oup	Jross Receipts First Gro
	0.00	\$		Base Rate Fee Second	0.00	\$		
	0.00	\$ SUBSCRIBER GROUP	l Group	Base Rate Fee Second			oup	Base Rate Fee First Gro
	0.00	\$	l Group	Base Rate Fee Second		\$	oup	Base Rate Fee First Gro
	0.00	\$	l Group	Base Rate Fee Second	JP	\$	oup	Base Rate Fee First Gro
	0.00	\$ SUBSCRIBER GROUP	I Group	ONE HUNDRE	JP 0	\$ SUBSCRIBER GROU	EVENTH	ONE HUNDRED S
	0.00	\$ SUBSCRIBER GROUP	I Group	ONE HUNDRE	JP 0	\$ SUBSCRIBER GROU	EVENTH	ONE HUNDRED S
	0.00	\$ SUBSCRIBER GROUP	I Group	ONE HUNDRE	JP 0	\$ SUBSCRIBER GROU	EVENTH	ONE HUNDRED S
	0.00	\$ SUBSCRIBER GROUP	I Group	ONE HUNDRE	JP 0	\$ SUBSCRIBER GROU	EVENTH	ONE HUNDRED S
	0.00	\$ SUBSCRIBER GROUP	I Group	ONE HUNDRE	JP 0	\$ SUBSCRIBER GROU	EVENTH	ONE HUNDRED S
	0.00	\$ SUBSCRIBER GROUP	I Group	ONE HUNDRE	JP 0	\$ SUBSCRIBER GROU	EVENTH	Base Rate Fee First Gro ONE HUNDRED S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	I Group	ONE HUNDRE	JP 0	\$ SUBSCRIBER GROU	EVENTH	Base Rate Fee First Gro ONE HUNDRED S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	I Group	ONE HUNDRE	JP 0	\$ SUBSCRIBER GROU	EVENTH	Base Rate Fee First Gro ONE HUNDRED S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	I Group	ONE HUNDRE	JP 0	\$ SUBSCRIBER GROU	EVENTH	COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	I Group	ONE HUNDRE	JP 0	\$ SUBSCRIBER GROU	EVENTH	Base Rate Fee First Gro ONE HUNDRED S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	I Group	ONE HUNDRE	JP 0	\$ SUBSCRIBER GROU	EVENTH	Base Rate Fee First Gro ONE HUNDRED S COMMUNITY/ AREA
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	0.00	\$ SUBSCRIBER GROUP	I Group	ONE HUNDRE	JP 0	\$ SUBSCRIBER GROU	EVENTH	ONE HUNDRED S COMMUNITY/ AREA CALL SIGN
	0.00	\$ SUBSCRIBER GROUP	DSE	Dase Rate Fee Second ONE HUNDREI COMMUNITY/ AREA CALL SIGN	DSE	\$ SUBSCRIBER GROU	DSE	Base Rate Fee First Gro ONE HUNDRED S COMMUNITY/ AREA

LEGAL NAME OF OWNE Northeast Telepho			•			Sì	STEM ID# 8559	Name
				TE FEES FOR EACH				
	ED NINTH	SUBSCRIBER GROU		1	ED TENTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fee
		-						and
		-						Syndicated
						H		Exclusivity Surcharge
								for
		-			1	#		Partially
		-						Distant
								Stations
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		-			.			
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
•	·				·			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED EI	LEVENTH	SUBSCRIBER GROU	JP	ONE HUNDRED	TWELVTH	SUBSCRIBER GROU	Р	
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	
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Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
·	e fee:			Base Rate Fee Fourth	·	\$	0.00	

LEGAL NAME OF OWNE Northeast Telepho			•			S	YSTEM ID# 8559	Name
				TE FEES FOR EACH				
ONE HUNDRED THI	RTEENTH	SUBSCRIBER GRO		T .		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
						. –		Exclusivity Surcharge
		-						for
		-				"-		Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs		!!	0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FI	FTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED S	SIXTEENTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
sase Rate Fee: Add the inter here and in block			criber group	as shown in the boxes	above.	\$		

9 Nam								
				TE FEES FOR EACI				
9	0	SUBSCRIBER GROUP	GHTEENTH	ONE HUNDRED E	0	SUBSCRIBER GROUP	ENTEENTH	ONE HUNDRED SEVE
Comput	U			COMMUNITY/ AREA	U			COMMUNITY AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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and								
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Surcha						-		
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_	0.00			Total DSEs	0.00		!	otal DSEs
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	Group	Gross Receipts First G
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1								
	0.00	\$	nd Group	Base Rate Fee Seco	0.00	\$		3ase Rate Fee First G
]	•	\$ SUBSCRIBER GROU		ONE HUNDRED T	JP	\$ SUBSCRIBER GROU	Group	ONE HUNDRED NII
	•	\$ SUBSCRIBER GROU			_	1:	Group	ONE HUNDRED NII
	•	SUBSCRIBER GROU		ONE HUNDRED T	JP	1:	Group	ONE HUNDRED NII
	P 0		VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII
	P 0		VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII
	P 0		VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII
	P 0		VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII
	P 0		VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII
	P 0		VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII
	P 0		VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII
	P 0		VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII
	P 0		VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	COMMUNITY/ AREA
	P 0		VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII
	P 0		VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII
	P 0		VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII
	P 0		VENTIETH	ONE HUNDRED T	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII
	DSE		DSE	ONE HUNDRED T COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	NTEENTH DSE	ONE HUNDRED NII
	DSE 0.000	CALL SIGN	DSE	ONE HUNDRED T COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE	SUBSCRIBER GROU	NTEENTH DSE	ONE HUNDRED NII COMMUNITY/ AREA CALL SIGN Fotal DSEs
	DSE 0.000	CALL SIGN	DSE OF OTHER DESCRIPTION OF OT	ONE HUNDRED T COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE	SUBSCRIBER GROU	NTEENTH DSE Group	ONE HUNDRED NII

	8559	SY			-			EGAL NAME OF OWNER Northeast Telepho
		IBER GROUP	JBSCRI	S FOR EACH		COMPUTATION OF		
9		SUBSCRIBER GROUP	ECOND :	JNDRED TWENTY		SUBSCRIBER GROUP	TY-FIRST	ONE HUNDRED TWEN
Computation	0			IUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	SE	SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F						_		
and Syndicate								
Exclusivity						-		
Surcharge						-		
for								
Partially						-		
Distant								
Stations						-		
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	0.00			SEs	0.00			Total DSEs
	0.00	\$	roup	Receipts Second	0.00	\$	oup	Gross Receipts First Gro
	0.00	\$	roup	Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro
		SUBSCRIBER GROUP	OURTH	JNDRED TWENT		SUBSCRIBER GROUP	ΓY-THIRD	ONE HUNDRED TWENT
	0			IUNITY/ AREA	0			COMMUNITY/ AREA
1	DSE	CALL SIGN	SE	LSIGN	DSE	CALL SIGN	DSE	CALL SIGN
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n e								
	0.00		ı)SEs	0.00			Total DSEs
		\$	oup	Receipts Fourth	0.00	\$	oup	Gross Receipts Third Gr
	0.00	<u>*</u>						

NI	YSTEM ID# 8559	SY						LEGAL NAME OF OWNER Northeast Telephore
		RIBER GROUP	BSCRII	FOR EACH	BASE RATE	COMPUTATION OF	OCK A: C	BLO
9		SUBSCRIBER GROUP	SIXTH S		The state of the s	SUBSCRIBER GROUP	TY-FIFTH	ONE HUNDRED TWEN
Computation	0			NITY/ AREA	0 C			COMMUNITY/ AREA
of	DSE	CALL SIGN	SE .	IGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and						-		
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Surcharge								
for								
Partially								
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	0.00			Es	0.00 T			Total DSEs
	0.00				0.00	\$	าเมา	Gross Receipts First Gro
	0.00	\$	oup	ceipts Second		Y	Jup	
	-	\$	oup	ceipts Second		<u> </u>	Sup	·
	-	\$		ceipts Second		\$		
	0.00		oup	te Fee Second	0.00	\$	oup	Base Rate Fee First Gro
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	0.00	\$	oup	te Fee Second	0.00 E	\$	oup	Base Rate Fee First Gro
	0.00	\$ SUBSCRIBER GROUP	GHTH S	IDRED TWENT	0.00 E	\$ SUBSCRIBER GROUP	SEVENTH	Base Rate Fee First Gro NE HUNDRED TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	GHTH S	IDRED TWENT	0.00 E	\$ SUBSCRIBER GROUP	SEVENTH	Base Rate Fee First Gro NE HUNDRED TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	GHTH S	IDRED TWENT	0.00 E	\$ SUBSCRIBER GROUP	SEVENTH	Base Rate Fee First Gro NE HUNDRED TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	GHTH S	IDRED TWENT	0.00 E	\$ SUBSCRIBER GROUP	SEVENTH	Base Rate Fee First Gro NE HUNDRED TWENTY-S COMMUNITY/ AREA
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	0.00	\$ SUBSCRIBER GROUP	GHTH S	IDRED TWENT	0.00 E	\$ SUBSCRIBER GROUP	SEVENTH	Base Rate Fee First Gro NE HUNDRED TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	GHTH S	IDRED TWENT	0.00 E	\$ SUBSCRIBER GROUP	SEVENTH	Base Rate Fee First Gro NE HUNDRED TWENTY-S COMMUNITY/ AREA
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	0.00	\$ SUBSCRIBER GROUP	GHTH S	IDRED TWENT	0.00 E	\$ SUBSCRIBER GROUP	SEVENTH	Base Rate Fee First Gro NE HUNDRED TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	GHTH S	IDRED TWENT	0.00 E	\$ SUBSCRIBER GROUP	SEVENTH	Base Rate Fee First Gro NE HUNDRED TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	GHTH S	IDRED TWENT	0.00 E	\$ SUBSCRIBER GROUP	SEVENTH	Base Rate Fee First Gro NE HUNDRED TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	GHTH S	IDRED TWENT	0.00 E	\$ SUBSCRIBER GROUP	SEVENTH	Base Rate Fee First Gro NE HUNDRED TWENTY-S COMMUNITY/ AREA
	0.00 0.00 DSE	\$ SUBSCRIBER GROUP	GHTH S	DRED TWENT NITY/ AREA	0.00 E	\$ SUBSCRIBER GROUP	DUP SEVENTH	Base Rate Fee First Gro NE HUNDRED TWENTY-S COMMUNITY/ AREA CALL SIGN
	0.00	\$ SUBSCRIBER GROUP	GHTH S	IDRED TWENT	0.00 E	\$ SUBSCRIBER GROUP	DUP SEVENTH	Base Rate Fee First Gro NE HUNDRED TWENTY-S COMMUNITY/ AREA
	0.00 0.00 DSE	\$ SUBSCRIBER GROUP	GHTH S	DRED TWENT NITY/ AREA	0.00 E	\$ SUBSCRIBER GROUP	DSE	Base Rate Fee First Gro NE HUNDRED TWENTY-S COMMUNITY/ AREA CALL SIGN

9								LEGAL NAME OF OWNER Northeast Telepho
9		IBER GROUP	SUBSCR	TE FEES FOR EACH				
n 9	OUP	SUBSCRIBER GROUP	THIRTIETH	ONE HUNDRED		SUBSCRIBER GROUP	TY-NINTH	ONE HUNDRED TWEN
Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
SE of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fo								
and						-		
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00	0.00			Total DSEs	0.00			Total DSEs
00_	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gro
00	0.00	\$	l Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gro
	OUP	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIRT)	SUBSCRIBER GROUP	TY-FIRST	ONE HUNDRED THIR
0	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
SE SE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			Total DSEs
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	0.00	\$	Group	Gross Receipts Fourth		<u>*</u>	ισαρ	Gross Receipts Third G

	OF OWNER OF CABLE SYSTEM: Telephone Company LLC SYSTEM ID: 8559							Name
BLOC	K A: C	COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP						
ONE HUNDRED THIRTY-	THIRD	SUBSCRIBER GROUP			TY-FOURTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computatio
	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
					<u> </u>			Syndicated
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								Stations
Fotal DSFo	!.		0.00	Total DSEs		<u> </u>	0.00	
Total DSEs	•		_	Total DSEs				
Gross Receipts First Group		\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Group		\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED THIRTY-F	FIFTH S	SUBSCRIBER GROU	JP	ONE HUNDRED THIS	RTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA				COMMUNITY/ AREA			0	
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						H		
	H							
Γotal DSEs			0.00	Total DSEs	1		0.00	
Gross Receipts Third Group	٥ .	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
	[
Base Rate Fee Third Group	o	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
		e fees for each subsc	riber group	as shown in the boxes	above.	s		

<u> </u>	8559	NER OF CABLE SYSTEM: SYSTEM ID: Shone Company LLC 855:						
		IBER GROUP	SUBSCR	TE FEES FOR EACH				
9		SUBSCRIBER GROUP	TY-EIGHTH			SUBSCRIBER GROUP	SEVENTH	ONE HUNDRED THIRTY-
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F						-		
and							.	
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for						-		
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Stations			•				•	
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	0.00			Total DSEs	0.00		-	Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	Р	SUBSCRIBER GROU	ORTIETH	ONE HUNDRED	JP	SUBSCRIBER GROU	Y-NINTH	ONE HUNDRED THIRT
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00_			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	roup	Total DSEs Gross Receipts Third G

	NER OF CABLE SYSTEM: SYSTEM ID Shone Company LLC 855							Name
В	LOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	RTY-FIRST	SUBSCRIBER GROU				SUBSCRIBER GROUP)	9
COMMUNITY/ AREA	***************************************		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
								Exclusivity Surcharge
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		-						Partially
								Distant
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Γotal DSEs		<u>I</u>	0.00	Total DSEs		H	0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
·	•			·	•			
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED FO	RTY-THIRD	SUBSCRIBER GROU	D	ONE HUNDRED FOR	RTY-FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	\		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						.		
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						. –		
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	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	
Dago Rate 1 de 1111/0 (<u></u>	3.00	Dasc Nate i ee i ouii	Oroup	<u>\dagger</u>	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWN Northeast Teleph						S	YSTEM ID# 8559	Name
				TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	ORTY-FIFTH	SUBSCRIBER GROU	P			I SUBSCRIBER GROUP	,	٥
COMMUNITY/ AREA 0			COMMUNITY/ AREA 0				9 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
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		+				H		
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Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Second Group \$			0.00	
3ase Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FORT	Y-SEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRED FO	RTY-EIGHTH	I SUBSCRIBER GROUP	•	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		H						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Four	th Group	\$	0.00		
							i	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t			criber group	as shown in the boxes	s above.	s		

Northeast Telepho		E SYSTEM: pany LLC				S	YSTEM ID# 8559	Name
				TE FEES FOR EACH				
ONE HUNDRED FORT	Y-NINTH	SUBSCRIBER GROU			FIFTIETH	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
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Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FIFT	Y-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIFT	'-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	·····			
					DSE	CALL SIGN	DSE	
		-			DSE	CALL SIGN	DSE	
					DSE	CALL SIGN	DSE	
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					DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs	DSE	CALL SIGN	DSE	
			0.00				0.00	
	roup	\$	0.00	Total DSEs Gross Receipts Fourth		CALL SIGN		
Total DSEs Gross Receipts Third G	·	\$			Group		0.00	

LEGAL NAME OF OWNE Northeast Telepho						S'	YSTEM ID# 8559	Name
				TE FEES FOR EACH				
ONE HUNDRED FIF	TY-THIRD	SUBSCRIBER GRO		ONE HUNDRED FIFT		SUBSCRIBER GROU		9
COMMUNITY/ AREA 0			COMMUNITY/ AREA	0	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-				.		Base Rate Fee
		-						and
								Syndicated Exclusivity
								Surcharge
		-						for
								Partially
		-						Distant
		=						Stations
		-						
Total DSEs			0.00	Total DSEs		!!	0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	JP	ONE HUNDRED FI	FTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		=						
		-						
		-						
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Total DSEs	1		0.00	Total DSEs	1		0.00	
Gross Receipts Third Group \$ 0.00						0.00		
·	•				•			
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	s		

LEGAL NAME OF OWNE Northeast Telepho						S	YSTEM ID# 8559	Name
В	LOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCF	RIBER GROUP		
ONE HUNDRED FIFTY	-SEVENTH	SUBSCRIBER GROUP	<u> </u>			SUBSCRIBER GROUP		9
COMMUNITY/ AREA 0			COMMUNITY/ AREA	Computation				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fe
		-						and
		-						Syndicated Exclusivity
								Surcharge
		-						for
		-						Partially
								Distant
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Total DSEs			0.00	Total DSEs		ļļ.	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Second Group \$ 0.			0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIF	TY-NINTH	SUBSCRIBER GRO	UP	ONE HUNDREI	SIXTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA				
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		0.00	Gross Receipts Fourt	h Group	\$	0.00		
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
se Rate Fee: Add the ter here and in block			criber group	as shown in the boxes	above.	s		

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Northeast Telephone Company LLC 8559 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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