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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY						
DATE RECEIVED	AMOUNT					
8-2-24	\$ 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 STATEMENT:										
Accounting Period	2023/1										
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines if there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account. Check here if this is the system's first filing. If not, enter the system's ID	es of the cable system on the last day of the unting period.	m. e accounting period should sub								
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM										
	NELSONVILLE TV CABLE INC.										
				2023/1							
				2023/1							
	1120 E. Canal Street										
	Nelsonville, Ohio 45764										
С	INSTRUCTIONS: In line 1, give any business or trade names used to i										
	names already appear in space B. In line 2, give the mailing address o	f the system, if dif	ferent from the address give	n in space B.							
System	1 IDENTIFICATION OF CABLE SYSTEM:										
	NELSONVILLE TV CABLE INC. MAILING ADDRESS OF CABLE SYSTEM:										
	1120 E. Canal Street										
	(Number, street, rural route, apartment, or suite number) Nelsonville. Ohio 45764										
	(City, town, state, zip code)										
D	Instructions: For complete space D instructions, see page 1b. Identify	only the first com	ımunity served below and re	list on page 1b							
Area	with all communities.										
Served	CITY OR TOWN	STATE									
First	NELSONVILLE	ОН									
Community	Below is a sample for reporting communities if you report multiple cha	annel line-ups in S	Space G.								
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#							
Sample	Alda	MD	Α	1							
	Alliance	MD MD	B B	3							
	Gering	IVID	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 this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address, and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the 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.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: **NELSONVILLE TV CABLE INC.** Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The first community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# **NELSONVILLE** ОН First **AMES TOWNSHIP** OH Α 1 Community ATHENS TOWNSHIP ОН Α **BUCHTEL** OH Α 1 CHAUNCEY OH Α 1 **DOVER TOWNSHIP** OH Α 1 See instructions for **GLOUSTER** OH Α 1 additional information on alphabetization. **GREEN TOWNSHIP** ОН Α 2 **HOMER TOWNSHIP** OH Α 1 OH Α 1 **JACKSONVILLE** STARR TOWNSHIP OH Α 2 Add rows as necessary. THE PLAINS OH Α 1 TRIMBLE ОН Α 1 TRIMBLE TOWNSHIP ОН Α 1 WARD TOWNSHIP ОН 2 Α YORK TOWNSHIP OH Α 1

1	·· T ······	1		1
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				1

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM: **NELSONVILLE TV CABLE INC.** SYSTEM ID#

Е

Secondary

Transmission

Service: Subscribers and

Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1				BLOCK 2		
	NO. OF					NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS		RATE		CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:							
 Service to first set 	3,587	\$	45.00				
 Service to additional set(s) 		ļ					
 FM radio (if separate rate) 		ļ					
Motel, hotel		ļ					
Commercial		ļ					
Converter		ļ					
 Residential 		ļ					
Non-residential							
	•	······		-		•	

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 1							
CATEGORY OF SERVICE		RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE		RATE	
Continuing Services:			Installation: Non-residential					
Pay cable	\$	12.95	Motel, hotel		EXPANDED BASIC	\$	100.00	
 Pay cable—add'l channel 	\$	15.95	Commercial		НВО	\$	16.95	
 Fire protection 			Pay cable		CINEMAX	\$	12.95	
Burglar protection			Pay cable-add'l channel		SHOWTIME	\$	15.95	
Installation: Residential			Fire protection		STARZ/ENCORE	\$	17.95	
First set	\$	12.00	Burglar protection					
Additional set(s)			Other services:					
 FM radio (if separate rate) 			Reconnect					
Converter	\$	100.00	Disconnect					
			Outlet relocation					
			Move to new address					
						ļ		

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **NELSONVILLE TV CABLE INC.** PRIMARY TRANSMITTERS: TELEVISION In General: In space G. identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under 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 Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 2. B'CAST 4. DISTANT? 5. BASIS OF 1. CALL 3. TYPE 6. LOCATION OF STATION SIGN CHANNEL CARRIAGE OF (Yes or No) NUMBER STATION (If Distant) WSYX 6 Ν No Columbus, OH WSYX-DT2 6.2 Columbus, OH I-M No See instructions for additional information WSYX-DT3 6.3 N-M No Columbus, OH on alphabetization. WHIZ 18 Ν No Zanesville, Ohio WHIZ-DT2 18.2 N-M No Zanesville, Ohio WHIZ-DT3 18.3 I-M No Zanesville, Ohio **WCMH** 4 N No Columbus, OH WCMH-DT2 4.2 I-M No Columbus, OH WCMH-DT3 4.3 I-M No Columbus, OH WCMH-DT4 4.4 I-M No Columbus, OH **WCHS** N 8 Yes 0 Charleston, WV 0 WCHS-DT2 8.2 N-M Yes Charleston, WV WCHS-DT3 8.3 I-M Yes 0 Charleston, WV **WOUB** 20 Ε No Athens, Ohio **WOUB-DT2** 20.2 E-M No Athens, Ohio Athens, Ohio WOUB-DT3 20.3 E-M No WOUB-DT4 E-M Athens, Ohio 20.4 No **WOUB-DT5** 20.5 Athens, Ohio E-M No

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **NELSONVILLE TV CABLE INC.** PRIMARY TRANSMITTERS: TELEVISION In General: In space G. identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AB, cont. 2. B'CAST 3. TYPE 1. CALL 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL CARRIAGE SIGN OF (Yes or No) STATION NUMBER (If Distant) **WOUB-DT6** 20.6 E-M No Athens, Ohio **WOUB-DT7** 20.7 E-M No Athens, Ohio **WBNS** 10 N No Columbus, OH WBNS-DT2 10.2 I-M No Columbus, OH WBNS-DT3 10.3 I-M No Columbus, OH WBNS-DT4 10.4 I-M No Columbus, OH WBNS-DT5 10.5 I-M No Columbus, OH WBNS-DT6 10.6 I-M No Columbus, OH WBNS-DT7 10.7 I-M No Columbus, OH WBNS-DT8 10.8 I-M No Columbus, OH **WWHO** 53 ı No Columbus, OH WWHO-DT2 53.2 I-M Columbus, OH No WWHO-DT3 53.3 I-M No Columbus, OH

LEGAL NAME OF OWN	IED OF CARLE SY	CTEM:			SYSTEM ID#	
NELSONVILLE					3131EW 1D#	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s	system during the	ne accounting n June 24, 19	g period, except 81, permitting th	(1) stations carried ne carriage of certa	and low power television stations) d only on a part-time basis under ain network programs [sections	G
substitute program bas Substitute Basis S	sis, as explaine Stations: With r	d in the next espect to any	paragraph. y distant stations	. , , , , , , , , , , ,	nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
 basis under specifc FC Do not list the station station was carried 	here in space	G—but do lis		e Special Stateme	ent and Program Log)—if the	
basis. For further in in the paper SA3 fo	formation conc rm.	erning substi	tute basis statio	ns, see page (v) o	ute basis and also on some other f the general instructions located	
each multicast stream cast stream as "WETA WETA-simulcast).	associated with -2". Simulcast	n a station ac streams mus	cording to its ov t be reported in	er-the-air designa column 1 (list each	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in	
its community of licens on which your cable sy	se. For example stem carried th	e, WRC is Ch le station.	annel 4 in Wash	nington, D.C. This	may be different from the channel pendent station, or a noncommercial	
(for independent multid For the meaning of the Column 4: If the sta	cast), "E" (for no ese terms, see p ation is outside	oncommercia page (v) of the the local ser	ll educational), o e general instruc vice area, (i.e. "c	or "E-M" (for nonco ctions located in th distant"), enter "Ye	s". If not, enter "No". For an ex-	
-	ave entered "Ye ne distant statio	es" in column on during the	4, you must cor accounting period	mplete column 5, s od. Indicate by ent	tating the basis on which your ering "LAC" if your cable system	
of a written agreement the cable system and a	entered into or a primary transi	n or before Ju mitter or an a	ine 30, 2009, be ssociation repre	tween a cable sys senting the primar	payment because it is the subject tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further	
Column 6: Give the	e location of ea Canadian statio	ch station. Fo	or U.S. stations, re the name of th	list the community ne community with	d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AC		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OWN	IED OF CARLE SY	CTEM:			SYSTEM ID#	
NELSONVILLE					3131EWID#	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s	system during th	ne accounting	g period, except	(1) stations carried	and low power television stations) d only on a part-time basis under ain network programs [sections	G
substitute program bas	sis, as explaine	d in the next	paragraph.	. , , , , , , , , , , ,	nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
basis under specifc FCDo not list the station station was carried	here in space	G—but do lis		e Special Stateme	ent and Program Log)—if the	
basis. For further in in the paper SA3 fo	formation conc rm.	erning substi	tute basis statio	ns, see page (v) o	ute basis and also on some other f the general instructions located	
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(for independent multid For the meaning of the Column 4: If the sta	cast), "E" (for no ese terms, see ation is outside	oncommercia page (v) of the the local ser	ll educational), o e general instruc vice area, (i.e. "c	or "E-M" (for nonco ctions located in th distant"), enter "Ye	s". If not, enter "No". For an ex-	
-	ave entered "Ye he distant statio	es" in column on during the	4, you must cor accounting period	mplete column 5, s od. Indicate by ent	tating the basis on which your ering "LAC" if your cable system	
For the retransmiss of a written agreement the cable system and a	sion of a distant entered into on a primary trans	multicast stren n or before Ju mitter or an a	eam that is not s ine 30, 2009, be ssociation repre	subject to a royalty tween a cable sys senting the primar	payment because it is the subject tem or an association representing y transmitter, enter the designa-	
explanation of these the Column 6: Give the FCC. For Mexican or C	nree categories e location of ea Canadian statio	, see page (vinch station. For ns, if any, giv) of the general in or U.S. stations, we the name of the content o	instructions locate list the community ne community with	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing	ig multiple char	•	use a separate	•	channel line-up.	
4.041	O DIOACT				O LOCATION OF STATION	
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 OWN	IED OF CARLE SY	CTEM:			SYSTEM ID#	
NELSONVILLE					OTOTEM ID#	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s	system during the	ne accounting n June 24, 19	g period, except 81, permitting th	(1) stations carried ne carriage of certa	and low power television stations) d only on a part-time basis under ain network programs [sections	G
substitute program bas Substitute Basis S	sis, as explaine Stations: With r	d in the next espect to any	paragraph. y distant stations	. , , , , , , , , , , ,	nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
basis under specifc FCDo not list the station station was carried	here in space	G—but do lis		e Special Stateme	ent and Program Log)—if the	
basis. For further in in the paper SA3 fo	formation conc rm.	erning substi	tute basis statio	ns, see page (v) o	ute basis and also on some other f the general instructions located	
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its community of licens on which your cable sy	se. For example stem carried th	e, WRC is Ch le station.	annel 4 in Wash	nington, D.C. This	may be different from the channel pendent station, or a noncommercial	
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-	ave entered "Ye ne distant statio	es" in column on during the	4, you must cor accounting period	mplete column 5, s od. Indicate by ent	tating the basis on which your ering "LAC" if your cable system	
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Note: If you are utilizing	g muluple char		EL LINE-UP	•	cnannei iine-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	

LEGAL NAME OF OWN	IED OF CARLE SY	CTEM:			SYSTEM ID#	
NELSONVILLE					3131214110#	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s	system during the	ne accounting n June 24, 19	g period, except 81, permitting th	(1) stations carried ne carriage of certa	and low power television stations) d only on a part-time basis under ain network programs [sections	G
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its community of licens on which your cable sy	se. For example stem carried th	e, WRC is Ch le station.	annel 4 in Wash	nington, D.C. This	may be different from the channel	
(for independent multid For the meaning of the Column 4: If the sta	cast), "E" (for no ese terms, see p ation is outside	oncommercia page (v) of the the local ser	ll educational), o e general instruc vice area, (i.e. "c	or "E-M" (for nonco ctions located in th distant"), enter "Ye	s". If not, enter "No". For an ex-	
-	ave entered "Ye ne distant statio	es" in column on during the	4, you must cor accounting period	mplete column 5, s od. Indicate by ent	tating the basis on which your ering "LAC" if your cable system	
For the retransmiss of a written agreement the cable system and a	ion of a distant entered into or a primary transi	multicast stre n or before Ju mitter or an a	eam that is not s ine 30, 2009, be ssociation repre	subject to a royalty tween a cable sys senting the primar	payment because it is the subject tem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further	
explanation of these the Column 6: Give the FCC. For Mexican or C	iree categories e location of ea Canadian statio	, see page (vinch station. For the station. For the station, giver) of the general in or U.S. stations, we the name of the content o	instructions locate list the community ne community with	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing	g muluple char		EL LINE-UP	•	channel line-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	

LEGAL NAME OF OWN	IED OF CARLE SY	CTEM:			SYSTEM ID#	
NELSONVILLE					3131214110#	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s	system during the	ne accounting n June 24, 19	g period, except 81, permitting th	(1) stations carried ne carriage of certa	and low power television stations) d only on a part-time basis under ain network programs [sections	G
substitute program bas Substitute Basis S	sis, as explaine Stations: With r	d in the next respect to any	paragraph. y distant stations	. , , , , , , , , , , ,	nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
basis under specifc FCDo not list the station station was carried	here in space	G—but do lis		e Special Stateme	ent and Program Log)—if the	
basis. For further in in the paper SA3 fo	formation conc rm.	erning substi	tute basis statio	ns, see page (v) o	ute basis and also on some other f the general instructions located	
each multicast stream cast stream as "WETA WETA-simulcast).	associated with -2". Simulcast	n a station ac streams mus	cording to its ov t be reported in	er-the-air designa column 1 (list each	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in	
its community of licens on which your cable sy	se. For example stem carried th	e, WRC is Ch ne station.	annel 4 in Wash	nington, D.C. This	may be different from the channel pendent station, or a noncommercial	
(for independent multid For the meaning of the Column 4: If the sta	cast), "E" (for no ese terms, see p ation is outside	oncommercia page (v) of the the local ser	ll educational), o e general instruc vice area, (i.e. "c	or "E-M" (for nonco ctions located in th distant"), enter "Ye	s". If not, enter "No". For an ex-	
-	ave entered "Ye ne distant statio	es" in column on during the	4, you must cor accounting period	mplete column 5, s od. Indicate by ent	stating the basis on which your ering "LAC" if your cable system	
For the retransmiss of a written agreement the cable system and a	ion of a distant entered into or a primary transi	multicast stren n or before Ju mitter or an a	eam that is not s ine 30, 2009, be ssociation repre	subject to a royalty tween a cable sys senting the primar	payment because it is the subject tem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further	
explanation of these the	iree categories e location of ea Canadian statio	, see page (vinch station. For ns, if any, giv) of the general in or U.S. stations, we the name of the content o	instructions locate list the community ne community with	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
Note: If you are utilizati	g multiple chai	•	EL LINE-UP	•	orianner 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	

LEGAL NAME OF OWN	IED OF CARLE SY	CTEM:			SYSTEM ID#	
NELSONVILLE					3131EW 1D#	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s	system during the	ne accounting n June 24, 19	g period, except 81, permitting th	(1) stations carried ne carriage of certa	and low power television stations) d only on a part-time basis under ain network programs [sections	G
substitute program bas Substitute Basis S	sis, as explaine Stations: With r	d in the next espect to any	paragraph. y distant stations	. , , , , , , , , , , ,	nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
basis under specifc FCDo not list the station station was carried	here in space	G—but do lis		e Special Stateme	ent and Program Log)—if the	
basis. For further in in the paper SA3 fo	formation conc rm.	erning substi	tute basis statio	ns, see page (v) o	ute basis and also on some other f the general instructions located	
each multicast stream cast stream as "WETA WETA-simulcast).	associated with -2". Simulcast	n a station ac streams mus	cording to its ov t be reported in	er-the-air designa column 1 (list each	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in	
its community of licens on which your cable sy	se. For example stem carried th	e, WRC is Ch le station.	annel 4 in Wash	nington, D.C. This	may be different from the channel	
(for independent multid For the meaning of the Column 4: If the sta	cast), "E" (for no ese terms, see p ation is outside	oncommercia page (v) of the the local ser	ll educational), o e general instruc vice area, (i.e. "c	or "E-M" (for nonco ctions located in th distant"), enter "Ye	s". If not, enter "No". For an ex-	
-	ave entered "Ye ne distant statio	es" in column on during the	4, you must cor accounting period	mplete column 5, s od. Indicate by ent	stating the basis on which your ering "LAC" if your cable system	
For the retransmiss of a written agreement the cable system and a	ion of a distant entered into or a primary transi	multicast stre n or before Ju mitter or an a	eam that is not s ine 30, 2009, be ssociation repre	subject to a royalty tween a cable sys senting the primar	payment because it is the subject tem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further	
explanation of these the Column 6: Give the FCC. For Mexican or C	iree categories e location of ea Canadian statio	, see page (vinch station. For the station. For the station, giver) of the general in or U.S. stations, we the name of the content o	instructions locate list the community ne community with	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing	g multiple char		EL LINE-UP	•	cnannei iine-up.	
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)		
		ĺ		I	1	1

LEGAL NAME OF OWN	JER OF CABLE SY	STEM.			SYSTEM ID#	
NELSONVILLE						Name
PRIMARY TRANSMITTE						
· ·			, ,		and low power television stations) d only on a part-time basis under	G
				•	ain network programs [sections	
	. , . ,	,	-	1(e)(2) and (4))]; a	nd (2) certain stations carried on a	Primary
substitute program ba				s carried by your c	able system on a substitute program	Transmitters: Television
basis under specifc F(o carriou by your o	able system on a substitute program	relevision
·				e Special Stateme	ent and Program Log)—if the	
station was carried	only on a subs	titute basis.				
basis. For further in	nformation cond				ute basis and also on some other f the general instructions located	
in the paper SA3 for Column 1: I ist each		sian Do not	report origination	n program service	s such as HBO, ESPN, etc. Identify	
		-			tion. For example, report multi-	
cast stream as "WETA	\-2". Simulcast	streams mus	t be reported in	column 1 (list eacl	n stream separately; for example	
WETA-simulcast). Column 2: Give the	e channel numl	per the FCC h	nas assigned to	the television stati	on for broadcasting over-the-air in	
	-		annel 4 in Wash	nington, D.C. This	may be different from the channel	
on which your cable sy	•					
					ependent station, or a noncommercial	
	-	•	, ,		ast), "I" (for independent), "I-M" Immercial educational multicast).	
For the meaning of the	,,		,,	`	,	
					es". If not, enter "No". For an ex-	
planation of local serv						
I -			-	="	stating the basis on which your	
-		-		•	ering "LAC" if your cable system	
carried the distant stat					payment because it is the subject	
					stem or an association representing	
the cable system and	a primary trans	mitter or an a	ssociation repre	senting the primar	y transmitter, enter the designa-	
` ' '			•	•	her basis, enter "O." For a further	
	-				d in the paper SA3 form.	
				-	to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing						
	.9	• •	EL LINE-UP	•		
			T			+
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		•
						•
						•
					<u> </u>	
					<u> </u>	

LEGAL NAME OF OWN	IED OF CARLE SY	CTEM:			SYSTEM ID#		
NELSONVILLE					3131EWIID#	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s	system during th	ne accounting	g period, except	(1) stations carried	and low power television stations) d only on a part-time basis under ain network programs [sections	G	
substitute program bas	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. 							
basis. For further in in the paper SA3 fo	formation conc rm.	erning substi	tute basis statio	ns, see page (v) o	ute basis and also on some other f the general instructions located		
each multicast stream cast stream as "WETA WETA-simulcast).	associated with -2". Simulcast	n a station ac streams mus	cording to its ov t be reported in	er-the-air designa column 1 (list each	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in		
its community of licens on which your cable sy	se. For example stem carried th	e, WRC is Ch le station.	annel 4 in Wash	nington, D.C. This	may be different from the channel		
(for independent multid For the meaning of the Column 4: If the sta	cast), "E" (for no ese terms, see p ation is outside	oncommercia page (v) of the the local ser	ll educational), o e general instruc vice area, (i.e. "c	or "E-M" (for nonco ctions located in th distant"), enter "Ye	s". If not, enter "No". For an ex-		
-	ave entered "Ye ne distant statio	es" in column on during the	4, you must cor accounting period	mplete column 5, s od. Indicate by ent	stating the basis on which your ering "LAC" if your cable system		
For the retransmiss of a written agreement the cable system and a	ion of a distant entered into or a primary transi	multicast stre n or before Ju mitter or an a	eam that is not s ine 30, 2009, be ssociation repre	subject to a royalty tween a cable sys senting the primar	payment because it is the subject tem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further		
explanation of these the Column 6: Give the FCC. For Mexican or C	iree categories e location of ea Canadian statio	, see page (vinch station. For the station. For the station, giver) of the general in or U.S. stations, we the name of the content o	instructions locate list the community ne community with	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.		
Note: If you are utilizing	g multiple char		EL LINE-UP	•	channel line-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		
				(

LEGAL NAME OF OWN	ED OF CARLE SY	CTEM:			SYSTEM ID#			
NELSONVILLE					OTOTEM ID#	Name		
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
carried by your cable s	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.								
basis. For further in in the paper SA3 fo	formation conc rm.	erning substi	tute basis statio	ns, see page (v) o	ute basis and also on some other f the general instructions located s such as HBO, ESPN, etc. Identify			
each multicast stream cast stream as "WETA WETA-simulcast).	associated with -2". Simulcast	n a station ac streams mus	cording to its ov t be reported in o	er-the-air designa column 1 (list each	on for broadcasting over-the-air in			
its community of licens on which your cable sy Column 3: Indicate	e. For example stem carried the in each case w	e, WRC is Ch ne station. whether the st	annel 4 in Wash tation is a netwo	nington, D.C. This ork station, an inde	may be different from the channel pendent station, or a noncommercial			
(for independent multid For the meaning of the Column 4: If the sta	cast), "E" (for no se terms, see p ation is outside	oncommercia page (v) of the the local ser	ll educational), o e general instruc vice area, (i.e. "c	or "E-M" (for nonco ctions located in th distant"), enter "Ye	s". If not, enter "No". For an ex-			
-	ave entered "Ye ne distant statio	es" in column on during the	4, you must cor accounting period	mplete column 5, s od. Indicate by ent	tating the basis on which your ering "LAC" if your cable system			
of a written agreement the cable system and a tion "E" (exempt). For	entered into or a primary transi simulcasts, also	n or before Ju mitter or an a o enter "E". If	ine 30, 2009, be ssociation repre you carried the	etween a cable sys senting the primar channel on any ot	payment because it is the subject tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further			
Column 6: Give the	e location of ea Canadian statio	ch station. Fo	or U.S. stations, re the name of th	list the community ne community with	d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.			
		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			

LEGAL NAME OF OWN	IED OE CABI E SV	CTEM-			SYSTEM ID#	
NELSONVILLE					0101EM 15#	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space C	G, identify every system during th	television state	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under	G
76.59(d)(2) and (4), 76 substitute program bas	i.61(e)(2) and (sis, as explaine	4), or 76.63 (r d in the next	eferring to 76.6 paragraph.	1(e)(2) and (4))]; a	ain network programs [sections nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
basis under specifc FC	CC rules, regula	tions, or auth	orizations:		ent and Program Log)—if the	
· ·	and also in spa formation cond	ce I, if the sta			ute basis and also on some other f the general instructions located	
each multicast stream	associated witl	n a station ac	cording to its ov	er-the-air designa	s such as HBO, ESPN, etc. Identify tion. For example, report multi-	
WETA-simulcast).				•	n stream separately; for example on for broadcasting over-the-air in	
its community of licens on which your cable sy Column 3: Indicate	se. For example stem carried the in each case w	e, WRC is Cha e station. whether the st	annel 4 in Wash	nington, D.C. This ork station, an inde	may be different from the channel	
(for independent multide For the meaning of the	cast), "E" (for no ese terms, see	oncommercia page (v) of the	l educational), o e general instruc	or "E-M" (for nonco ctions located in th	ast), "I" (for independent), "I-M" mmercial educational multicast). ne paper SA3 form. s". If not, enter "No". For an ex-	
planation of local servi Column 5: If you ha	ce area, see pa ave entered "Ye	age (v) of the es" in column	general instruct 4, you must cor	ions located in the nplete column 5, s	e paper SA3 form. stating the basis on which your	
carried the distant stat	ion on a part-tir	ne basis beca	ause of lack of a	activated channel	ering "LAC" if your cable system capacity. payment because it is the subject	
_				•	tem or an association representing y transmitter, enter the designa-	
explanation of these th	ree categories	see page (v)) of the general i	instructions locate	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the	
	Canadian statio	ns, if any, giv	e the name of th	ne community with	which the station is identifed.	
		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	

LEGAL NAME OF OWN	ED OF CARLE SY	CTEM:			SYSTEM ID#		
NELSONVILLE					3131EWIID#	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s	ystem during the	ne accounting n June 24, 19	g period, except 81, permitting th	(1) stations carried ne carriage of certa	and low power television stations) d only on a part-time basis under ain network programs [sections	G	
substitute program bas Substitute Basis S	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.							
basis. For further in in the paper SA3 fo	formation conc rm.	erning substi	tute basis statio	ns, see page (v) o	ute basis and also on some other f the general instructions located		
each multicast stream cast stream as "WETA WETA-simulcast).	associated with -2". Simulcast	n a station ac streams mus	cording to its ov t be reported in	er-the-air designa column 1 (list each	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in		
its community of licens on which your cable sy	e. For example stem carried th	e, WRC is Ch le station.	annel 4 in Wash	nington, D.C. This	may be different from the channel pendent station, or a noncommercial		
(for independent multid For the meaning of the Column 4: If the sta	cast), "E" (for no se terms, see p ation is outside	oncommercia page (v) of the the local ser	ll educational), o e general instruc vice area, (i.e. "c	or "E-M" (for nonco ctions located in th distant"), enter "Ye	s". If not, enter "No". For an ex-		
-	ave entered "Ye ne distant statio	es" in column on during the	4, you must cor accounting period	mplete column 5, s od. Indicate by ent	tating the basis on which your ering "LAC" if your cable system		
For the retransmiss of a written agreement the cable system and a	ion of a distant entered into or a primary transı	multicast stre n or before Ju mitter or an a	eam that is not s ine 30, 2009, be ssociation repre	subject to a royalty tween a cable sys senting the primar	payment because it is the subject tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further		
explanation of these the	ree categories location of ea Canadian statio	, see page (vinch station. For the station. For the station, giver) of the general in or U.S. stations, we the name of the content o	instructions locate list the community ne community with	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.		
Note. Il you are utilizili	y multiple chai	• •	EL LINE-UP	•	опаннен ште-ир.		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#		
NELSONVILLE						Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s	system during the	ne accounting	g period, except	(1) stations carried	and low power television stations) d only on a part-time basis under	G	
76.59(d)(2) and (4), 76 substitute program bas	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 spa formation cond	ice I, if the sta			ute basis and also on some other f the general instructions located		
each multicast stream cast stream as "WETA	associated with	n a station ac	cording to its ov	er-the-air designat	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example		
its community of licens	se. For example	e, WRC is Ch	-		on for broadcasting over-the-air in may be different from the channel		
	in each case v	whether the st			pendent station, or a noncommercial ast), "I" (for independent), "I-M"		
For the meaning of the Column 4: If the st	ese terms, see ation is outside	page (v) of the	e general instruc vice area, (i.e. "c	ctions located in th distant"), enter "Ye	s". If not, enter "No". For an ex-		
cable system carried the	ave entered "Yo he distant statio	es" in column on during the	4, you must cor accounting period	nplete column 5, s od. Indicate by ent	stating the basis on which your ering "LAC" if your cable system		
of a written agreement	sion of a distant t entered into o	multicast stren or before Ju	eam that is not s ine 30, 2009, be	subject to a royalty tween a cable sys	payment because it is the subject tem or an association representing		
tion "E" (exempt). For sexplanation of these th	simulcasts, also nree categories	o enter "E". If , see page (v	you carried the o	channel on any oth instructions locate	y transmitter, enter the designa- ner basis, enter "O." For a further d in the paper SA3 form.		
	Canadian statio	ns, if any, giv	e the name of th	ne community with	to which the station is licensed by the which the station is identifed. channel line-up.		
		CHANN	EL LINE-UP	AN			
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 OWN	IED OE CARI E SV	'QTEM:			SYSTEM ID#	
NELSONVILLE					OTOTEM ID#	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
·			, ,		and low power television stations) d only on a part-time basis under	G
76.59(d)(2) and (4), 76 substitute program bas	i.61(e)(2) and (sis, as explaine	4), or 76.63 (r d in the next	referring to 76.6° paragraph.	1(e)(2) and (4))]; a	ain network programs [sections nd (2) certain stations carried on a	Primary Transmitters: Television
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under 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						
· ·	and also in spa	ice I, if the sta			ute basis and also on some other f the general instructions located	
each multicast stream cast stream as "WETA WETA-simulcast).	h station's call associated witl -2". Simulcast	n a station ac streams mus	cording to its ov t be reported in o	er-the-air designat column 1 (list each	s such as HBO, ESPN, etc. Identify cion. For example, report multi- n stream separately; for example	
its community of licens on which your cable sy	se. For example stem carried th	e, WRC is Ch le station.	annel 4 in Wash	nington, D.C. This	on for broadcasting over-the-air in may be different from the channel	
educational station, by (for independent multion For the meaning of the Column 4: If the sta	entering the le cast), "E" (for no ese terms, see pation is outside	tter "N" (for noncommercial page (v) of the the local ser	etwork), "N-M" (fall educational), of general instructions area, (i.e. "c	for network multica or "E-M" (for nonco ctions located in th distant"), enter "Ye	s". If not, enter "No". For an ex-	
•	ave entered "Ye ne distant statio	es" in column on during the	4, you must cor accounting perion	mplete column 5, s od. Indicate by ent	tating the basis on which your ering "LAC" if your cable system	
of a written agreement the cable system and a	entered into or a primary transi	n or before Ju mitter or an a	ine 30, 2009, be ssociation repre	tween a cable sys senting the primar	payment because it is the subject tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further	
Column 6: Give the	e location of ea Canadian statio	ch station. Fo	or U.S. stations, e the name of th	list the community ne community	d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.	
·		CHANN	EL LINE-UP	AO		
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 OWN	ED OF CARLE SY	CTEM:			SYSTEM ID#		
NELSONVILLE					OTOTEM ID#	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s	ystem during the	ne accounting n June 24, 19	g period, except 81, permitting th	(1) stations carried ne carriage of certa	and low power television stations) d only on a part-time basis under ain network programs [sections	G	
substitute program bas Substitute Basis S	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. 							
basis. For further in in the paper SA3 fo	formation conc rm.	erning substi	tute basis statio	ns, see page (v) o	ute basis and also on some other f the general instructions located		
each multicast stream cast stream as "WETA WETA-simulcast).	associated with -2". Simulcast	n a station ac streams mus	cording to its ov t be reported in	er-the-air designa column 1 (list each	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in		
its community of licens on which your cable sy	e. For example stem carried th	e, WRC is Ch le station.	annel 4 in Wash	nington, D.C. This	may be different from the channel		
(for independent multid For the meaning of the Column 4: If the sta	cast), "E" (for no se terms, see p ation is outside	oncommercia page (v) of the the local ser	ll educational), o e general instruc vice area, (i.e. "c	or "E-M" (for nonco ctions located in th distant"), enter "Ye	s". If not, enter "No". For an ex-		
-	ave entered "Ye ne distant statio	es" in column on during the	4, you must cor accounting period	mplete column 5, s od. Indicate by ent	stating the basis on which your ering "LAC" if your cable system		
For the retransmiss of a written agreement the cable system and a	ion of a distant entered into or a primary transı	multicast stre n or before Ju mitter or an a	eam that is not s ine 30, 2009, be ssociation repre	subject to a royalty tween a cable sys senting the primar	payment because it is the subject tem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further		
explanation of these the	ree categories location of ea Canadian statio	, see page (vinch station. For the station. For the station, giver) of the general in or U.S. stations, we the name of the content o	instructions locate list the community ne community with	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.		
rotor ii you aro atiiizii	g malapio onai		EL LINE-UP	•	onamio mio 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		

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#				
NELSONVILLE TV CABLE INC.			3131EMID#	Name			
PRIMARY TRANSMITTERS: TELEVISION							
In General: In space G, identify every televis carried by your cable system during the according records and regulations in effect on June	ounting period, except ((1) stations carried	only on a part-time basis under	G			
substitute program basis, as explained in the	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 basis. For further information concerning in the paper SA3 form.	substitute basis station	ns, see page (v) o	the general instructions located				
Column 1: List each station's call sign. E each multicast stream associated with a stat cast stream as "WETA-2". Simulcast stream WETA-simulcast). Column 2: Give the channel number the	tion according to its ovens must be reported in c	er-the-air designat column 1 (list each	ion. For example, report multi- stream separately; for example				
its community of license. For example, WRC on which your cable system carried the static Column 3: Indicate in each case whether	C is Channel 4 in Wash on.	ington, D.C. This	may be different from the channel				
educational station, by entering the letter "N" (for independent multicast), "E" (for noncome For the meaning of these terms, see page (N Column 4: If the station is outside the local column 4: If the stati	mercial educational), or v) of the general instruc cal service area, (i.e. "d	r "E-M" (for nonco ctions located in th listant"), enter "Ye	mmercial educational multicast). e paper SA3 form. s". If not, enter "No". For an ex-				
planation of local service area, see page (v) Column 5: If you have entered "Yes" in c cable system carried the distant station durir carried the distant station on a part-time bas	column 4, you must con ng the accounting perio	nplete column 5, s od. Indicate by ent	tating the basis on which your ering "LAC" if your cable system				
For the retransmission of a distant multicor of a written agreement entered into on or betthe cable system and a primary transmitter of	ast stream that is not s fore June 30, 2009, be or an association repres	ubject to a royalty tween a cable sys senting the primar	payment because it is the subject tem or an association representing y transmitter, enter the designa-				
tion "E" (exempt). For simulcasts, also enter explanation of these three categories, see p. Column 6: Give the location of each stat FCC. For Mexican or Canadian stations, if a	age (v) of the general in tion. For U.S. stations, I any, give the name of th	nstructions located list the community se community with	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.				
Note: If you are utilizing multiple channel line	e-ups, use a separate s		channel line-up.				
1. CALL 2. B'CAST 3. TYF SIGN CHANNEL OF NUMBER STA		5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				
THE		(ii Dietaint)					

LEGAL NAME OF OWN	JER OF CABLE SY	STEM.			SYSTEM ID#		
NELSONVILLE					3 · 3 · 2 · · 2 · · · · · · · · · · · ·	Name	
PRIMARY TRANSMITTE	ERS: TELEVISIO	N					
·			, ,		and low power television stations) d only on a part-time basis under	G	
				•	ain network programs [sections		
. , . ,	. , . ,	,	-	1(e)(2) and (4))]; a	nd (2) certain stations carried on a	Primary Transmitters:	
substitute program bas				s carried by your ca	able system on a substitute program	Television	
	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 lis	t it in space I (th	ie Special Stateme	ent and Program Log)—if the		
station was carried	-						
	• 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						
• •		sian. Do not	report origination	n program service	s such as HBO, ESPN, etc. Identify		
		-			tion. For example, report multi-		
cast stream as "WETA	\-2". Simulcast	streams mus	t be reported in	column 1 (list each	n stream separately; for example		
			-		on for broadcasting over-the-air in		
	-		annel 4 in Wash	nington, D.C. This	may be different from the channel		
on which your cable sy			tation is a netwo	ark station, an inde	pendent station, or a noncommercial		
					ast), "I" (for independent), "I-M"		
·	-	•	, ,		mmercial educational multicast).		
For the meaning of the	ese terms, see	page (v) of th	e general instru	ctions located in th	ne paper SA3 form.		
					es". If not, enter "No". For an ex-		
planation of local servi					e paper SA3 form. Stating the basis on which your		
1			-	<u>=</u> "	ering "LAC" if your cable system		
carried the distant stat		-		•	-		
	-				payment because it is the subject		
_				•	stem or an association representing		
•			•	• .	ry transmitter, enter the designa-		
` ',			•	•	her basis, enter "O." For a further d in the paper SA3 form.		
	-				to which the station is licensed by the		
				-	which the station is identifed.		
Note: If you are utilizing				•			
		CHANN	EL LINE-UP	AR			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION	` ′	(If Distant)			
				,		İ	
						•	
						•	
						1	
					<u> </u>		
]	
					<u> </u>		

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	
NELSONVILLE						Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s	system during th	ne accounting	g period, except	(1) stations carried	and low power television stations) d only on a part-time basis under	G
76.59(d)(2) and (4), 76 substitute program bas	6.61(e)(2) and (esis, as explaine	4), or 76.63 (r d in the next	referring to 76.6 paragraph.	1(e)(2) and (4))]; a	ain network programs [sections nd (2) certain stations carried on a able system on a substitute program	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 station was carried only on a substitute basis.						
• List the station here,	and also in spa formation cond	ice I, if the sta			ute basis and also on some other f the general instructions located	
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						
its community of licens	se. For example	e, WRC is Ch	-		on for broadcasting over-the-air in may be different from the channel	
educational station, by	in each case we entering the le	whether the state "N" (for n	etwork), "N-M" (for network multica	pendent station, or a noncommercial ast), "I" (for independent), "I-M"	
For the meaning of the Column 4: If the sta	ese terms, see pation is outside	page (v) of the	e general instruc vice area, (i.e. "c	ctions located in th distant"), enter "Ye	s". If not, enter "No". For an ex-	
1	ave entered "Ye he distant statio	es" in column on during the	4, you must cor accounting period	nplete column 5, s od. Indicate by ent	stating the basis on which your ering "LAC" if your cable system	
For the retransmiss of a written agreement	ion of a distant entered into or	multicast stren or before Ju	eam that is not s ine 30, 2009, be	subject to a royalty tween a cable sys	payment because it is the subject tem or an association representing y transmitter, enter the designa-	
tion "E" (exempt). For sexplanation of these th	simulcasts, also nree categories	o enter "E". If , see page (v	you carried the o	channel on any oth instructions locate	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the	
	Canadian statio	ns, if any, giv	e the name of th	ne community with	which the station is identifed.	
	_	CHANN	EL LINE-UP	AS		
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	
						•

TORWIGAGE: FAGE 6:					0)/07514 ID	
NELSONVILLE					SYSTEM ID:	Wame Name
PRIMARY TRANSMITT						
In General: In space	G, identify every	/ television st	, ,		and low power television stations) d only on a part-time basis under	G
	6.61(e)(2) and (4), or 76.63 (referring to 76.6	•	ain network programs [sections and (2) certain stations carried on a	Primary Transmitters:
basis under specifc F	CC rules, regula	ations, or auth	norizations:		able system on a substitute program	Television
station was carried	-		st it in space I (th	ie Special Statemo	ent and Program Log)—if the	
	nformation cond				tute basis and also on some other fithe general instructions located	
each multicast stream	associated wit	h a station ac	cording to its ov	er-the-air designa	s such as HBO, ESPN, etc. Identify tion. For example, report multi- h stream separately; for example	
Column 2: Give th			-		ion for broadcasting over-the-air in may be different from the channel	
	e in each case v	whether the s			ependent station, or a noncommercial	
(for independent multi For the meaning of the	icast), "E" (for neese terms, see	oncommercia page (v) of th	al educational), c e general instru	or "E-M" (for nonco		
planation of local serv	rice area, see pa	age (v) of the	general instruct	ions located in the	es". If not, enter "No". For an ex- e paper SA3 form. estating the basis on which your	
•	the distant statio	on during the	accounting period	od. Indicate by ent	tering "LAC" if your cable system	
For the retransmiss	sion of a distant	multicast str	eam that is not s	subject to a royalty	γ payment because it is the subject stem or an association representing	
the cable system and	a primary trans	mitter or an a	ssociation repre	senting the prima	ry transmitter, enter the designa- her basis, enter "O." For a further	
1	-				d in the paper SA3 form. to which the station is licensed by the	
FCC. For Mexican or Note: If you are utilizing					which the station is identifed. channel line-up.	
		CHANN	IEL LINE-UP	AT		7
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
	NUMBER	STATION		(If Distant)		+
						···]

LECAL NAME OF OWA	IED OF CARLE CV	OTEM.			SYSTEM ID#		
NELSONVILLE					3131EWIID#	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s	system during th	ne accounting	g period, except	(1) stations carried	and low power television stations) d only on a part-time basis under ain network programs [sections	G	
substitute program bas Substitute Basis S	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. 							
basis. For further in in the paper SA3 fo	formation conc rm.	erning substi	tute basis statio	ns, see page (v) o	ute basis and also on some other f the general instructions located		
each multicast stream cast stream as "WETA WETA-simulcast).	associated with -2". Simulcast	n a station ac streams mus	cording to its ov t be reported in	er-the-air designa column 1 (list each	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in		
its community of licens on which your cable sy	se. For example stem carried th	e, WRC is Ch le station.	annel 4 in Wash	nington, D.C. This	may be different from the channel		
(for independent multid For the meaning of the Column 4: If the sta	cast), "E" (for no ese terms, see p ation is outside	oncommercia page (v) of the the local ser	ll educational), o e general instruc vice area, (i.e. "c	or "E-M" (for nonco ctions located in th distant"), enter "Ye	s". If not, enter "No". For an ex-		
-	ave entered "Ye ne distant statio	es" in column on during the	4, you must cor accounting period	mplete column 5, s od. Indicate by ent	stating the basis on which your ering "LAC" if your cable system		
For the retransmiss of a written agreement the cable system and a	ion of a distant entered into or a primary transi	multicast stre n or before Ju mitter or an a	eam that is not s ine 30, 2009, be ssociation repre	subject to a royalty tween a cable sys senting the primar	payment because it is the subject tem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further		
explanation of these the	iree categories e location of ea Canadian statio	, see page (vinch station. For the station. For the station, giver) of the general in or U.S. stations, we the name of the content o	instructions locate list the community ne community with	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.		
Note. Il you are utilizili	g multiple chai		EL LINE-UP	•	опаннен ине-ир.		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

LEGAL NAME OF OWN	ED OF CARLE SY	CTEM:			SYSTEM ID#		
NELSONVILLE					3131211110#	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s	ystem during the	ne accounting n June 24, 19	g period, except 81, permitting th	(1) stations carried ne carriage of certa	and low power television stations) d only on a part-time basis under ain network programs [sections	G Primary	
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 FCDo not list the station station was carried	here in space	G—but do lis		e Special Stateme	ent and Program Log)—if the		
basis. For further in in the paper SA3 fo	formation conc rm.	erning substi	tute basis statio	ns, see page (v) o	ute basis and also on some other f the general instructions located		
each multicast stream cast stream as "WETA WETA-simulcast).	associated with -2". Simulcast	n a station ac streams mus	cording to its ov t be reported in	er-the-air designa column 1 (list each	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in		
its community of licens on which your cable sy	e. For example stem carried th	e, WRC is Ch le station.	annel 4 in Wash	nington, D.C. This	may be different from the channel		
(for independent multid For the meaning of the Column 4: If the sta	cast), "E" (for no se terms, see p ation is outside	oncommercia page (v) of the the local ser	ll educational), o e general instruc vice area, (i.e. "c	or "E-M" (for nonco ctions located in th distant"), enter "Ye	s". If not, enter "No". For an ex-		
-	ave entered "Ye ne distant statio	es" in column on during the	4, you must cor accounting period	mplete column 5, s od. Indicate by ent	stating the basis on which your ering "LAC" if your cable system		
For the retransmiss of a written agreement the cable system and a	ion of a distant entered into or a primary transı	multicast stre n or before Ju mitter or an a	eam that is not s ine 30, 2009, be ssociation repre	subject to a royalty tween a cable sys senting the primar	payment because it is the subject tem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further		
explanation of these the	ree categories location of ea Canadian statio	, see page (vinch station. For the station. For the station, giver) of the general in or U.S. stations, we the name of the content o	instructions locate list the community ne community with	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.		
Note. If you are utilized	g multiple chai	• •	EL LINE-UP	•	опаппет ппе-ир.		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

LEGAL NAME OF OWN	ED OE CARI E SV	'QTEM:			SYSTEM ID#	
NELSONVILLE					0101EM 15#	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space C carried by your cable s	6, identify every ystem during th	television st	g period, except	(1) stations carried	and low power television stations) d only on a part-time basis under	G
76.59(d)(2) and (4), 76 substitute program bas	.61(e)(2) and (esis, as explaine	4), or 76.63 (r d in the next	referring to 76.6 paragraph.	1(e)(2) and (4))]; a	ain network programs [sections nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
basis under specifc FC	CC rules, regula	itions, or auth	norizations:		ent and Program Log)—if the	10.00.00
station was carried • List the station here, basis. For further in in the paper SA3 fo	only on a subs and also in spa formation cond rm.	titute basis. ice I, if the sta erning substi	ation was carried	d both on a substit ns, see page (v) o	ute basis and also on some other f the general instructions located	
		-			s such as HBO, ESPN, etc. Identify tion. For example, report multi-	
WETA-simulcast).			•	•	n stream separately; for example on for broadcasting over-the-air in	
on which your cable sy Column 3: Indicate	stem carried the in each case w	e station. whether the st	tation is a netwo	rk station, an inde	may be different from the channel pendent station, or a noncommercial ast), "i" (for independent), "i-M"	
(for independent multid For the meaning of the	cast), "E" (for no se terms, see	oncommercia page (v) of the	il educational), o e general instruc	r "E-M" (for nonco ctions located in th	mmercial educational multicast).	
1	ave entered "Ye	es" in column	4, you must cor	nplete column 5, s	e paper SA3 form. stating the basis on which your ering "LAC" if your cable system	
	ion of a distant	multicast stre	eam that is not s	subject to a royalty	capacity. payment because it is the subject tem or an association representing	
tion "E" (exempt). For sexplanation of these the Column 6: Give the	simulcasts, also ree categories e location of ea	o enter "E". If , see page (v) ch station. Fo	you carried the or of the general in U.S. stations,	channel on any ot instructions locate list the community	y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing				· ·		
		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: 2023/1 FORM SA3E, PAGE 4.

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

FORM SA3E. PAGE 5.						ACCOUNTING	PERIOD: 2023/1		
LEGAL NAME OF OWNER OF	CABLE SYST	EM:			5	SYSTEM ID#	Nama		
NELSONVILLE TV CAE	BLE INC.						Name		
SUBSTITUTE CARRIAGE	: SPECIAI	_ STATEMEN	T AND PROGRAM LOG						
In General: In space I, identi substitute basis during the ad explanation of the programm	counting pe	eriod, under spe	ecific present and former FC	C rules, regul	ations, or authorizations.	For a further	Substitute		
				e general ilist	ructions located in the pa	iper SAS form.	Carriage:		
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? ☐ Yes ☒ No									
Note: If your answer is "No,		rest of this pag	ge blank. If your answer is '	'Yes," you mι	-	-	Program Log		
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the program Column 3: Give the call s Column 4: Give the broat the 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."	itute progra ce, please a of every nor distant stati gulations, o tion. Do no ucy" or "NB n was broad sign of the s dcast statio adian statio th and day re "5/7." ss when the Example: a er "R" if the and regulatio ogramming	m on a separa attach additional network televition and that your authorization at use general class live, enterestation broadca and socation (the ones, if any, the owner your system authorise and program carried is the program carried in the program carried is the program carried is the program carried in the program carried in the program carried is the program carried in the program ca	al pages. Ision program (substitute pur cable system substitute s. See page (vi) of the geneategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the tem carried the substitute purchase of the substitute program was carried by your orded by a system from 6:01: was substituted for programing the accounting period	rogram) that, d for the progeral instruction "basketball". lo." m. station is lice station is ider program. Use cable system. 15 p.m. to 6:2 mming that y l; enter the let	during the accounting ramming of another state on slocated in the paper. List specific program unsed by the FCC or, in ntified). numerals, with the more List the times accurate 8:30 p.m. should be our system was require tter "P" if the listed pro	tion hth y			
9	URSTITLIT	E PROGRAM			EN SUBSTITUTE IAGE OCCURRED	7. REASON			
TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIMES	FOR DELETION			
	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM — TO				
					<u> </u>				
					_				
					_				
					_				
					_				
					<u> </u>				
					_				

ACCOUNTING PERIOD: 2023/1 FORM SA3E, PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **NELSONVILLE TV CABLE INC.** PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-J time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in 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 "4/10." · State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.– 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.-12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED CALL SIGN CALL SIGN HOURS HOURS DATE **FROM** TO DATE **FROM** TO

	AL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Name
Inst all a (as i	OSS RECEIPTS tructions: The figure you give in this space determines the form you file and the amount you amounts (gross receipts) paid to your cable system by subscribers for the system's secondary identified in space E) during the accounting period. For a further explanation of how to compile (vii) of the general instructions.	y transmission s	ervice	K Gross Receipts
IMP	Gross receipts from subscribers for secondary transmission service(s) during the accounting period. PORTANT: You must complete a statement in space P concerning gross receipts.	\$ (Amount of g	968,490.00 ross receipts)	
ComComIf youIf you	YRIGHT ROYALTY FEE uctions: Use the blocks in this space L to determine the royalty fee you owe: mplete block 1, showing your minimum fee. mplete block 2, showing whether your system carried any distant television stations. bur system did not carry any distant television stations, leave block 3 blank. Enter the amount from block 1 on line 1 of block 4, and calculate the total royalty fee. bur system did carry any distant television stations, you must complete the applicable parts of ompanying this form and attach the schedule to your statement of account.			Copyright Royalty Fee
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be ente ck 3 below.	ered on line 1 of		
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be enterelow.	ed on line 2 in b	ock	
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be block 4 below.	e entered on line	•	
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are least the minimum fee, regardless of whether they carried any distant stations. This fee is 1 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.	\$	968,490.00	
	Enter the result here. This is your minimum fee.	\$	10,304.73	
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the infor space G. If, in space G, you identified any stations as "distant" by stating "Yes" in column 4, "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period? X Yes—Complete the DSE schedule. No—Leave block 3 below blank and complete the DSE schedule.	, you must check	(
Block	Line 1. BASE RATE FEE : Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero.	\$	2,108.17	
3	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.	\$	2,108.17	
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.	\$	10,304.73	Cable systems
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter		0.00	submitting additional
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	\$	95.43	deposits under Section 111(d)(7) should contact
	Line 4. FILING FEE	<u></u> \$	725.00	the Licensing additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	11,125.17	appropriate form for submitting the
	EFT Trace # or TRANSACTION ID #			additional fees.
	Remit this amount via electronic payment payable to Register of Copyrights. (See pag	ge (i) of the		
	general instructions located in the paper SA3 form and the Excel instructions tab for r	.	<u>n.)</u>	

ACCOUNTING PERIOD: 2023/1

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: NELSONVILLE TV CABLE INC.	
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.	
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
Be Contacted for Further Information	Name ALMA HOXHA, CINNAMON MUELLER Telephone 314-462-9000	
	Address 1714 Deer Tracks Trail, STE 230 (Number, street, rural route, apartment, or suite number) St. Louis, MO 63131 (City, town, state, zip)	
	Email ahoxha@cinnamonmueller.com Fax (optional)	
0	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations.)	
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)]	
	/s/ Betty Edwards	
	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, then type /s/ and your name. Pressing the "F2" button will avoid enabling Excel's Lotus compatibility settings.	
	Typed or printed name: Betty Edwards	
	Title: Co-Owner (Title of official position held in corporation or partnership)	
	Date: August 2, 2024	

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 this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address, and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the 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#	Name
NELSONVILLE TV CABLE INC.	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 information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below	P Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address Mailing Address	
INTEREST ASSESSMENTS	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
x 338 days Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,	
space L (page 7) \$ 95.43 (interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.	
Owner Address	
First community served	
Accounting period	
ID number	

Privacy Act Notice: Section 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address, and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the 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: 2023/1

DSE SCHEDULE. PAGE 10.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that the second of the se	

Note that local stations are not counted at all in computing DSEs. $\label{eq:DSEs}$

Step 2: Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space G of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

Step 3: Multiply the result of step 1 by the result of step 2. This gives you the particular station's DSE for the accounting period. (Note that for stations other than those carried on a part-time basis due to lack of activated channel capacity, actual multiplication is not necessary since the DSE will always be the same as the type value.)

SPECIAL FORMULA FOR STATIONS LISTED IN SPACE I OF SA3E (LONG FORM)

Step 1: For each station, calculate the number of programs that, during the accounting period, were broadcast live by the station and were substituted for programs deleted at the option of the cable system.

(These are programs for which you have entered "Yes" in column 2 and "P" in column 7 of space I.)

Step 2: Divide the result of step 1 by the total number of days in the calendar year (365—or 366 in a leap year). This gives you the particular station's DSE for the accounting period.

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

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
 (1) 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:

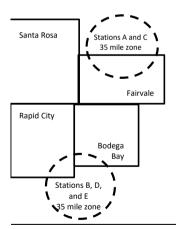
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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 Cari	ried	Identification	of Subscriber Groups	
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
E (network)	0.25	Fairvale	Stations B, D, and E	120,000.00
TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00

Minimum Fee Total Gross Receipts	\$600,000.00
	x .01064
	\$6.384.00

	Ψ0,001.00			
	Second Subscriber Group		Third Subscriber Group	
	(Rapid City and Bodega Bay)		(Fairvale)	
\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
2.472	DSEs	1.083	DSEs	1.389
\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
	2.472 \$6,497.20 3,298.40 3,198.80	\$310,000.00 Gross receipts 2.472 DSEs \$6,497.20 Base rate fee 3,298.40 \$170,000 x .01064 x 1.0 = 3,198.80 \$170,000 x .00701 x .083 =	\$310,000.00 Gross receipts \$170,000.00 2.472 DSEs 1.083 \$6,497.20 Base rate fee \$1,907.71 3,298.40 \$170,000 x .01064 x 1.0 = 1,808.80 3,198.80 \$170,000 x .00701 x .083 = 98.91	\$310,000.00 Gross receipts \$170,000.00 Gross receipts \$2.472 DSEs 1.083 DSEs \$6,497.20 Base rate fee \$1,907.71 Base rate fee \$3,298.40 \$170,000 x .01064 x 1.0 = \$1,808.80 \$120,000 x .01064 x 1.0 = \$3,198.80 \$170,000 x .00701 x .083 = 98.91 \$120,000 x .00701 x .389 =

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: 2023/1

DSE SCHEDULE, PAGE	l ·					/OTE: := ::			
1	LEGAL NAME OF OWNER OF CABLE SYSTEM: NELSONVILLE TV CABLE INC. SYSTEM ID#								
<u> </u>									
	SUM OF DSEs OF CATEGORY "O" STATIONS:								
	 Add the DSEs of each station 								
	Enter the sum here and in line	1 of part 5 of this	schedule.		1.50				
						<u>i</u>			
2	Instructions: In the column headed "Call S	Sian": list the call	signs of all distant stations in	dentified by th	e letter "O" in column 5				
	of space G (page 3).	Jigii . not the oun	orgino or an alotarit otationo i	dentined by th	o lottor o in column o				
Computation	In the column headed "DSE"	: for each indepe	ndent station, give the DSE a	as "1.0"; for e	ach network or noncom-				
of DSEs for	mercial educational station, giv	e the DSE as ".25	5."						
Category "O"			CATEGORY "O" STATION	S: DSEs					
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	WCHS	0.250							
	WCHS-DT2	0.250							
	WCHS-DT3	1.000			<u> </u>				
					<u> </u>				
Add rows as									
necessary.		-		 	 				
Remember to copy all				ļ					
formula into new									
rows.									
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7	 	5	· • · · · · · · · · · · · · · · · · · ·	

Name		WNER OF CABLE SYSTEM: LE TV CABLE INC.					•	SYSTEM ID#
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should of Column 3 Column 4 be carried out Column 5 give the type-1 Column 6	CAPACITY st the call sign of all distar : For each station, give the correspond with the inform : For each station, give the Divide the figure in colurat least to the third decime: For each independent so walue as ".25." : Multiply the figure in coluration. This is the station's	ne number of I mation given in the total number mn 2 by the final point. This station, give the num 4 by the	hours your cable syster n space J. Calculate or er of hours that the stati gure in column 3, and g is the "basis of carriage e "type-value" as "1.0."	n carried the stati ly one DSE for each on broadcast ove ive the result in co e value" for the st For each network	con during the accounting ach station. If the air during the accounting the air during the accounting the accounting the accounting the accounting the accounting the accounting the air during the air during the accounting the acco	inting period. In figure must ational station,	
Capacity		C	CATEGOR	Y LAC STATIONS:	COMPUTATI	ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	R JRS :D BY M	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	5. TYPE SE VALUE		SE
			÷		=	<u>x</u>	=	
			÷			x x		
			÷		=	x	=	
			÷		=	x	=	
			÷		=	x x	=	
			÷		=	x	=	
	Add the DSEs	OF CATEGORY LAC Stop of each station. m here and in line 2 of page 2.		hedule,		0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efference to broadcast of space I). Column 2: at your option. Column 3: Column 4: I	e the call sign of each state by your system in substitute on October 19, 1976 (a sine or more live, nonnetwoner of the control of the contro	delete under FCC rules the word "Yes" in column 2 itution for programs that volumn 4. Round to no less	of vere deleted than the third	n).			
		SU	IBSTITUTE	-BASIS STATION	S: COMPUTA	ATION OF DSEs		•
	1. CALL SIGN	2. 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
		÷		=		÷		=
		÷		=		÷		
		÷		=		÷		=
		÷		=		÷		=
	Add the DSEs	÷ OF SUBSTITUTE-BASIS of each station. m here and in line 3 of pa	S STATIONS:			0.00		-
5 Total Number of DSEs	number of DSEs	R OF DSEs: Give the among applicable to your system of DSEs from part 2 ● of DSEs from part 3 ●		boxes in parts 2, 3, and	4 of this schedule	and add them to provide t	1.50 0.00	
	3. Number	of DSEs from part 4 ●				<u> </u>	0.00	
	TOTAL NUMBE	R OF DSEs						1.50

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2023/1

LEGAL NAME OF O							S	YSTEM ID#	Name
NELSONVILLE	IV CABLE IN	C.							
Instructions: Bloc In block A:	k A must be comp	leted.							
If your answer if " schedule.	Yes," leave the re	mainder of pa	irt 6 and part 7	of the DSE schedu	ule blank and	complete part 8	3, (page 16) of the		6
If your answer if "	No," complete blo								
1. 41 1.1				TELEVISION MA		70 F . (FO	S	e t	Computation of 3.75 Fee
Is the cable system effect on June 24,	•	itside of all m	ajor and smalle	er markets as defin	ea unaer sec	tion 76.5 of FCC	rules and regular	tions in	
			O NOT COMP	LETE THE REMAI	NDER OF PA	ART 6 AND 7.			
X No—Comp	lete blocks B and	C below.							
		BLO	CK B: CARR	IAGE OF PERM	MITTED DS	SEs			
Column 1: CALL SIGN	FCC rules and re	gulations prio e DSE Scheo	or to June 25, 1 dule. (Note: Th	part 2, 3, and 4 of t 981. For further ex e letter M below ref Act of 2010.)	planation of p	ermitted station	ns, see the	•	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommercia D Grandfatherect instructions fo E Carried pursus *F A station pre	les and regulated pursuant to on as defined all educational I station (76.6 r DSE scheduant to individuationally carried HF station wi	ations cited be to the FCC mare in 76.5(kk) (76) I station [76.59 is) (see paragrule). all waiver of FC don a part-timethin grade-B co	e or substitute basi ontour, [76.59(d)(5)	e in effect on .57, 76.59(b), .(1), 76.63(a) .3(a) referring stitution of gra	June 24, 1981.) 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] andfathered stat	.63(a) referring to 61(e)(1) ions in the		
Column 3:		stations ider	ntified by the le DSE.)	parts 2, 3, and 4 of tter "F" in column 2		omplete the wor	ksheet on page 14	T	
SIGN WCHS	BASIS	0.25	SIGN	BASIS		SIGN	BASIS		-
WCHS-DT2	······	0.25				 			
WCHS-DT3	М	1.00							
		1	1			Н		1.50	
		F	SLOCK C: CC	MPUTATION OF	3.75 FFF				-
Line 1: Enter the	total number of								
Line 2: Enter the	sum of permitted	d DSEs from	n block B abo	ve					
Line 3: Subtract I (If zero, le				of DSEs subject of this schedule		ate.			
Line 4: Enter gro	ss receipts from	space K (pa	ge 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375 a	ınd enter sur	m here				x		permited/ partially nonpermitted
Line 6: Enter tota	ıl number of DSE	Es from line :	3				^		carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 an	d enter here	and on line 2	2, block 3, space	L (page 7)			0.00	

	WNER OF CABLE S						S'	YSTEM ID#	Name
		i i		SION MARKETS			T		6
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

ACCOUNTING PERIOD: 2023/1

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

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: NELSONVILLE TV CABLE INC.	D# Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE	
Section 1	Enter the amount of gross receipts from space K (page 7)	7
Section 2	A. Enter the total DSEs from block B of part 7	00 Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	Cundinated
	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	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below.	
	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 DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	
	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 DSE 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)	
	B. Enter 0.00189 of gross receipts (the amount in section 1)	
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here	
	D. Multiply line B by line C and enter here	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge	

Name	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM: SYSTEM ID#									
Name	I	NELSONVILLE TV CABLE INC.									
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.									
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$									
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1)									
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here									
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ _\$									
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here									
		F. Multiply line D by line E and enter here									
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)									
		Syndicated Exclusivity Surcharge									
	Instru	ctions:									
8		ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5.									
		ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.									
Computation	-	ır answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.									
of Base Rate Fee	• If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below blank.										
Dase Nate Fee	What is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers										
	were located within that station's local service area and others were located outside that area. For the definition of a station's "local										
	service	service area," see page (v) of the general instructions.									
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS										
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?										
	X Yes—Complete part 9 of this schedule. No—Complete the following sections.										
	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE										
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶\$									
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.									
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)									
	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									

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2023/1

LEGAL NAME OF OWNER OF CABLE SYSTEM:	STEM ID#
NELSONVILLE TV CABLE INC.	Name
Section If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.	
A. Enter 0.01064 of gross receipts (the amount in section 1) * \$	8
B. Enter 0.00701 of gross receipts (the amount in section 1)	Computation of
C. Multiply line B by 3.000 and enter here ▶\$	Base Rate Fee
D. Enter 0.00330 of gross receipts (the amount in section 1)	
E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here	
F. Multiply line D by line E and enter here	
G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	
Base Rate Fee	0.00
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast sign instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-Space G.	
In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to ex	
receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take advanta exclusion, you must:	age of this of Base Rate Fee
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the s	same and
station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the nu DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	group. Exclusivity Surcharge
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. If your cable system is wholly located outside all major television markets, complete block A only.	
How to Identify a Subscriber Group for Partially Distant Stations	for Partially
Step 1: For each community served, determine the local service area of each wholly distant and each partially distant station yo carried to that community.	Permitted Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (a same token, the station is distant to the subscriber.)	
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a call will have only one subscriber group when the distant stations it carried have local service areas that coincide.	able system
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's groups.	subscriber
In each section:	
 Identify the communities/areas represented by each subscriber group. Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the subscribers in the group. 	9
• 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 of this schedule; or,	3 2, 3, and 4
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 E part 6 of this schedule.	3,
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 instruction in the paper SA3 form.	tions
Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceded page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to succeed that calculations on the form.	he total

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

LEGAL NAME OF OWNER NELSONVILLE TV						S	YSTEM ID#	Name
Е	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCRI	BER GROUP		
	FIRST	SUBSCRIBER GROU	Р		SECOND	SUBSCRIBER GROU	Р	•
COMMUNITY/ AREA	Athens	and Morgan Cou	nties	COMMUNITY/ AREA	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				WCHS	0.25			Base Rate Fee
				WCHS-DT2	0.25			and
				WCHS-DT3	1.00			Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
			ļ					
Total DSEs			0.00	Total DSEs			1.50	
Gross Receipts First Gro	oup	\$ 819	450.00	Gross Receipts Seco	nd Group	\$ 1	49,040.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	2,108.17	
	THIRD	SUBSCRIBER GROU	Р		FOURTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
	······································			-				
	·							
	<u> </u>	-						
	<u> </u>		·····					
	<u> </u>		<u> </u>					
	<u> </u>		<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	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 the Enter here and in block			ber group a	s shown in the boxes a	bove.	\$	2,108.17	

NELSONVILLE '	TV CABLE	INC.						Name
				ATE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	ID	
COMMUNITY/ ARE/		SUBSCRIBER GRO	0	COMMUNITY/ ARE.	0	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN DSE CALL SIGN DSE				Computati of
								Base Rate I
		-				-		and
								Syndicate Exclusivit
								Surcharg
								for
		-						Partially Distant
								Stations
						-		
						+		
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts Firs	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO			EIGHTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA	Α		0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		<u> </u>						
		-						
				-				
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				Ш				
ase Rate Fee: Add			criber group a	as shown in the boxes	above.	\$		
nor note and in bit	JON J, IIIIC 1, S	pace L (page 1)				Ψ		

LEGAL NAME OF OWN NELSONVILLE T						•	SYSTEM ID#	Name
		COMPUTATION O		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROI	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
201411111111111111111111111111111111111		SUBSCRIBER GRO		COMMUNITY// ADE		SUBSCRIBER GRO	UP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	II as shown in the boxes	above.	\$		

NELSONVILLE '	TV CABLE	INC.						Name
-				ATE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	ID.	
COMMUNITY/ AREA		SUBSCRIBER GRO	0	COMMUNITY/ ARE	0	9		
	LDOE	I call closs						Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate I
								and
		<u> </u>						Syndicate
								Exclusivit Surcharge
								for
						 -		Partially
								Distant Stations
otal DSEs			0.00	Total DSEs			0.00	
Fross Receipts Firs	t Group	\$	0.00	Gross Receipts Second Group \$ 0.00				
ase Rate Fee First		\$	0.00	Base Rate Fee Sec		\$ SUBSCRIBER GROU	0.00	
COMMUNITY/ ADE		SUBSCRIBER GRO	0 0	COMMUNITY/ADE	JP 0			
COMMUNITY/ AREA				COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		.						
						-		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				Ш				
ase Rate Fee: Add			criber group a	as shown in the boxes	above.	\$		
	-,, -	. (1 "3- ')						

LEGAL NAME OF OWNER OF CABLE SYSTEM: NELSONVILLE TV CABLE INC. SYSTEM ID#								
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		BER GROUP SUBSCRIBER GROUP	0	
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
					<u></u>			for Partially
						-		Distant
								Stations
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gro		\$	0.00	Base Rate Fee Secon		\$	0.00	
NII COMMUNITY/ AREA	NTEENTH	SUBSCRIBER GROU	IP 0	COMMUNITY/ AREA	WENTIETH	SUBSCRIBER GROUP	0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
								
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
	•	•			- F	-		
Base Rate Fee Third G	Base Rate Fee Third Group \$ 0.00			Base Rate Fee Fourth	Group	\$	0.00	
Raco Dato Foc. Add 41-	hace ==*	foot for each subsection	ibor grove	ne chown in the haves	2010			
Enter here and in block			ivei group a	as shown in the boxes ab	ouve.	\$		

LEGAL NAME OF OWNER NELSONVILLE TV						SYS	STEM ID#	Name
BI	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
TWENT	TY-FIRST	SUBSCRIBER GROU	Р	TWENTY	-SECOND	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
O/ IEE OIOIY	DOL	O/ ILL SIGIT	DOL	O/ LEE OF OTT	DOL	O/ LEE OTOTA	562	Base Rate Fee
						_		and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
								
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
TWENT	Y-THIRD	SUBSCRIBER GROU	Р	TWENT	/-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	[
	<u> </u>							
	<u>[</u>]							
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	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	e fees for each subscri	ber group s	s shown in the hoxes ab	ove.			
Enter here and in block 3			gup c			\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: NELSONVILLE TV CABLE INC. SYSTEM ID#								
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		BER GROUP SUBSCRIBER GROU	P	
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
	ļ							Distant
	<u></u>		ļ		 		<u></u>	Stations
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T			0.00	T		Į I	0.00	
Total DSEs 0.00				Total DSEs 0.00				
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Group \$ 0.00			-	Base Rate Fee Second Group \$ 0.00 TWENTY-EIGHTH SUBSCRIBER GROUP				
	SEVENTH	SUBSCRIBER GROU		ii .	TY-EIGHTH	SUBSCRIBER GROU	P 0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
			<u> </u>					
	 							
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	ı Group	\$	0.00			
Deep Data Free Aller	. h	- fore fore a last	:1					
Enter here and in block			iber group a	as shown in the boxes at	ove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: NELSONVILLE TV CABLE INC. SYSTEM ID#								
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		BER GROUP SUBSCRIBER GROU	P	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					···			Syndicated
								Exclusivity
	<u></u>							Surcharge for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First Group \$ 0.00			-	Base Rate Fee Second Group \$ 0.00 THIRTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA	RTY-FIRST	SUBSCRIBER GROU	0 0	COMMUNITY/ AREA	Y-SECOND	SUBSCRIBER GROU	0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u> </u>					
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Sase Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	n Group	\$	0.00			
				П				
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes al	bove.	\$		
						<u> </u>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: NELSONVILLE TV CABLE INC.								
				ATE FEES FOR EACH			ID.	
THIR COMMUNITY/ AREA	IY-THIRD	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
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 Group \$ 0.00			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	
THIR	RTY-FIFTH	SUBSCRIBER GROU		ii e	IRTY-SIXTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			•					
			-					
			•					
			-					
			·					
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	h Group	\$	0.00			
December 5: All'	_ h	for for	dle e e		h			
Base Rate Fee: Add the Enter here and in block			nber group a	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: NELSONVILLE TV CABLE INC. SYSTEM ID#								
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		BER GROUP SUBSCRIBER GROUI	D	
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
								
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00		0.00	Gross Receipts Secon	d Group	\$	0.00		
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Secon	d Group	\$	0.00	
THIR	TY-NINTH	SUBSCRIBER GROU	IP		FORTIETH	SUBSCRIBER GROUI	>	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u>.</u>				<u></u>			
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
, , , , , , , , ,	•							
Sase Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	Group	\$	0.00			
Page Pate Face Add III	hace ==4:	food for each sub-	ibor ara ···	on about in the barrer of	2010			
Enter here and in block			ivei group a	as shown in the boxes ab	ouve.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: NELSONVILLE TV CABLE INC. SYSTEM ID#								
B	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	I SUBSCRI	BER GROUP		
FOR	TY-FIRST	SUBSCRIBER GROU	IP	FORT	Y-SECOND	SUBSCRIBER GROU	Р	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
	-							
								
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Secon	nd Group	\$	0.00	
FOR	TY-THIRD	SUBSCRIBER GROU	IP	FORT	Y-FOURTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
			<u> </u>					
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	-							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
sase Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	n Group	\$	0.00			
			iber group a	as shown in the boxes al	bove.			
Enter here and in block	3, line 1, sր	pace L (page 7)				\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: NELSONVILLE TV CABLE INC. SYSTEM ID#								
B	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	I SUBSCRI	BER GROUP		
		SUBSCRIBER GROU		11		SUBSCRIBER GROU	Р	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
0,122 0.0.1	202	07.122 0.011	202	07.122.01.01.1	332	07.22 0.011	332	Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
								for
						-		Partially
								Distant
						-		Stations
	-							
	-					-		
	-					-		
	-		 					
Total DSEs	•	ч	0.00	Total DSEs			0.00	
				Total DSEs 0.00				
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Secon	nd Group	\$	0.00	
FORTY-	SEVENTH	SUBSCRIBER GROU	IP	FOR	TY-EIGHTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
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	n Group	\$	0.00	
sase Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	ı Group	\$	0.00			
				П				
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes a	bove.	s		
		- (page 1)				<u> </u>		

Total DSEs Gross Receipts First Group	CALL SIGN Subscriber Group CALL SIGN Subscriber Group CALL SIGN Subscriber Group CALL SIGN		COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Seco	DSE	BER GROUP SUBSCRIBER GROU CALL SIGN S \$	DSE	Exclusivit
CALL SIGN DSE CALL SIGN DSE Total DSEs Gross Receipts First Group	CALL SIGN	0 DSE	CALL SIGN CALL SIGN Total DSEs	DSE	CALL SIGN	0 DSE	Computation of Base Rate I and Syndicate Exclusivities Surcharg for Partially Distant
CALL SIGN DSE Total DSEs Gross Receipts First Group	\$	DSE	CALL SIGN CALL SIGN Total DSEs	DSE		DSE O.00	Computation of Base Rate Fand Syndicate Exclusivite Surcharge for Partially Distant
Total DSEs Gross Receipts First Group	\$	0.00	Total DSEs			0.00	Base Rate I and Syndicate Exclusivit Surcharg for Partially Distant
Gross Receipts First Group				and Group	\$		and Syndicate Exclusivit Surcharg for Partially Distant
Gross Receipts First Group				and Group	\$		Syndicate Exclusivit Surcharge for Partially Distant
Gross Receipts First Group				and Group	\$		Exclusivit Surcharge for Partially Distant
Gross Receipts First Group				and Group	\$		for Partially Distant
iross Receipts First Group				and Group	\$		Partially Distant
Gross Receipts First Group				and Group	\$		Distant
Gross Receipts First Group				and Group	\$		
Gross Receipts First Group				and Group	\$		
Gross Receipts First Group				and Group	\$		
Gross Receipts First Group				and Group	\$		
Gross Receipts First Group				nd Group	\$		
Gross Receipts First Group				nd Group	\$		
Gross Receipts First Group				nd Group	\$		
		0.00	Gross Receipts Seco	nd Group	\$	0.00	
ase Rate Fee First Group	¢						
ase Rate Fee First Group	e e	ļ			i		
	\$	0.00	Base Rate Fee Seco		\$	0.00	
FIFTY-FIRST SUBSCRIBER GROUP			FIF				
COMMUNITY/ AREA		0	COMMUNITY/ AREA				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	CALL SIGN DSE	
					-		
					-		
					-		
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: NELSONVILLE TV CABLE INC. SYSTEM ID#								
	BLOCK A:	COMPUTATION O	BASE RA	ATE FEES FOR EACH	H SUBSCR	BER GROUP		
		SUBSCRIBER GROU		11		SUBSCRIBER GROU	JP	Ω
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	O SE Name O Computation OF Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations OO OO
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								and
								Syndicated
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Total DSEs		_	0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			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	
		SUBSCRIBER GROU	'			SUBSCRIBER GROU	-	
COMMUNITY/ AREA	11	SUBSCRIBER GROU	0	COMMUNITY/ AREA		SUBSCRIBER GROC	_	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL CICIY	DOL	OALL GIGIT	DOL	Of IEE GIGIT	DOL	O'ALL GIGIN	DOL	
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Total DSEs			0.00	Total DSEs		_	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
sase Rate Fee Third Group \$ 0.00		Base Rate Fee Fourt	h Group	\$	0.00			
				Ш				
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	s		
Lines here and in block	υ, iiiισ 1, δ	pade L (page 1)				Ψ		

BI OCK	A: COMPUTATION (OF BASE RA	TE FEES FOR FACE	-I SUBSCRI	BER GROUP		
	TH SUBSCRIBER GRO		III		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	9 Compu
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Ra
							and
							Syndic
					 		Exclus
							Surcha
							for
					H		Partia Dista
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					11		
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00		Gross Receipts Secon	nd Group	\$	0.00		
Base Rate Fee First Group \$ 0.00		Base Rate Fee Secon	nd Group	\$	0.00		
						_	
	TH SUBSCRIBER GRO				SUBSCRIBER GROU		
	TH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	II	0				0	
OMMUNITY/ AREA	II		COMMUNITY/ AREA		SUBSCRIBER GROU		
OMMUNITY/ AREA	II	0				0	
OMMUNITY/ AREA	II	0				0	
OMMUNITY/ AREA	II	0				0	
OMMUNITY/ AREA	II	0				0	
OMMUNITY/ AREA	II	0				0	
OMMUNITY/ AREA	II	0				0	
OMMUNITY/ AREA	II	0				0	
OMMUNITY/ AREA	II	0				0	
COMMUNITY/ AREA	II	0				0	
COMMUNITY/ AREA	II	0				0	
COMMUNITY/ AREA	II	0				0	
COMMUNITY/ AREA	II	0				0	
COMMUNITY/ AREA	II	0				0	
CALL SIGN DSE	II	0				0	
CALL SIGN DSE	II	DSE	CALL SIGN	DSE		DSE	
COMMUNITY/ AREA	II	0 DSE	CALL SIGN Total DSEs	DSE	CALL SIGN	DSE	
CALL SIGN DSE	II	0 DSE	CALL SIGN Total DSEs	DSE	CALL SIGN	DSE	

LEGAL NAME OF OWNER NELSONVILLE TV						SYS	STEM ID#	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
SIX	TY-FIRST	SUBSCRIBER GROU	Р	SIXTY	-SECOND	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
OALL GIGIT	DOL	CALL SIGN	DOL	CALL SIGN	DOL	OALL GION	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
SIXT	Y-THIRD	SUBSCRIBER GROU	Р	SIXT	/-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 Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Bass Bats Fas Till I O			2.00	Barr Batr For Front	0			
Base Rate Fee Third Group \$ 0.00			Base Rate Fee Fourth	Group	\$	0.00		
Base Rate Fee: Add the	base rate	e fees for each subscri	ber aroup s	as shown in the hoxes ah	ove.			
Enter here and in block 3			- Ji gioup c	SHOWN III THE DONGS AD	- .	\$		

NELSONVILLE TV						S	YSTEM ID#	Name
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	I SUBSCRI	BER GROUP		
		SUBSCRIBER GROU		11		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 Fe
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
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	+							
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
SIXTY-S	SEVENTH	SUBSCRIBER GROU	JP	SIX	TY-EIGHTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	ļ		ļ					
			<u></u>					
								
	 							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	-oup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
			iber group a	as shown in the boxes al	oove.			
Enter here and in block	3, line 1, sր	pace L (page 7)				\$		

CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fee First Group SEVENTY-FIRST SUBSCRIBER GROUP	LEGAL NAME OF OWNER NELSONVILLE TV						S	YSTEM ID#	Name
CALL SIGN DSE CALL SIGN	B	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	I SUBSCRI	BER GROUP		
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE data Retail Fee And and a second property of the Call Sign DSE call Sign DSE call Sign DSE call Sign DSE data Retail Fee And and a second property of the Call Sign DSE ca	SIX	TY-NINTH	SUBSCRIBER GROU	IP	11	EVENTIETH	SUBSCRIBER GROU	Р	0
CALL SIGN DSE CALL SIGN	COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
Sase Rate Sase R	CALL SIGN	DSE	CALLSIGN	DSE	CALL SIGN	DSF	CALL SIGN	DSE	
Syndicated Exclusivity Total DSEs O.00 Total DSEs O.00 Seventy-First Group Seventy-First Group Seventy-First Subscriber GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL	O/ ILLE OIGIV	DOL	CALL GIGIT	DOL	O/ LEE GIGIN	DOL	Of REE GIGIT	DOL	Base Rate Fe
Fotal DSEs Output Servicing to repart lating to the part of the									and
Surcharge Partially Distant Stations Total DSEs O.00 Gross Receipts First Group Seventy-First Subscriber Group Seventy-First Subscriber Group CALL SIGN DSE									Syndicated
For partially Distant Stations Total DSEs 0.00 Gross Receipts First Group \$ 0.00 SEVENTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUN									Exclusivity
Partially Distant Stations Total DSEs									Surcharge
Distant Stations Intol DSEs O.00 Gross Receipts First Group Seventy-First Group Seventy-First Subscriber Group COMMUNITY/ AREA OCCALL SIGN DSE CALL SIGN D									
Stations Total DSEs O.00 Gross Receipts First Group Seventy-First Subscriber Group CALL SIGN DSE C									
Total DSEs		-							
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL		-							Jianons
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL		-							
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL									
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL									
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL				<u></u>					
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL									
Base Rate Fee First Group SEVENTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	Total DSEs			0.00	Total DSEs			0.00	
SEVENTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DS	Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
SEVENTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DS									
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 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 DSE CALL SIGN	Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	SEVEN	TY-FIRST	SUBSCRIBER GROU	IP	SEVENT	Y-SECOND	SUBSCRIBER GROU	Р	
Total DSEs 0.00 Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00	COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
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Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00				ļ					
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00				ļ					
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Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00		-						····	
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00		-						····	
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	Total DSEs			0.00	Total DSEs			0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
	Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
	Base Rate Fee: Add the	e base rate	e fees for each subscr	iber group :	as shown in the boxes a	bove.			
				J P			\$		

and syndicated to spring the second Group support the second Group support to the seco	LEGAL NAME OF OWNER NELSONVILLE TV						S	YSTEM ID#	Name
CALL SIGN DSE CALL SIGN	В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	l SUBSCRI	BER GROUP		
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE date Rate Fe and such as the control of		TY-THIRD	SUBSCRIBER GROU		11	Y-FOURTH	SUBSCRIBER GROU		۵
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Find Group SEVENTY-FIFTH SUBSCRIBER GROUP CALL SIGN DSE CALL	COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
and and syndicated special spe	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Syndicated Exclusivity Distant Stations Total DSEs									Base Rate Fe
Ease Rate Fee Third Group Cross Receipts Third Group See Rate Fee Fer Third Group See Rate Fee Third Group See Rate Fee Third Group See Rate Fee Fer Third Group See Rate Fee Fourth Group See Rate Fee Third Group See Rate Fee Fourth Group See Rate Fee Third Group See Rate Fee Fourth Group See Rate Fee Third Group See Rate Fee Fourth Group See Rate Fee Fee Add the base rate fees for each subscriber group as shown in the boxes above.									
Surcharge for Partially Distant Stations Total DSEs O.00 See Rate Fee First Group SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA OCMMUNITY/ AREA OCMMUNI									
Total DSEs OLOU Serventy-First Group SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA OLOU CALL SIGN DSE CALL SIGN									
Total DSEs									
Total DSEs Gross Receipts First Group Base Rate Fee Second Group SEVENTY-SITH SUBSCRIBER GROUP COMMUNITY/ AREA O GOSS Receipts CALL SIGN DSE CALL SIG									
Total DSEs O.00 Gross Receipts First Group SOUND SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY AREA OCALL SIGN DSE CALL SIGN DSE CAL									Distant
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE CAL									Stations
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL									
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL		-		ļ			H		
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL									
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL									
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL									
Base Rate Fee First Group SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE Total DSEs			0.00	Total DSEs			0.00		
SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DS	Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DS									
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	Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	SEVEN	TY-FIFTH	SUBSCRIBER GROU	JP	SEVE	NTY-SIXTH	SUBSCRIBER GROU	Р	
Total DSEs	COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
Gross Receipts Third 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.	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Gross Receipts Third 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.									
Gross Receipts Third 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.		-					-		
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00							-		
Gross Receipts Third 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.									
Gross Receipts Third 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.							-		
Gross Receipts Third 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.									
Gross Receipts Third 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.									
Gross Receipts Third 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.									
Gross Receipts Third 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.									
Gross Receipts Third 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.				ļ					
Gross Receipts Third 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.				ļ					
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00				ļ					
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	Total DSEs			0.00	Total DSEs			0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
	Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
	Raco Dato Eno. Add the	haso rota	a face for each subsection	iher group	as shown in the haves of	hove			
				inei Aionb	as shown in the boxes al	DUVE.	\$		

LEGAL NAME OF OWNER NELSONVILLE TV						S	SYSTEM ID#	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	H SUBSCR	BER GROUP		
		SUBSCRIBER GROU		TI .		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
								and
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
SEVEN	TY-NINTH	SUBSCRIBER GROU	JP		EIGHTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	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	
				Ш				
Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNER NELSONVILLE TV						s	YSTEM ID#	Name
		COMPUTATION OF		ATE FEES FOR EACH		BER GROUP 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 Fe
					····	-		Syndicated
								Exclusivity
								Surcharge for
					····	-		Partially
								Distant
								Stations
	<u> </u>							
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Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
·	•							
Base Rate Fee First Gro		\$	0.00	Base Rate Fee Secon		\$	0.00	
	ry-third	SUBSCRIBER GROU		ii e	Y-FOURTH	SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					···			
								
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							<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	oup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the	base rate	e fees for each subscr	iber aroup :	II as shown in the boxes at	oove.			
Enter here and in block			J P			\$		

LEGAL NAME OF OWNER NELSONVILLE TV						S'	YSTEM ID#	Name
				ATE FEES FOR EACH			_	
EIGH COMMUNITY/ AREA	TY-FIFTH	SUBSCRIBER GROU	1P 0	COMMUNITY/ AREA	HTY-SIXTH	SUBSCRIBER GROUI	0	9
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
					<u> </u>		<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	SEVENTH	SUBSCRIBER GROU	IP	EIGH ⁻	TY-EIGHTH	SUBSCRIBER GROUP	>	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u> </u>			
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes ab	oove.	\$		

LEGAL NAME OF OWNE NELSONVILLE TV						S	SYSTEM ID#	Name
				ATE FEES FOR EACH				
EIGH COMMUNITY/ AREA	ITY-NINTH	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
0411 01011	T DOE				Lpor	II call closs		Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fe
			·					and
								Syndicated
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	<u> </u>		·					Stations
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			-					
			·····					
Total DSEs		Ч	0.00	Total DSEs		H	0.00	
							•	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
NINE	ETY-FIRST	SUBSCRIBER GROU		11		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	
	roup	<u> </u>	0.00		h Group	e	0.00	
Gross Receipts Third G	noup	\$	0.00	Gross Receipts Fourt	н Стоир	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
B B.(=			2		1			
Base Rate Fee: Add the Enter here and in block			nber group	as shown in the boxes a	ibove.	\$		

LEGAL NAME OF OWNER NELSONVILLE TV						SY	STEM ID#	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
NINET	Y-THIRD	SUBSCRIBER GROU	Р	NINETY	/-FOURTH	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
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
	- up			Order Hood, pie Good.	. О. о ир			
Base Rate Fee First Gro		\$	0.00	Base Rate Fee Second		\$	0.00	
NINE	TY-FIFTH	SUBSCRIBER GROU	P	NINE	ETY-SIXTH	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 Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			ber group a	as shown in the boxes ab	ove.	\$		
						L		

LEGAL NAME OF OWNER NELSONVILLE TV						S	YSTEM ID#	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		BER GROUP SUBSCRIBER GROUP	0	
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
					<u></u>			Exclusivity
								Surcharge
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	+							Stations
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			l					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	auc	\$	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	
	TY-NINTH	SUBSCRIBER GROU		ii .	JNDREDTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	 		l					
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	
Dana Bata Free A 11.0	. h	- Fore form and the state of						
Enter here and in block			per group a	as shown in the boxes ab	ove.	\$		

LEGAL NAME OF OWNER NELSONVILLE TV						S'	YSTEM ID#	Name
ONE HUNDRI		COMPUTATION OF SUBSCRIBER GROU		ii e		BER GROUP SUBSCRIBER GROUE	o .	0
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
					<u> </u>		···	Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
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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	
	D THIRD	SUBSCRIBER GROU		ii .	D FOURTH	SUBSCRIBER GROUP	D	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	ļ							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
	•				·			
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Raco Dato Foe: Add 41-	hace ret	foor for each subs	hor grave	as shown in the haves	2010			
Enter here and in block			pei gioup i	as shown in the boxes ab		\$		

LEGAL NAME OF OWN NELSONVILLE T						,	SYSTEM ID#	Name
0115111111				TE FEES FOR EAC				
COMMUNITY/ AREA		SUBSCRIBER GRO	0	COMMUNITY/ ARE		SUBSCRIBER GRO	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
					······			and
		 				-		Syndicated Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
		 						
		 						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO		ii e		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts Third	I Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	s shown in the boxes	above.	\$		

LEGAL NAME OF OWNER NELSONVILLE TV						S	YSTEM ID#	Name
ONE HUNDRE		COMPUTATION OF SUBSCRIBER GROU	IP	ii e		BER GROUP 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
								Stations
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T	ļ	<u> </u>	0.00	T 1 1 DOE		Ц	0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED EI	EVENTH	SUBSCRIBER GROU	IP	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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			l					
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third G	oup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third Gi	oup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the	base rate	e fees for each subscri	iber group a	as shown in the boxes al	bove.			
Enter here and in block						\$		

LEGAL NAME OF OWNER NELSONVILLE TV						S	YSTEM ID#	Name
ONE HUNDRED THIF			Р	ii e	URTEENTH	BER GROUP 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
					<u></u>			Syndicated Exclusivity
								Surcharge
								for
								Partially
						-		Distant
	 		<u> </u>					Stations
	 		l					
	†							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00		0.00	Gross Receipts Secon	nd Group	\$	0.00		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIF	TEENTH	SUBSCRIBER GROU	Р	ONE HUNDRED	SIXTEENTH	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	1		0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourtl	h Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add the	e base rate	e fees for each subscri	ber group a	II as shown in the boxes a	bove.			
Enter here and in block			· ·			\$		

LEGAL NAME OF OWNER NELSONVILLE TV						S	YSTEM ID#	Name	
BONE HUNDRED SEVER				ONE HUNDRED EI		BER GROUP SUBSCRIBER GROU	P 0	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	
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			<u> </u>						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Group \$ 0.00		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		
ONE HUNDRED NII	NTEENTH	SUBSCRIBER GROU	Р	ONE HUNDRED T	WENTIETH	SUBSCRIBER GROU	Р		
COMMUNITY/ AREA			0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						-			
						-			
			l						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00		
S. 300 P. Goolpto Tillid G	. 547	*	3.00	S. Coo Recorpts Fourt	. Олоцр	-			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			per group	as shown in the boxes a	pove.	\$			

NELSONVILLE TV						SY	STEM ID#	Name
				TE FEES FOR EACH				
	NTY-FIRST	SUBSCRIBER GROU		ONE HUNDRED TWENT	TY-SECOND	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 Fee
								and Syndicated
							···	Exclusivity
								Surcharge
								for
								Partially Distant
							·	Stations
							·	
Total DSEs	•		0.00	Total DSEs		•	0.00	
Gross Receipts First Gro	מוור	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Gross Receipts First Ort	Jup	.*	0.00	Gross Receipts decon-	a Group	•	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED TWEN	ITY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWEN	TY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>		 			
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the			ber group a	as shown in the boxes ab	ove.			
Enter here and in block	3, line 1, sp	pace L (page 7)				\$		

LEGAL NAME OF OWNER NELSONVILLE TV						S	YSTEM ID#	Name
		COMPUTATION OF SUBSCRIBER GROUP	BASE RA	ONE HUNDRED TW		BER GROUP SUBSCRIBER GROUP	0	9
COMMONT IT AIREA				COMMONT IT AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
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Total DSEs			0.00	Total DSEs			0.00	
		0.00	Gross Receipts Secon	nd Group	\$	0.00		
						<u> </u>		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED TWENTY	-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED TWE	NTY-EIGHTH	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 G	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	oup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
				Ш				
Raco Dato Ecc. Add 41-	hace ==+	fooe for each subse-	ibor ara	as shown in the boxes al	2010			

NELSONVILLE T						S	YSTEM ID#	Name
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCR	BER GROUP		
ONE HUNDRED TV		SUBSCRIBER GROUP		III		SUBSCRIBER GROUP		^
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
		<u> </u>	<u></u>					Exclusivity
								Surcharge
								for Partially
								Distant
		 				-		Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
•	·			· ·	·			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED T	HIRTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED TH	IRTY-SECOND	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		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	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
O. 000 . 1000.p.c . 1	. O. o. a.p				ш. Олошр	· · · · · · · · · · · · · · · · · · ·		
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				Ш				
Base Rate Fee: Add Enter here and in blo			riber group a	as shown in the boxes	above.	\$		
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LEGAL NAME OF OWNER NELSONVILLE TV						S	YSTEM ID#	Name
		COMPUTATION OF SUBSCRIBER GROUP	BASE RA	11		BER GROUP SUBSCRIBER GROUP	0	9
COMMUNITY/ AREA			U	COMMUNITY/ AREA				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 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	
ONE HUNDRED THIS	RTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED TH	HIRTY-SIXTH	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	
		•			0		-	
Gross Receipts Third Gr	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Page Bate Face Add !!	hace ==4:	food for each sub-	ibor ara ···	on about in the barrer	2010			
Enter here and in block			ivei group i	as shown in the boxes al	oove.	\$		

LEGAL NAME OF OWN NELSONVILLE T						(SYSTEM ID#	Name
				TE FEES FOR EAC	H SUBSCR	BER GROUP		
		SUBSCRIBER GROUI				SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	-	\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GROUI	0	ii —		SUBSCRIBER GROU	0	
COMMUNITY/ AREA				COMMUNITY/ ARE	······································			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····			·		
								
			<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group a	II	above.	\$		

LEGAL NAME OF OWNE NELSONVILLE TV						S	YSTEM ID#	Name
			BASE RA	ATE FEES FOR EAC				
ONE HUNDRED FO	RTY-FIRST	SUBSCRIBER GROUP	0	ONE HUNDRED FO		SUBSCRIBER GROUP	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DSE	CALL SIGN	DOE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
								and
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								Exclusivity Surcharge
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Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First G	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
	RTY-THIRD	SUBSCRIBER GROUP		T .		SUBSCRIBER GROUP	0	
COMMUNITY/ AREA			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 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	
				Ш				
Base Rate Fee: Add th Enter here and in block			iber group a	as shown in the boxes a	above.	\$		

NELSONVILLE TV						S	YSTEM ID#	Name
ONE HUNDRED FOR		COMPUTATION OF SUBSCRIBER GROUP		11		BER GROUP SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<u></u>					-		Base Rate Fee
						-		and
								Syndicated Exclusivity
					····	-		Surcharge
						-		for
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Total DSEs			0.00	Total DSEs			0.00	
<u>-</u>		0.00	Gross Receipts Secor	nd Group	\$	0.00		
						<u> </u>		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FORTY	-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FO	RTY-EIGHTH	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 G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the	e base rate	e fees for each subscri	iber group a	as shown in the boxes al	bove.			
Enter here and in block						\$		

LEGAL NAME OF OWN NELSONVILLE T						•	SYSTEM ID#	Name
				TE FEES FOR EAC	CH SUBSCR	BER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						-		and
						-		Syndicated Exclusivity
		 				-		Surcharge
								for
								Partially
		<u> </u>						Distant Stations
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T		Щ	0.00	T		11	0.00	
Total DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED	FIFTY-FIRST	SUBSCRIBER GRO	UP	ONE HUNDRED FI	TY-SECOND	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	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	II as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER NELSONVILLE TV						S	YSTEM ID#	Name
ONE HUNDRED FIF		COMPUTATION OF SUBSCRIBER GROU	IP	11		BER GROUP 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
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Total DSEs	-	ч	0.00	Total DSEs	-	11	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	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GROU	IP	ONE HUNDRED F	IFTY-SIXTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourtl	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNER NELSONVILLE TV						S	YSTEM ID#	Name
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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	
ONE HUNDRED FIF	TY-NINTH	SUBSCRIBER GROUP		ONE HUNDRE	ED SIXTIETH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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Total DSEs			0.00	Total DSEs			0.00	
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Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	отоир	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Raca Pata East Add the	haso rota	foos for each subseri	her group	as shown in the boxes ab	2010			
Enter here and in block			pei gioup i	ao onown in the boxes at	.∪v∈.	\$		

LEGAL NAME OF OWNE NELSONVILLE TV							SYSTEM ID#	Nan
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Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 81	9,450.00	Gross Receipts Secon	d Group	\$	149,040.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Secon		\$	0.00	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
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Base Rate Fee: Add th	ie base rat i	e fees for each subs	criber aroup	as shown in the boxes at	oove			
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SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE	Gross Receipts First Group	\$ 0.00	Gross Receipts Sec	ond Group	\$	0.00	
SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE							
COMMUNITY/ AREA O COMMUNITY/ AR	Base Rate Fee First Group	\$ 0.00	Base Rate Fee Sec	ond Group	\$	0.00	
CALL SIGN DSE CA	SEVENT	SUBSCRIBER GROUP		EIGHTH	SUBSCRIBER GRO	UP	
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otal DSEs			0.00	Total DSEs			0.00	
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LEGAL NAME OF OWI NELSONVILLE 1							SYSTEM ID#	Nam
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Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
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Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Hate I GC IIIII	. J. Jup	4	0.00	Just Auto I ee i ou	Croup	Ψ	0.00	
acc Data Eco: Add	the base rat	e fees for each subs	criber group a	as shown in the boxes	above.			

LEGAL NAME OF OWN							SYSTEM ID#	Nam
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Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
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noss ivensihis illila	Отопр	\$	0.00	Oloss Necelbis Fou	iai Gioup	\$	0.00	
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ross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
FOF	RTY-THIRD	SUBSCRIBER GRO	UP	FORT	Y-FOURTH	SUBSCRIBER GROU	JP	
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ase Rate Fee First Gro	up	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
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ase Rate Fee First Gro	up	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
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otal DSEs	oup	\$	0.00	Total DSEs Gross Receipts Fourt	h Group	\$	0.00	

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ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
CI)	/TV TUIDD	SUBSCRIPED CDG	NID.	CIVI	V FOURTU	CURCOBIRED CROI	ID.	
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otal DSEs	-		0.00	Total DSEs			0.00
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ase Rate Fee First Group	p [\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
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ACCOUNTING PERIOD: 2023/1 FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **NELSONVILLE TV CABLE INC.** BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 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 of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2023/1 FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **NELSONVILLE TV CABLE INC.** BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 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 of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group Second Group SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2023/1 FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **NELSONVILLE TV CABLE INC.** BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 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 of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. NINTH SUBSCRIBER GROUP TENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group Second Group **ELEVENTH SUBSCRIBER GROUP** TWELVTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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ACCOUNTING PERIOD: 2023/1 FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **NELSONVILLE TV CABLE INC.** BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 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 of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP ONE HUNDRED FIFTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group Second Group ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-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 SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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C	Cable Worksheet	Total amount of remittance	Numb	per of SAs rec'd	lı	nitials	
		Date of remittance	_ ☐ Check	□ EFT	☐ FILING	G FEES	
Cable ID #					Amount	Initials	
Examined by	Reviewed by	Date examination completed	Allocation	number			
Space A Accounting	(enter four digit year and /1 (for Jan-Jun period) or /2 (for Jul-Dec period) No spaces)						
Period	☐ Letter sent ☐ Information received						
	☐ Accepted	☐ Accepted ☐ Phone call/Date/Contact					
Space B Owner							
	□ Letter sent □ Information received						
	☐ Accepted ☐ Phone call/Date/Contact						
Space D Area Served							
	☐ Letter sent ☐ Information received						
	☐ Accepted	ccepted					
Space E Secondary Transission							
Service Subscribers:	☐ Letter sent ☐ Information received						
and Rates	☐ Accepted ☐ Phone call/Date/Contact		Contact				
Space G Primary Transmitters:							
Television	☐ Letter sent	☐ Information received					
	☐ Accepted	☐ Phone call/Date/Contact					
Space H Primary Transmitters:							
Radio	☐ Accepted		☐ Phone call/Date/	Contact			

Space I Substitute

		Carriage
☐ Letter sent	☐ Information received	
☐ Accepted	☐ Phone call/Date/Contact	
		Space J Part-time Carriage Log
☐ Letter sent	☐ Information received	(SA3 only)
☐ Accepted	☐ Phone call/Date/Contact	
		Space K Gross Receipts
☐ Letter sent	☐ Information received	
☐ Accepted	☐ Phone call/Date/Contact	
		Space L Copyright Filing and Royalty Fees
☐ Royalty Fee should be	☐ Refund request to fiscal	
☐ Letter sent	☐ Information received	
☐ Accepted	☐ Phoe call/Date/Contact	
		Cuasa M
		Space M Channels
□ Letter sent	☐ Information received	
☐ Letter sent	☐ Information received ☐ Phone call/Date/Contact	
		Channels Space O
☐ Accepted	☐ Phone call/Date/Contact	Channels Space O
☐ Accepted	☐ Phone call/Date/Contact ☐ Information received	Channels Space O
☐ Accepted	☐ Phone call/Date/Contact ☐ Information received	Space O Certification Space P Statement of
☐ Accepted ☐ Letter sent ☐ Accepted	☐ Phone call/Date/Contact ☐ Information received ☐ Phone call/Date/Contact	Space O Certification Space P Statement of
☐ Accepted ☐ Letter sent ☐ Accepted ☐ Letter sent	☐ Phone call/Date/Contact ☐ Information received ☐ Phone call/Date/Contact ☐ Information received	Space O Certification Space P Statement of
☐ Accepted ☐ Letter sent ☐ Accepted ☐ Letter sent	☐ Phone call/Date/Contact ☐ Information received ☐ Phone call/Date/Contact ☐ Information received	Space O Certification Space P Statement of Gross Receipts Space Q Interest