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				
3/1/2021	\$				
	ALLOCATION NUMBER				

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:			
Accounting Period	2020/2			
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 busine. If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account covering the entire account in the conduction of the covering the entire account in the covering the covering the entire account in the covering the covering the entire account in the cov	ss of the cable syster on the last day of to	em. he accounting period should st	•
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM			
	MEDIACOM INDIANA LLC			
				02533220202
				025332 2020/2
	ONE MEDIACOM WAY MEDIACOM PARK, NY 10918			
С	INSTRUCTIONS: In line 1, give any business or trade names used to names already appear in space B. In line 2, give the mailing address of			
System	1 IDENTIFICATION OF CABLE SYSTEM: MEDIACOM ILLINOIS LLC	i the system, ii dii	leterit irom the address giv	ен ш зрасе Б.
	MAILING ADDRESS OF CABLE SYSTEM: 1102 N. Fourth Street, PO Box 334 (Number, street, rural route, apartment, or suite number) Chillicothe, IN 61523 (City, town, state, zip code)			
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst com	munity served below and re	elist on page 1b
Area Served	with all communities.	T		
First	CITY OR TOWN North Webster	STATE		
Community	Below is a sample for reporting communities if you report multiple ch		Space G	
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#
Sample	Alda	MD	A	1
	Alliance	MD	В	2
	Gering	MD	В	3

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

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 1b. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 025332 MEDIACOM INDIANA LLC Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future 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 **CH LINE UP** SUB GRP# STATE **North Webster** IN AA 2 First IN 2 **Dewart Lake** AA Community 2 IN AA Kosciusko County IN AA 2 Leesburg **Pierceton** IN AA 2 Milford IN AA 2 See instructions for IN 2 Syracuse AA additional information on alphabetization. 3 **Bremen** IN AA **Nappanee** IN AA 2 3 Argos IN AA 3 IN **Bourbon** AA Add rows as necessary. IN 3 **Tippecanoe** AA IN 1 **Noble County** AB Warsaw IN AA 2

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

MEDIACOM INDIANA LLC

SYSTEM ID# 025332

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLO	OCK 1		BLOCK 2				
	NO. OF		NO. OF				
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE SUBSCRIBERS RATE				
Residential:							
 Service to first set 	3,728	29.95-60.65					
 Service to additional set(s) 							
 FM radio (if separate rate) 							
Motel, hotel							
Commercial	2	29.95-60.65					
Converter							
Residential							
Non-residential							
		1					

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2				
CATEGORY OF SERVICE	RATE CATEGORY OF SERVICE RATE			CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
• Pay cable	PP	Motel, hotel		Family Cable	\$ 84.99
 Pay cable—add'l channel 	PP	Commercial			
Fire protection		• Pay cable			
•Burglar protection		 Pay cable-add'l channel 			
Installation: Residential		Fire protection			
First set	\$ 99.99	Burglar protection			
 Additional set(s) 	15.00-49.00	Other services:			
• FM radio (if separate rate)		Reconnect	\$ 49.00		
Converter	\$ 10.50	Disconnect			
		Outlet relocation	15.00-49.00		
		 Move to new address 			

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 025332 MEDIACOM INDIANA LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if th∈ 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identifi each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-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 channe 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 noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe 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 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL CARRIAGE OF (Yes or No) NUMBER STATION (If Distant) WBND/WBND(HD 49 Ν No South Bend, IN WBND-DT2 MeTV 49.2 I No South Bend, IN See instructions for additional information No **WBND-DT3 Movie** 49.3 I South Bend, IN on alphabetization. WCWW/WCWW H 27 I No SOUTH BEND, IN WCWW-DT2 Start 27.2 ı No SOUTH BEND, IN WFWA/WFWA HD 40 Ε Yes 0 Fort Wayne, IN WHME-IND 46 South Bend, IN No ı WMYS/WMYS HD 39 I No South Bend, IN WMYS-DT2 Telen 39.2 I No South Bend, IN WMYS-DT3 Deca 39.3 Ī No South Bend, IN WNDU/WNDU(HD 42 Ν No South Bend, IN WNDU-DT2 Anter 42.2 No ı South Bend, IN WNIT/WNIT(HD) P 35 Е No South Bend, IN WNIT-DT2 InFocu 35.2 Ε No South Bend, IN WNIT-DT3 PBS K 35.3 Ε No South Bend, IN WSBT/WSBT (HD 22 Ν No South Bend, IN WSBT-DT2/WSBT 22.2 I No South Bend, IN WSJV/WSJV(HD) 28 ı No South Bend, IN

MEDIACOM INDIANA LLC 025332	Name
LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	NI
TORW ONCE, I NOE 5.	

PRIMARY TRANSMITTERS: TELEVISION

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

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute progran 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

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

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

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 furthe 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.

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
WTTW (PBS)	47	E	Yes	0	Chicago, IL
WSJV-DT2 Justic	28.2	I	No		South Bend, IN
WSJV-DT3 Escap	28.3	I	No		South Bend, IN
WSJV-DT4 Court	28.4	I	No		South Bend, IN
WSJV-DT5 Quest	28.5	I	No		South Bend, IN
WSJV-DT6 Bound	28.6	I	No		South Bend, IN
WNIT-DT5 WORL	35.5	Е	No		South Bend, IN
WNDU-DT3 Circle	4.3	I	No		South Bend, IN

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

MEDIACOM INDIANA LLC

SYSTEM ID#

Name

Name

PRIMARY TRANSMITTERS: TELEVISION

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

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute progran 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identificated 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 ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

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

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

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

		CHANN	EL LINE-UP	AB	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WANE/WANE(HD	31	N	No		Fort Wayne, IN
0			No		
WFFT/WFFT PBS	36	I	No		Fort Wayne, IN
WFWA/WFWA HD	40	Е	No		Fort Wayne, IN
WFWA-DT2 Kids	40.2	Е	No		Fort Wayne, IN
WFWA-DT3 PBS	40.3	E	No		Fort Wayne, IN
WFWA-DT4 39 4-	40.4	Е	No		Fort Wayne, IN
WINM (TBN)	12	I	No		Fort Wayne, IN
WISE/WISE (HD)	18	I	No		Fort Wayne, IN
WNDU/WNDU(HD	42	N	No		South Bend, IN
WNIT/WNIT(HD) F	35	Е	No		South Bend, IN
WPTA/WPTA(HD)	24	N	No		Fort Wayne, IN
WPTA-DT2/WPTA	24.2	N	No		Fort Wayne, IN
WPTA-DT3/WPTA	24.3	I	No		Fort Wayne, IN
WSBT/WSBT (HD	22	N	No		South Bend, IN
WANE-DT3 Laff	31.3	I	No		Fort Wayne, IN
WANE-DT4 Escap	31.4	I	No		Fort Wayne, IN
WFFT-DT2 Bound	36.2	I	No		Fort Wayne, IN

G

Primary Transmitters: Television

FORM SASE, FAGE 3.		
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
MEDIACOM INDIANA LLC	025332	Name
PRIMARY TRANSMITTERS: TELEVISION		

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

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

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

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

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

CHANNEL LINE-UP AB Cont									
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				
WISE-DT2 Justice	18.2	I	No		Fort Wayne, IN				
WISE-DT3 Grit	18.3	I	No		Fort Wayne, IN				
WISE-DT4 Court	18.4	I	No		Fort Wayne, IN				
WISE-DT5 Start T	18.5	I	No		Fort Wayne, IN				
WISE-DT6 MeTV	18.6	I	No		Fort Wayne, IN				
WISE-DT7 DABL	18.7	I	No		Fort Wayne, IN				
WFWA-DT5 PBS3	40.5	E	No		Fort Wayne, IN				
	•								

G

Primary Transmitters: Television

FORM SA3E. PAGE 3. LEGAL NAME OF OWNI	ER OF CABLE SY	STEM:			SYSTEM ID#				
MEDIACOM IND					025332	Name			
PRIMARY TRANSMITTE		ON .							
			tation (including	translator station	s and low power television stations)	_			
					ed only on a part-time basis under	G			
•				•	tain network programs [sections				
76.59(d)(2) and (4), 76 substitute program bas	` , ` ,	` '.		61(e)(2) and (4))];	and (2) certain stations carried on a	Primary Transmitters			
	Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program								
asis under specifc FCC rules, regulations, or authorizations									
 Do not list the station station was carried 	•		st it in space I (t	he Special Statem	nent and Program Log)—if the				
	,		ation was carrie	ed both on a subst	itute basis and also on some othe				
		cerning substi	tute basis statio	ons, see page (v)	of the general instructions located				
in the paper SA3 for		sian Do not	report origination	n program service	es such as HBO, ESPN, etc. Identify				
		-			ation. For example, report multi				
	-2". Simulcast	streams mus	t be reported in	column 1 (list eac	ch stream separately; for example				
WETA-simulcast).	channel num	her the FCC I	has assigned to	the television sta	tion for broadcasting over-the-air ir				
			J		s may be different from the channe				
on which your cable sy									
					ependent station, or a noncommercia cast), "I" (for independent), "I-M				
					commercial educational multicast)				
For the meaning of the									
Column 4: If the sta planation of local servi			•	•	es". If not, enter "No". For an ex				
					stating the basis on which you				
•		•	٠.	•	ntering "LAC" if your cable syster				
carried the distant stati	•				capacity by payment because it is the subjec				
					/stem or an association representin				
the cable system and a	a primary trans	mitter or an a	ssociation repr	esenting the prima	ary transmitter, enter the designa				
			•	•	other basis, enter "O." For a furthe ed in the paper SA3 form				
					ty to which the station is licensed by the				
				•	th which the station is identifed				
Note: If you are utilizin	g multiple cha	nnel line-ups,	use a separate	space G for each	n channel line-up.				
		CHANN	EL LINE-UP	AC					
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION				
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE					
	NUMBER	STATION		(If Distant)					

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **MEDIACOM INDIANA LLC** 025332 PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

FURINI SAJE. PAGE 5.						ACCOUNTING	PERIOD: 2020/2
LEGAL NAME OF OWNER OF MEDIACOM INDIANA I		EM:			S	025332	Name
SUBSTITUTE CARRIAGI In General: In space I, ident substitute basis during the a explanation of the programm	ify every nor	nnetwork televiseriod, under spe	sion program broadcast by ecific present and former F0	a distant stati CC rules, regu	lations, or authorizations.	For a further	Substitute
form.							Carriage:
1. SPECIAL STATEMEN	-						Special
During the accounting per broadcast by a distant sta		ir cable system	n carry, on a substitute bas	sis, any nonn	etwork television program		Statement and Program Log
Note: If your answer is "No log in block 2.	", leave the	rest of this pag	ge blank. If your answer is	"Yes," you m	nust complete the progra	m	
2. LOG OF SUBSTITUTE							
In General: List each subsiclear. If you need more spa				wherever po	ssible, if their meaning is	5	
Column 1: Give the title	of every no	nnetwork telev	rision program (substitute				
Column 3: Give the call	gulations, o tion. Do no Lucy" or "NE n was broad sign of the s	or authorization of use general BA Basketball: dcast live, ente station broadca	s. See page (vi) of the ge categories like "movies", o	neral instructi r "basketball' No." am.	ons located in the paper '. List specific program		
the case of Mexican or Car	adian statio	ons, if any, the	community with which the	station is ide	entified).		
Column 5: Give the mor first. Example: for May 7 gir		when your sys	stem carried the substitute	program. Us	e numerals, with the mo	nth	
, , ,		e substitute pro	gram was carried by your	cable system	n. List the times accurate	ely	
to the nearest five minutes.	Example: a	a program carr	ied by a system from 6:01	15 p.m. to 6:	28:30 p.m. should be		
stated as "6:00–6:30 p.m." Column 7: Enter the lett	er "R" if the	listed program	was substituted for progr	amming that	your system was require	d	
to delete under FCC rules a	and regulation	ons in effect di	uring the accounting period	d; enter the le	etter "P" if the listed pro		
gram was substituted for prefect on October 19, 1976.		that your syst	em was permitted to delet	e under FCC	rules and regulations in		
effect off October 19, 1970				T 1		ı	
S	UBSTITUT	E PROGRAM	l		EN SUBSTITUTE	7. REASON	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	FOR DELETION	
					_		
						,	
					<u> </u>		
						·	
					_		
					<u> </u>		
					<u> </u>	·	
					_		

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name MEDIACOM INDIANA LLC 025332 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 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 **FROM** TO DATE FROM TO DATE

LEGA	L NAME OF OWNER OF CABLE SYSTEM: DIACOM INDIANA LLC		SYSTEM ID# 025332	Name					
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. Secondary transmission service(s) \$ 961,006.94 IMPORTANT: You must complete a statement in space P concerning gross receipts.									
Instru Com Com If yo fee f If yo acco	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: aplete block 1, showing your minimum fee. aplete block 2, showing whether your system carried any distant television stations. Our system did not carry any distant television stations, leave block 3 blank. Enter the arriver block 1 on line 1 of block 4, and calculate the total royalty fee. Our system did carry any distant television stations, you must complete the applicable parapanying this form and attach the schedule to your statement of account. To the transfer of the DSE schedule was completed, the base rate fee should be a below. To the DSE schedule was completed, the amount from line 7 of block C should be a schedule was completed.	arts of the I	DSE Schedule	L Copyright Royalty Fee					
3 be If pa 2 in Block 1		uld be ente	ered on line red to pay at						
	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colun "Yes" in this block. • Did your cable system carry any distant television stations during the accounting perion in the column in t	nn 4, you n od?	on you gave in nust check						
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	\$	2,787.00						
	Line 3. Add lines 1 and 2 and enter here	\$	2,787.00						
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 Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	\$	10,225.11 0.00 0.00	Cable systems submitting additional deposits under Section 111(d)(7) should contact					
	Line 4. FILING FEE	\$	725.00	the Licensing additional fees. Division for the appropriate					
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ See page	10,950.11	form for submitting the additional fees.					
	general instructions located in the paper SA3 form for more information.)	pago	.,						

ACCOUNTING PERIOD: 2020/2

ACCOUNTING PERIO	FORM SA3E. PAGE 8
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID:
Numo	MEDIACOM INDIANA LLC 025332
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. 70
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)
Individual to Be Contacted for Further Information	Name Kenneth J. Kohrs Telephone 845-443-2762
	Address One Mediacom Way (Number, street, rural route, apartment, or suite number)
	Mediacom Park, NY 10918 (City, town, state, zip)
	Email Copyrights@mediacomcc.com Fax (optional)
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)
O Certifcation	I, the undersigned, hereby certify that (Check one, but only one, 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)]
	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 "F" button will avoid enabling Excel's Lotus compatibility settings. Typed or printed name: Kenneth J. Kohrs
	Title: Vice President, Financial Reporting (Title of official position held in corporation or partnership) Date:

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on the 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 telephon numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of lav

SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satillation from Viewer Act of 1988 amended Title 17, section 111(d) (IA), of the Copyright Act by adding the following interestive and amounts collected from subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmistients, 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. INTEREST ASSESSMENTS You must complete this worksheef for those mystly 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. Line 1 Einter the amount of late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form. Line 2 Multiply line 1 by the interest rate* and enter the sum here. Line 2 Multiply line 2 by the number of days late and enter the sum here. 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). To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. This is the decimal equivalent of 1/356, 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 liling. First community served Accounting period Line 4 Multiply and 2 days worksheet covering a statement of account already submitted to the Copyr	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
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 pager 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? No	MEDIACOM INDIANA LLC	025332	Name
During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellife carriers to satellife dish owners? No	The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright A lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable systemic of providing secondary transmissions of primary broadcast transmitters, the systemic scribers and amounts collected from subscribers receiving secondary transmissions pursuants. For more information on when to exclude these amounts, see the note on page (vii) of the general	ystem for the basic n shall not include sub- lant to section 119."	Special Statement Concerning Gross Receipts
Name Mailing Address INTEREST ASSESSMENTS You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form. Line 1 Enter the amount of late payment or underpayment. Line 2 Multiply line 1 by the interest rate* and enter the sum here. x days Line 3 Multiply line 2 by the number of days late and enter the sum here. x 0.00274 Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7). (interest charge) * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing. Owner Address First community served Accounting period	During the accounting period did the cable system exclude any amounts of gross receipts for second by satellite carriers to satellite dish owners?	ondary transmissions	EXCIUSION
Mailing Address Mailing Address Mailing Address	YES. Enter the total here and list the satellite carrier(s) below		
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. Line 1 Enter the amount of late payment or underpayment			
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form. Line 1 Enter the amount of late payment or underpayment	INTEREST ASSESSMENTS		
Line 2 Multiply line 1 by the interest rate* and enter the sum here	· · · · · · · · · · · · · · · · · · ·		Q
Line 3 Multiply line 2 by the number of days late and enter the sum here	Line 1 Enter the amount of late payment or underpayment	x	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	Line 2 Multiply line 1 by the interest rate* and enter the sum here	xdays	
space L, (page 7) (interest charge) * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing. Owner Address First community served Accounting period	Line 3 Multiply line 2 by the number of days late and enter the sum here	× 0.00274	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing. Owner Address First community served Accounting period		(interest charge)	
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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	** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
Address First community served Accounting period	please list below the owner, address, first community served, accounting period, and ID number a		
Accounting period			

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INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25

Note that local stations are not counted at all in computing DSEs.

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

NOTE: If your cable system carried a station that you believe qualifies as a 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, 198I, on a substitute and/or part-time basis only and complete the log to determine the portion of the DSE exempt from the 3.75 percent rate.
- Subtract the number of DSEs resulting from this carriage from the number of DSEs reported in part 5 of the DSE Schedule. This is the total number of DSEs subject to the 3.75 percent rate. Multiply these DSEs by gross receipts by .0375. This is the 3.75 fee.

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

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

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

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

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.

- 5. 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:

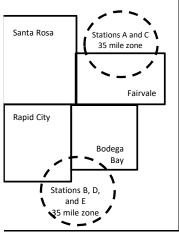
- · When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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 Carr	ied	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)	<u>0.25</u>	Fairvale	Stations B, D, and E	120,000.00
TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00

Minimum Fee Total Gross Receipts \$600,000.00 x .01064 \$6,384,00

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

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94

In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

ACCOUNTING PERIOD: 2020/2

DSE SCHEDULE. PAGE 11. (CONTINUED)

DSE SCHEDULE. PAG	BE TT. (CONTINUED)											
4	LEGAL NAME OF OWNER OF CABLE	SYSTEM:			S	YSTEM ID#						
<u> </u>	MEDIACOM INDIANA LL		025332									
	SUM OF DSEs OF CATEGOR	Y "O" STATION	S:									
	Add the DSEs of each station.											
	Enter the sum here and in line 1	1 of part 5 of this	schedule.	<u></u>	0.50							
2	Instructions:			: 1 PE 11 H								
2	In the column headed "Call S	ign": list the call	signs of all distant station	s identified by ti	ne letter "O" in column 5							
Computation	of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-											
of DSEs for	mercial educational station, give the DSE as ".25."											
Category "O"			CATEGORY "O" STATIO	NS: DSEs								
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
	WFWA/WFWA HD PBS	0.250										
	WTTW (PBS)	0.250										
Add rows as												
necessary.												
Remember to copy all formula into new												
rows.												
iows.												
				···								
				···								
				<u> </u>								
				···								

• • • • • • • • • • • • • • • • • • •	h	hh	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MEDIACOM INDIANA LLC 025332 Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Computation Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. of DSEs for Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must **Stations** be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Carried Part Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, Time Due to give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the Lack of Activated third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper Channel Capacity CATEGORY LAC STATIONS: COMPUTATION OF DSEs 3. NUMBER 5. TYPE 1 CALL 2. NUMBER 4 BASIS OF 6. DSE OF HOURS SIGN OF HOURS **CARRIAGE VALUE** CARRIED BY **STATION VALUE** SYSTEM ON AIR SUM OF DSEs OF CATEGORY LAC STATIONS: Add the DSEs of each station. 0.00 Instructions: 4 Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station: Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regular-tions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and Computation • Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of of DSEs for Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted Substitute-**Basis Stations** at your option. This figure should correspond with the information in space I. Column 3: Enter the number of days in the calendar year: 365, except in a leap year. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form). SUBSTITUTE-BASIS STATIONS: COMPUTATION OF DSEs 1. CALL 2. NUMBER 3. NUMBER 4. DSE 1. CALL 2. NUMBER 3. NUMBER 4 DSF OF DAYS SIGN SIGN OF OF DAYS **PROGRAMS** IN YEAR **PROGRAMS** IN YEAR SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS: Add the DSEs of each station. Enter the sum here and in line 3 of part 5 of this schedule, 0.00 TOTAL NUMBER OF DSEs: Give the amounts from the boxes in parts 2, 3, and 4 of this schedule and add them to provide the total 5 number of DSEs applicable to your system. 0.50 1. Number of DSEs from part 2 ● **Total Number** of DSEs 2. Number of DSEs from part 3 ● 0.00 0.00 3. Number of DSEs from part 4 ● TOTAL NUMBER OF DSEs 0.50

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

EGAL NAME OF O		SYSTEM:					S'	YSTEM ID# 025332	Mama
n block A: If your answer if " chedule.	•	mainder of pa	•	of the DSE sched	ule blank and	d complete part	t 8, (page 16) of the	e	6
If your answer if	No," complete blo			TELEVISION MA	ΔRKETS				Computation of
effect on June 24,	1981?	utside of all m	najor and smal	ler markets as defii	ned under se		CC rules and regul	ations in	3.75 Fee
		BLO	CK B: CARF	RIAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	of distant sta and regulatio e DSE Scheo	ntions listed in ns prior to Jun dule. (Note: Th	part 2, 3, and 4 of t e 25, 1981. For fur e letter M below re	this schedule	that your syste	d stations, see the	·	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfathered instructions fo E Carried pursua *F A station pre	les and reguled pursuant to as defined al educational station (76.6 r DSE scheduant to individuationally carried HF station will be a stat	ations cited be to the FCC mare in 76.5(kk) (70). I station [76.58] (5) (see paragule). Ie). all waiver of FC don a part-tim thin grade-B c	e or substitute bas ontour, [76.59(d)(5	e in effect on .57, 76.59(b) .(1), 76.63(a) 3(a) referring stitution of gr	June 24, 1981 1, 76.61(b)(c), 7 1) referring to 76 1 to 76.61(d)] 1) randfathered sta	6.63(a) referring to		
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 o			orksheet on page 1	I	
SIGN	BASIS		SIGN	BASIS	0. 202	SIGN	BASIS	0. 202	
WFWA/WF\ WTTW (PBS		0.25 0.25							
WIIW (FB		0.25							
			•						
			•						
								0.50	
		Е	BLOCK C: CC	MPUTATION OF	3.75 FEE				
ine 1: Enter the	total number of	DSEs from լ	part 5 of this	schedule					
ine 2: Enter the	sum of permitte	d DSEs from	n block B abo	ve					
				of DSEs subject 7 of this schedule		rate.			
ine 4: Enter gro	ss receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represe partially
ine 5: Multiply li	ne 4 by 0.0375 a	and enter su	m here				x		permited/ partially nonpermitted carriage?
ine 6: Enter tota	al number of DSI	Es from line	3						If yes, see par 9 instructions
ino 7: Multiply li	ne 6 hy line 5 an	d enter here	and on line	2, block 3, space	L (page 7)			0.00	

Name	025332	SY						IDIANA LLC	MEDIACOM II
			UED)	(CONTIN	SION MARKETS	A: TELEVIS	BLOCK		
6	3. DSE	2. PERMITTED BASIS		3. DSE	2. PERMITTED BASIS		3. DSE	2. PERMITTED BASIS	1. CALL SIGN
Computation 3.75 Fee									

ACCOUNTING PERIOD: 2020/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **MEDIACOM INDIANA LLC** 025332 Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Computating Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute -Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). Carriage 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 In block A: Computation If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. of the Syndicated **BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? X Yes—Complete blocks B and C . No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer or in part, over the cable system? to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN CALL SIGN CALL SIGN DSE CALL SIGN DSE DSE DSE 0.00 0.00 **TOTAL DSEs** TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: MEDIACOM INDIANA LLC	YSTEM ID# 025332	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	961,006.94	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below.		
	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?		
	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		ME OF OWNER OF CABLE SYSTEM: MEDIACOM INDIANA LLC	025332
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. A. Enter 0.00300 of gross receipts (the amount in section 1). B. Enter 0.00189 of gross receipts (the amount in section 1). C. Multiply line B by 3.000 and enter here. D. Enter 0.00089 of gross receipts (the amount in section 1). \$\begin{array}{c} \\$ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	
8 Computation of Base Rate Fee	You m 6 was In blo If you If you blank What i	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below. is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers occated within that station's local service area and others were located outside that area. For the definition of a station's "local service area," see page (v) of the general instructions.	w
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS rour cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1 Section 2	Enter the amount of gross receipts from space K (page 7)	
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1). B. Enter 0.00701 of gross receipts (the amount in section 1). C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here. D. Multiply line B by line C and enter here. E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	
		Base Rate Fee	0.00

	iedule. PAGE 17.	ACCOUNTING	3 PERIOD: 2020/2
LEGAL N	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
MEDI	ACOM INDIANA LLC	025332	Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4	A Fatar 0.04004 of wassa vassints		8
	A. Enter 0.01064 of gross receipts (the amount in section 1) ▶\$		
	(the arroad in section 1)		
	B. Enter 0.00701 of gross receipts		Computation
	(the amount in section 1) ▶		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	
	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broa	•	
	stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multip Space G.	le channel line-	9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate		Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To tal clusion, you must:	re advantage of	of
tillo CX	ordotori, you must.		Base Rate Fee
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant		and Syndicated
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Detern and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee		Exclusivity
	Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	-	Surcharge for
	If any portion of your cable system is located within the top 100 television market and the station is not exempt		Partially
	lso compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A er, if your cable system is wholly located outside all major television markets, complete block A only.	. and B below.	Distant Stations, and
How to	Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
·	: For each community served, determine the local service area of each wholly distant and each partially distant	station you	Stations
	to that community.		
outside	: For each wholly distant and each partially distant station you carried, determine which of your subscribers we the station's local service area. A subscriber located outside the local service area of a station is distant to tha ne token, the station is distant to the subscriber.)		
	: Divide your subscribers into subscriber groups according to the complement of stations to which they are dist	ant. Each	
subscr	iber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Not will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
-	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your iber groups.	system's	
	a section:		
• Identi	fy the communities/areas represented by each subscriber group.		
	the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant tibers in the group.	o all of the	
• If:			
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave of this schedule; or,	e it in parts 2, 3,	
, -	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it 6 of this schedule.	in block B,	
	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
• Calcu	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the gene e paper SA3 form.	ral instructions	
	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on	the precedina	
page. DSEs t	In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group for that group's complement of stations and total gross receipts from the subscribers in that group). You do not calculations on the form.	(that is, the total	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 025332 **MEDIACOM INDIANA LLC** Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

Total DSEs O.00 Total DSEs O.00 Sross Receipts First Group Sourbon; Bremen; Tipped CALL SIGN DSE C	В	1001/ ^	COMPLITATION		TE EEE0 FOD FAOL	1 CLIDCODI	DED ODOLID		
CALL SIGN DSE CA					TE FEES FOR EACH			ID	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE SIGNAL SIGN DSE CALL SIGN DSE				<u>r</u>	COMMUNITY/ADEA				9
CALL SIGN DSE CALL SIGN	COMMUNITY AREA	Nobie C	Journey		COMMUNITY AREA	KUSCIUSI	to County, Willo	u, Syracus	_
Base Rate	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs Total DSEs O.00 Total DSEs O.00 Total DSEs O.00 Base Rate Fee First Group THIRD SUBSCRIBER GROUP CALL SIGN DSE CALL SIGN					H	_			
Cotal DSEs			-						and
Exclusive Surchars for Partial Distant Station Total DSEs		3	-	a					
Surchard for a form of the control o		1	-						
Fotal DSEs Gross Receipts First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA Argos: Bourbon; Bremen; Tipper CALL SIGN DSE CALL SIGN DS		<u> </u>	-	4					
Cotal DSEs Ocial DSEs		-	-	ā					
Distant Stations Otal DSEs Otal DSE		1	-						Partially
otal DSEs		3	-	a					Distant
Gross Receipts First Group S		<u> </u>	-	4					Stations
Gross Receipts First Group \$ 47,208.06 Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 2,074.41 THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA Argos; Bourbon; Bremen; Tipper COMMUNITY/ AREA COMMUNITY/ AREA COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE VYMA/WFWA HD 0.25 VTTW (PBS) 0.25 Total DSEs Gross Receipts Fourth Group \$ 133,945.47 Gross Receipts Fourth Group \$ 0.00		1	•						
Gross Receipts First Group S			+	-					
Gross Receipts First Group S			•						
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CALL SIGN DSE NFWA/WFWA HD 1 0.25 NTTW (PBS) NTW (PBS) N		THIRD	SUBSCRIBER GROU	P		FOURTH	SUBSCRIBER GROL	IP.	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE NFWA/WFWA HD I 0.25	COMMUNITY/ A DE A				COMMUNITY/ADEA		OODOO! (IDE! CO! O! CO!	_	
VFWAWFWA HD 0.25 Image: Control of the property of th	OMMUNITY AREA	Aigus,	Bourbon, Bremei	i, ripper	COMMUNITY/ AREA				
WTTW (PBS) 0.25	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	WFWA/WFWA HD	0.25							
Gross Receipts Third Group \$ 133,945.47 Gross Receipts Fourth Group \$ 0.00	NTTW (PBS)	0.25							
Gross Receipts Third Group \$ 133,945.47 Gross Receipts Fourth Group \$ 0.00									
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Gross Receipts Third Group \$ 133,945.47 Gross Receipts Fourth Group \$ 0.00		.l L							
Gross Receipts Third Group \$ 133,945.47 Gross Receipts Fourth Group \$ 0.00									
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Gross Receipts Third Group \$ 133,945.47 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 133,945.47 Gross Receipts Fourth Group \$ 0.00									
	Fotal DSEs			0.50	Total DSEs			0.00	
Base Rate Fee Third Group \$ 712.59 Base Rate Fee Fourth Group \$ 0.00			422					-	
Base Rate Fee Third Group \$ 712.59 Base Rate Fee Fourth Group \$ 0.00		roup	ş 133			n Group	\$	-	
	Total DSEs Gross Receipts Third G	roup	s 133			n Group	\$	-	
	Gross Receipts Third G	·	s 133	,945.47	Gross Receipts Fourth	·		0.00	
	Gross Receipts Third G	·	s 133	,945.47	Gross Receipts Fourth	·		0.00	
	Gross Receipts Third G	roup	\$	712.59	Gross Receipts Fourth	h Group		0.00	

D# 32 N	025332						ER OF CABLE	MEDIACOM INDIA
		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	BLOCK A: (В
0	P	SUBSCRIBER GROU	SIXTH			SUBSCRIBER GROU	FIFTH	
O Comp	COMMUNITY/ AREA			0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base							-	
Synd								
Excl Sure								
1		-						
Par								
Dis						-		
Sta								
<u>) </u>	0.00			Total DSEs	0.00			Γotal DSEs
<u>) </u>	0.00	\$	Group	Gross Receipts Second	0.00	\$	Group	Gross Receipts First Gr
<u>-</u>								
<u>)</u>	0.00	\$	Group	Base Rate Fee Second	0.00	\$	Group	Base Rate Fee First Gr
<u> </u>		\$ SUBSCRIBER GROU		Base Rate Fee Second		\$ SUBSCRIBER GROU		
				Base Rate Fee Second COMMUNITY/ AREA				
0	P				JP			
0	P 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
0	P 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	OMMUNITY/ AREA
0	P 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
0	P 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
0	P 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
0	P 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
0	P 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
0	P 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
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0	P 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
0	P 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
0	P 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
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0	P O	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	CALL SIGN CALL SIGN Total DSEs
0	DSE DSE	SUBSCRIBER GROU CALL SIGN	DSE	CALL SIGN CALL SIGN Total DSEs	DSE DSE	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA

# 2 ^{Na}	025332						NA LLC	
		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (ВІ
 		SUBSCRIBER GROUI	TENTH			SUBSCRIBER GROU	NINTH :	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Compo C Base R	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base								
a		-				-		
Synd								
Excl Sure								
5u.c								
Pai								
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Sta								
		H						
]								
<u> </u>								
	0.00			Total DSEs	0.00			Γotal DSEs
	0.00	\$	Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gro
.								
. 								
-] 	0.00	\$	Group	Base Rate Fee Second	0.00	\$		
	0.00	\$ SUBSCRIBER GROUP				\$ SUBSCRIBER GROU		
	0.00							EL
	0.00			-	IP			EL
	0.00 P	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	EVENTH :	EL COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	EVENTH :	EL OMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	EVENTH :	EL COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	EVENTH :	EL COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	EVENTH :	EL COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	EVENTH :	EL COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	EVENTH :	EL COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	EVENTH :	EL COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	EVENTH :	EL
	0.00 P	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	EVENTH :	EL
	0.00 P	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	EVENTH :	EL COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	EVENTH :	EL
	0.00 P	SUBSCRIBER GROUI	TWELVTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	EVENTH :	COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROUI	DSE	CALL SIGN	DSE	SUBSCRIBER GROU	DSE	CALL SIGN

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNE		E SYSTEM:				S	O25332	Name
В				TE FEES FOR EACH			_	
COMMUNITY/ AREA	Noble (SUBSCRIBER GROU County	JP	COMMUNITY/ AREA		SUBSCRIBER GROUP ko County; Milfore		9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate F
								and Syndicate
		+						Exclusivit
		-				-		Surcharge
								for
								Partially Distant
								Stations
						-		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 47	,208.06	Gross Receipts Second	d Group	\$ 77	79,853.41	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GROUI	P	
COMMUNITY/ AREA	Argos;	Bourbon; Breme	n; Tippe	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
		-						
		-						
Total DSEs	-		0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$ 133 	,945.47	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th	ne base rate	e fees for each subsc	riber groun :	II as shown in the boxes at	oove.			
inter here and in block			o. group a	20 Shown in the boxes at		\$	0.00	

Nonpermitted 3.75 Stations

CABLE SYSTEM: LLC SYSTEM II 02533	
K A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
TIFTH SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA	0 9
SE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	Computa SE of
	Base Rate
	and
	Syndica: Exclusiv
	Surchar
	for
	Partial
	Distan
	Station
0.00 Total DSEs 0.00	
\$ 0.00 Gross Receipts Second Group \$ 0.00	<u>,,, </u>
\$ 0.00 Base Rate Fee Second Group \$ 0.00	00
ENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP	
• II · · · · · · · · · · · · · · · ·	
O COMMUNITY/ AREA	0
COMMUNITY/ AREA SE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	
	SE
SE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	SE

	BLE SYSTEM: .C				<u> </u>	025332	Name
	A: COMPUTATION (TE FEES FOR EAC				
NIN' COMMUNITY/ AREA	TH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA 0				9
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computat of
							Base Rate
					 		and
							Syndicat
					. –		Exclusiv Surchar
					. —		for
							Partially
							Distant
							Station
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ELEVEN'	TH SUBSCRIBER GRO	OUP		TWELVTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
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	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	Total DSEs	DSE	CALL SIGN	DSE	
Fotal DSEs	CALL SIGN				CALL SIGN		
CALL SIGN DSE		0.00	Total DSEs			0.00	

ACCOUNTING PERIOD: 2020/2

FORM SA3E. PAGE 20

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MEDIACOM INDIANA LLC 025332 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market οf Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for 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 **Partially** Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation _ computation _____ SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2020/2

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#
Name	MEDIACOM INDIANA LLC 025332
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9 Computation	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 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:
of Base Rate Fee	First 50 major television market Second 50 major television market
and	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
Syndicated Exclusivity Surcharge for Partially	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 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. 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 Stations	schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group
	SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge
	computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)

		BER GROUP	SUBSCRI	IL I LLO I ON LACII	BASE RA	COMPUTATION OF	LOCK A: (В
	IP	SUBSCRIBER GROU	RTEENTH	FOL	IP	SUBSCRIBER GROU	RTEENTH	THIF
9	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computati								
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndicate								
Exclusivi								
Surcharg								
for								
Partially								
Distant								
Stations								
							<mark></mark>	
							<mark></mark>	
4			j		j			
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr
				'			•	•
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
=		,						
=	IP	\$ SUBSCRIBER GROU		S	IP	\$ SUBSCRIBER GROU		FII
=		,						FII
	IP	,		S	IP			FII
	IP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	IP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	IP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	IP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	IP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	IP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTEENTH	FII OMMUNITY/ AREA
	IP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTEENTH	FII OMMUNITY/ AREA
	IP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	IP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	IP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	IP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
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NI	YSTEM ID# 025332	31					NA LLC	MEDIACOM INDIA
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Name 9 Computati	025332	LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM INDIANA LLC BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP						
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MEDIACOM INDI		E SYSTEM:				S	025332	Name
	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
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Name 9 Computat	YSTEM ID# 025332						NA LLC	MEDIACOM INDIA
		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (В
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Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Gross Receipts Third Gr	roup	\$	0.00	Gross Receipts Fourtl	n Group		0.00	

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Name	025332						TA LLO	MEDIACOM INDIAI
		BER GROUP	SUBSCRII	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (В
9		SUBSCRIBER GROUP	Y-EIGHTH	İ		SUBSCRIBER GROU	SEVENTH	
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		\$ SUBSCRIBER GROUP		ONE HUI	IP	SUBSCRIBER GROU		NINE
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	P 0	SUBSCRIBER GROUP	NDREDTH	ONE HUI COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-NINTH	NINET
	P 0	SUBSCRIBER GROUP	NDREDTH	ONE HUI COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-NINTH	NINET
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	COMPUTATION OF BASE RASUBSCRIBER GROUP 0 CALL SIGN DSE		
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	\$ 0.00		Base Rate Fee First Gro
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0 COMMUNITY/ AREA	0		COMMUNITY/ AREA
E CALL SIGN DSE	CALL SIGN DSE	DSE	CALL SIGN
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LEGAL NAME OF OWNER MEDIACOM INDIA		E SYSTEM:				S	YSTEM ID# 025332	Name
В	LOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	I SUBSCR	IBER GROUP		
ONE HUNDR	ED FIFTH	SUBSCRIBER GROU	IP	ONE HUND	RED SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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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	
ONE HUNDRED S	SEVENTH	SUBSCRIBER GROU	IP	ONE HUNDR	ED EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs		ı	0.00	Total DSEs		11	0.00	
Gross Rossinta Third C	roup	•	0.00	Gross Passinta Estat	Group	•	0.00	
Gross Receipts Third G	ισαμ	4	J.00	Gross Receipts Fourth	i Gioup	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourti	n Group	\$	0.00	
Base Rate Fee: Add th			iber group	as shown in the boxes a	above.			
Enter here and in block	3 line 1 e	pace I (page 7)				\$		

Name	YSTEM ID# 025332						NA LLC	MEDIACOM INDIAI
		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (BI
9	Р	SUBSCRIBER GROU	D TENTH	ONE HUNDRE	IP	SUBSCRIBER GROU	D NINTH	
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	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	0	\$ SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
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		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (В
9	IP	SUBSCRIBER GROU	RTEENTH	ONE HUNDRED FOU		SUBSCRIBER GROU	RTEENTH	ONE HUNDRED THIF
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	0.00	\$	l Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	I Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	IP	SUBSCRIBER GROU	XTEENTH	ONE HUNDRED SI	IP .	SUBSCRIBER GROU	TEENTH	ONE HUNDRED FI
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00_			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	roup	Total DSEs Gross Receipts Third G

	YSTEM ID# 025332	S				E SYSTEM:		LEGAL NAME OF OWNER MEDIACOM INDIA!
		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A:	BI
9	Р	SUBSCRIBER GROU	HTEENTH			SUBSCRIBER GROU	ITEENTH	ONE HUNDRED SEVEN
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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LEGAL NAME OF OWNE		E SYSTEM:				S	YSTEM ID# 025332	Name
В	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	I SUBSCRI	BER GROUP		
ONE HUNDRED TWE	NTY-FIRST	SUBSCRIBER GROU	IP	ONE HUNDRED TWEN	ITY-SECOND	SUBSCRIBER GROUP		^
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED TWE	NTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWEN	ITY-FOURTH	SUBSCRIBER GROUP		
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Total DSEs			0.00	Total DSEs			0.00	
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Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes a	bove.	\$		
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Name	YSTEM ID# 025332						NA LLC	MEDIACOM INDIAI
		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (В
9		SUBSCRIBER GROUP	NTY-SIXTH			SUBSCRIBER GROUP	NTY-FIFTH	
Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0.00	SUBSCRIBER GROUP	Group	ONE HUNDRED TWEN COMMUNITY/ AREA	0	SUBSCRIBER GROUP	SEVENTH	NE HUNDRED TWENTY-COMMUNITY/ AREA
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	YSTEM ID# 025332	S)				E SYSTEM:		LEGAL NAME OF OWNER MEDIACOM INDIA
		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION O	LOCK A: (В
9		SUBSCRIBER GROUP	THIRTIETH	i i		SUBSCRIBER GROUP	ITY-NINTH	ONE HUNDRED TWEN
Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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9 Computatio of Base Rate Fo	025332	SYS				E SYSTEM:		LEGAL NAME OF OWNER MEDIACOM INDIAN
		BER GROUP	SUBSCRII	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (Bl
۵		SUBSCRIBER GROUP	Y-FOURTH	ONE HUNDRED THIRT		SUBSCRIBER GROUP	RTY-THIRD	
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		SUBSCRIBER GROUP	RTY-SIXTH	ONE HUNDRED THI		SUBSCRIBER GROUP	RTY-FIFTH	ONE HUNDRED THIS
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	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	1		I		I			
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	0.00			Total DSEs	0.00			Fotal DSEs
	•		Group				TOUR.	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	roup	Fotal DSEs Gross Receipts Third Gr

MEDIACOM INDIAN								
				TE FEES FOR EACH				
ONE HUNDRED THIRTY-S	SEVENTH	SUBSCRIBER GROUP		11	RTY-EIGHTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computat
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
O/ALL GIGIT	BOL	O/ LEE GIGIT		O'ALL GIGIT	DOL	O/ALL SIGIY	BOL	Base Rate
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Grou	un	e	0.00	Gross Receipts Second	d Group	¢	0.00	
oross receipts i list Grot	ир	\$	0.00	Gross Receipts Secon	и Отоир	\$	0.00	
Base Rate Fee First Gro	up	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
							'	
ONE HUNDRED THIRT)	ONE HUNDRED		\$ SUBSCRIBER GROU	'	
ONE HUNDRED THIRT							P	
ONE HUNDRED THIRT)	ONE HUNDRED			P	
ONE HUNDRED THIRT	ry-ninth	SUBSCRIBER GROUP	0	ONE HUNDRED COMMUNITY/ AREA	FORTIETH	SUBSCRIBER GROU	P 0	
ONE HUNDRED THIRT	ry-ninth	SUBSCRIBER GROUP	0	ONE HUNDRED COMMUNITY/ AREA	FORTIETH	SUBSCRIBER GROU	P 0	
ONE HUNDRED THIRT	ry-ninth	SUBSCRIBER GROUP	0	ONE HUNDRED COMMUNITY/ AREA	FORTIETH	SUBSCRIBER GROU	P 0	
ONE HUNDRED THIRT	ry-ninth	SUBSCRIBER GROUP	0	ONE HUNDRED COMMUNITY/ AREA	FORTIETH	SUBSCRIBER GROU	P 0	
ONE HUNDRED THIRT	ry-ninth	SUBSCRIBER GROUP	0	ONE HUNDRED COMMUNITY/ AREA	FORTIETH	SUBSCRIBER GROU	P 0	
ONE HUNDRED THIRT	ry-ninth	SUBSCRIBER GROUP	0	ONE HUNDRED COMMUNITY/ AREA	FORTIETH	SUBSCRIBER GROU	P 0	
ONE HUNDRED THIRT	ry-ninth	SUBSCRIBER GROUP	0	ONE HUNDRED COMMUNITY/ AREA	FORTIETH	SUBSCRIBER GROU	P 0	
ONE HUNDRED THIRT	ry-ninth	SUBSCRIBER GROUP	0	ONE HUNDRED COMMUNITY/ AREA	FORTIETH	SUBSCRIBER GROU	P 0	
ONE HUNDRED THIRT	ry-ninth	SUBSCRIBER GROUP	0	ONE HUNDRED COMMUNITY/ AREA	FORTIETH	SUBSCRIBER GROU	P 0	
ONE HUNDRED THIRT	ry-ninth	SUBSCRIBER GROUP	0	ONE HUNDRED COMMUNITY/ AREA	FORTIETH	SUBSCRIBER GROU	P 0	
ONE HUNDRED THIRT	ry-ninth	SUBSCRIBER GROUP	0	ONE HUNDRED COMMUNITY/ AREA	FORTIETH	SUBSCRIBER GROU	P 0	
COMMUNITY/ AREA	ry-ninth	SUBSCRIBER GROUP	0	ONE HUNDRED COMMUNITY/ AREA	FORTIETH	SUBSCRIBER GROU	P 0	
ONE HUNDRED THIRT	ry-ninth	SUBSCRIBER GROUP	0	ONE HUNDRED COMMUNITY/ AREA	FORTIETH	SUBSCRIBER GROU	P 0	
ONE HUNDRED THIRT	ry-ninth	SUBSCRIBER GROUP	0	ONE HUNDRED COMMUNITY/ AREA	FORTIETH	SUBSCRIBER GROU	P 0	
ONE HUNDRED THIRT	ry-ninth	SUBSCRIBER GROUP	0	ONE HUNDRED COMMUNITY/ AREA	FORTIETH	SUBSCRIBER GROU	P 0	
ONE HUNDRED THIRT	DSE	CALL SIGN	0 DSE	ONE HUNDRED COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	DSE 0.000	
ONE HUNDRED THIRT COMMUNITY/ AREA CALL SIGN Fotal DSEs	DSE	SUBSCRIBER GROUP	DSE	ONE HUNDRED COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	
ONE HUNDRED THIRT	DSE	CALL SIGN	0 DSE	ONE HUNDRED COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	DSE 0.000	
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ONE HUNDRED THIRT COMMUNITY/ AREA CALL SIGN Cotal DSEs Gross Receipts Third Gro	DSE DUP	CALL SIGN SUBSCRIBER GROUP	0 DSE	ONE HUNDRED COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Fourth	DSE	SUBSCRIBER GROU	DSE	

	YSTEM ID# 025332	3				- OTOTEWI.	R OF CABLE	MEDIACOM INDIAI
		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A:	B
9		SUBSCRIBER GROUP	Y-SECOND	li		SUBSCRIBER GROUP	RTY-FIRST	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and						-		
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
		SUBSCRIBER GROUP	Y-FOURTH	ONE HUNDRED FORT		SUBSCRIBER GROUP	TY-THIRD	ONE HUNDRED FOR
				H				
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	H	O DSE	CALL SIGN	DSE	COMMUNITY/ AREA
		CALL SIGN	DSE	COMMUNITY/ AREA		CALL SIGN	DSE	
		CALL SIGN	DSE	COMMUNITY/ AREA		CALL SIGN	DSE	
		CALL SIGN	DSE	COMMUNITY/ AREA		CALL SIGN	DSE	
		CALL SIGN	DSE	COMMUNITY/ AREA		CALL SIGN	DSE	
		CALL SIGN	DSE	COMMUNITY/ AREA		CALL SIGN	DSE	
		CALL SIGN	DSE	COMMUNITY/ AREA		CALL SIGN	DSE	
		CALL SIGN	DSE	COMMUNITY/ AREA		CALL SIGN	DSE	
		CALL SIGN	DSE	COMMUNITY/ AREA		CALL SIGN	DSE	
		CALL SIGN	DSE	COMMUNITY/ AREA		CALL SIGN	DSE	
		CALL SIGN	DSE	COMMUNITY/ AREA		CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE	COMMUNITY/ AREA		CALL SIGN	DSE	
		CALL SIGN	DSE	COMMUNITY/ AREA		CALL SIGN	DSE	
		CALL SIGN	DSE	COMMUNITY/ AREA		CALL SIGN	DSE	
		CALL SIGN	DSE	COMMUNITY/ AREA		CALL SIGN	DSE	
		CALL SIGN	DSE	COMMUNITY/ AREA		CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN		CALL SIGN	DSE	CALL SIGN		

MEDIACOM INDIA		E SYSTEM:				S	YSTEM ID# 025332	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCRI	BER GROUP		
ONE HUNDRED FO	RTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED F	ORTY-SIXTH	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-						Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	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	
						H		
						H		
						-		
						-		
		-				H		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
,	•							
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add th	ne base rat e	e fees for each subser	iber group	as shown in the boxes a	above.			
Enter here and in block			JP			\$		

LEGAL NAME OF OWNER MEDIACOM INDIA!		SYSTEM:				S'	YSTEM ID# 025332	Name
BI	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
ONE HUNDRED FORT	Y-NINTH	SUBSCRIBER GROU	Р	ONE HUNDRE) FIFTIETH	SUBSCRIBER GROU	Р	^
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						=		and
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								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 Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FIF	TY-FIRST	SUBSCRIBER GROU	Р	ONE HUNDRED FIFT	Y-SECOND	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			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	
Page Pate Face Add III	hass == 1	food for each	ibor are:::	no chown in the barra	hovo			
Base Rate Fee: Add the Enter here and in block			inei group i	as shown in the doxes a	JUVE.	\$		

Name	YSTEM ID# 025332						NA LLC	MEDIACOM INDIAI
				TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (В
•	P	SUBSCRIBER GROUI	-FOURTH	ONE HUNDRED FIFT	IP	SUBSCRIBER GROU	Y-THIRD	
9 Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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and								
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	0.00	\$		Base Rate Fee Second	0.00	\$		
	0.00	\$ SUBSCRIBER GROUP		ONE HUNDRED FI	IP	\$ SUBSCRIBER GROU		ONE HUNDRED FIF
	0.00							ONE HUNDRED FIF
	0.00			ONE HUNDRED FI	IP			ONE HUNDRED FIF
	0.00 P	SUBSCRIBER GROUI	TY-SIXTH	ONE HUNDRED FII	0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED FIF
	0.00 P	SUBSCRIBER GROUI	TY-SIXTH	ONE HUNDRED FII	0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED FIF
	0.00 P	SUBSCRIBER GROUI	TY-SIXTH	ONE HUNDRED FII	0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED FIF
	0.00 P	SUBSCRIBER GROUI	TY-SIXTH	ONE HUNDRED FII	0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED FIF
	0.00 P	SUBSCRIBER GROUI	TY-SIXTH	ONE HUNDRED FII	0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED FIF
	0.00 P	SUBSCRIBER GROUI	TY-SIXTH	ONE HUNDRED FII	0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED FIF
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	0.00 P	SUBSCRIBER GROUI	TY-SIXTH	ONE HUNDRED FII	0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED FIF
	0.00 P	SUBSCRIBER GROUI	TY-SIXTH	ONE HUNDRED FII	0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED FIF
	0.00 P	SUBSCRIBER GROUI	TY-SIXTH	ONE HUNDRED FII	0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED FIF
	0.00 P	SUBSCRIBER GROUI	TY-SIXTH	ONE HUNDRED FII	0	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROUI	TY-SIXTH	ONE HUNDRED FII	0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED FIF
	0.00 P	SUBSCRIBER GROUI	TY-SIXTH	ONE HUNDRED FII	0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED FIF
	0.00 P	SUBSCRIBER GROUI	TY-SIXTH	ONE HUNDRED FII	0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED FIF
	0.00 P	SUBSCRIBER GROUI	DSE	ONE HUNDRED FII COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED FIF

Name	YSTEM ID# 025332						NA LLC	MEDIACOM INDIAI
		BER GROUP	SUBSCRII	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (B
9		SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FIF		SUBSCRIBER GROUP	SEVENTH	ONE HUNDRED FIFTY
Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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1							-	
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	l Group	Gross Receipts Second	0.00	\$	nun	Gross Receipts First Gr
		<u>*</u>	Oloup	Gross recocipts occorre	0.00	<u>*</u>	Jup	oroso recocipio i iist Or
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	3ase Rate Fee First Gr
		\$ SUBSCRIBER GROUP			0.00	\$ SUBSCRIBER GROUP		
					0.00			ONE HUNDRED FIR
*	0.00			ONE HUNDRE				ONE HUNDRED FIR
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	0.00	SUBSCRIBER GROUP	O SIXTIETH	ONE HUNDRE COMMUNITY/ AREA	0	SUBSCRIBER GROUP	TY-NINTH :	ONE HUNDRED FIF
	0.00	SUBSCRIBER GROUP	O SIXTIETH	ONE HUNDRE COMMUNITY/ AREA	0	SUBSCRIBER GROUP	TY-NINTH :	ONE HUNDRED FIF
	0.00	SUBSCRIBER GROUP	O SIXTIETH	ONE HUNDRE COMMUNITY/ AREA	0	SUBSCRIBER GROUP	TY-NINTH :	ONE HUNDRED FIF
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	0.00	SUBSCRIBER GROUP	O SIXTIETH	ONE HUNDRE COMMUNITY/ AREA	0	SUBSCRIBER GROUP	TY-NINTH :	ONE HUNDRED FIF
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	0.00	SUBSCRIBER GROUP	O SIXTIETH	ONE HUNDRE COMMUNITY/ AREA	0	SUBSCRIBER GROUP	TY-NINTH :	ONE HUNDRED FIF
	0.00	SUBSCRIBER GROUP	DSE	ONE HUNDRE COMMUNITY/ AREA CALL SIGN	O DSE	SUBSCRIBER GROUP	DSE DSE	ONE HUNDRED FIF

R OF CABLE SYSTEM: ANA LLC 0253	ID# 332 Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
IRTEENTH SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA	9
DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI	Computat SE of
	Base Rate
	and
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	for
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	Stations
	00_
Group \$ 0.00 Gross Receipts Second Group \$ 0.0	00_
sroup \$ 0.00 Base Rate Fee Second Group \$ 0.0	00
	
RETEENTH SURSCORED COOLD II SIYTEENTH SURSCORED COOLD	
IFTEENTH SUBSCRIBER GROUP SIXTEENTH SUBSCRIBER GROUP O COMMUNITY AREA	0
IFTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA	0
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0 COMMUNITY/ AREA	SE
DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI	SE
DSE CALL SIGN DSE CALL SIGN DSI COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSI CA	SE

NI	YSTEM ID# 025332	S				E SYSTEM:		LEGAL NAME OF OWNE
<u> </u>		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (В
9	JP	SUBSCRIBER GROU	HTEENTH	EIC	IP	SUBSCRIBER GROU	NTEENTH :	SEVE
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computa of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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and						-	-	
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u d								
				Total DSEs	0.00			otal DSEs
	0.00							D : 1 E: 10
	0.00	\$	l Group	Gross Receipts Secon	0.00	\$	oup	Fross Receipts First Gi
1		\$	l Group	Gross Receipts Secon	0.00	\$	oup	iross Receipts First Gi
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	0.00		l Group	Base Rate Fee Secon	0.00		oup	ase Rate Fee First G
	0.00	\$	l Group	Base Rate Fee Secon	0.00	\$	oup	iase Rate Fee First Gi
	0.00 0.00	\$	l Group	Base Rate Fee Secon	0.00	\$	oup	ase Rate Fee First G
	0.00 0.00	\$ SUBSCRIBER GROU	d Group VENTIETH	Base Rate Fee Secon TO COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROU	oup	ase Rate Fee First Gi Nii OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group VENTIETH	Base Rate Fee Secon TO COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROU	oup	ase Rate Fee First Gi Nii OMMUNITY/ AREA
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group VENTIETH	Base Rate Fee Secon TO COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROU	oup	iase Rate Fee First Gi Ni COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group VENTIETH	Base Rate Fee Secon TO COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROU	oup	iase Rate Fee First Gi Ni COMMUNITY/ AREA
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group VENTIETH	Base Rate Fee Secon TO COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gi Nii COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group VENTIETH	Base Rate Fee Secon TO COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROU	oup	NIOMMUNITY/ AREA
	0.00 0.00 DSE	\$ SUBSCRIBER GROU	d Group VENTIETH	Base Rate Fee Secon TO COMMUNITY/ AREA CALL SIGN	0.00	\$ SUBSCRIBER GROU	oup	NII COMMUNITY/ AREA CALL SIGN
	0.00 0.00 DSE 0.00	\$ SUBSCRIBER GROU	d Group VENTIETH DSE	Base Rate Fee Secon TO COMMUNITY/ AREA CALL SIGN Total DSEs	0.00	\$ SUBSCRIBER GROU	DSE	CALL SIGN Cotal DSEs
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Name	YSTEM ID# 025332						R OF CABLE	MEDIACOM INDIA
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LEGAL NAME OF OWNER MEDIACOM INDIA		E SYSTEM:	•	Timetod 0.70 Otal		SY	STEM ID# 025332	Name
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Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
FORTY-S	SEVENTH	SUBSCRIBER GROU	Р	FORT	Y-EIGHTH	SUBSCRIBER GROUP		
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Gross Receipts Third Gr	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
16	e base rate			Base Rate Fee Fourth		\$	0.00	

	M ID# 25332 Name
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Name	STEM ID# 025332							LEGAL NAME OF OWNER MEDIACOM INDIA
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9		SUBSCRIBER GROUP	-FOURTH			SUBSCRIBER GROU	ry-third	
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		BER GROUP	SUBSCRII	TE FEES FOR EACH				
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First G
	0.00		d Group	Base Rate Fee Secon	0.00	\$ SUBSCRIBER GROU	oup	ONE HUNDRED
	0.00	\$	d Group	Base Rate Fee Secon	0.00		oup	ONE HUNDRED
	0.00	\$	d Group	Base Rate Fee Secon	0.00		oup	ONE HUNDRED
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	0.00 JP 0	\$ SUBSCRIBER GROU	d Group D EIGHTH	ONE HUNDR COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	oup SEVENTH	ONE HUNDRED :
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	0.00 JP 0	\$ SUBSCRIBER GROU	d Group D EIGHTH	ONE HUNDR COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	oup SEVENTH	ONE HUNDRED :
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	0.00 JP 0	\$ SUBSCRIBER GROU	d Group D EIGHTH	ONE HUNDR COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	oup SEVENTH	COMMUNITY/ AREA
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M ID# 5332 Name	SYS						LEGAL NAME OF OWNER MEDIACOM INDIA
			TE FEES FOR EACH				
<u> </u>	BSCRIBER GROUP	ED TENTH S		JP 0	SUBSCRIBER GROU	ED NINTH :	ONE HUNDRE COMMUNITY/ AREA
Computa			COMMUNITY/ AREA	U			COMMUNITY/ AREA
DSE of	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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0.00		TWELVTH S	ONE HUNDRED	JP 0	SUBSCRIBER GROU	LEVENTH :	COMMUNITY/ AREA
0.00		TWELVTH S	ONE HUNDRED	JP 0	SUBSCRIBER GROU	LEVENTH :	ONE HUNDRED EI
0.00		TWELVTH S	ONE HUNDRED	JP 0	SUBSCRIBER GROU	LEVENTH :	ONE HUNDRED EI
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0.00 DSE		DSE	ONE HUNDRED COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED EI COMMUNITY/ AREA CALL SIGN
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Name	025332						NA LLC	MEDIACOM INDIAI
		BER GROUP	SUBSCRII	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (В
9	P	SUBSCRIBER GROUP	RTEENTH	ONE HUNDRED FOL		SUBSCRIBER GROU	RTEENTH	ONE HUNDRED THIS
Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and		=					-	
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Surchar, for								
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Station							-	
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	l Group	Gross Receipts Second	0.00	\$	oup	Bross Receipts First Gr
	0.00	\$		Base Rate Fee Second	0.00	\$	-	
		\$ SUBSCRIBER GROUP		ONE HUNDRED S		\$ SUBSCRIBER GROU	-	ONE HUNDRED FIR
							-	ONE HUNDRED FIF
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	P 0	SUBSCRIBER GROUI	XTEENTH	ONE HUNDRED S	JP 0	SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
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	P 0	SUBSCRIBER GROUI	XTEENTH	ONE HUNDRED S	JP 0	SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
	P 0	SUBSCRIBER GROUI	XTEENTH	ONE HUNDRED S	JP 0	SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
	P 0	SUBSCRIBER GROUI	XTEENTH	ONE HUNDRED S	JP 0	SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
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	DSE	SUBSCRIBER GROUI	DSE	ONE HUNDRED S COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED FIE

LEGAL NAME OF OWNE		E SYSTEM:	•	micoa o.7 o otac		S	YSTEM ID# 025332	Name
			BASE RA	TE FEES FOR EACH				
ONE HUNDRED SEV	ENTEENTH	SUBSCRIBER GROUP	0	ONE HUNDRED E	IGHTEENTH	SUBSCRIBER GROUP	0	9
COMMUNITY AREA				COMMONT Y/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
						-		and Syndicate
								Exclusivit
		-				-		Surcharge
								for
								Partially Distant
					<u> </u>			Stations
		-						
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Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED N	NTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED T	WENTIETH	SUBSCRIBER GROU	IP	
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 (Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group a	II	bove.	s		

	NA LLC	E SYSTEM:				S	025332	Name
			BASE RA	TE FEES FOR EACH				
	NTY-FIRST	SUBSCRIBER GROUP		i i		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		H				_		Base Rate Fee
								and
		T						Syndicated Exclusivity
						=		Surcharge
								for
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								Stations
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	-	\$	0.00	Base Rate Fee Second	•	\$	0.00	
	NTY-THIRD	SUBSCRIBER GROUP				SUBSCRIBER GROUP	•	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN				
					DSE	CALL SIGN	DSE	
					DSE	CALL SIGN	DSE	
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		-			DSE	CALL SIGN	DSE	
					DSE	CALL SIGN	DSE	
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				Table DSFs	DSE	CALL SIGN		
			0.00	Total DSEs		CALL SIGN	0.00	
	roup	\$	0.00	Total DSEs Gross Receipts Fourt		CALL SIGN		
Gross Receipts Third G	·	\$			h Group		0.00	
Total DSEs Gross Receipts Third C Base Rate Fee Third C Base Rate Fee: Add the Inter here and in block	Group ne base rat e	e fees for each subscr	0.00	Gross Receipts Fourt Base Rate Fee Fourt	h Group		0.00	

EGAL NAME OF OWNE		E SYSTEM:				•	025332	Name
I	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCR	IBER GROUP		
ONE HUNDRED TWE	NTY-FIFTH	SUBSCRIBER GROUP		İ		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
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otal DSEs			0.00	Total DSEs			0.00	
	· · · · · · · · · · · · · · · · · · ·	•	0.00		nd Craun	•	0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Secon	na Group	\$	0.00	
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
NE HUNDRED TWENT	Y-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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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
e Rate Fee: Add t	ne base rat e			Base Rate Fee Fourt		\$	0.00	

Name	STEM ID# 025332	SY				E SYSTEM:		LEGAL NAME OF OWNER MEDIACOM INDIAI
		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A:	BI
9		SUBSCRIBER GROUP	THIRTIETH	ii		SUBSCRIBER GROUP	TY-NINTH	ONE HUNDRED TWEN
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	Group	Gross Receipts Second	0.00	\$	oup	Fross Receipts First Gro
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro
						CLIBCODIBED CDOLID	TV FIDOT	ONE HUNDRED THIS
	ONE HUNDRED THIRTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0			SUBSCRIBER GROUP 0		TY-FIRST	ONE HONDINED IIII	
	0	SUBSCRIBER GROUP	Y-SECOND		0	SUBSCRIBER GROUP	TY-FIRST	
	O DSE	CALL SIGN	Y-SECOND DSE		O DSE	CALL SIGN	DSE	
				COMMUNITY/ AREA				COMMUNITY/ AREA
				COMMUNITY/ AREA				COMMUNITY/ AREA
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				COMMUNITY/ AREA				COMMUNITY/ AREA
				COMMUNITY/ AREA				COMMUNITY/ AREA
				COMMUNITY/ AREA				CALL SIGN
	DSE		DSE	CALL SIGN	DSE		DSE	COMMUNITY/ AREA

LEGAL NAME OF OWNE		E SYSTEM:	•	miliou 5.75 State		S	YSTEM ID# 025332	Name
			BASE RA	TE FEES FOR EACH				
ONE HUNDRED THI	RTY-THIRD	SUBSCRIBER GROUP	0	ONE HUNDRED THIS	RTY-FOURTH	SUBSCRIBER GROUP	0	9
COMMUNITY AREA				COMMUNITY/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
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								for
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Total DSEs			0.00	Total DSEs	1		0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED THIS	RTY-FIFTH	SUBSCRIBER GROU	JP	ONE HUNDRED THI	RTY-SIXTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						-		
						-		
Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add th		e fees for each subsc pace L (page 7)	riber group a	as shown in the boxes a	bove.			

Name	YSTEM ID# 025332						NA LLC	MEDIACOM INDIAI
		BER GROUP	SUBSCRII	TE FEES FOR EACH	BASE RA			
9		SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED THIR		SUBSCRIBER GROUP	SEVENTH	ONE HUNDRED THIRTY
Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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		\$	l Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gr
	0.00	•						
	0.00							
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$		
	0.00	\$ SUBSCRIBER GROU	l Group					
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	0.00		l Group	ONE HUNDRED	IP			ONE HUNDRED THIRT
	0.00 P	SUBSCRIBER GROU	Group	ONE HUNDRED I	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED THIRT
	0.00 P	SUBSCRIBER GROU	Group	ONE HUNDRED I	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED THIRT
	0.00 P	SUBSCRIBER GROU	Group	ONE HUNDRED I	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED THIRT
	0.00 P	SUBSCRIBER GROU	Group	ONE HUNDRED I	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED THIRT
	0.00 P	SUBSCRIBER GROU	Group	ONE HUNDRED I	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED THIRT
	0.00 P	SUBSCRIBER GROU	Group	ONE HUNDRED I	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED THIRT
	0.00 P	SUBSCRIBER GROU	Group	ONE HUNDRED I	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED THIRT
	0.00 P	SUBSCRIBER GROU	Group	ONE HUNDRED I	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED THIRT
	0.00 P	SUBSCRIBER GROU	Group	ONE HUNDRED I	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED THIRT
	0.00 P	SUBSCRIBER GROU	Group	ONE HUNDRED I	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED THIRT
	0.00 P	SUBSCRIBER GROU	Group	ONE HUNDRED I	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED THIRT COMMUNITY/ AREA CALL SIGN
	0.00 P	SUBSCRIBER GROU	Group	ONE HUNDRED I	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED THIRT
	0.00 P	SUBSCRIBER GROU	Group	ONE HUNDRED I	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED THIRT
	0.00 P	SUBSCRIBER GROU	Group	ONE HUNDRED I	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED THIRT
	0.00 P	SUBSCRIBER GROU	Group	ONE HUNDRED I	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED THIRT
	0.00 DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED THIRT

Name	025332						R OF CABLE	MEDIACOM INDIA
				TE FEES FOR EACH				
9		SUBSCRIBER GROUP	Y-SECOND			SUBSCRIBER GROUP	RTY-FIRST	
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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for			•			-		
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Stations								
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ļ								
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
<u> </u>	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First Gr
		\$ SUBSCRIBER GROUP	-		<u>'</u>	SUBSCRIBER GROUP		
			-		<u>'</u>			ONE HUNDRED FOR
			-	ONE HUNDRED FOR)			ONE HUNDRED FOR
	0	SUBSCRIBER GROUP	ry-fourth	ONE HUNDRED FOI	0	SUBSCRIBER GROUP	RTY-THIRD	ONE HUNDRED FOR
	0	SUBSCRIBER GROUP	ry-fourth	ONE HUNDRED FOI	0	SUBSCRIBER GROUP	RTY-THIRD	ONE HUNDRED FOR
	0	SUBSCRIBER GROUP	ry-fourth	ONE HUNDRED FOI	0	SUBSCRIBER GROUP	RTY-THIRD	ONE HUNDRED FOR
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