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

### SA3E Long Form

### STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY							
DATE RECEIVED	AMOUNT						
2/28/2018	\$ 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	2017/2									
Bowner	Instructions:  Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo rate title of the subsidiary, not that of the parent corporation  List any other name or names under which the owner conducts the business of the cable system  If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period  Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.  62893  LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM  The Ohio Bell Telephone Company									
				6289320172						
				62893 2017/2						
	1010 N. St. Mary's Street, Room 13-59-B San Antonio, TX 78215-2109									
С	INSTRUCTIONS: In line 1, give any business or trade names unames already appear in space B. In line 2, give the mailing ad									
System	1 IDENTIFICATION OF CABLE SYSTEM:	,,,,,	3···							
	MAILING ADDRESS OF CABLE SYSTEM:									
	2 (Number, street, rural route, apartment, or suite number)									
	(City, town, state, zip code)									
D	Instructions: For complete space D instructions, see page 1b.	Identify only the frst comm	nunity served below and rel	ist on page 1b						
Area	with all communities.	<u> </u>								
Served	CITY OR TOWN	STATE								
First Community	Columbus	ОН								
,	Below is a sample for reporting communities if you report mul	Itiple channel line-ups in S STATE	pace G.  CH LINE UP	SUB GRP#						
	CITY OR TOWN (SAMPLE)  Alda	MD	A	30B GRP#						
Sample	Alliance	MD	В	2						
	Gering	MD	В	3						

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

**ACCOUNTING PERIOD: 2017/2** FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 62893 The Ohio Bell Telephone Company Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# Columbus OH **First Berne Township** OH Community OH Bexley **Blendon Township** OH **Bloom Township** OH **Brice** OH See instructions for **Brown** OH additional information on alphabetization. **Canal Winchester** OH Cinton OH **Commercial Point** OH OH Concord Township **Deer Creek Township** OH Dublin OH **Etna Township** OH Franklin OH Gahanna OH **Genoa Township** OH **Grandview Heights** OH **Grove City** OH Groveport OH Hamilton ОН **Harlem Township** OH Hilliard OH Jackson OH Jefferson Township OH Jerome OH Lancaster OH **Liberty Township** OH Lithopolis OH London OH **Madison Township** OH Marble Cliff OH Mifflin OH Minerva Park OH **New Albany** OH Norwich OH Obetz OH **Orange Township** OH Pataskala OH Perry OH

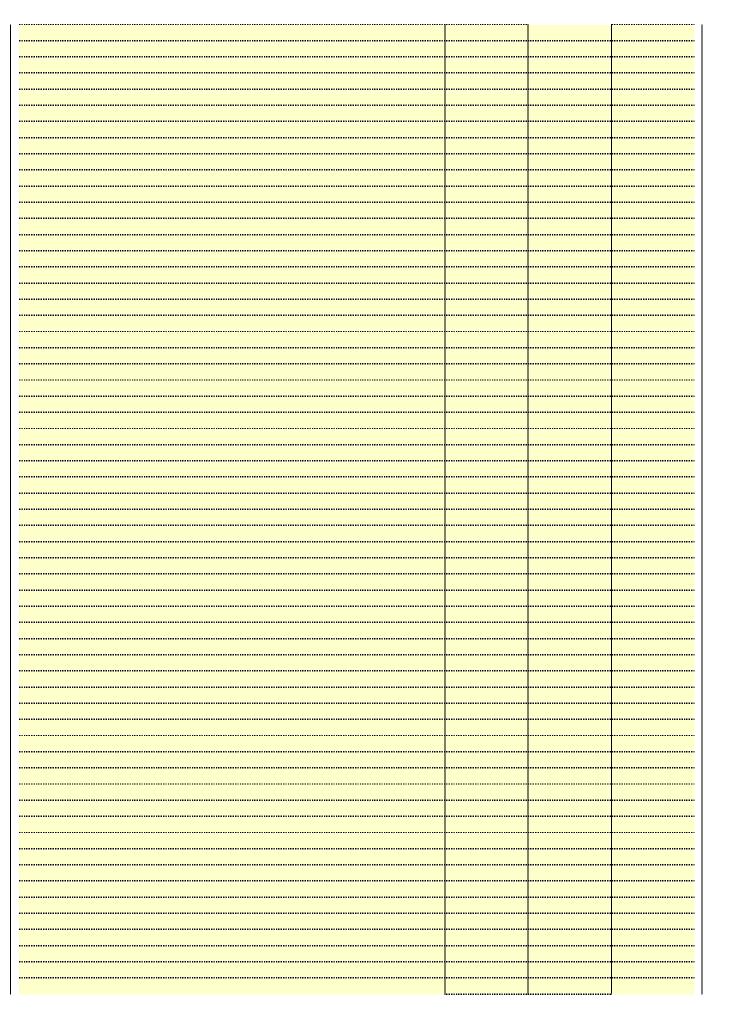
OH

OH

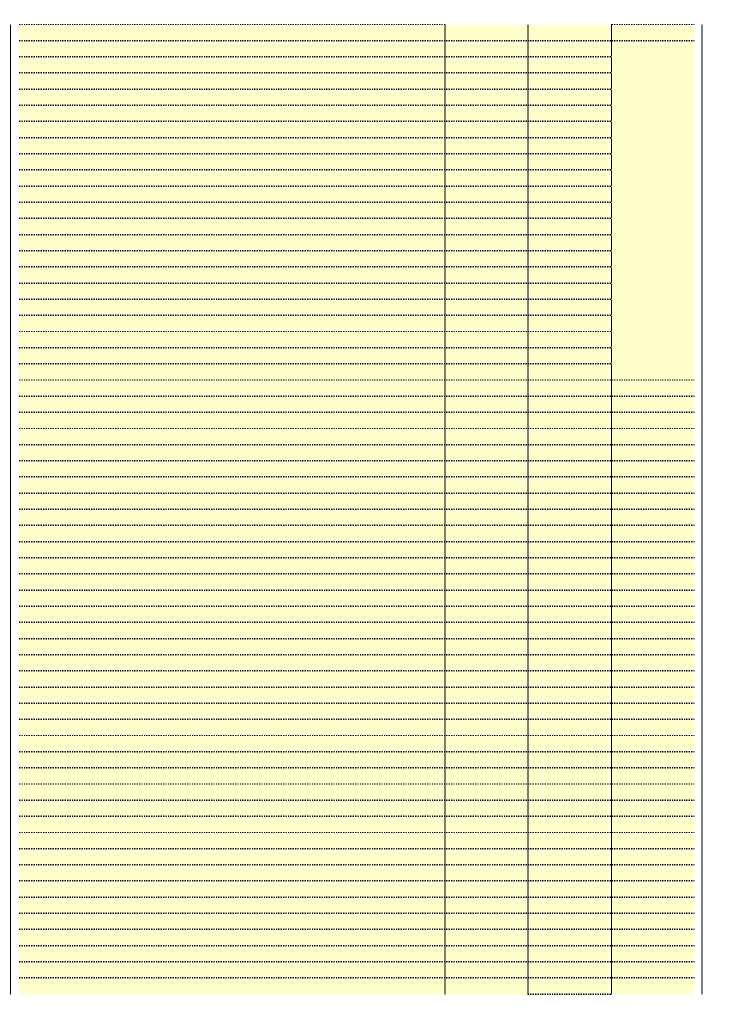
Plain

**Pickerington** 

		-		
Pleasant	OH			
Pleasant Township Powell	ОН			
Dowoll	ОН			
FOWEII				
Prairie	OH			
Reynoldsburg Riverlea Scioto Township Sharon	ОН			
Riverlea	ОН			
Scioto Township	ОН		•••••	
Sciolo Township				Add rows as necessary.
Sharon	OH			,
Shawnee Hills Truro Township Upper Arlington Urbancrest	OH			
Truro Townshin	ОН			
Haran Addinates				
Upper Arlington	OH			
Urbancrest	OH			
Vallevview	ОН			
Valleyview Violet Township Washington Township	ОН			
VIOLET LOWINGHID				
Washington Lownship	OH	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************	
Westerville Whitehall	OH			
Whitehall	OH			
Worthington	OH			
Worthington	ОН			
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Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:
SYSTEM ID#
The Ohio Bell Telephone Company
62893

### Ε

### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1		BLOCK 2				
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE
Residential:							
<ul> <li>Service to first set</li> </ul>	60,459	\$	19.00	HD Tech Fee	51,200	\$	10.00
<ul> <li>Service to additional set(s)</li> </ul>		Ţ		Set-Top Box	60,995	T	\$0-\$10
<ul> <li>FM radio (if separate rate)</li> </ul>				Broadcast TV Surcharge	60,459	\$4.	99-\$5.99
Motel, hotel							
Commercial	536	\$	20.00				
Converter							
Residential		<u> </u>				Ī	
Non-residential		1					
i	· · · · · · · · · · · · · · · · · · ·				• • • • • • • • • • • • • • • • • • • •	*******	

### 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	CATEGORY OF SERVICE RATE CATEGORY OF SERVICE RATE				
Continuing Services:		Installation: Non-residential			
<ul> <li>Pay cable</li> </ul>		Motel, hotel		Video on Demand	\$0-\$100
<ul> <li>Pay cable—add'l channel</li> </ul>	\$5-\$199	Commercial		Service Activation Fee	\$0-\$35
Fire protection		Pay cable		Credit Management Fee	\$0-\$449
Burglar protection		<ul> <li>Pay cable-add'l channel</li> </ul>		Dispatch on Demand	\$149
Installation: Residential		Fire protection		Wireless Receiver	\$10-\$49
First set	\$0-\$199	Burglar protection		HD Premium Tier	\$7
<ul> <li>Additional set(s)</li> </ul>		Other services:		DVR Upgrade Fee	\$50-\$105
<ul> <li>FM radio (if separate rate)</li> </ul>		Reconnect	\$0-\$35		
Converter		Disconnect			
		Outlet relocation	\$0-\$55		
		Move to new address			

LEGAL NAME OF OWN	IFR OF CABLE S	YSTEM:			SYSTEM ID#	ŧI						
The Ohio Bell 1					62893	Namo						
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON .										
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(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												
,	<u> </u>	CHANN	EL LINE-UP	AA	·							
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION							
WBNS-DT/HD	10/1010	N	No		Columbus, OH							
WCMH-DT/HD	4/1004	N	No		Columbus, OH	See instructions for						
WOSU-DT/HD	34/1034	E	No		Columbus, OH	additional information on alphabetization.						
WSFJ-DT	51	I	No		Newark, OH							
WSYX-DT/HD	6/1006	N	No		Columbus, OH							
WTTE-DT/HD	28/1028	I	No		Columbus, OH							
WWHO-DT/HD	53/1053	I	No		Chillicothe, OH							

FORM SA3E. PAGE 3.										
LEGAL NAME OF OWN					SYSTEM ID#	Name				
The Ohio Bell T	elephone C	ompany			62893					
PRIMARY TRANSMITTERS: TELEVISION  In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:  • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in										
its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).  For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.  Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.  Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.  For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.  Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.  Note: If you are utilizing multiple cha										
		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					

ACCOUNTING PERIOD: 2017/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62893 The Ohio Bell Telephone Company PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.							ACCOUNTING	PERIOD: 2017/2				
LEGAL NAME OF OWNER OF							SYSTEM ID#	Name				
The Ohio Bell Telepho	ne Comp	any					62893	Name				
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEN	NT AND PROGRAM LOG									
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a												
substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further												
explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.												
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE												
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?  Yes XNo												
Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program												
log in block 2.			•									
2. LOG OF SUBSTITUTE In General: List each subst			te line. I lse abbreviations v	wherever nos	sible if the	ir meaning i	e					
clear. If you need more spa	ice, please a	attach addition	al pages.			_	3					
<b>Column 1:</b> Give the title period, was broadcast by a			ision program (substitute p				ation					
under certain FCC rules, re	gulations, o	r authorization	s. See page (vi) of the gen	eral instructio	ons located	in the pape	r					
SA3 form for futher informa titles, for example, "I Love L				"basketball".	List speci	fic program						
Column 2: If the program	n was broad	dcast live, ente	r "Yes." Otherwise enter "N									
			asting the substitute programe community to which the		nsed by the	e ECC or in						
the case of Mexican or Can	adian statio	ons, if any, the	community with which the	station is ider	ntified).							
<b>Column 5:</b> Give the mor first. Example: for May 7 gives		when your sys	tem carried the substitute p	orogram. Use	numerals,	with the mo	onth					
		substitute pro	gram was carried by your o	able system.	. List the tir	nes accurat	ely					
to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	ı program carri	ed by a system from 6:01:1	5 p.m. to 6:2	28:30 p.m. s	should be						
Column 7: Enter the letter			was substituted for progra				ed					
to delete under FCC rules a gram was substituted for pr												
effect on October 19, 1976.		iliai youl sysie	em was permitted to delete	under FCC i	ules and re	guiations in						
				WHE	EN SUBST	ITLITE						
S	SUBSTITUT	E PROGRAM	1		IAGE OC		7. REASON FOR					
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	-	TIMES TO	DELETION					
	163 01 140	OALL SIGIV	4. STATIONS ESCATION	AND DAT	TROW	_ 10						
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ACCOUNTING PERIOD: 2017/2 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62893 The Ohio Bell Telephone Company **PART-TIME CARRIAGE LOG** J In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.- 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.-12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS HOURS** DATE **FROM** TO DATE **FROM** TO

	SA3E. PAGE 7. L NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	
	Ohio Bell Telephone Company		62893	Name
Inst all a (as i page	PSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount mounts (gross receipts) paid to your cable system by subscribers for the system's secondentifed in space E) during the accounting period. For a further explanation of how to ce (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s) during the accounting period.  DRTANT: You must complete a statement in space P concerning gross receipts.	ondary transmissior ompute this amour	n service nt, see 0,298,927.27	<b>K</b> Gross Receipts
<ul><li>Instru</li><li>Com</li><li>Com</li><li>If yo fee f</li><li>If yo</li></ul>	RIGHT ROYALTY FEE  ctions: Use the blocks in this space L to determine the royalty fee you owe: plete block 1, showing your minimum fee. plete block 2, showing whether your system carried any distant television stations.  ur system did not carry any distant television stations, leave block 3 blank. Enter the ar  rom block 1 on line 1 of block 4, and calculate the total royalty fee.  ur system did carry any distant television stations, you must complete the applicable pa  mpanying this form and attach the schedule to your statement of account.			L Copyright Royalty Fee
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be 3 below.	e entered on line 1	of	
▶ If pa 3 be	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be $\epsilon$ low.	entered on line 2 in	block	
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be entered on li	ine	
1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.  Line 1. Enter the amount of gross receipts from space K	e is 1.064 percent o		
	Line 2. Multiply the amount in line 1 by 0.01064  Enter the result here.	<u> </u>		
	This is your minimum fee.	\$	205,340.59	
	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 period Yes—Complete the DSE schedule.    No—Leave block 3 below blank and columns.	nn 4, you must che	ck	
Block 3	Line 1. <b>BASE RATE FEE:</b> 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. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		0.00	
	Line 3. Add lines 1 and 2 and enter here	\$	-	
Block 4	Line 1. <b>BASE RATE FEE/3.75 FEE or MINIMUM FEE:</b> 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	\$	205,340.59	Cable systems
	Line 2. <b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.		0.00	submitting additional deposits under
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9  (Interest Worksheet)		0.00	Section 111(d)(7) should contact the Licensing
	Line 4. FILING FEE	\$	725.00	additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.  Add Lines 1, 2 and 3 of block 4 and enter total here	\$	206,065.59	appropriate form for submitting the additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (separate instructions located in the paper SA3 form for more information.)	See page (i) of the		additional lees.

Name	LEGAL NAME OF OWN	IER OF CABLE	SYSTEM:					SYSTEM ID#			
Name	The Ohio Bell	Telephone	Company					62893			
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										
							13				
	system carried	television bi	roadcast stations								
	2. Enter the total	number of a	activated channel	s							
		•		broadcast station			609				
	and nonbroadc	ast services									
N Individual to Be Contacted											
for Further	Name <b>Dian</b>	e Belling	jer			Telephone	210-351-4805				
Information	Address 1010 (Number	N. St. M er, street, rural	ary's Street,	Room 13-59-	В						
			TX 78215								
	(City, to	own, state, zip)									
	Email	dg77	96@att.com			Fax (optional) 210-246-	-8199				
	CERTIFICATION	(This statem	nent of account m	ust be certifed an	d signed in accorda	ance with Copyright Office re	gulations.				
O Certifcation	• I, the undersigne	nd hereby ce	ertify that (Check o	ne hut only one o	of the hoves )						
Gertification	i, the undersigne	u, nereby ee	inity that (Oncor o	ne, but only one, c	or the boxes.						
	(Owner other	than corpor	ation or partners	hip) I am the owne	er of the cable syster	m as identifed in line 1 of spac	ce B; or				
				partnership) I am not a corporation of		agent of the owner of the cab	le system as identified	i			
	(Officer or pa		an officer (if a corp	oration) or a partne	er (if a partnership) o	of the legal entity identifed as o	owner of the cable sys	tem			
		e, and correc	t to the best of my	-		at all statements of fact contai d are made in good faith.	ned herein				
		<u> </u>	/s/ Mike McG	Guire							
		(e.g., /s	/ John Smith). Bef	ore entering the firs	t forward slash of the	ture to certify this statement.  s /s/ signature, place your curso will avoid enabling Excel's Lotu					
		Typed	or printed name:	Mike McGui	re						
		Title:	(Title of official pos	sition held in corporation	t – Billing Ope on or partnership)	rations					
		Date:	February 23, 20	,10							

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

U.S. Copyright Office

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nama
The Ohio Bell Telephone Company	62893	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act lowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system service of providing secondary transmissions of primary broadcast transmitters, the system scribers and amounts collected from subscribers receiving secondary transmissions pursual For more information on when to exclude these amounts, see the note on page (vii) of the general in paper SA3 form.  During the accounting period did the cable system exclude any amounts of gross receipts for second made by satellite carriers to satellite dish owners?  X NO	tem for the basic shall not include sub- nt to section 119."	Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment For an explanation of interest assessment, see page (viii) of the general instructions in the paper S.		Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- 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 furth 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 Copplease list below the owner, address, first community served, accounting period, and ID number as filing.		
Owner Address		
First community served Accounting period ID number		

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

ACCOUNTING PERIOD: 2017/2

# INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

#### FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that the character and a contract of the contract of the party of	

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

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

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

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

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

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

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

#### **TOTAL OF DSEs**

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

### THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

#### PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

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

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

### **EXAMPLE**:

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

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



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

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

		φο,σο 1.σσ			
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: 2017/2** 

DSE SCHEDULE. PAG	E 11. (CONTINUED)												
4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			SY	STEM ID#							
	The Ohio Bell Telephon	e Company				62893							
	SUM OF DSEs OF CATEGOR		NS:										
	Add the DSEs of each station												
	Enter the sum here and in line	1 of part 5 of this	s schedule.		0.00								
	Instructions:			•		ı							
2	In the column headed "Call S	Sign": list the ca	II signs of all distant stations	s identified by t	he letter "O" in column 5								
	of space G (page 3).		and at station with DO	= #4 D". F									
Computation of DSEs for	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-												
Category "O"	mercial educational station, give the DSE as ".25."  CATEGORY "O" STATIONS: DSEs												
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE							
Gtations	OALL GIGIT	DOL	OALL GIGIT	DOL	OALL GIGIT	DOL							
Add rows as													
necessary.													
Remember to copy													
all formula into new													
rows.													
						·····							
						·····							
						·····							

Name		II Telephone Compa	ny				S	62893
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	figure should correspond with the information given in space J. Calculate only one DSE for each station.  Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period.  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 be carried out at least to the third decimal point. This is the "basis of carriage value" for the station.  Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, 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 third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper							
Capacity	0/10/11/11	C	ATEGORY LAC	STATIONS: (	COMPUTATION	ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	R 3. N JRS O ED BY S	UMBER F HOURS TATION N AIR	4. BASIS OF CARRIAGI VALUE	5. TYPE	6. DS	SE
						x		
			÷	=		X	<u>=</u>	
			÷	=		x	=	
						x x		
							=	
	Add the DSEs	OF CATEGORY LAC Soft each station.  Im here and in line 2 of page 2.		e,		0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efferations in efferations in efferations and effect space I).     Column 2: at your option.     Column 3: Column 4:	e the call sign of each state of the call sign of each state of the condition of the condition of the call sign of the call s	itution for a program as shown by the lett ork programs during number of live, non spond with the informs in the calendar yearn 2 by the figure in	that your system rer "P" in column 7 that optional carris network programs nation in space I. ar: 365, except in a column 3, and giv	was permitted to of space I); and age (as shown by the carried in substi- a leap year. the the result in color	delete under FCC rules the word "Yes" in column 2 itution for programs that lumn 4. Round to no less	2 of were deleted s than the third	rm).
		SU	BSTITUTE-BAS	IS STATIONS	S: COMPUTA	TION OF DSEs	_	
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷		= <mark></mark>		÷		=
		-		=		÷		=
		÷		= =		÷		=
		÷		=		÷		=
	Add the DSEs	of SUBSTITUTE-BASI of each station. Im here and in line 3 of pa		9,	<b>&gt;</b>	0.00		
<b>5</b> Total Number of DSEs	number of DSE: 1. Number o 2. Number o	ER OF DSEs: Give the ames applicable to your system of DSEs from part 2 ● of DSEs from part 3 ● of DSEs from part 4 ●		s in parts 2, 3, and	4 of this schedule	and add them to provide	0.00 0.00 0.00	
	TOTAL NUMBE	R OF DSEs						0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2017/2

LEGAL NAME OF OWNER OF CABLE S The Ohio Bell Telephone Con						S	YSTEM ID# 62893	Name
Instructions: Block A must be compl							02033	
In block A:		oart 6 and part	7 of the DSE cohe	odulo blank ar	ad complete pr	ort 9 (page 16) of	tho	6
If your answer if "Yes," leave the rer schedule.			7 of the DSE sche	edule blank ar	ia compiete pa	art 8, (page 16) oi	ine	U
If your answer if "No," complete bloc			ELEVISION M.	ARKETS				Computation of
Is the cable system located wholly ou effect on June 24, 1981?					ection 76.5 of	FCC rules and re	gulations in	3.75 Fee
Yes—Complete part 8 of the s	schedule—E	OO NOT COM	PLETE THE REMA	AINDER OF F	PART 6 AND 7			
X No—Complete blocks B and C	below.							
	BLOC	CK B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: List the call signs of under FCC rules a instructions for the Satellite Television	and regulation DSE Sche	ons prior to Jui dule. (Note: Th	ne 25, 1981. For fune letter M below r	urther explana	ation of permitt	ed stations, see t	he	
Column 2: Enter the appropri BASIS OF (Note the FCC rule PERMITTED A Stations carried CARRIAGE 76.61(b)(c)]	es and regu d pursuant t	lations cited be o the FCC ma	elow pertain to tho rket quota rules [7	se in effect or 6.57, 76.59(b	n June 24, 198 ), 76.61(b)(c),	76.63(a) referring	y tc	
B Specialty station C Noncommerica D Grandfathered instructions for	l educationa station (76.6 DSE sched	al station [76.5 65) (see parag ule).	9(c), 76.61(d), 76. raph regarding su	63(a) referring	g to 76.61(d)			
E Carried pursuar *F A station previ G Commercial UF M Retransmissior	iously carrie IF station w	ed on a part-tin rithin grade-B	ne or substitute ba contour, [76.59(d)(	•		erring to 76.61(e)	(5)	
Column 3: List the DSE for ea *(Note: For those this schedule to de	stations ide	ntified by the I	•			vorksheet on pag	e 14 of	
1. CALL 2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
	1		l				0.00	
	В	LOCK C: CO	MPUTATION OF	3.75 FEE				
Line 1: Enter the total number of D	SEs from	nart 5 of this	schedule				_	
Line 2: Enter the sum of permitted								
·					roto			
Line 3: Subtract line 2 from line 1. (If zero, leave lines 4–7 bla			•		rate.		0.00	
Line 4: Enter gross receipts from s	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply line 4 by 0.0375 at	nd enter su	ım here						permited/ partially nonpermitted
Line 6: Enter total number of DSE	s from line	3				X		carriage? If yes, see part
Line 7: Multiply line 6 by line 5 and	d antar har	e and on line	2 block 3 cacc	el (page 7)			0.00	9 instructions.

LEGAL NAME OF OWNER OF CABLE SYSTEM:  The Ohio Bell Telephone Company  62893								Name		
BLOCK A: TELEVISION MARKETS (CONTINUED)  1. CALL										6
	SIGN	BASIS	J. DJL	SIGN	BASIS	3. D3L	SIGN	BASIS	J. DOL	
										Computation of 3.75 Fee
·····										
<mark></mark>			•••••			•				
••••										
									••••••	
				<u></u>						

Name	The Ohio Bell 1								S	YSTEM ID#
	The Onio Bell 1	elephone (	Joinpany							62893
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.  A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections									981 ne enterer
	_	PERMITTI	ED DSE EOR STA	TIONS CARRI	FD	ON A PART-TIME AN	ID SHRSTI	THE BASIS		
	1. CALL	2. PRIC		COUNTING		4. BASIS OF		RESENT	6. P	ERMITTED
	SIGN	DSE	Р	ERIOD		CARRIAGE	I	DSE		DSE
									•••••	
<b>7</b> Computation of the Syndicated		"Yes," comple	ete blocks B and C ocks B and C blan	k and complete	_	art 8 of the DSE sched				
Exclusivity			BLOCI	K A. WAJOK	1 -	ELEVISION WARK	<u> </u>			
Surcharge	Is any portion of the or	cable system w	rithin a top 100 majo	or television mar	rket	t as defned by section 7	6.5 of FCC	rules in effect J	une 24,	1981?
	X Yes—Complete	blocks B and	C .			No—Proceed to	part 8			
	BLOCK B: C	arriage of VHF	Grade B Contour	Stations		BLOCK	C: Compu	ıtation of Exem	npt DSE	3
	Is any station listed in commercial VHF stati or in part, over the ca	on that places				Was any station listed nity served by the cab to former FCC rule 76	le system p			
	Yes—List each s  X No—Enter zero a		h its appropriate per part 8.	mitted DSE		Yes—List each st  X No—Enter zero a			ate permi	tted DSE
	CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN								SN	DSE
	SALE SIGN DOL SALE SIGN DOL CALL SIGN DOE CALL SIGN									
								-		
			TOTAL DSEs	0.00				TOTAL DS	SEs	0.00

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:  The Ohio Bell Telephone Company  62893	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE	
Section 1	Enter the amount of gross receipts from space K (page 7)	7
Section 2	A. Enter the total DSEs from block B of part 7	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	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	Surcharge
• Is any	y portion of the cable system within a top 50 television market as defned by the FCC?  Yes—Complete section 3 below.  X No—Complete section 4 below.	
	SECTION 3: TOP 50 TELEVISION MARKET	
Section 3a	• Did your cable system retransmit the signals of any partially distant television stations during the accounting period?  X Yes—Complete part 9 of this schedule.  No—Complete the applicable section below.	
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	
	A. Enter 0.00599 of gross receipts (the amount in section1)	
	B. Enter 0.00377 of gross receipts (the amount in section.1)	
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here	
	D. Multiply line B by line C and enter here	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)	
	Syndicated Exclusivity Surcharge	
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.	
	A. Enter 0.00599 of gross receipts (the amount in section 1)	
	B. Enter 0.00377 of gross receipts (the amount in section 1)	
	C. Multiply line B by 3.000 and enter here	
	D. Enter 0.00178 of gross receipts (the amount in section 1)	
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here	
	F. Multiply line D by line E and enter here	
	G. Add lines A, C, and F. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)	
	Syndicated Exclusivity Surcharge	
	SECTION 4: SECOND 50 TELEVISION MARKET	
Section	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?    X  Yes—Complete part 9 of this schedule.   No—Complete the applicable section below.	
4a	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSE	
	is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.  A. Enter 0.00300 of gross receipts (the amount in section 1)	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$	
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here	
	D. Multiply line B by line C and enter here	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:									
Hame	1	The Ohio Bell Telephone Company	62893							
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.								
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$								
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)								
Surcharge		C. Multiply line B by 3.000 and enter here								
		D. Enter 0.00089 of gross receipts (the amount in section 1)								
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here								
		F. Multiply line D by line E and enter here								
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)								
		Syndicated Exclusivity Surcharge.								
8 Computation of Base Rate Fee	6 was a In blo In blo If you blank What i were lo	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of p checked "Yes," use the total number of DSEs from part 5. lock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. Ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. Ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B be	elow							
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS								
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?								
		Yes—Complete part 9 of this schedule.   X No—Complete the following sections.								
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE								
	Section 1	Enter the amount of gross receipts from space K (page 7)	.27_							
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule.  (If block A of part 6 was checked "Yes,"  use the total number of DSEs from part 5.)	).00 <u> </u>							
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , 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)	<u>-</u>							
		B. Enter 0.00701 of gross receipts  (the amount in section 1) ▶ _ \$ 135,285.48  C. Subtract 1.000 from total DSEs								
		(the figure in section 2) 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	<u> </u>							
	l									

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2017/2

	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
The Oh	io Bell Telephone Company	62893	
	the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4	A. Enter 0.01064 of gross receipts  (the amount in section 1) ▶  \$		8
	B. Enter 0.00701 of gross receipts  (the amount in section 1)		Computation of
	C. Multiply line B by 3.000 and enter here <b>▶</b>	_	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 <b>&gt;</b> \$		
	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	
	ANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channed.		9
In Gener	ral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee		Computation
•	from subscribers located within the station's local service area, from your system's total gross receipts. To take a n, you must:	avantage of this	of Base Rate Fee
station or DSEs an	vide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine d the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	the number of	and Syndicated Exclusivity Surcharge
also com	any portion of your cable system is located within the top 100 television market and the station is not exempt in pute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B be ble system is wholly located outside all major television markets, complete block A only.		for Partially Distant Stations, and
	dentify 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 star o that community.	tion you	Stations
Step 2: Foutside the	For each wholly distant and each partially distant station you carried, determine which of your subscribers were lone station's local service area. A subscriber located outside the local service area of a station is distant to that state token, the station is distant to the subscriber.)		
Step 3: E subscribe	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. For group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the vill have only one subscriber group when the distant stations it carried have local service areas that coincide.		
groups.	ing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your sys	tem's subscriber	
In each s  Identify	ection: the communities/areas represented by each subscriber group.		
• Give the	e call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all ers in the group.	of the	
• lf:			
and 4 of	ystem is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in this schedule; or,		
	ortion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b of this schedule.	lock B,	
Add the	DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	te gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in paper SA3 form.	nstructions	
page. In	te a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the that group). You do not pre-	at is, the total	

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

actual calculations on the form.

# SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62893 The Ohio Bell Telephone Company Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OW The Ohio Bell To						S	YSTEM ID# 62893	Name	
				TE FEES FOR EAG				9	
		SUBSCRIBER GRO	)UP			SUBSCRIBER GRO	UP		
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE	A		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fee	
								and	
								Syndicated	
						<u> </u>		Exclusivity	
								Surcharge	
								for	
								Partially Distant	
			····		······			Stations	
			····					Guarono	
						<u> </u>			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	t Groun	s 19,29	8,927.27	Gross Receipts Sec	cond Group	\$	0.00		
oroso receipto i iro	Cloup	<del>* 10,20</del>	0,027.27	Oross receipts see	John Group	<u>*</u>			
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00		
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	JP		
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE	Α	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
				-					
			····						
			····		······				
				-		<u> </u>			
						<u> </u>			
			<b>.</b>						
							<u></u>		
							····		
Total DSEs	1		0.00	Total DSEs	<u>'</u>		0.00		
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	urth Group	\$	0.00		
Base Rate Fee Thire	d Group	\$	0.00	Base Rate Fee Fou	urth Group	\$	0.00		
				11					
			scriber group	as shown in the boxe	s above.	•	0.00		
Enter here and in blo	оск 3, line 1,	space L (page 7)				\$	0.00		

Name	YSTEM ID# 62893	S						LEGAL NAME OF OWNE The Ohio Bell Tele
	JP	IBER GROUP SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GRO		
9 Computatio	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
Syndicated	<u></u>							
Exclusivity								
Surcharge for								
Partially								
Distant								
Stations								
	0.00			Total DSEs	0.00			Total DSEs
		\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
		\$	d Group	Base Rate Fee Secon	0.00	\$	roup	<b>3ase Rate Fee</b> First G
	SUBSCRIBER GROUP		EIGHTH			SUBSCRIBER GRO	SEVENTH	
	COMMUNITY/ AREA 0				0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	<u></u>							
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
	0.00							

LEGAL NAME OF OWN The Ohio Bell Te			<u> </u>			S	YSTEM ID# 62893	Name
E				TE FEES FOR EAC				
001444		SUBSCRIBER GRO		001111111		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
			<u></u>		<u>.</u>			and
			<u></u>		·····			Syndicated Exclusivity
								Surcharge
								for
								Partially
							<u></u>	Distant
	<u> </u>						<u></u>	Stations
						-		
Total DSEs			0.00	Total DSEs	0.00			
Gross Receipts First	Group	\$ 19,298	8,927.27	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO				I SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····		<del></del>		·····		<u></u>	
T D.C.=			0.00	T			0.00	
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				II				
			scriber group	as shown in the boxe	s above.	¢	0.00	
Enter here and in bloo	ск з, iine 1, s	space L (page /)				\$	0.00	

O Computation  O DSE  Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations  O.00  O.00  O.00	SUBSCRIBER GROU		TE FEES FOR EACH			ephone C	The Ohio Bell Tele
O Computation of Base Rate Ference and Syndicated Exclusivity Surcharge for Partially Distant Stations  O.00 O.00 GROUP O		SIXTH					Bl
Computation  DSE  Base Rate Ference and Syndicated Exclusivity Surcharge for Partially Distant Stations  0.00  0.00  GROUP  0			COMMUNITY ADD A		SUBSCRIBER GRO	FIFTH	COMMUNITY/ ADD A
DSE of Base Rate Fed and Syndicated Exclusivity Surcharge for Partially Distant Stations  0.00 0.00 GROUP 0		DMMUNITY/ AREA		<b>0</b>			COMMUNITY/ AREA
and Syndicated Exclusivity Surcharge for Partially Distant Stations  0.00 0.00  0.00  GROUP 0		DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Syndicated Exclusivity Surcharge for Partially Distant Stations  0.00 0.00 GROUP 0							
Exclusivity Surcharge for Partially Distant Stations  0.00 0.00  0.00  GROUP  0							
Surcharge for Partially Distant Stations  0.00 0.00 0.00 GROUP 0					_	·	
O.00 O.00 GROUP O							
0.00 0.00 0.00 GROUP							
0.00 0.00 0.00 GROUP					 		
0.00 0.00 0.00 GROUP							
0.00 0.00 GROUP					-		
0.00 0.00 GROUP							
0.00 0.00 GROUP							
0.00 0.00 GROUP							
0.00 0.00 GROUP							
0.00 0.00 GROUP		1	Total DSEs	0.00			Total DSEs
0.00 GROUP 0	•	d Casua			•		
GROUP 0	\$	a Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
0	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	<b>3ase Rate Fee</b> First Gi
	SUBSCRIBER GROU	EIGHTH		JP	SUBSCRIBER GRO	SEVENTH	5
DSE			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						·	
					_		
······································							
					-		
						<u> </u>	
0.00			Total DSEs	0.00			Total DSEs
0.00			TOTAL DOLO				
	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
0.00	\$	Group		0.00	\$	Group	Gross Receipts Third G

ACCOUNTING PERIOD: 2017/2

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name The Ohio Bell Telephone Company 62893 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . . . . THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group . . . . . . . . . . . . . . . . Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

ACCOUNTING PERIOD: 2017/2

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name The Ohio Bell Telephone Company 62893 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group . . . . . . . . . . . . . . . . SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group . . . . . . . . . . . . . . . . Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown