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

### SA3E Long Form

### STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY						
DATE RECEIVED	AMOUNT					
8/27/2018	\$					
0/2//2016	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	2018/1				
Period					
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. Check here if this is the system's first filing. If not, enter the system's ID	ess of the cable system on the last day of the counting perion	em the accounting period should s		62827
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM				
	Pacific Bell Telephone Company				
				62827	720181
				62827	2018/1
	1010 N. St. Mary's Street, Room 13-59-B				
	San Antonio, TX 78215-2109				
	INSTRUCTIONS: In line 1, give any business or trade names used to id	dentify the busines	ss and operation of the syste	em unless '	these
С	names already appear in space B. In line 2, give the mailing address of				
System	1 IDENTIFICATION OF CABLE SYSTEM:				
	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 fret comp	nunity served below and rel	ist on nage	1h
_		only the list com	numity served below and ren	ist on page	10
Area Served	with all communities.  CITY OR TOWN	STATE			
First	Los Angeles	CA			
Community	Below is a sample for reporting communities if you report multiple cha		naco G		
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB	GRP#
	Alda	MD	A		1
Sample	Alliance	MD	В		2
	Gering	MD	В		3

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on 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 suffciency of the fling, a determination that would be made by a court of law.

**ACCOUNTING PERIOD: 2018/1** FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 62827 **Pacific 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. CH LINE UP CITY OR TOWN STATE SUB GRP# Los Angeles **Agoura Hills** unity Alhambra Aliso Viejo Altadena Anaheim ns for Arcadia ormation Beaumont ation. Bell **Bell Gardens** Bellflower **Beverly Hills** Bloomington Brea **Buena Park** Burbank Carson Castaic Chino Hills

STATE	CH LINE UP	SUB GRP#	
CA	AA	1	First
CA	AA	1	Commu
CA	AA	1	
CA	AA	1	
CA	AA	1	
CA	AA	1	See instruction
CA	AA	1	additional infor
CA	AA	1	on alphabetizat
CA	AA	1	
 CA	AA	1	
 CA	AA	1	
CA	AA	1	
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CA	AA	1	
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CA	AA	1	
 CA	AA	1	
CA	AA	1	
L	L	L	I

Claremont

Compton

Commerce

Culver City

Dana Point

Fountain Valley

Garden Grove

Colton

Corona Costa Mesa

**Cypress** 

**Del Aire** Downey

Eastvale **El Monte** El Segundo **Fontana** 

Fullerton

Gardena Glendale **Grand Terrace** 

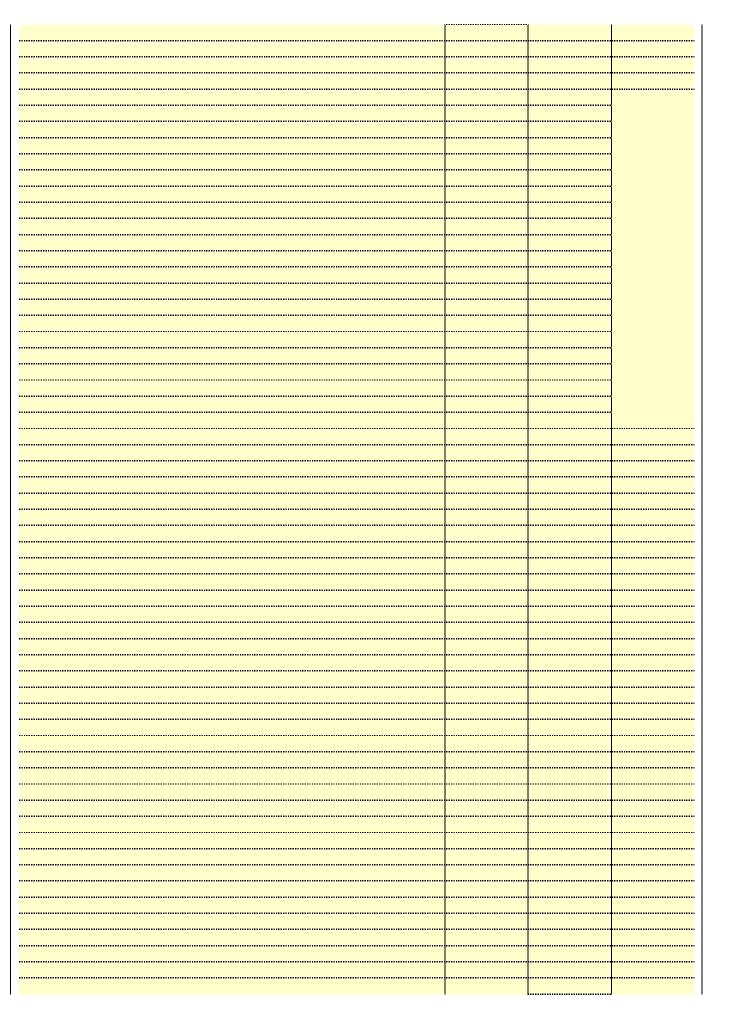
East Los Angeles East San Gabriel

Hawthorne	CA	AA	1
Hidden Hills	CA	AA	1
Highland	CA	AA	1
Huntington Park	CA	AA	1
Inglewood Irvine	CA	AA	1
Inglewood	CA	AA	1
Jurupa Valley	CA	AA	••••••
La Carada Flintridas	CA	AA AA	1
La Canada Flintridge La Crescenta-Montrose	CA	AA AA	11
La Habra	CA	AA AA	1
La Mirada	CA		11
La Mirada	CA	AA	11
La Palma	CA	AA	1
Ladera Ranch	CA	AA	1
Laguna Hills	CA	AA	1
Laguna Niguel	CA	AA	1
Laguna Niguel Laguna Woods Lake Forest	CA	AA	1
Lake Forest	CA	AA	1
Lakewood	CA	AA	1
Lancaster	CA	AA	1
Lawndale	CA	AA	1
Lennox	CA	AA	1
Loma Linda	CA	AA	1
Lomita	CA	AA	1
Long Beach	CA	AA	1
Los Angeles Unincorporated County	CA	AA	1
Lynwood	CA	AA	1
Maywood	CA	AA	<u>.</u>
Mission Viejo	CA	AA	<u>.</u>
Monrovia	CA	AA	<u>'</u>
Montebello	CA	AA	1
	CA	AA AA	I
Monterey Park			1
Moorpark	CA	AA	1
Moreno Valley	CA	AA	1
Newport Beach	CA	AA	1
Norco	CA	AA	1
Oak Park	CA	AA	1
Ojai	CA	AB	2
Orange	CA	AA	1
Orange Unincorporated County	CA	AA	1
Palmdale	CA	AA	1
Paramount	CA	AA	1
Pasadena	CA	AA	1
Placentia	CA	AA	1
Pomona	CA	AA	1
Rancho Cucamonga	CA	AA	1
Rancho Palos Verdes	CA	AA	1
Rancho Santa Margarita	CA	AA	1
Redlands	CA	AA	1
Rialto	CA	AA	1
Riverside	CA	AA	1
Riverside Unincorporated County	CA	AA	1
Rolling Hills Estates	CA	AA	1
Rosemead	CA	AA	1
San Bernardino	CA	AA	1
San Bernardino Unincorporated County	CA	AA	1
San Clemente	CA	AA	1
San Gabriel	CA		1
	CA	AA	1
San Juan Capistrano	<b>(</b>	AA	1
San Marino	CA	AA	1
Santa Ana	CA	AA	1

Add rows as necessary.

Santa Clarita	CA	AA	1
Simi Valley South El Monte	CA	AA	1
South El Monte	CA	AA	1
	CA	AA	1
South Gate			
South Pasadena	CA	AA	1
Stanton	CA	AA	1
Stevenson Ranch	CA CA	AA	1
Temple City	CA	AA	1
Stevenson Ranch Temple City Thousand Oaks	CA	AA	1
Topanga	CA	AA	1
Torrance	CA	AA	1
Torrance Tustin	CA	AA	1
	CA		
Upland Ventura	LA CA	AA	1
Ventura	CA	AC	3
Ventura Unincorporated County	CA	AA	1
Vornon	CA	AA	1
View Park Windsor Hills	CA	AA	1
Villa Park	CA	AA AA	1
Vernon View Park Windsor Hills Villa Park West Athens	CA	AA	1 1
West Helling			
west nollywood	CA CA	AA	1
Westlake Village	CA	AA	1
West Adlens West Hollywood Westlake Village Westminster	CA	AA	1
Westmont	CA	AA	1
Westmont Yorba Linda	CA	AA	1
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Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

Pacific Bell Telephone Company

SYSTEM ID#
62827

### 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		BLOG	CK 2			
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE
Residential:							
<ul> <li>Service to first set</li> </ul>	177,240	\$	19.00	HD Tech Fee	148,036	\$	10.00
<ul> <li>Service to additional set(s)</li> </ul>				Set-Top Box	178,547	T	\$0-\$15
<ul> <li>FM radio (if separate rate)</li> </ul>				Broadcast TV Surcharge	177,240	\$4.	99-\$5.99
Motel, hotel							
Commercial	1,307	\$	20.00				
Converter							
Residential						Ī	
Non-residential							
						T	

### 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		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	\$99 - \$149
Installation: Residential		Fire protection		Wireless Receiver	\$10-\$49
• First set	\$0-\$199	Burglar protection		HD Premium Tier	\$7
Additional set(s)		Other services:		DVR Upgrade Fee	\$50
• FM radio (if separate rate)		Reconnect	\$0-\$35	Vacation Hold	\$ 7.00
Converter		Disconnect			
		Outlet relocation	\$0-\$55		
		Move to new address			

FORM SA3E. PAGE 3.					0./0=====	
LEGAL NAME OF OWN					SYSTEM ID#	Namo
Pacific Bell Tel	lephone Col	mpany			62827	
PRIMARY TRANSMITT	ERS: TELEVISION	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba	system during to ions in effect of 6.61(e)(2) and ( sis, as explaine	he accounting n June 24, 19 (4), or 76.63 (red in the next	g period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrience carriage of cert 1(e)(2) and (4))];	s and low power television stations) ed only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary Transmitters:
				s carried by your	cable system on a substitute program	Television
station was carried • List the station here, basis. For further ir in the paper SA3 for	n here in space only on a subs and also in spa aformation cond orm.	G—but do listitute basis.  ace I, if the staterning substit	t it in space I (thation was carried tute basis station	d both on a substi	ent and Program Log)—if the tute basis and also on some other of the general instructions located as such as HBO, ESPN, etc. Identify	
each multicast stream	associated wit	h a station ac	cording to its ov	er-the-air designa	tion. For example, report multi- h stream separately; for example	
	e channel numl	ber the FCC h	nas assigned to	the television stat	ion for broadcasting over-the-air in	
on which your cable so Column 3: Indicate	ystem carried the in each case v	ne station. whether the st	tation is a netwo	ork station, an inde	may be different from the channel ependent station, or a noncommercial	
(for independent multi For the meaning of the	cast), "E" (for n ese terms, see ation is outside	oncommercia page (v) of the the local serv	l educational), o e general instru vice area, (i.e. "o	or "E-M" (for nonce ctions located in t distant"), enter "Yo	es". If not, enter "No". For an ex-	
Column 5: If you h	ave entered "Y	es" in column	4, you must cor	mplete column 5,	stating the basis on which your tering "LAC" if your cable system	
For the retransmiss of a written agreemen	sion of a distant t entered into o	n or before Ju	eam that is not s une 30, 2009, be	subject to a royalt etween a cable sy	payment because it is the subject stem or an association representing	
For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the FCC. For Mexican or of the second	sion of a distant tentered into o a primary trans simulcasts, also ree categories e location of ea Canadian static	n or before Jumitter or an aco o enter "E". If , see page (v) och station. Fo ons, if any, giv	earn that is not so une 30, 2009, be association repre you carried the of the general or U.S. stations, the the name of the	subject to a royalty etween a cable sy esenting the prima channel on any o instructions locate list the community ne community witle	y payment because it is the subject stem or an association representing ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form.  If the which the station is licensed by the match the station is identifed.	
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For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the FCC. For Mexican or Note: If you are utilizing 1. CALL SIGN  KABC/KABCHD  KAZA/KAZAHD  KAZA/KAZAHD  KCBS/KCBSHD  KCCET/KCETHD  KCOP/KCOPHD  KDOC/KDOCHD  KFTR/KFTRHD	sion of a distant t entered into o a primary trans simulcasts, also aree categories e location of ea Canadian stations multiple characteristics.  2. B'CAST CHANNEL NUMBER 7/1007 54/1054 63 9/1009 2/1002 28/1028 13/1013	n or before Jumitter or an aco enter "E". If, see page (v), ch station. Found, if any, givened line-ups,  CHANN  3. TYPE  OF  STATION  N  I  I  N	eam that is not some 30, 2009, be specially be specially be specially be specially controlled the special por U.S. stations, the the name of the use a separate of U.S. Stations, the the name of the use a separate of U.S. Stations, the the name of the use a separate of U.S. Stations, the the name of the use a separate of U.S. Stations, the the name of the use a separate of U.S. No.  NO.  NO.  NO.  NO.  NO.  NO.  NO.	subject to a royalty etween a cable sy esenting the prima channel on any o instructions locate list the community ne community with space G for each  AA  5. BASIS OF CARRIAGE	y payment because it is the subject stem or an association representing ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. It which the station is licensed by the nawhich the station is identified. It channel line-up.  6. LOCATION OF STATION  Los Angeles, CA  Avalon, CA  Oxnard, CA  Los Angeles, CA  Anaheim, CA	additional information
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For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the FCC. For Mexican or Note: If you are utilizing 1. CALL SIGN  KABC/KABCHD  KABC/KABCHD  KABC/KABCHD  KCBS/KCBSHD  KCBS/KCBSHD  KCOP/KCOPHD  KCOP/KCOPHD  KIIO-LD  KILM  KJLA/KJLAHD  KLCS  KMEX/KMEXHD	sion of a distant t entered into o a primary trans simulcasts, also ree categories e location of ea Canadian stations multiple characteristics.  2. B'CAST CHANNEL NUMBER 7/1007 54/1054 63 9/1009 2/1002 28/1028 13/1013 56/1056 46/1046 10 64 57/1057 58 34/1034	n or before Jumitter or an aco enter "E". If , see page (v) ch station. Fo ons, if any, giv nnel line-ups,  CHANN  3. TYPE  OF STATION  N  I  I  I  I  I  I  I  I  I  I  I  I	eam that is not some 30, 2009, be specially be specially be specially be specially controlled the special of the general of U.S. stations, the the name of the use a separate of U.S. stations, the the name of the use a separate of U.S. stations, the the name of the use a separate of the special of the spec	subject to a royalty etween a cable sy esenting the prima channel on any o instructions locate list the community ne community with space G for each  AA  5. BASIS OF CARRIAGE	y payment because it is the subject stem or an association representing ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. It is which the station is licensed by the which the station is identifed. In the channel line-up.  6. LOCATION OF STATION  Los Angeles, CA  Avalon, CA  Oxnard, CA  Los Angeles, CA  Los Angeles, CA  Los Angeles, CA  Los Angeles, CA  Anaheim, CA  Ontario. CA  Dontario. CA  Ventura, CA  Los Angeles, CA	additional information

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Pacific Bell Telephone Company 62827 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF CARRIAGE (Yes or No) NUMBER **STATION** (If Distant) Long Beach, CA **KSCI** 18 No ı **KTBN** 40 No Santa Ana, CA See instructions for additional information 5/1005 KTLA/KTLAHD ı No Los Angeles, CA on alphabetization. KTTV/KTTVHD 11/1011 ı No Los Angeles, CA 24 Ε San Bernardino, CA **KVCR** No KVEA/KVEAHD 52/1052 ı No Corona, CA KVMD/KVMDHD 31/1031 No Twentynine Palms, CA **KVME** 20 ı No Bishop, CA KWHY/KWHYHD 22/1022 ı Los Angeles, CA No KXLA/KLXAHD 44/1044 ı Rancho Palos Verdes, CA No **KZSW-LP** 27 No Hemet, CA

**ACCOUNTING PERIOD: 2018/1** FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **Pacific Bell Telephone Company** 62827 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

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

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

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

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

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

**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is 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				
KABC/KABCHD	7/1007	N	No		Los Angeles, CA				
KAZA/KAZAHD	54/1054	I	No		Avalon, CA				
KBEH	63	I	No		Oxnard, CA				
KCAL/KCALHD	9/1009	l	No		Los Angeles, CA				
KCBS/KCBSHD	2/1002	N	No		Los Angeles, CA				
KCET/KCETHD	28/1028	E	Yes	0	Los Angeles, CA				
KCOP/KCOPHD	13/1013	ı	No		Los Angeles, CA				
KDOC/KDOCHD	56/1056	ı	No		Anaheim, CA				
KFTR/KFTRHD	46/1046	ı	No		Ontario. CA				
KIIO-LD	10	ı	No		Los Angeles, CA				
KILM	64	l	No		Barstow, CA				
KJLA/KJLAHD	57/1057	l	No		Ventura, CA				
KLCS	58	E	Yes	0	Los Angeles, CA				
KMEX/KMEXHD	34/1034	I	No		Los Angeles, CA				
KNBC/KNBCHD	4/1004	N	No		Los Angeles, CA				
KOCE/KOCEHD	50/1050	E	Yes	0	Huntington Beach, CA				
KPXN/KPXNHD	30/1030	I	No		San Bernardino, CA				
KRCA/KRCAHD	62/1062	ı	No		Riverside. CA				

**ACCOUNTING PERIOD: 2018/1** FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **Pacific Bell Telephone Company** 62827 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. · List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	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
KSCI	18	I	No		Long Beach, CA
KTBN	40	I	No		Santa Ana, CA
KTLA/KTLAHD	5/1005	I	No		Los Angeles, CA
KTTV/KTTVHD	11/1011	l	No		Los Angeles, CA
KVCR	24	Е	Yes	О	San Bernardino, CA
KVEA/KVEAHD	52/1052	l	No		Corona, CA
KVMD/KVMDHD	31/1031	I	No		Twentynine Palms, CA
KVME	20	l	No		Bishop, CA
KWHY/KWHYHD	22/1022	l	No		Los Angeles, CA
KXLA/KLXAHD	44/1044	I	No		Rancho Palos Verdes, CA
KZSW-LP	27	l	No		Hemet, CA

Transmitters:

Television

FORM SA3E. PAGE 3.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Pacific Bell Telephone Company

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 Primary

substitute program basis, as explained in the next paragraph.

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

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

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	AC	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KABC/KABCHD	7/1007	N	No		Los Angeles, CA
KAZA/KAZAHD	54/1054	ı	No		Avalon, CA
KBEH	63	l	No		Oxnard, CA
KCAL/KCALHD	9/1009	I	No		Los Angeles, CA
KCBS/KCBSHD	2/1002	N	No		Los Angeles, CA
KCET/KCETHD	28/1028	Е	Yes	0	Los Angeles, CA
KCOP/KCOPHD	13/1013	I	No		Los Angeles, CA
KDOC/KDOCHD	56/1056	l	No		Anaheim, CA
KFTR/KFTRHD	46/1046	I	No		Ontario. CA
KIIO-LD	10	I	No		Los Angeles, CA
KILM	64	I	No		Barstow, CA
KJLA/KJLAHD	57/1057	I	No		Ventura, CA
KLCS	58	Е	No		Los Angeles, CA
KMEX/KMEXHD	34/1034	I	No		Los Angeles, CA
KNBC/KNBCHD	4/1004	N	No		Los Angeles, CA
KOCE/KOCEHD	50/1050	Е	No		Huntington Beach, CA
KPXN/KPXNHD	30/1030	I	No		San Bernardino, CA
KRCA/KRCAHD	62/1062	I	No		Riverside, CA

**ACCOUNTING PERIOD: 2018/1** FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **Pacific Bell Telephone Company** 62827 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. · List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AC	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KSCI	18	I	No		Long Beach, CA
KTBN	40	I	No		Santa Ana, CA
KTLA/KTLAHD	5/1005	I	No		Los Angeles, CA
KTTV/KTTVHD	11/1011	l	No		Los Angeles, CA
KVCR	24	E	Yes	0	San Bernardino, CA
KVEA/KVEAHD	52/1052	I	No		Corona, CA
KVMD/KVMDHD	31/1031	I	No		Twentynine Palms, CA
KVME	20	I	No		Bishop, CA
KWHY/KWHYHD	22/1022	I	No		Los Angeles, CA
KXLA/KLXAHD	44/1044	I	No		Rancho Palos Verdes, CA
KZSW-LP	27	I	No		Hemet, CA

ACCOUNTING PERIOD: 2018/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62827 **Pacific 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: 2018/1			
LEGAL NAME OF OWNER OF CAR							SYSTEM ID#	Name			
Pacific Bell Telephone Co	ompany	/					62827				
SUBSTITUTE CARRIAGE: SPECIAL STATEMENT 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 CO								Carriage: Special			
Note: If your answer is "No", le	eave the	rest of this pag	ge blank. If your answer is '	Yes," you mu	st comple	te the pro	ogram	Program Log			
log in block 2.  2. LOG OF SUBSTITUTE PF In General: List each substitute clear. If you need more space,     Column 1: Give the title of e period, was broadcast by a dist under certain FCC rules, regula SA3 form for futher information titles, for example, "I Love Lucy     Column 2: If the program wa     Column 3: Give the call sign     Column 4: Give the broadca the case of Mexican or Canadia     Column 5: Give the month a first. Example: for May 7 give "s     Column 6: State the times w to the nearest five minutes. Exa stated as "6:00–6:30 p.m."     Column 7: Enter the letter "I to delete under FCC rules and gram was substituted for progra effect on October 19, 1976.	e prograi please a every nor tant stati- ations, on n. Do not y" or "NB as broad n of the s ast station and day very 5/7." when the ample: a	m on a separa attach additional attach additional attach additional and that your authorizational tuse general of A Basketball: locast live, entertation broadcan's location (thins, if any, the when your syssubstitute proprogram carrillisted program ons in effect du	al pages. ision program (substitute pur cable system substitute pur cable system substitute pur cable system substitute pur cable system substitute pur categories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute program to community to which the community with which the stem carried the substitute pur carried the substitute pur carried by a system from 6:01:10 was substituted for programing the accounting period.	rogram) that, at for the program instruction "basketball".  o."  m. station is licent station is identerogram. Use table system.  5 p.m. to 6:20 mming that you enter the letter	during the ramming on slocated List specured by the tiffied). numerals List the time is a consistent of the time i	e account of another in the pa ific progra ne FCC or , with the mes accu should be n was requested p	ing r station aper am r, in month urately e quired				
	.0717117	5 DD00D444			N SUBS		7. REASON				
	LIVE?	E PROGRAM  3. STATION'S		5. MONTH	AGE OC 6.	TIMES	FOR DELETION				
Ye	es or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM	_	ТО				
						_					
						_					
						_					
						-=					
						_					

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

**ACCOUNTING PERIOD: 2018/1** FORM SA3E, PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62827 **Pacific Bell Telephone Company** 

### J

### Part-Time Carriage Log

### PART-TIME CARRIAGE LOG

In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages.

Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G.

Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred 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."

				7 12	F PART-TIME CAP	T T			
CALL SIGN	WHEN CARRIAGE OCCURRED HOURS			CALL SIGN	WHEN CARRIAGE OCCURRED HOURS				
	DATE FROM		OUR	TO		DATE	FROM	TO	
			_						
			_					_	
			_					_	
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								-=-	
			_						
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			_					_	
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			_=_						
			_					_	

LEG	AL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#			
Pa	cific Bell Telephone Company			62827	, Name		
Ins all a (as pag	OSS RECEIPTS tructions: The figure you give in this space determines the form you fle and the amount (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 be (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s) during the accounting period.  PORTANT: You must complete a statement in space P concerning gross receipts.	ndary	transme this a	ission service	<b>K</b> Gross Receipts		
• Cor • Cor • If you fee • If you accord	YRIGHT ROYALTY FEE actions: Use the blocks in this space L to determine the royalty fee you owe: implete block 1, showing your minimum fee. implete 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 art from 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 prompanying this form and attach the schedule to your statement of account.	arts of	the DS	E Schedule	Copyright Royalty Fee		
blo	ck 3 below.						
3 b	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.  art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho						
2 in	block 4 below.				_		
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.  Line 1. Enter the amount of gross receipts from space K  Line 2. Multiply the amount in line 1 by 0.01064  Enter the result here.						
	This is your minimum fee.	\$		601,656.28			
Block 2	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 colur "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting peri   X Yes—Complete the DSE schedule.  No—Leave block 3 below blank and colored in the part 8, section 3 or	nn 4, y od?	ou mus	block 4.			
Block 3	4, or part 9, block A of the DSE schedule. If none, enter zero		\$	702.46			
	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	\$		702.46			
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		\$	601,656.28	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	-		0.00	submitting additional deposits under		
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)						
	Line 4. FILING FEE. \$ 725.00						
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.  Add Lines 1, 2 and 3 of block 4 and enter total here	\$		602,381.28	appropriate form for submitting the additional fees.		
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. ( general instructions located in the paper SA3 form for more information.)	See pa	age (i) c	of the			

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#									
Name	Pacific Bell Telephone Company		62827									
M Channels		nber of channels on which the cable system carried television broadcast station m's total number of activated channels, during the accounting period.	ıs									
	1. Enter the total number of channels on		49									
	system carried television broadcast sta	tions										
	2. Enter the total number of activated ch	annels										
	on which the cable system carried tele-	vision broadcast stations	711									
	and nonbroadcast services											
N Individual to Be Contacted	ted											
for Further Information	Name Diane Bellinger	Telephone 210-3	51-4805									
information	Address 1010 N. St. Mary's Str. (Number, street, rural route, apartme	eet, Room 13-59-B nt, or suite number)										
	San Antonio, TX 7821	5										
	(City, town, state, zip)											
	Email dg7796@att.co	pm Fax (optional) 210-246-8199										
	CERTIFICATION (This statement of acco	unt must be certifed and signed in accordance with Copyright Office regulation	S.									
O Certifcation	• I, the undersigned, hereby certify that (Ch	eck one. but only one. of the boxes.)										
Continuation	_											
	(Owner other than corporation or par	tnership) I am the owner of the cable system as identifed in line 1 of space B; or										
		on or partnership) I am the duly authorized agent of the owner of the cable systemer is not a corporation or partnership; or	n as identified									
	(Officer or partner) I am an officer (if a in line 1 of space B.	a corporation) or a partner (if a partnership) of the legal entity identifed as owner of	the cable system									
		t and hereby declare under penalty of law that all statements of fact contained here of my knowledge, information, and belief, and are made in good faith.	in									
	X /s/ Mike	McGuire										
	(e.g., /s/ John Smith	ignature on the line above using an "/s/" signature to certify this statement.  Before entering the first forward slash of the /s/ signature, place your cursor in the be /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compa										
	Typed or printed r	name: Mike McGuire										
	(Title of office	nt Vice President – Billing Operations ial position held in corporation or partnership)										
	Date: August 23	, 2010										

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
Pacific Bell Telephone Company	62827	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by a lowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for service of providing secondary transmissions of primary broadcast transmitters, the system shall rescribers and amounts collected from subscribers receiving secondary transmissions pursuant to see For more information on when to exclude these amounts, see the note on page (vii) of the general instruction paper SA3 form.  During the accounting period did the cable system exclude any amounts of gross receipts for secondary made by satellite carriers to satellite dish owners?	or the basic not include sub- ection 119."	Special Statement Concerning Gross Receipts Exclusion
X NO  YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address  Name Mailing Address  Name Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 for		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	- < 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,  space L, (page 7)	erest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further ass 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 Copyrigh please list below the owner, address, first community served, accounting period, and ID number as given 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: 2018/1

## INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

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

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

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

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

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

**Step 2:** Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space C of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1)

calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

Step 3: Multiply the result of step 1 by the result of step 2. This gives

**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
in	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
3	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

		40,0000			
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: 2018/1** 

DSE SCHEDULE. PAG											
1	LEGAL NAME OF OWNER OF CABL				SY	STEM ID#					
•	Pacific Bell Telephone (	Company				62827					
	SUM OF DSEs OF CATEGOR	RY "O" STATION	S:								
	<ul> <li>Add the DSEs of each station</li> </ul>										
	Enter the sum here and in line	1 of part 5 of this	schedule.		1.00						
2	Instructions:										
2	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3).										
Computation	In the column headed "DSF"	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" STATION	IS: DSEs							
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
	KCET/KCETHD	0.250									
	KLCS	0.250									
	KOCE/KOCEHD	0.250									
	KVCR	0.250									
Add rows as											
necessary.		<b> </b>									
Remember to copy											
all formula into new											
rows.											

Name		NNER OF CABLE SYSTEM: elephone Company	,					YSTEM ID# 62827				
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2: figure should co Column 3: Column 4: be carried out a Column 5: give the type-va Column 6:	the call sign of all dista For each station, give the prespond with the information of the prespond with the information of the figure in coluit least to the third decir For each independent static as ".25."  Multiply the figure in co	he number of houmation given in some total number of the total number of the figure of	ars your cable system pace J. Calculate of if hours that the starter in column 3, and the "basis of carriag type-value" as "1.0. ure in column 5, and	m carried the stanly one DSE for tion broadcast or give the result in ge value" for the "For each netword give the result the point of the standard give the result give the standard give th	ation during the accounting the accounting each station.  If you have the air during the accounting the account of the account	ounting period. his figure must ucational station,					
Capacity	CATEGORY LAC STATIONS: COMPUTATION OF DSEs											
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	R 3. JRS ED BY	NUMBER OF HOURS STATION ON AIR	4. BASIS O CARRIAG VALUE	F 5. TYPE		SE.				
			÷ -		=	x	<u>=</u>					
			÷			x x	<u>-</u>					
			÷		=	x	=					
					=	x						
			_		=	x x	=					
			÷		=	x	=					
	Add the DSEs of	OF CATEGORY LAC Soft each station. In here and in line 2 of parts		dule,	▶	0.00						
Computation of DSEs for Substitute-Basis Stations	Was carried be tions in effect     Broadcast on space I).     Column 2: For at your option. The Column 3: En Column 4: Di	by your system in substited on October 19, 1976 (in e or more live, nonnetwood each station give the his figure should correstret the number of days ivide the figure in column	itution for a progras shown by the ork programs durin number of live, n spond with the infis in the calendar yn 2 by the figure	am that your syster letter "P" in columning that optional carronnetwork program ormation in space I year: 365, except in in column 3, and gi	n was permitted 7 of space I); an riage (as shown b as carried in subs a leap year. ve the result in c	Programs) if that station: to delete under FCC rule id y the word "Yes" in column stitution for programs that column 4. Round to no lethe general instructions	2 of t were deleted es than the third	rm).				
		SUI	BSTITUTE-BA	ASIS STATION	( )	ATION OF DSEs	1					
	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				
		÷					÷	=				
		÷		=			<del>-</del>	=				
		÷		=			÷	=				
		÷		=			÷	=				
	Add the DSEs of	÷ DF SUBSTITUTE-BASI each station. h here and in line 3 of pa		= dule,		0.00	)	=				
<b>5</b> Total Number	number of DSEs at 1. Number of [	applicable to your systen DSEs from part 2●		xes in parts 2, 3, and	d 4 of this schedu	le and add them to provid	1.00					
of DSEs		OSEs from part 4				<u></u>	0.00					
	3. Number of L	OSEs from part 4 ●					<u> </u>					
	TOTAL NUMBER	OF DSEs					·	1.00				

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2018/1

LEGAL NAME OF O							S	YSTEM ID# 62827	Name
Instructions: Bloc In block A: • If your answer if 's schedule. • If your answer if '	"Yes," leave the re	emainder of p		7 of the DSE sche	edule blank aı	nd complete pa	art 8, (page 16) of	the	6
		l	BLOCK A: T	ELEVISION M.	ARKETS				Computation of
	1981?	schedule—D	•	aller markets as de				gulations in	3.75 Fee
		BLOC	K B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulations  e DSE Scheen	ons prior to Jui dule. (Note: Ti	part 2, 3, and 4 of ne 25, 1981. For fu ne letter M below r Act of 2010.)	urther explana	ation of permitt	ed stations, see th	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfathered instructions fo E Carried pursus *F A station pre	lles and reguled pursuant to on as defined all educations of station (76.6 or DSE sched ant to individuation wiously carried the station w	lations cited boot the FCC ma  I in 76.5(kk) (7  Il station [76.565) (see paragule).  I ial waiver of F  I d on a part-tin ithin grade-B	ne or substitute ba contour, [76.59(d)(	ose in effect of 76.57, 76.59(b) re)(1), 76.63(a) 63(a) referring bstitution of g	n June 24, 198 a), 76.61(b)(c), a) referring to 7 g to 76.61(d) irandfathered s	76.63(a) referring 6.61(e)(1 stations in the		
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on page	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
KCET/KCET	C	0.25	CICIT	B) (C)C		GIGIT	B/ (CIC		-
KLCS	С	0.25				-			
KOCE/KOC		0.25							
<b></b>									
KVCR	С	0.25							
		•						1.00	
									-
		В	LOCK C: CO	MPUTATION OF	- 3.75 FEE				-
Line 1: Enter the									
Line 2: Enter the	sum of permitte	a USEs fror	n block B ab	ove					
Line 3: Subtract (If zero, le				r of DSEs subject 7 of this schedu		rate.			
Line 4: Enter gro	ss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375 a	and enter su	m here				x		permited/ partially nonpermitted carriage?
Line 6: Enter tota	al number of DSI	Es from line	3						If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 ar	nd enter her	e and on line	2, block 3, spac	e L (page 7)	) 		0.00	

acific Bell	Telephone Com	pany						4STEM ID# 62827	Name
		BLOCK	A: TELEVIS	ION MARKETS	S (CONTIN	UED)	1		•
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation of 3.75 Fee
								••••••	5 6 66
								•••••	
								••••••	
								•••••	
								<b></b>	
								<b></b>	
			. <mark></mark>						

Name	Pacific Bell Tel		0.012							48TEM ID# 62827	
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the of Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the Fot A—Part-time spi 76.59( B—Late-night pr 76.61( S—Substitute ca genera Column 5: Indicate Column 6: Comparion block	or to June 25, call sign for eather DSE for the DSE for the accounting the basis of CC rules and ecialty progra (d)(1),76.61(e rogramming: (e)(3)).  Farriage under all instructions the station's the the DSE fig. B, column 3 (e) information you	1981, under former ach distant station his station for a sing period and year arriage on which the regulations cited by mming: Carriage, ()(1), or 76.63 (refectoriage under FC certain FCC rules, in the paper SA3 DSE for the curren ures listed in column of part 6 for this state ungive in columns	DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS						e entere	
		PERMITT	ED DSE FOR STA	TIONS CARRI	ΕD	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS			
	1. CALL SIGN	2. PRIO		COUNTING ERIOD		4. BASIS OF CARRIAGE		RESENT DSE	6. P	ERMITTED DSE	
1	0.014			_				- C		BOL	٦
	Instructional Block	h must be see	anloted								_
7	Instructions: Block A In block A:	t must be con	ipietea.								
Computation	If your answer is	"Yes," comple	ete blocks B and C	, below.							
of the	If your answer is	"No," leave b	locks B and C blar	k and complete	pa	art 8 of the DSE sched	ule.				
Syndicated			BLOC	K A: MAJOR	TI	ELEVISION MARK	ET				
Exclusivity Surcharge	a la any partian of the	abla avatam v	uithin a tan 100 mai	or tolovicion mar	·ko	t as defned by section 7	's E of ECC	ruloo in offoot l	uno 24	10012	
Surcharge	l <u> </u>	•		or television mai	ĸe			rules ili ellect 3	une 24,	1901!	
	X Yes—Complete	DIOCKS B and	10.			No—Proceed to	рап в				
	BLOCK B: Ca	arriage of VHI	F/Grade B Contou	Stations		BLOCK	C: Compu	tation of Exem	pt DSEs	<b>i</b>	
	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		th its appropriate per part 8.	mitted DSE		Yes—List each st  X No—Enter zero a			ate permi	tted DSE	
	044.0:5::	205	0	505		0.11.0:2::	505	0411.51		B05	
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	iN	DSE	
			-								
			-								
				<b>.</b>							
							<del> </del>				
				-							
	-	-	TOTAL DSEs	0.00		·		TOTAL DS	Es	0.00	

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:  Pacific Bell Telephone Company	62827	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	,546,643.04	7
Section	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Exclusivity Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC?  X Yes—Complete section 3 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?      X Yes—Complete part 9 of this schedule.  No—Complete the applicable section below.  If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE	:	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	-	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	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?		
4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.  If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.  A. Enter 0.00300 of gross receipts (the amount in section 1)	:	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		

Name	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM: SYST	TEM ID#
Namo	F	Pacific Bell Telephone Company	62827
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)	
of the Syndicated 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	<u></u> .
	Instruc	ctions:	
8	You mi	nust 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.  Dock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation	• If you	ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	
of Base Rate Fee	• If you 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	
Dage Mate : 55		is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
  -		ocated within that station's local service area and others were located outside that area. For the definition of a station's "local	
	service	e area," see page (v) of the general instructions.	
		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?	
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ _\$	
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)▶	
	Section		
	3	If the figure in section 2 is <b>4.000</b> 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
		pase rate ree.	<u></u> .

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2018/1

LEGAL N	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Pacif	c Bell Telephone Company	62827	Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4			8
	A. Enter 0.01064 of gross receipts  (the amount in section 1)  **State		O
		_	
	B. Enter 0.00701 of gross receipts  (the amount in section 1)		Computation of
			Base Rate Fee
	C. Multiply line B by 3.000 and enter here	_	
	D. Enter 0.00330 of gross receipts		
	(the amount in section 1) \$		
	E. Subtract 4.000 from total DSEs		
	(the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here <b>&gt;</b>		
	G. Add lines A, C, and F. This is your base rate fee.	<del></del>	
	Enter here and in block 3, line 1, space L (page 7)  Base Rate Fee	0.00	
	base rate ree	0.00	
IMPOF	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca	st signals shall	
instead Space	be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channels	I line-ups in	9
-	o. <b>eral:</b> If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee	e, to exclude	Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take ac on, you must:	dvantage of this	of
			Base Rate Fee and
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine		Syndicated
DSEs	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for		Exclusivity Surcharge
_	: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		for
also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in properties a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B becable system is wholly located outside all major television markets, complete block A only.		Partially Distant Stations, and
	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 stat to that community.	ion you	Stations
	For each wholly distant and each partially distant station you carried, determine which of your subscribers were lo	cated	
	the 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.)	ition (and, by	
	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant.	Each	
	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.	at a cable	
groups		em's subscriber	
	section: 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 to all	of the	
subscr • If:	bers in the group.		
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in	n parts 2, 3,	
2) any	of this schedule; or, portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b 6 of this schedule.	lock B,	
•	ne 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 general in paper SA3 form.	nstructions	
• Comp	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the		
	In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that or that group's complement of stations and total gross receipts from the subscribers in that group). You do not nee		

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actual calculations on the form.

# SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62827 Pacific 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 OWN Pacific Bell Telep						S	YSTEM ID# 62827	Name
E	BLOCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRII	BER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				KVCR	0.25			Base Rate Fee
				KCET/KCETHD	0.25			and
				KLCS KOCE/KOCEHD	0.25			Syndicated
				KOCE/KOCEHD	0.25			Exclusivity
								Surcharge
							<del></del>	for
			<b>.</b>					Partially Distant
	····		•				····	Stations
			·					Stations
	····		·		<u> </u>		····	
			·					
			<b>†</b>					
					<b>-</b>			
Total DSEs	-		0.00	Total DSEs	1		1.00	
Gross Receipts First (	Group	s 56,433	,840.99	Gross Receipts Secon	d Group	\$	19,238.80	
0.000 . 1000 ptoot .	2. oup		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		. а С. Сар		10,200.00	
Base Rate Fee First (		\$	0.00	Base Rate Fee Secon		\$	204.70	
	THIRD	SUBSCRIBER GROU			FOURTH	SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
KCET/KCETHD	0.25							
KVCR	0.25		<b>.</b>					
			<b>.</b>	-				
			<u>.</u>			-	····	
			·					
	····		<del> </del>		<del> </del>		····	
			<b>†</b>		<b>+</b>			
			<b>†</b>					
			<b>†</b>		<u> </u>			
			<u> </u>					
Total DSEs			0.50	Total DSEs			0.00	
Gross Receipts Third	Group	\$ 93	,563.25	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third	Group	\$	497.76	Base Rate Fee Fourth	ı Group	\$	0.00	
	•	-			•	-		
			riber group	as shown in the boxes a	bove.		<b>700</b> 10	
Enter here and in bloc	k 3, line 1, s	space L (page 7)				\$	702.46	

LEGAL NAME OF OWNE Pacific Bell Telepl						S	YSTEM ID# 62827	Name
		-		TE EEFO FOD F*0		IDED CDOLID	02021	
BI		SUBSCRIBER GRO		TE FEES FOR EAC		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9
CALL CION	DOE	CALL SIGN	DOE	CALL CICN	DOE	CALL CICN	DOE	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
	···			·				and
								Syndicated
								Exclusivity
			. <mark>.</mark>					Surcharge
								for
			······································		····	<b>-</b>	·····	Partially Distant
						-		Stations
		-	•				•••••	
	<mark>.</mark>							
					<u></u>			
					·····			
Total DSEs			0.00	Total DSEs		Į I	0.00	
Gross Receipts First G	roun	\$	0.00	Gross Receipts Sec	and Group	\$	0.00	
Cross recorpts i list C	Toup	<u> </u>	0.00	Cross receipts occ	она Огоар	•	0.00	
<b>Base Rate Fee</b> First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO	UP		EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
			······································				<u> </u>	
	···	-	······································		·····	-		
		-			•••••	-		
							<u> </u>	
		<b></b>			••••		·····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	•				- 1-			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
				Н				
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE Pacific Bell Telep							62827	Name
В				TE FEES FOR EAC				
	FIRST	SUBSCRIBER GRO				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
								and
								Syndicated
	-					-		Exclusivity
			···					Surcharge for
			···					Partially
		-						Distant
								Stations
			<u></u>					
			<u></u>					
	<u> </u>		<u></u>					
			···					
Total DSEs			0.00	Total DSEs		Ц	0.00	
Gross Receipts First G	roup	\$ 56,433	3,840.99	Gross Receipts Sec	and Group	\$ 19,238.80		
Gioss Receipts Filst G	Ιουρ	3 30,430	5,040.99	Gloss Receipts Sec	ona Group	3	19,230.00	
<b>Base Rate Fee</b> First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	I SUBSCRIBER GRO	)UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	٩	0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			···					
		-						
		-						
			<u></u>					
			<u></u>				<u></u>	
			•				·····	
Total DSEs			0.00	Total DSEs	•	-	0.00	
Gross Receipts Third (	Group	\$ 93	3,563.25	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				<u>II</u>				
Base Rate Fee: Add th		e fees for each subs space L (page 7)	criber group	as shown in the boxe	s above.	\$	0.00	

Name	YSTEM ID# 62827	S			•			LEGAL NAME OF OWNE Pacific Bell Teleph
				TE FEES FOR EACH				BL
9	JP <b>0</b>	SUBSCRIBER GROU	SIXTH	COMMUNITY/ADEA		SUBSCRIBER GRO	FIFTH	COMMUNITY/ ADE A
Computatio			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicated Exclusivity							·	
Surcharge								
for								
Partially							·	
Distant Stations							·	
Clations							-	
							·	
		<b></b>					···	
	0.00	Ц	<u> </u>	Total DSEs	0.00		1 1	Total DSEs
	-	_			_	_		
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	EIGHTH		JP	SUBSCRIBER GRO	SEVENTH	S
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
							-	
			i l		ļ		. <mark>.</mark>	
	0.00			Total DSEs	0.00			Total DSEs
	0.00		Group	Total DSEs Gross Receipts Fourth	0.00		Group	Total DSEs Gross Receipts Third G
	-	\$	Group			\$	Group	

ACCOUNTING PERIOD: 2018/1

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Pacific Bell Telephone Company 62827 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 Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

ACCOUNTING PERIOD: 2018/1

FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Pacific Bell Telephone Company 62827 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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown