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.

STATEMENT OF ACCOUNT for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

SA3E Long Form

Return completed workbook by email to:

coplicsoa@loc.gov

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

| Α | ACCOUNTING PERIOD COVERED BY | THIS STATEMENT: | | | | | | | | |
|----------------------|---|--|---------------------------------------|---------------|--------|--|--|--|--|--|
| Accounting Period | 2018/1 | | | | | | | | | |
| B Owner | Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the business of the cable system If there were different owners during the accounting period, only the owner on the last day of the accounting period should submi a single statement of account and royalty fee payment covering the entire accounting perioa Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. | | | | | | | | | |
| | LEGAL NAME OF OWNER/MAILING ADDRES | SS OF CABLE SYSTEM | | | | | | | | |
| | Bellsouth Telecommunications | , LLC | | | | | | | | |
| | | | | 06318 | 020181 | | | | | |
| | | | | 063180 | 2018/1 | | | | | |
| С | 1010 N. St. Mary's Street, Room San Antonio, TX 78215-2109 INSTRUCTIONS: In line 1, give any busines | s or trade names used to identify the busin | . , | | | | | | | |
| | names already appear in space B. In line 2, | give the mailing address of the system, if d | ifferent from the address give | en in space | В. | | | | | |
| System | 1 | | | | | | | | | |
| | 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 instruct | tions, see page 1b. Identify only the frst cor | nmunity served below and re | elist on page | e 1b | | | | | |
| Area | with all communities. | | | | | | | | | |
| Served | CITY OR TOWN | STATE | | | | | | | | |
| First | Abita Springs | LA | | | | | | | | |
| Community | Below is a sample for reporting communitie | | | 1 | | | | | | |
| | CITY OR TOWN (SAMPLE) | STATE | CH LINE UP | SUB | GRP# | | | | | |
| Sample | Alda | MD | A B | | 2 | | | | | |
| | Alliance Gering | MD MD | B | | 3 | | | | | |
| | Gennig | | B | | 5 | | | | | |
| Privacy Act Notic | e: Section 111 of title 17 of the United States Code authori | izes the Copyright Offce to collect the personally ident | ifying information (PII) requested on | n th | | | | | | |
| | ocess your statement of account. PII is any personal inform | | · · · | | | | | | | |
| | ding PII, you are agreeing to the routine use of it to establis pared for the public. The effect of not providing the PII requ | | - | | | | | | | |

FOR COPYRIGHT OFFICE USE ONLY

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AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

8/27/2018

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.

| FORM SA3E. PAGE 1b. | | | | 1 | | | | | | | |
|--|--------------------|------------|------------|------------------------|--|--|--|--|--|--|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM: | | | SYSTEM ID# | | | | | | | | |
| Bellsouth Telecommunications, LLC | | | 063180 | | | | | | | | |
| Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as do 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 of system identification hereafter known as the "first community." Please use it as the first community on all future filings. | | | | | | | | | | | |
| Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parenthes 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 (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns | d a subscriber gro | | | | | | | | | | |
| CITY OR TOWN | STATE | CH LINE UP | SUB GRP# | | | | | | | | |
| Abita Springs | LA | AA | 1 | First | | | | | | | |
| Ama | LA | AA | 1 | Community | | | | | | | |
| Amite | LA | AA | 2 | | | | | | | | |
| ARABI | LA | AA | 1 | | | | | | | | |
| AVONDALE | LA | AA | 1 | | | | | | | | |
| Bayou Cane | LA | AA | 3 | See instructions for | | | | | | | |
| Belle Chasse | LA | AA | 1 | additional information | | | | | | | |
| Bogalusa | LA | AA | 3 | on alphabetization. | | | | | | | |
| Bourg | LA | AA | 1 | | | | | | | | |
| Boutte | LA | AA | 1 | | | | | | | | |
| BRIDGE CITY | LA | AA | 1 | Add rows as necessary. | | | | | | | |
| Chackbay | LA | AA | 1 | Add Tows as necessary. | | | | | | | |
| Chalmette | LA | AA | 1 | | | | | | | | |
| COVINGTON | LA | AA | 1 | | | | | | | | |
| Destrehan | LA | AA | 1 | | | | | | | | |
| Franklinton | LA | AA | 2 | | | | | | | | |
| Gramercy | LA | AA | 1 | | | | | | | | |
| GRAY | LA | AA | 3 | | | | | | | | |
| Gretna | LA | AA | 1 | | | | | | | | |
| Hammond | LA | AA | 1 | | | | | | | | |
| Harahan | LA | AA | 1 | | | | | | | | |
| Harvey | LA | AA | 1 | | | | | | | | |
| HOUMA | LA | AA | 1 | | | | | | | | |
| Independence | LA | AA | 2 | | | | | | | | |
| JEFFERSON | LA | AA | 1 | | | | | | | | |
| Jefferson Unincorporated County | LA | AA | 1 | | | | | | | | |
| KENNER | LA | AA | 1 | | | | | | | | |
| Kraemer | LA | AA | 1 | | | | | | | | |
| La Place | LA | AA | 1 | | | | | | | | |
| LaCombe | LA | AA | 1 | | | | | | | | |
| LAFOURCHE UNINCORPORATED COUNTY | LA | AA | 1 | | | | | | | | |
| Larose | LA | AA | 1 | | | | | | | | |
| Lockport | LA | AA | 1 | | | | | | | | |
| Luling | LA | AA | 1 | | | | | | | | |
| Lutcher | LA | AA | 1 | | | | | | | | |
| Madisonville | LA | AA | 1 | | | | | | | | |
| MANDEVILLE | LA | AA | 1 | | | | | | | | |
| Marrero | LA | AA | 1 | | | | | | | | |
| MATHEWS | LA | AA | 1 | | | | | | | | |
| Meraux | LA | AA | 1 | | | | | | | | |
| METAIRIE | LA | AA | 1 | | | | | | | | |
| Montegut | LA | AA | 3 | | | | | | | | |
| | L | | | 1 | | | | | | | |

| MONTZ | LA | AA | 1 |
|---|----|-----------|---|
| Natalbany | LA | AA | 3 |
| New Orleans | LA | AA | 1 |
| New Sarpy | LA | AA | 1 |
| Norco | LA | AA | 1 |
| Paulina | LA | AA | 1 |
| PEARL RIVER | LA | AA | 1 |
| Plaquemines Unincorporated County | LA | AA | 3 |
| PONCHATOULA | LA | AA | 1 |
| Poydras | LA | AA | 1 |
| RACELAND | LA | AA | 1 |
| River Ridge | LA | AA | 1 |
| Roseland | LA | AA | 2 |
| Saint Bernard Unincorporated County | LA | AA | 1 |
| Saint James | LA | AA | 1 |
| Saint JAMES UNINCORPORATED COUNTY | LA | AA | 1 |
| Saint Rose | LA | AA | 1 |
| Saint TAMMANY UNINCORPORATED COUNTY | LA | AA | 1 |
| SCHRIEVER | | <u>AA</u> | 3 |
| SLIDELL | | AA | 1 |
| | | AA AA | 1 |
| Tangipahoa Unincorporated County TERREBONNE UNINCORPORATED COUNTY | | AA AA | 1 |
| | | | 4 |
| Terrytown | | | 1 |
| | LA | AA | 3 |
| VARNADO | LA | AA | 2 |
| Village of Tickfaw | LA | AA | 3 |
| Violet | LA | AA | 1 |
| WAGGAMAN | LA | AA | 1 |
| | LA | AA | 1 |
| | LA | AA | 1 |
| Westwego | LA | AA | 1 |
| BAY SAINT LOUIS | MS | AA | 1 |
| Diamondhead | MS | AA | 1 |
| Hancock Unincorporated County | MS | AA | 1 |
| Kiln | MS | AA | 1 |
| Nicholson | MS | AA | 1 |
| Pearl River Unincorporated County | MS | AA | 1 |
| Picayune | MS | AA | 1 |
| POPLARVILLE | MS | AA | 2 |
| WAVELAND | MS | AA | 1 |
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| | 1 | | 1 |

| Name | LEGAL NAME OF OWNER OF CAB | E SYSTEM: | | | | | | | S | YSTEM ID | | |
|-------------------------------|--|---|--|--|-----------|------------------------|-------------|------------------------------------|--|---------------------------|--|--|
| Name | Bellsouth Telecommun | ications, LL | C | | | | | | | 06318 | | |
| Е | SECONDARY TRANSMISSION In General: The information in s | space E should | covera | all categories of | of second | | | | | | | |
| Secondary | about other services (including) | 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 paried (lune 20 or December 21 on the case may be) | | | | | | | | | | |
| Transmission Service: Sub- | | 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 | | | | | | | | | | |
| scribers and | down by categories of secondar | y transmission | service | . In general, y | ou can co | ompute the num | ber o | of subscri | bers in | | | |
| Rates | each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service). | | | | | | | | | | | |
| | Rate: Give the standard rate of unit in which it is generally billed | | | | | | | | | | | |
| | category, but do not include dise | counts allowed | for adv | ance 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. Not | | | | | | | | | | | |
| | categories, that person or entity | | | | | | | | | | | |
| | subscriber who pays extra for ca | | | | | | unde | r "Service | e 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, with the number of subscribers a sufficient. | | | | | | | | | | | |
| | BL | OCK 1 | | - | | | | BLOCK | | - | | |
| | CATEGORY OF SERVICE | NO. OF SUBSCRIB | | RATE | CA | TEGORY OF SI | ERV | ICE | NO. OF SUBSCRIBERS | RATE | | |
| | Residential: | | | | 0. | | | | | | | |
| | Service to first set | 4 | 6,497 | \$ 19.00 | HD Te | | | | 39,717 | \$ 10.0 | | |
| | Service to additional set(s) | | | | Set-To | | | | 46,826 | \$0-\$1 | | |
| | • FM radio (if separate rate) Motel, hotel | | | | Broad | Broadcast TV Surcharge | | 46,497 | \$4.99-\$5.9 | | | |
| | Commercial | | 329 | \$ 20.00 | | | | | | | | |
| | Converter | | | | | | | | | | | |
| | Residential | | | | | | | | | | | |
| | Non-residential | | | | | | | | | | | |
| | SERVICES OTHER THAN SEC | ONDARY TRA | NSMIS | SIONS: RATI | S | | | | | | | |
| F | In General: Space F calls for ra | • | ' | | • | | | | | | | |
| • | not covered in space E, that is, service for a single fee. There a | | | | | , | | , | | | | |
| Services | furnished at cost or (2) services | or facilities furr | hished t | o nonsubscrib | ers. Rate | e information sho | ould i | nclude bo | oth the | | | |
| Other Than Secondary | amount of the charge and the un enter only the letters "PP" in the | | usually | / billed. If any i | ates are | charged on a va | ariabl | e per-pro | gram basis, | | | |
| ransmissions: | Block 1: Give the standard ra | te charged by t | | | | | | | | | | |
| Rates | Block 2: List any services that listed in block 1 and for which a | | | | | | | | | | | |
| | brief (two- or three-word) descri | | | | | | | | | | | |
| | | BLO | CK 1 | | | | | | BLOCK 2 | | | |
| | CATEGORY OF SERVICE | RATE | | GORY OF SEI | RVICE | RATE | С | ATEGO | RY OF SERVICE | RATE | | |
| | Continuing Services: | | | ation: Non-re | sidential | 1 | | | Demond | ¢0, ¢40 | | |
| | Pay cable add'l channel | \$5-\$199 | | otel, hotel | | | •• • | ideo on | Demand | \$0-\$10 \$0-\$3 | | |
| | | \$5-\$199CommerciaPay cable | | | | | •• ••• | | nagement Fee | \$0-\$44 | | |
| | Pay cable—add'l channel Fire protection | | | | | | •• •••• | | | | | |
| | Fire protection Burglar protection | | | y cable-add'l o | hannel | | D | ispatti | on Demand | \$99 - \$1 | | |
| | Fire protection | | • Pa | - | hannel | | | | | \$99 - \$14 \$10 - \$4 | | |
| | Fire protection Burglar protection Installation: Residential First set | \$0-\$199 | • Pa • Fir • Bu | y cable-add'l o e protection rglar protectio | | | N H | Vireless I ID Premi | on Demand Receiver um Tier | \$10 - \$4 \$ | | |
| | Fire protection Burglar protection Installation: Residential First set Additional set(s) | \$0-\$199 | • Pa • Fir • Bu Other | y cable-add'l o e protection rglar protection services: | | | N H D | Vireless I ID Premi IVR Upgi | on Demand Receiver um Tier rade Fee | \$10 - \$ \$ \$5 | | |
| | Fire protection Burglar protection Installation: Residential First set Additional set(s) FM radio (if separate rate) | \$0-\$199 | • Pa • Fir • Bu Other • Re | y cable-add'l c e protection rglar protection services: connect | | \$0-\$35 | N H D | Vireless I ID Premi | on Demand Receiver um Tier rade Fee | \$10 - \$ \$ \$5 | | |
| | Fire protection Burglar protection Installation: Residential First set Additional set(s) | \$0-\$199 | • Pa • Fir • Bu Other • Re • Dis | y cable-add'l o e protection rglar protection services: | | \$0-\$35 \$0-\$55 | H D V | Vireless I ID Premi IVR Upgi | on Demand Receiver um Tier rade Fee | \$10 - \$ \$ \$5 | | |

Name

G

Primary

Transmitters:

Television

SYSTEM ID#

063180

| Bellsouth Telecommunication | is. L | LLC |
|-----------------------------|-------|-----|
|-----------------------------|-------|-----|

LEGAL NAME OF OWNER OF CABLE SYSTEM

PRIMARY TRANSMITTERS: TELEVISION

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

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

• Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.

 List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

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

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

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

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

| | | | EL LINE-UP | ٨٨ | | |
|-----------------|--------------------------------|--------------------------|----------------------------|---|------------------------|------------------------|
| | 1 | CHANN | EL LINE-OF | AA | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
| KFOL-CD | 10 | I | No | | Houma, LA | |
| WDSU/WDSUHD | 6/1006 | N | No | | New Orleans, LA | See instructions for |
| WGNO/WGNOHD | 26/1026 | N | No | | New Orleans, LA | additional information |
| WHNO | 20 | I | No | | New Orleans, LA | on alphabetization. |
| WLAE/WLAEHD | 32/1032 | Е | Yes | 0 | New Orleans, LA | |
| WNOL/WNOLHD | 38/1038 | I | No | | New Orleans, LA | |
| WPXL | 49 | I | No | | New Orleans, LA | |
| WTNO-LP | 22 | I | No | | New Orleans, LA | |
| WUPL/WUPLHD | 54/1054 | I | No | | Slidell, LA | |
| WVUE/WVUEHD | 8/1008 | I | No | | New Orleans, LA | |
| WWL/WWLHD | 4/1004 | N | No | | New Orleans, LA | |
| WYES/WYESHD | 12/1012 | E | Yes | 0 | New Orleans, LA | |
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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.

ACCOUNTING PERIOD: 2018/1

Name

G

Primary

Transmitters:

Television

SYSTEM ID#

063180

Bellsouth Telecommunications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM:

PRIMARY TRANSMITTERS: TELEVISION

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

basis under specific FCC rules, regulations, or authorizations:

 Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.

 List the station here, and also in space I, if the station was carried both on a substitute basis and also on some 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 AB | | | | | | | | | | | |
|--------------------|-----------|---------|-------------|--------------|------------------------|--|--|--|--|--|--|
| 1. CALL | 2. B'CAST | 3. TYPE | 4. DISTANT? | 5. BASIS OF | 6. LOCATION OF STATION | | | | | | |
| SIGN | CHANNEL | OF | (Yes or No) | CARRIAGE | | | | | | | |
| | NUMBER | STATION | | (If Distant) | | | | | | | |
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| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Bellsouth Telecommunications, LLC 063180 | | | | | | | | | |
|---|--|----------|-----|---------------------|-----------|----------|----------|---------------------|--|--|
| H PRIMARY TRANSMITTERS: RADIO In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on all-band basis whose signals were "generally receivable" by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generative receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expendent on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated interfor detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instrulocated 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 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 Mexican or Canadian stations, if any, the community with which the station is identified). | | | | | | | | | | |
| | CALL SIGN | AM or FM | S/D | LOCATION OF STATION | CALL SIGN | AM or FM | S/D | LOCATION OF STATION | | |
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| LEGAL NAME OF OWNER OF | CABLE SYST | ΓEM: | | | | SYSTEM ID# | NI |
|--|----------------|------------------|--|-----------------|---------------------------|------------|--------------------------|
| Bellsouth Telecommur | nications, | , LLC | | | | 063180 | Name |
| SUBSTITUTE CARRIAGE | : SPECIA | | NT AND PROGRAM LOG | | | | |
| | | | | | | | I |
| | | | sion program broadcast by a | | | | • |
| | | | ecific present and former FC0 n this log, see page (v) of the | | | | Substitute |
| . SPECIAL STATEMENT | | | | J | | r - r | Carriage: |
| | | ir cable system | i carry, on a substitute basis | s, any nonne | twork television progr | am | Special Statement and |
| proadcast by a distant stat | | | | | Yes | | Program Log |
| Note: If your answer is "No' | , leave the | rest of this pag | ge blank. If your answer is " | Yes," you mu | ist complete the prog | ram | |
| log in block 2. 2. LOG OF SUBSTITUTE | PROGRA | MS | | | | | |
| n General: List each subst | itute progra | im on a separa | te line. Use abbreviations v | vherever pos | sible, if their meaning |) is | |
| clear. If you need more spa | | | al pages. ision program (substitute pi | oaram) that | during the accounting | a | |
| beriod, was broadcast by a | | | | | | | |
| under certain FCC rules, reg | | | | | | | |
| SA3 form for futher informat titles, for example, "I Love L | | | | "Dasketball". | List specific program | n | |
| Column 2: If the program | n was broad | dcast live, ente | r "Yes." Otherwise enter "N | | | | |
| | | | asting the substitute programe the community to which the | | nsed by the FCC or | in | |
| he case of Mexican or Can | adian static | ons, if any, the | community with which the s | station is ider | ntified). | | |
| Column 5: Give the mon irst. Example: for May 7 giv | | when your sys | tem carried the substitute p | orogram. Use | numerals, with the m | nonth | |
| Column 6: State the time | es when the | | gram was carried by your c | | | ately | |
| | Example: a | a program carri | ed by a system from 6:01:1 | 5 p.m. to 6:2 | 8:30 p.m. should be | - | |
| stated as "6:00–6:30 p.m." Column 7: Enter the lette | er "R" if the | listed program | was substituted for program | mming that y | our system was requ | ired | |
| to delete under FCC rules a | ind regulation | ons in effect du | uring the accounting period; | enter the let | ter "P" if the listed pro |) | |
| gram was substituted for pro effect on October 19, 1976. | | that your syste | em was permitted to delete | under FCC r | ules and regulations | in | |
| | | | | 1 | | | |
| S | | E PROGRAM | | | EN SUBSTITUTE | 7. REASON | |
| 1. TITLE OF PROGRAM | 2. LIVE? | 3. STATION'S | | 5. MONTH | 6. TIMES | | |
| | Yes or No | CALL SIGN | 4. STATION'S LOCATION | AND DAY | FROM — T | o 🛛 | |
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FORM SA3E. PAGE 5.

ACCOUNTING PERIOD: 2018/1

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FORM SA3E. PAGE 6.

| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID Bellsouth Telecommunications, LLC 06318 | | | | | | | | | |
|-----------------------------------|--|------------|-----------------|-------------|------|--------------|--------|----------------|--------|--|
| | Bellsouth Te | elecommuni | cations, LLC | | | | | | 063180 | |
| 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 part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in 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 "4/10." State the station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m 12:00 p.m." | | | | | | | | | |
| | | | DATES | AND HOURS (| DF F | ART-TIME CAR | RRIAGE | | | |
| | | WHEN | I CARRIAGE OCCU | RRED | | | WHEN | I CARRIAGE OCC | URRED | |
| | CALL SIGN | DATE | HOUR FROM | | | CALL SIGN | DATE | HOL FROM | | |
| | | DATE | FROM _ | 10 | | | DATE | FROM | 10 | |
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| LEC | AL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM ID# | Nome | | | | | | | |
|---|---|------------------------------|---|--|--|--|--|--|--|--|
| Be | Ilsouth Telecommunications, LLC | 063180 | Name | | | | | | | |
| GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. | | | | | | | | | | |
| ім | PORTANT: You must complete a statement in space P concerning gross receipts. | (Amount of gross receipts) | | | | | | | | |
| Instr • Co • Co • If y fee • If y acc ■ If p | YRIGHT ROYALTY FEE Juctions: Use the blocks in this space L to determine the royalty fee you owe: mplete block 1, showing your minimum fee. mplete block 2, showing whether your system carried any distant television stations. our system did not carry any distant television stations, leave block 3 blank. Enter the a 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 p companying this form and attach the schedule to your statement of account. art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should the | parts of the DSE Schedule | L Copyright Royalty Fee | | | | | | | |
| | ck 3 below. art 6 of the DSE schedule was completed, the amount from line 7 of block C should be | entered on line 2 in block | | | | | | | | |
| 3 b | elow. art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho | | | | | | | | | |
| | 1 block 4 below. | | | | | | | | | |
| Block 1 | 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. | \$ 166,284.12 | | | | | | | | |
| 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 colu "Yes" in this block. Did your cable system carry any distant television stations during the accounting per X Yes—Complete the DSE schedule. No—Leave block 3 below blank and complete the DSE schedule. | mn 4, you must check iod? | | | | | | | | |
| Block 3 | Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero | \$ 2,490.17 | | | | | | | | |
| | Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero | 0.00 | | | | | | | | |
| | Line 3. Add lines 1 and 2 and enter here | \$ 2,490.17 | | | | | | | | |
| Block 4 | Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger | \$ 166,284.12 | Cable systems | | | | | | | |
| | Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter 0.00 | | | | | | | | | |
| | 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 | the Licensing additional fees. Division for the | | | | | | | |
| | TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here | \$ 167,009.12 | 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 page (i) of the | | | | | | | | |

FORM SA3E. PAGE 7.

| ACCOUNTING PERIOD: | 2018/1 |
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| ACCOUNTING PERI | OD: 2018/1 | | | | | | FORM SA | 3E. PAGE 8. |
|--------------------|--|----------------|---|-----------------------------|-----------------------------|------------------------|-----------------------|-------------|
| Name | LEGAL NAME OF OWNER | | | | | | SY | STEM ID# |
| Namo | Bellsouth Teleco | ommunic | ations, LLC | | | | | 063180 |
| | CHANNELS | | | | | | | |
| М | Instructions: You | must give | (1) the number of chann | nels on which the cabl | e system carried televis | sion broadcast sta | tions | |
| | to its subscribers a | and (2) the | cable system's total nur | mber of activated char | inels, during the accour | nting period. | | |
| Channels | | | | | | | | |
| | | | channels on which the ca roadcast stations | | | | 20 | |
| | system carried to | 101131011 0 | | | | ····· | | |
| | 2. Enter the total n | umber of a | activated channels | | | | | |
| | on which the cab | le system | carried television broado | cast stations | | | 625 | |
| | and nonbroadcas | st services | | | | | | |
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| Ν | | | CTED IF FURTHER INI | FORMATION IS NEEI | DED: (Identify an individ | dual | | |
| Individual to | we can contact ab | out this sta | atement of account.) | | | | | |
| Be Contacted | | | | | | | | |
| for Further | Name Diane | Belling | er | | | Telephone 210 |)-351-4805 | |
| Information | | | | | | | | |
| | Address 1010 | N. St. M | ary's Street, Roon | n 13-59-B | | | | |
| | (Number, | street, rural | route, apartment, or suite num | iber) | | | | |
| | | | TX 78215 | | | | | |
| | (City, town | n, state, zip) | | | | | | |
| | Email | da77 | 96@att.com | | Fax (optional | I) 210-246-81 9 | 99 | |
| | | | <u> </u> | | | , | | |
| | | | | | | | • | |
| • | CERTIFICATION (1 | his statem | ent of account must be | certifed and signed in | accordance with Copyr | right Office regulat | ions. | |
| 0 | • • • • • • • • • • • • • • • • • • • | | | | 、 、 | | | |
| Certifcation | • I, the undersigned, | nereby ce | rtify that (Check one, but | only one, of the boxes. |) | | | |
| | (Owner other th | an corpoi | ation or partnership) a | m the owner of the cab | le system as identifed in | line 1 of space B; | or | |
| | | | , | | | • | | |
| | (Agent of owne | r other tha | n corporation or partne | rship) I am the duly au | thorized agent of the own | ner of the cable sys | stem as identified | |
| | | | I that the owner is not a c | | | , | | |
| | X (Officer or part | ner) I am a | an officer (if a corporation) |) or a partner (if a partne | ership) of the legal entity | videntifed as owner | r of the cable system | ı |
| | in line 1 of s | - | , i , | | | | , | |
| | I have examined the second seco | ne stateme | nt of account and hereby | declare under penalty of | of law that all statements | of fact contained h | nerein | |
| | are true, complete, | and correc | t to the best of my knowle | | | | | |
| | [18 U.S.C., Section | 1001(1986 | 5)] | | | | | |
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| | | Х | /s/ Mike McGuire | | | | | |
| | | ~ | 13/ Milke McGuire | | | | | |
| | | | n electronic signature on th | | | | | |
| | | | / John Smith). Before ente ton, then type /s/ and your | | | | | |
| | | | | name. Treesing the T | | .g 2.0010 2000 001 | inputionity counigo. | |
| | | Typed | or printed name: Mike | e McGuire | | | | |
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| | | Title: | Assistant Vice P | resident – Billin | o Operations | | | |
| | | | (Title of official position held | | | | | |
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| | | Date: | August 23, 2018 | | | | | |
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| Privacy Act Notice | : Section 111 of title 1 | 7 of the Un | ted States Code authorize | s the Copyright Offce to | collect the personally ide | ntifying information | (PII) requested on th | |

form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephor numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in th 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 lav

| FORM | SA3E | PAGE9. |
|-------|-------|--------|
| FURIN | SASE. | FAGE9. |

| EGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#Bellsouth Telecommunications, LLC063180 | Namo |
|---|---|
| SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS | |
| The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." | P Special |
| For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the | Statement Concerning Gross Receipts |
| paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? | Exclusion |
| X NO | |
| YES. Enter the total here and list the satellite carrier(s) below | |
| Name Name | |
| Mailing Address Mailing Address | |
| | |
| | |
| INTEREST ASSESSMENTS | |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form. | Q |
| Line 1 Enter the amount of late payment or underpayment | Interest |
| | Assessment |
| x | - |
| Line 2 Multiply line 1 by the interest rate* and enter the sum here | - |
| x days | |
| Line 3 Multiply line 2 by the number of days late and enter the sum here | - |
| Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, | |
| space L, (page 7) | _ |
| (interest charge) | |
| * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. | |
| ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. | |
| NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing. | |
| OwnerAddress | |
| 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 suffciency of the fling, a determination that would be made by a court of law.

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 carriec 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 LISTEE 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 G of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station sover the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

The Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable sys-

tems 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, noncommercial 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.

DSE SCHEDULE. PAGE 11.

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

Determine whether any of the stations you carried were partially distantthat 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 DSF 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.

TOTAL DSEs

5. Calculate a separate base rate fee for each subscriber group, using (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.

6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.

7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

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

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

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

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

CITY

Santa Rosa

Bodega Bay

Rapid City

Fairvale

DSE

1.0

1.0

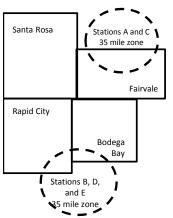
0.083

0.139

0.25

2 4 7 2

Distant Stations Carried STATION In most cases under current FCC rules, all of Fairvale would be within A (independent) B (independent) the local service area of both stations C (part-time) A and C and all of Rapid City and Bo-D (part-time) dega Bay would be within the local service areas of stations B, D, and E. E (network)



| Minimum Fee Total Gross F | Receipts | \$600,000.00 <u>x</u> .01064 \$6,384.00 | | | |
|------------------------------|--------------|---|--------------|-----------------------------|--------------|
| First Subscriber Group | | Second Subscriber Group | | Third Subscriber Group | |
| (Santa Rosa) | | (Rapid City and Bodega Bay) | | (Fairvale) | |
| Gross receipts | \$310,000.00 | Gross receipts | \$170,000.00 | Gross receipts | \$120,000.00 |
| DSEs | 2.472 | DSEs | 1.083 | DSEs | 1.389 |
| Base rate fee | \$6,497.20 | Base rate fee | \$1,907.71 | Base rate fee | \$1,604.03 |
| \$310,000 x .01064 x 1.0 = | 3,298.40 | \$170,000 x .01064 x 1.0 = | 1,808.80 | \$120,000 x .01064 x 1.0 = | 1,276.80 |
| \$310,000 x .00701 x 1.472 = | 3,198.80 | \$170,000 x .00701 x .083 = | 98.91 | \$120,000 x .00701 x .389 = | 327.23 |
| Base rate fee | \$6,497.20 | Base rate fee | \$1,907.71 | Base rate fee | \$1,604.03 |

Identification of Subscriber Groups

OUTSIDE LOCAL

Stations A and C

Stations A and C

Stations B, D, and E

TOTAL GROSS RECEIPTS

SERVICE AREA OF

Stations A, B, C, D , E

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

GROSS RECEIPTS

\$310,000.00

100,000.00

70,000.00

120,000.00

\$600.000.00

FROM SUBSCRIBERS

DSE SCHEDULE. PAGE 11. (CONTINUED)

| 4 | LEGAL NAME OF OWNER OF CABLE | E SYSTEM: | | | S | YSTEM ID# | | | | | | |
|--|---|--------------------|----------------------------------|-----------------|---------------------------|-----------|--|--|--|--|--|--|
| 1 | Bellsouth Telecommuni | cations, LLC | | | | 063180 | | | | | | |
| | SUM OF DSEs OF CATEGORY "O" STATIONS: • Add the DSEs of each station. Enter the sum here and in line 1 of part 5 of this schedule. 0.50 | | | | | | | | | | | |
| | Instructions: | Sign": list the ca | Il signs of all distant stations | identified by t | be letter "Ω" in column 5 | | | | | | | |
| Computation | 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). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25." | | | | | | | | | | | |
| Stations | CATEGORY "O" STATIONS: DSEs CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE | | | | | | | | | | | |
| Stations | WLAE/WLAEHD | 0.250 | CALL SIGN | DOL | CALL SIGN | DOL | | | | | | |
| | | | | | | | | | | | | |
| Add rows as necessary. Remember to copy all formula into new rows. | | 0.250 | | | | | | | | | | |
| | | | | | | | | | | | | |

| Name | | OWNER OF CABLE SYSTEM: elecommunications, | LLC | | | | | S | YSTEM II 06318 |
|--|--|--|---|---|---|--|--|--|-------------------|
| 3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel | Column figure should Column be carried ou Column give the type Column | :: CAPACITY ist the call sign of all dista 2 : For each station, give in correspond with the infor 3 : For each station, give in 4 : Divide the figure in coll at at least to the third deci 5 : For each independent t-value as ".25." 6 : Multiply the figure in coll point. This is the station | the number of rmation given the total numb umn 2 by the mal point. Thi station, give t | hours your cable syst in space J. Calculate ber of hours that the st figure in column 3, and s is the "basis of carria he "type-value" as "1.0 e figure in column 5, and | em carried the st only one DSE for ation broadcast of give the result in uge value" for the ." For each netwo and give the result | ation during the each station. ver the air duri n decimals in c station. ork or noncom in column 6. R | ng the accou olumn 4. This mercial educa ound to no le | nting period. s figure must ational station, ess than the | |
| Capacity | | C | CATEGOR | LAC STATIONS | : COMPUTAT | ION OF DS | Es | | |
| | 1. CALL SIGN | 2. NUMBE OF HOI CARRIE SYSTE | URS ED BY | 3. NUMBER OF HOURS STATION ON AIR | 4. BASIS O CARRIA VALUE | | 5. TYPE VALUE | 6. DS | Ε |
| | | | | | | | | | |
| | | | ÷ | | | x x | | = | |
| | | | ÷ | | = | x | | = | |
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| | | | | | | | | | |
| | | | ÷ | | = | X | | = | |
| | Was carrie tions in eff Broadcast | ve the call sign of each st d by your system in subs fect on October 19, 1976 one or more live, nonnetw | titution for a p (as shown by | rogram that your syste the letter "P" in colum | m was permitted n 7 of space I); ar | to delete unde nd | r FCC rules | | |
| Computation of DSEs for Substitute- | Column 1: Gir • Was carrie tions in eff • Broadcast space I). Column 2: at your option. Column 3: Column 4: | ve the call sign of each st d by your system in subs ect on October 19, 1976 | titution for a p (as shown by york programs a number of liv spond with the s in the calend nn 2 by the fig | rogram that your syste the letter "P" in colum during that optional ca re, nonnetwork progra e information in space dar year: 365, except i jure in column 3, and g | m was permitted n 7 of space I); ar rriage (as shown b ms carried in sub I. n a leap year. give the result in o | to delete undend nd y the word "Yes stitution for pro column 4. Rour | r FCC rules a " in column 2 ograms that w nd to no less | of vere deleted than the third | m). |
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| LEGAL NAME OF C | | | | | | | S | YSTEM ID# 063180 | Name |
|--|--|--|--|--|---|--|---|---------------------|--|
| Instructions: Bloo In block A: • If your answer if schedule. • If your answer if | ck A must be com | pleted. emainder of p | · | 7 of the DSE sche | edule blank ar | nd complete p | art 8, (page 16) o | | 6 |
| | · · | | | ELEVISION M | ARKETS | | | | Computation of |
| | 1981? | schedule—E C below. | DO NOT COM | Iller markets as de | AINDER OF F | PART 6 AND 7 | | gulations in | 3.75 Fee |
| Column 1: CALL SIGN | under FCC rules | and regulation of the second sec | ons prior to Ju dule. (Note: Tl | part 2, 3, and 4 of ne 25, 1981. For fu ne letter M below r Act of 2010.) | urther explana | ation of permit | ted stations, see t | he | |
| Column 2: BASIS OF PERMITTED CARRIAGE | (Note the FCC r. A Stations carrie 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfathered instructions for E Carried pursua *F A station pre | Iles and regu ed pursuant t on as defined al educationa d station (76.1 or DSE sched ant to individu viously carrie JHF station w | lations cited b to the FCC ma d in 76.5(kk) (7 al station [76.5 65) (see parag ule). Jal waiver of F ad on a part-tin rithin grade-B | ne or substitute ba contour, [76.59(d)(| se in effect o 6.57, 76.59(b e)(1), 76.63(a 63(a) referrin bstitution of g sis prior to Ju | n June 24, 194 b), 76.61(b)(c), a) referring to 5 g to 76.61(d) randfathered 5 une 25, 1981 | 76.63(a) referrinថ 76.61(e)(1 stations in th∉ | - | |
| Column 3: | | e stations ide | ntified by the I | n parts 2, 3, and 4 etter "F" in column | | | worksheet on pag | e 14 of | |
| 1. CALL SIGN | 2. PERMITTED BASIS | | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | |
| WLAE/WLA WYES/WYE | | 0.25 0.25 | | | | | | | |
| WTES/WTE | | 0.25 | | | | | | | |
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| | | | | | | | | 0.50 | |
| | | В | LOCK C: CO | MPUTATION OF | - 3.75 FEE | | | | |
| Line 1: Enter the | total number of | | | | | | | | |
| Line 2: Enter the | sum of permitte | d DSEs fror | n block B ab | ove | | | | | |
| Line 3: Subtract (If zero, l | | | | r of DSEs subjec 7 of this schedu | | rate. | | | |
| Line 4: Enter gro | ess receipts from | space K (p | age 7) | | | | x 0.0 | 375 | Do any of the DSEs represent partially |
| Line 5: Multiply li | ine 4 by 0.0375 a | and enter su | um here | | | | <u> </u> | | permited/ partially nonpermitted |
| Line 6: Enter tota | al number of DSI | Es from line | 3 | | | | | | carriage? If yes, see part 9 instructions. |
| Line 7: Multiply li | ine 6 by line 5 ar | nd enter her | e and on line | 2, block 3, spac | e L (page 7 <u>)</u> | | | 0.00 | |

DSE SCHEDULE. PAGE 13.

ACCOUNTING PERIOD: 2018/1

| | F OWNER OF CABLE Elecommunicati | | | | | | Name | | |
|-----------------|------------------------------------|-------|-----------------|-----------------------|-----------|-----------------|-----------------------|--------|-------------------------|
| | | BLOCK | A: TELEVIS | SION MARKET | S (CONTIN | UED) | | | |
| 1. CALL SIGN | 2. PERMITTED BASIS | | 1. CALL SIGN | 2. PERMITTED BASIS | | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 6 |
| | | | | | | | | | Computation 3.75 Fee |
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| | DSE SCHEDULE. PAGE | | | | | | | | | | |
|---|---|---------------------|----------------|--------------------|-------|-------------------------|------------|-------------------|---------------|---------|--|
| Nama | LEGAL NAME OF OWN | NER OF CABLE SYS | EM: | | | | | | SYS | TEM ID# | |
| Name | Bellsouth Teleo | communication | s, LLC | | | | | | | 063180 | |
| Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage | Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. | | | | | | | | | | |
| | | | | | | | | | | | |
| | 1. CALL | 2. PRIOR | | COUNTING | 00 | 4. BASIS OF | | RESENT | 6 PERI | MITTED | |
| | SIGN | 2. PRIOR DSE | | ERIOD | | 4. BASIS OF CARRIAGE | | DSE | | SE | |
| | | DOL | | EIGOD | | of it it is to be | | JUE | B | JE | |
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| 7 Computation of the Syndicated Exclusivity | Instructions: Block A must be completed. In block A: If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. BLOCK A: MAJOR TELEVISION MARKET | | | | | | | | | | |
| Surcharge | Is any portion of the or | cable system within | a top 100 majo | or television marl | ket a | s defned by section 7 | 6.5 of FCC | rules in effect J | une 24, 198 | 1? | |
| | X Yes—Complete | blocks B and C . | | | | No—Proceed to | part 8 | | | | |
| | | | | | | | | | | | |
| | BLOCK B: C | arriage of VHF/Gra | le B Contour | Stations | | BLOCK | C: Compu | itation of Exem | pt DSEs | | |
| | Is any station listed in block B of part 6 the primary stream of a commercial VHF station that places a grade B contour, in whole or in part, over the cable system? X Yes—List each station below with its appropriate permitted DSE No—Enter zero and proceed to part 8. No—Enter zero and proceed to part 8. | | | | | | | | | | |
| | | · | | | | | | | | | |
| | CALL SIGN | DSE | CALL SIGN | DSE | | CALL SIGN | DSE | CALL SIG | N | DSE | |
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| | | └────┤┤─── | | 0.00 | | | | | | 0.00 | |
| | TOTAL DSES 0.00 TOTAL DSES | | | | | | | | | | |

| LEGAL NA | ME OF OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC | SYSTEM ID# 063180 | Name |
|---------------|---|----------------------|-------------------------------------|
| | BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCH | ARGE | |
| Section 1 | Enter the amount of gross receipts from space K (page 7) | .▶\$ 15,628,206.92 | 7 |
| Section 2 | A. Enter the total DSEs from block B of part 7 | ▶ <u> 0.00</u> | Computation |
| | B. Enter the total number of exempt DSEs from block C of part 7 | • 0.00 | of the Syndicated Exclusivity |
| | C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8. | \$0.00 | Surcharge |
| • Is any | v portion of the cable system within a top 50 television market as defined by the FCC? X Yes—Complete section 3 below. | ction 4 below. | |
| | SECTION 3: TOP 50 TELEVISION MARKET | | |
| Section 3a | Did your cable system retransmit the signals of any partially distant television stations during the accounting 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. No is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below. | DTE: If the DSE | |
| | A. Enter 0.00599 of gross receipts (the amount in section1) | ▶ <u>\$</u> | |
| | B. Enter 0.00377 of gross receipts (the amount in section 1) \$ C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here > | | |
| | D. Multiply line B by line C and enter here | • | |
| | E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge | ▶\$ | |
| Section 3b | If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank | | |
| | A. Enter 0.00599 of gross receipts (the amount in section 1) | ▶ \$ | |
| | B. Enter 0.00377 of gross receipts (the amount in section 1) | | |
| | C. Multiply line B by 3.000 and enter here | \$ | |
| | D. Enter 0.00178 of gross receipts (the amount in section 1) | | |
| | E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here | | |
| | F. Multiply line D by line E and enter here | . <mark>\$</mark> | |
| | G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge | × | |
| | SECTION 4: SECOND 50 TELEVISION MARKET | | |
| | Did your cable system retransmit the signals of any partially distant television stations during the accounting | period? | |
| Section 4a | Yes—Complete part 9 of this schedule. | | |
| | If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. No 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) | DTE: If the DSE | |
| | 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 | •\$ <mark></mark> | |
| | 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 | \$ | |

ACCOUNTING PERIOD: 2018/1

| Name | | | STEM ID# |
|-------------------------------------|-------------------|--|-----------|
| | | Bellsouth Telecommunications, LLC | 063180 |
| 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> . |
| | Instru | ctions: | |
| 8 | | ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. | |
| | | bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. | |
| Computation | - | 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 | Ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below | |
| | | is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers | |
| | | ocated within that station's local service area and others were located outside that area. For the definition of a station's "local 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 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. | |
| | | A. Enter 0.01064 of gross receipts | |
| | | (the amount in section 1) | - |
| | | B. Enter 0.00701 of gross receipts | |
| | | (the amount in section 1) | |
| | | C. Subtract 1.000 from total DSEs | |
| | | (the figure in section 2) and enter here | |
| | | D. Multiply line B by line C and enter here | - |
| | | E. Add lines A, and D. This is your base rate fee. Enter here | |
| | | and in block 3, line 1, space L (page 7) | 0.00 |
| | | Base Rate Fee | 0.00 |
| | 1 | | |

| LEGAL N | AME OF OWNER OF CABLE SYSTEM: SYSTEM: | | Name | | | | |
|--|--|------------|--------------------------|--|--|--|--|
| Bells | outh Telecommunications, LLC 063 | 180 | INAILIE | | | | |
| 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) ▶ | | Ŭ | | | | |
| | | | | | | | |
| | 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 | | | | | | |
| | G. Add lines A, C, and F. This is your base rate fee. | _ | | | | | |
| | Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$ 0.0 | 0 | | | | | |
| | | <u> </u> | | | | | |
| | TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals s | | | | | | |
| Space | | | 9 | | | | |
| | eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of | | Computation | | | | |
| | on, you must: | | of Base Rate Fee | | | | |
| First: [| Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same | | and Syndicated | | | | |
| | or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group | | Exclusivity | | | | |
| | : Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system. | <i>J</i> . | Surcharge for | | | | |
| | If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you r | | Partially | | | | |
| | mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. Howe cable system is wholly located outside all major television markets, complete block A only. | ver, | Distant Stations, and | | | | |
| • | Identify a Subscriber Group for Partially Distant Stations | | for Partially | | | | |
| Step 1: | For each community served, determine the local service area of each wholly distant and each partially distant station you | | Permitted Stations | | | | |
| carried to that community. | | | | | | | |
| Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by the same token, the station is distant to the subscriber.) | | | | | | | |
| | 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 that a cable | | | | | | |
| | will have only one subscriber group when the distant stations it carried have local service areas that coincide. | | | | | | |
| Compu groups | iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subsc | criber | | | | | |
| | section: | | | | | | |
| | fy the communities/areas represented by each subscriber group. | | | | | | |
| | he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the bers in the group. | | | | | | |
| • lf: | | | | | | | |
| | system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, of this schedule; or, | , | | | | | |
| 2) any | portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, 6 of this schedule. | | | | | | |
| • | ne DSEs for each station. This gives you the total DSEs for the particular subscriber group. | | | | | | |
| | late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions paper SA3 form. | | | | | | |
| • Comp | ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding | | | | | | |
| DSEs f | In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the tot or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show y calculations on the form. | | | | | | |

| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: SY | STEM I |
|------|---|--------|
| | Bellsouth Telecommunications, LLC | 0631 |
| | 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 | e |
| | 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. | |
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| LEGAL NAME OF OWNER Bellsouth Telecom | | | | | | | SYSTEM ID# 063180 | Nar |
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| BL | | | | TE FEES FOR EACH | | | | |
| COMMUNITY/ AREA | FIRST | SUBSCRIBER GROU | JP 0 | COMMUNITY/ AREA | SECOND | SUBSCRIBER GR | OUP 0 | 9 |
| | | | | | | | | Comput |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE 0.25 | CALL SIGN | DSE | of Base Ra |
| | | | | WYES/WYESHD | 0.25 | | | and |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.50 | |
| Gross Receipts First Gr | oup | <u>\$</u> 14,731 | ,868.98 | Gross Receipts Secon | d Group | \$ | 39,814.60 | |
| | | | | | | | | |
| Base Rate Fee First Gro | - | \$ | 0.00 | Base Rate Fee Second | | \$ | 211.81 | |
| | THIRD | SUBSCRIBER GROU | | | FOURTH | SUBSCRIBER GRO | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
| WLAE/WLAEHD | 0.25 | | | | . | | | |
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| Total DSEs | | | 0.25 | Total DSEs | | | 0.00 | |
| Gross Receipts Third G | roup | \$ 856 | 6,523.34 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| 3ase Rate Fee Third Gi | roup | \$ 2 | 2,278.35 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| | | | | | | | | |
| | . h.e | | | as shown in the boxes a | haur | | | |

| FORM SA3E. F | PAGE | 19 |
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|--------------|------|----|

| LEGAL NAME OF OWNER Bellsouth Telecom | | | | | | SY | STEM ID# 063180 | Name |
|--|--------|-----------------|-------------------------|-----------------------|---------|------------------|--------------------|---------------------------|
| BL | | | | TE FEES FOR EACH | | | | |
| COMMUNITY/ AREA 0 | | | | COMMUNITY/ AREA | SIXTH | SUBSCRIBER GROUP | <u> </u> | 9 Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | | | | | | | | Base Rate Fee |
| | | | | | | | | and Syndicated |
| | | | | | | | | Syndicated Exclusivity |
| | | | | | | | | Surcharge |
| | | | | | | | | for |
| | | | | | | | | Partially Distant |
| | | _ | | | | | | Stations |
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| | | | | | | | | |
| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Second | d Group | \$ | 0.00 | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
| | EVENTH | SUBSCRIBER GROU | | | EIGHTH | SUBSCRIBER GROUP | _ | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA 0 | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| | | | | U | | | | |
| Base Rate Fee: Add the Enter here and in block | | nber group | as snown in the boxes a | idove. | \$ | | | |

| LEGAL NAME OF OWNE Bellsouth Telecon | | | | | | | 8YSTEM ID# 063180 | Name |
|--|-------|-----------------|-------------|-----------------------|----------|----------------|----------------------|------------------|
| BL | | | | ATE FEES FOR EAC | | | | |
| | FIRST | SUBSCRIBER GROU | | | | SUBSCRIBER GRO | | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | DOL | | DOL | ONLE OIGH | DOL | | DOL | Base Rate Fee |
| | | | | | | | | and |
| | | _ | | | | | | Syndicated |
| | | | | | | | | Exclusivity |
| | | | | | ··· | | | Surcharge |
| | | - | | | ••• | + | | for Partially |
| | | | | | | + | | Distant |
| | | | | | | | | Stations |
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| | | | | | | + | | |
| Total DSEs | • | | 0.00 | Total DSEs | | ••• | 0.00 | |
| | | | | | | | | |
| Gross Receipts First G | roup | \$ 14,731 | ,000.90 | Gross Receipts Seco | na Group | \$ | 39,814.60 | |
| Base Rate Fee First G | roup | \$ | 0.00 | Base Rate Fee Seco | nd Group | \$ | 0.00 | |
| | THIRD | SUBSCRIBER GROU | JP | | FOURTH | SUBSCRIBER GRO | OUP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| •••••• | | | | | | ••• | | |
| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third Group \$ 856,523.34 | | | 523.34 | Gross Receipts Fourt | h Group | \$ | 0.00 | |
| | P | <u> </u> | , | | | <u>-</u> | | |
| Base Rate Fee Third G | Group | \$ | 0.00 | Base Rate Fee Fourt | h Group | \$ | 0.00 | |
| | | | | U | | | | |
| Base Rate Fee: Add th Enter here and in block | | | riber group | as shown in the boxes | above. | \$ | 0.00 | |

| FORM SA3E. PAGE 19. |
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Nonpermitted 3.75 Stations

| LEGAL NAME OF OWNER Bellsouth Telecomn | | | | | | S | 063180 | Name |
|--|---------|-----------------|--------------------|----------------------|-----------|------------------|---------------|--------------|
| BLO | CK A: C | COMPUTATION OF | BASE RA | TE FEES FOR EAC | CH SUBSCF | RIBER GROUP | | |
| | FIFTH | SUBSCRIBER GROL | JP | | SIXTH | I SUBSCRIBER GRO | UP | • |
| COMMUNITY/ AREA 0 | | | 0 | COMMUNITY/ ARE | ۹ | | 0 | 9 |
| | | | | | | | | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | | | | | | | | Base Rate Fe |
| | | | | | | | | and |
| | | | | | | | | Syndicated |
| | | | | | | | | Exclusivity |
| | | | | | | | | Surcharge |
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| | | | | | | | | Stations |
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| | | | | | | 1 | | |
| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Grou | up | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | |
| Base Rate Fee First Grou | up | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 | |
| SE | VENTH | SUBSCRIBER GROU | JP | | EIGHTH | I SUBSCRIBER GRO | UP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ ARE | ۹ | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| | | | | | | | | |
| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third Group \$ 0.00 | | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 | | |
| | • | | | | I. | | | |
| Base Rate Fee Third Gro | oup | \$ | 0.00 | Base Rate Fee Four | rth Group | \$ | 0.00 | |
| | | | | | | | | |
| Base Rate Fee: Add the I Enter here and in block 3, | | | riber group | as shown in the boxe | s above. | \$ | | |

| | LEGAL NAME OF OWNER OF CABLE SYSTEM: | FORM SA3E. PAGE 20. |
|--|---|--|
| Name | Bellsouth Telecommunications, LLC | SYSTEM ID# 063180 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 | If your cable system is located within a top 100 television market and the Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981: | · · · · |
| Computation of | First 50 major television market | Second 50 major television market |
| Base Rate Fee | INSTRUCTIONS: | iel VIIIE Orada D. contour stations listed in black A. and O. of |
| and Syndicated Exclusivity Surcharge for Partially Distant Stations | Step 1: In line 1, give the total DSEs by subscriber group for commerce this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for Exempt DSEs in block C, part 7 of this schedule. If none enter Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the for schedule. In making this computation, use gross receipts figur your actual calculations on this form. | r the VHF Grade B contour stations that were classified as zero. DSEs used to compute the surcharge. |
| | 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |
| | SYNDICATED EXCLUSIVITY SURCHARGE First Group | SYNDICATED EXCLUSIVITY SURCHARGE Second Group |
| | THIRD SUBSCRIBER GROUP | FOURTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |
| | SYNDICATED EXCLUSIVITY SURCHARGE Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each in the boxes above. Enter here and in block 4, line 2 of space L (page 7) | |
| | | |

| | LEGAL NAME OF OWNER OF CABLE SYSTEM: | FORM SA3E. PAGE 20. |
|--|--|--|
| Name | Bellsouth Telecommunications, LLC | SYSTEM ID# 063180 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 | If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation of | First 50 major television market | Second 50 major television market |
| Base Rate Fee | INSTRUCTIONS: | |
| and Syndicated Exclusivity Surcharge for Partially Distant Stations | 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 this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. | |
| | FIFTH SUBSCRIBER GROUP | SIXTH SUBSCRIBER GROUP |
| | | SIATH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | Line 2: Enter the Exempt DSEs | Line 2: Enter the Exempt DSEs |
| | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |
| | SYNDICATED EXCLUSIVITY SURCHARGE First Group | SYNDICATED EXCLUSIVITY SURCHARGE Second Group |
| | SEVENTH SUBSCRIBER GROUP | EIGHTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |
| | SYNDICATED EXCLUSIVITY SURCHARGE Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each in the boxes above. Enter here and in block 4, line 2 of space L (page 7) | |
| | | |