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

### SA3E Long Form

### STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY						
DATE RECEIVED	AMOUNT					
8/27/2018	\$					
	ALLOCATION NUMBER					

Return completed workbook by email to:

### coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:										
Accounting	2018/1										
Period											
Bowner	Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo rate title of the subsidiary, not that of the parent corporation  List any other name or names under which the owner conducts the business of the cable system  If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period  Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.										
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM										
	BellSouth Telecommunications, LLC										
	,										
				6318	420181						
				63184	2018/1						
	1010 N. St. Mary's Street, Room 13-59-B										
	San Antonio, TX 78215-2109										
	·	Leaff for head and			0						
С	<b>INSTRUCTIONS:</b> In line 1, give any business or trade names used to ic names already appear in space B. In line 2, give the mailing address of										
System	1 IDENTIFICATION OF CABLE SYSTEM:			<u> </u>							
	MAILING ADDRESS OF CABLE SYSTEM:										
	2 (Number, street, rural route, apartment, or suite number)										
	(City, town, state, zip code)										
<b>D</b>				:-4	- 41-						
D	<b>Instructions:</b> For complete space D instructions, see page 1b. Identify	only the first comm	nunity served below and rel	ist on page	) 1D						
Area Served	with all communities.	0-4									
	CITY OR TOWN  Knoxville	STATE TN									
First Community											
	Below is a sample for reporting communities if you report multiple cha			0.10							
	CITY OR TOWN (SAMPLE)  Alda	STATE MD	CH LINE UP	SUB	3 GRP#						
Sample	Alliance	MD	A B		2						
	Gering	MD	В		3						
	g										

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.

FORM SA3E. PAGE 1b.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

BellSouth Telecommunications, LLC

Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas " 47 C. F.R. \$76.5(dd). The first community that you list will serve as a form

Area

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 fillings.

Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses

**Note:** Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.

If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).

When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below.

CITY OR TOWN	STATE	CH LINE UP	SUB GRP#
Knoxville	TN	AA	1
Alcoa	TN	AA	1
Anderson Unincorporated County	TN	AA	1
Andersonville	TN	AA	1
ATHENS	TN	AB	2
Benton	TN	AB	2
BLAINE	TN	AA	1
Blount Unincorporated County	TN	AA	1
BRADLEY UNINCORPORATED COUNTY	TN	AB	2
Campbell Unincorporated County	TN	AA	1
CARYVILLE	TN	AA	1
CHATTANOOGA	TN	AB	2
CLEVELAND	TN	AB	2
Clinton	TN	AA	1
Coalfield	TN	AA	3
COCKE UNINCORPORATED COUNTY	TN	AA	1
Cumberland Unincorporated County	TN	AA	3
Dayton	TN	AB	2
EAST RIDGE	TN	AB	2
Gatlinburg	TN	AA	1
GRANGER UNINCORPORATED COUNTY	TN	AA	1
Hamblen Unincorporated County HAMILTON UNINCORPORATED COUNTY	TN	AA	1
HAMILTON UNINCORPORATED COUNTY	TN	AB	2
Harriman	TN	AA	3
HARRISON	TN	AB	2
JACKSBORO	TN	AA	1
Jefferson City	TN	AA	1
JEFFERSON UNINCORPORATED COUNTY	TN	AA	1
KINGSTON	TN	AA	1
Knox Unincorporated County	TN	AA	1
La Follette	TN	AA	1
LAKESITE	TN	AB	2
Lenoir City	TN	AA	1
Lookout Mountain	TN	AB	2
Loudon	TN	AA	1
Loudon Unincorporated County	TN	AA	1
Louisville	TN	AA	1
LUTTRELL	TN	AA	1
Madisonville	TN	AA	1
Maryville	TN	AA	1
Mascot	TN	AA	1
MAYNARDVILLE	TN	AA	1

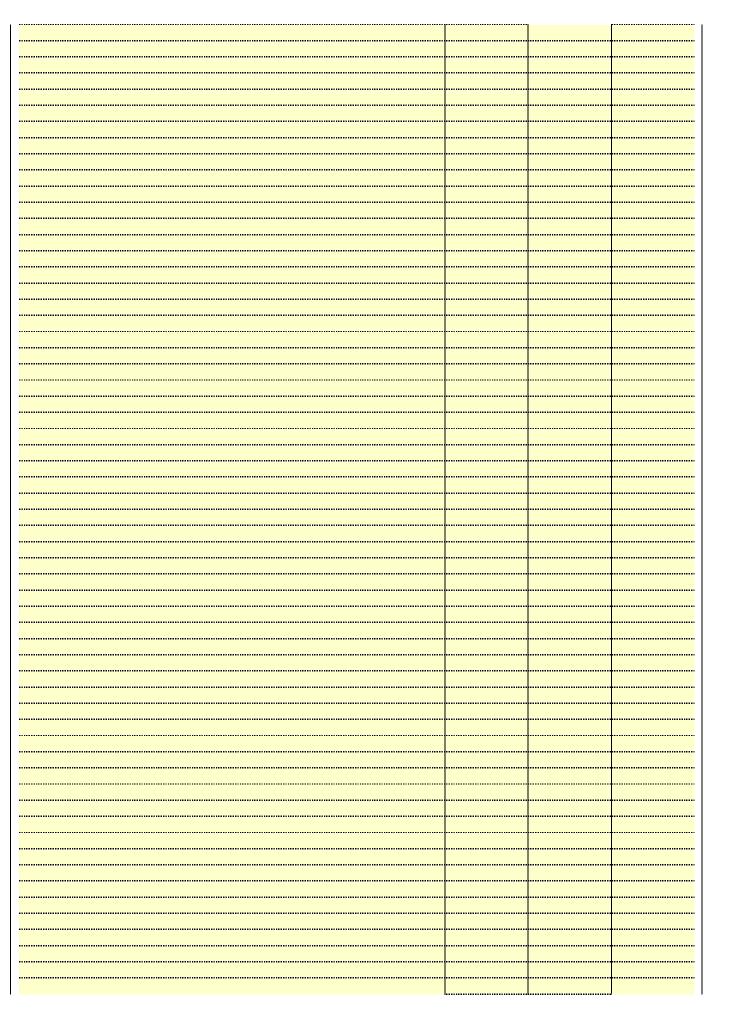
First Community

Served

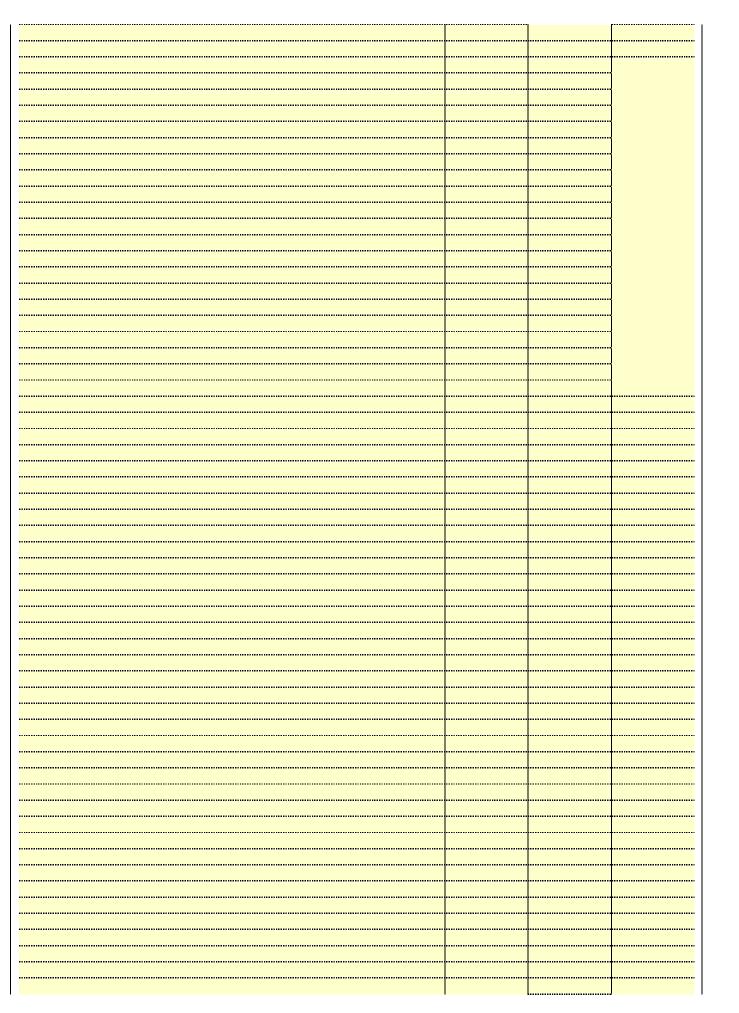
See instructions for additional information on alphabetization.

MCMINN UNINCORPORATED COUNTY	TN	AB	2
	. 4	<b>.</b>	2
Meigs Unincorporated County	TN	AB	2
Midtown	TN	AA	3
Monroe Unincorporated County	TN	AA	1
Morristown	TN	AA	
WOTTISTOWN	I N		1
New Market	TN	AA	1
Newport	TN	AA	1
Oak Pidaa	TN	AA	1
Oak Ridge Oliver Springs Parrottsville		AA	
Oliver Springs	TN	AA	3
Parrottsville	TN	AA	1
Philadelphia	TN	AA	3
n iniaucipina	TN	<b>.</b>	
Pigeon Forge	l N	AA	1
PLAINVIEW	TN	AA	1
Polk Unincorporated County	TN	AB	2
RED BANK	TN	AB	
	I IN	<b>.</b>	2
Rhea Unincorporated County	TN	AB	2
Ridgeside	TN	AB	2
Roane Unincorporated County	TN	AA	
Deal Control	1 14		11
Rockford	TN	AA	1
Rockwood	TN	AA	3
Salo Crook	TN	AB	2
Sequatchie Unincorporated County	TN		2
Sequatonie Unincorporated County		AB	2
Sevier Unincorporated County	TN	AA	1
Sevierville	TN	AA	1
	TN		
Seymour	. 4	AA	1
Signal Mountain	TN	AB	2
SODDY DAISY	TN	AB	2
Sweetwater	TN	AA	***************************************
Sweetwater	. <mark> </mark>		3
UNION UNINCORPORATED COUNTY	TN	AA	1
Vonore	TN	AA	3
Walden	TN	AB	2
Walland	TN	AA	1
	~ A	AB	2
CATOOSA UNINCORPORATED COUNTY	GA	70	
	. <del> </del>		
Dade Unincorporated County	GA	AB	2
Dade Unincorporated County FORT OGLETHORPE	GA GA	AB AB	2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain	GA GA GA	AB	2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain	GA GA GA	AB AB AB	2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain	GA GA GA	AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2
Dade Unincorporated County FORT OGLETHORPE Lookout Mountain ROSSVILLE	GA GA GA GA	AB AB AB AB	2 2 2

Add rows as necessary.



<b>,</b>	



"		
•••		 
•••		 
•••		 

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

BellSouth Telecommunications, LLC

SYSTEM ID#
63184

### Ε

### Secondary Transmission Service: Subscribers and Rates

### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1	BLOCK 2					
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	F	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE
Residential:							
<ul> <li>Service to first set</li> </ul>	25,222	\$	19.00	HD Tech Fee	20,966	\$	10.00
<ul> <li>Service to additional set(s)</li> </ul>		ļ		Set-Top Box	25,374	T	\$0-\$10
<ul> <li>FM radio (if separate rate)</li> </ul>				Broadcast TV Surcharge	25,222	\$4.	99-\$5.99
Motel, hotel							
Commercial	152	\$	20.00				
Converter							
Residential						Ī	•••••
Non-residential							
					• • • • • • • • • • • • • • • • • • • •	•	

## F

### Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2				
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
Pay cable		Motel, hotel		Video on Demand	\$0-\$100
<ul> <li>Pay cable—add'l channel</li> </ul>	\$5-\$199	Commercial		Service Activation Fee	\$0-\$35
Fire protection		Pay cable		Credit Management Fee	\$0-\$449
<ul> <li>Burglar protection</li> </ul>		<ul> <li>Pay cable-add'l channel</li> </ul>		Dispatch on Demand	\$99 - \$149
Installation: Residential		Fire protection		Wireless Receiver	\$10-\$49
First set	\$0-\$199	Burglar protection		HD Premium Tier	\$7
<ul> <li>Additional set(s)</li> </ul>		Other services:		DVR Upgrade Fee	\$50
• FM radio (if separate rate)		Reconnect	\$0-\$35	Vacation Hold	\$ 7.00
Converter		Disconnect			
		Outlet relocation	\$0-\$55		
		Move to new address			

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **BellSouth Telecommunications, LLC** 63184 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN **CHANNEL** OF CARRIAGE (Yes or No) NUMBER **STATION** (If Distant) WAGV 28 No Harlan, KY ı Knoxville, TN WATE/WATEHD 6/1006 Ν No See instructions for Knoxville, TN additional information 10/1010 Ν WBIR/WBIRHD No on alphabetization. WBXX/WBXXHD 20/1020 ı No Crossville, TN Ε WETP/WETPHD 2/1002 Yes 0 Sneedville, TN WKNX/WKNXHD 25/1025 ı No Knoxville, TN WKOP/WKOPHD Knoxville, TN 15/1015 Ε No WPXK/WPXKHD 54/1054 ı No Jellico, TN WTNZ/WTNZHD 43/1043 ı No Knoxville, TN WVLR ı Tazwell, TN 48 No WVLT/WVLTHD 8/1008 Ν No Knoxville, TN WVLTD2/WVLT2H 8/1008 No Knoxville, TN ı

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **BellSouth Telecommunications, LLC** 63184 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AB 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL OF CARRIAGE SIGN (Yes or No) NUMBER **STATION** (If Distant) WDEF/WDEFHD 12/1012 Ν No Chattanooga, TN **WDSI** 61 No Chattanooga, TN WELF 23 ı No Dalton, GA WFLI/WFLIHD No 53/1053 ı Cleveland, TN Ε **WNGH** 18 No CHATSWORTH, GA WRCB/WRCBHD 3/1003 Ν No Chattanooga, TN WTCI/WTCIHD 45/1045 Ε No Chattanooga, TN WTVC/WTVCHD Ν 9/1009 No Chattanooga, TN WTVCD2/WTVCH 9/1009 No Chattanooga, TN ı

FORM SA3E. PAGE 3.									
LEGAL NAME OF OWN					SYSTEM ID#	Name			
BellSouth Tele	communica	tions, LLC			63184				
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON							
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program 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 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 identified.									
-		CHANN	EL LINE-UP	AC					
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				
		<b></b>			<u>†</u>				

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 63184 **BellSouth Telecommunications, LLC** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.							ACCOUNTING	PERIOD: 2018/1		
LEGAL NAME OF OWNER OF  BellSouth Telecommu							SYSTEM ID# 63184	Name		
SUBSTITUTE CARRIAGI			IT AND PROGRAM LOG				00104			
In General: In space I, ident substitute basis during the a explanation of the programm	ccounting pe	eriod, under spe	cific present and former FC	C rules, regula	ations, or a	uthorization	s. For a further	Substitute		
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE										
During the accounting per broadcast by a distant star		r cable system	carry, on a substitute basi	s, any nonnet	twork telev		am <b>XNo</b>	Special Statement and Program Log		
Note: If your answer is "No log in block 2.  2. LOG OF SUBSTITUTE			ge blank. If your answer is '	'Yes," you mu	ust complet	e the prog	ram			
period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love I Column 2: If the prograr Column 3: Give the call Column 4: Give the broathe case of Mexican or Car Column 5: Give the mor first. Example: for May 7 gir Column 6: State the tim to the nearest five minutes. stated as "6:00–6:30 p.m."	ace, please a of every nor distant stati gulations, o tion. Do no Lucy" or "NE m was broad sign of the sadcast static adian static and and day we "5/7." es when the Example: a er "R" if the and regulation ogramming	attach addition nnetwork televion and that your authorization to use general of BA Basketball: deast live, ente station broadca on's location (thons, if any, the when your system a program carri- listed program ons in effect du	al pages. ision program (substitute pur cable system substitutes. See page (vi) of the geneategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the tem carried the substitute purposed by a system from 6:01:	rogram) that, d for the progeral instructio "basketball". lo." m. station is licenstation is idenorogram. Use cable system. 15 p.m. to 6:2 mming that yet; enter the letters	during the ramming o ons located List specifications of the tiffied).  List the tin 8:30 p.m. so our system ter "P" if the	accounting f another s in the papfic program  For FCC or, if with the manes accurate should be a was required listed program.	er n n n nonth ntely			
5	SUBSTITUT	E PROGRAM			N SUBST	URRED	7. REASON FOR			
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		TIMES  — TO	DELETION			
	<u> </u>					<u>–</u> –				
						_				
	<del></del>					<u>–</u> –				
						_				
						<u> </u>				
						<u> </u>				
						_				
	<del> </del>					<u>-</u>				
						_				

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

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

BellSouth Telecommunications, LLC

63184

## 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 starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.—3:15 a.m. app."
- You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.–12:00 p.m."

DATES AND HOURS OF PART-TIME CARRIAGE									
CALL SIGN	WHEN CARRIAGE OCCURRED				CALL SIGN	WHEN CARRIAGE OCCURRED			
O/ LEE GIGIT	DATE	FROM	OURS TO		O'NEE O'O'N	DATE	DATE FROM		RS TO
			_					_	
			_						
			_						
								-=-	
								_=_	
								_=_	
			<del>_</del>						
			<u> </u>						
								_=_	
			<u> </u>						
			_						
			_					_	
			_					_	
			_					_	
			_						
			_						
			_						

LEGA	IL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Name						
Bel	South Telecommunications, LLC		63184	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.  \$ 8,478,164.28										
IMP	ORTANT: You must complete a statement in space P concerning gross receipts.	(Amoun	t of gross receipts)							
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe:  Complete block 1, showing your minimum fee.  Complete block 2, showing whether your system carried any distant television stations.  If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee.  If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.										
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be a	oe entered on	line 1 of							
▶ If pa	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low.	entered on lin	e 2 in block							
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	ould be entere	d on line							
Block 1	<b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or mor least the minimum fee, regardless of whether they carried any distant stations. This fe 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		0,470,104.20							
	Enter the result here. This is your minimum fee.	\$	90,207.67							
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 Yes—Complete the DSE schedule.  No—Leave block 3 below blank and or the stations of the stations of the stations during the accounting per Yes—Complete the DSE schedule.	mn 4, you mus	st check							
Block 3	Line 1. <b>BASE RATE FEE</b> : Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$	142.38							
	Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		0.00							
	Line 3. Add lines 1 and 2 and enter here	\$	142.38							
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.	<b>\$</b>	90,207.67	Cable systems						
	whichever is larger Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter									
	zero.  Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9  (Interest Worksheet)		0.00	deposits under Section 111(d)(7) should contact the Licensing						
	Line 4. FILING FEE	\$	725.00	additional fees. Division for the						
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.  Add Lines 1, 2 and 3 of block 4 and enter total here	\$	90,932.67	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) o	of the							

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#						
Name	BellSouth Telecommunications, LLC		63184						
	CHANNELS								
M	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations								
Channels	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.								
	1. Enter the total number of channels on which	the cable	37						
	system carried television broadcast stations								
	Enter the total number of activated channel								
	on which the cable system carried television		1,231						
	and nonbroadcast services		1,231						
N Individual to									
Be Contacted for Further	Name Diane Bellinger		Telephone <b>210-351-4805</b>						
Information									
	Address 1010 N. St. Mary's Street, (Number, street, rural route, apartment, or street)	uite number)							
	San Antonio, TX 78215 (City, town, state, zip)								
		Fax (opti	onal) 210-246-8100						
	297700@44.55111	T ax (opti	01111) 210 210 0100						
	CERTIFICATION (This statement of account m	ust be certifed and signed in accordance with Co	opyright Office regulations.						
0									
Certifcation	• I, the undersigned, hereby certify that (Check o	ne, but only one, of the boxes.)							
	(Owner other than corporation or partners	nip) I am the owner of the cable system as identife	ed in line 1 of space B; or						
		and a supplied to \$1.00 and the supplied to th							
	in line 1 of space B and that the owner is	partnership) I am the duly authorized agent of the not a corporation or partnership; or	e owner of the cable system as identified						
	(Officer or partner) I am an officer (if a corp in line 1 of space B.	oration) or a partner (if a partnership) of the legal e	entity identifed as owner of the cable system						
	·								
	are true, complete, and correct to the best of my	nereby declare under penalty of law that all statem knowledge, information, and belief, and are made							
	[18 U.S.C., Section 1001(1986)]								
	N								
	/s/ Mike McC	uire							
	(e.g., /s/ John Smith). Bef	re on the line above using an "/s/" signature to certifore entering the first forward slash of the /s/ signature and your name. Pressing the "F" button will avoid en	e, place your cursor in the box and press the						
		,							
	Typed or printed name	mine McGuile							
	***************************************	ce President – Billing Operations tion held in corporation or partnership)							
	Dato: August 22, 204								
Ì	Date: August 23, 201								

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
BellSouth Telecommunications, LLC	63184	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act to lowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system service of providing secondary transmissions of primary broadcast transmitters, the system service service and amounts collected from subscribers receiving secondary transmissions pursuant.  For more information on when to exclude these amounts, see the note on page (vii) of the general inspaper SA3 form.  During the accounting period did the cable system exclude any amounts of gross receipts for second made by satellite carriers to satellite dish owners?  X NO	m for the basic sall not include subto section 119."	Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment For an explanation of interest assessment, see page (viii) of the general instructions in the paper SAS		Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	(interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further 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 Copy please list below the owner, address, first community served, accounting period, and ID number as g filing.	•	
Owner Address		
First community served Accounting period ID number		

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

ACCOUNTING PERIOD: 2018/1

# INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

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

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

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

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

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

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

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

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

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

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

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

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

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

#### **TOTAL OF DSEs**

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

### THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

### **EXAMPLE**:

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

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



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

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

		40,0000			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs .	1.083	DSEs .	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94 In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

**ACCOUNTING PERIOD: 2018/1** 

DSE SCHEDULE. PAG	GE 11. (CONTINUED)					
1	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			SY	STEM ID#
•	<b>BellSouth Telecommun</b>	ications, LLC	•			63184
	SUM OF DSEs OF CATEGOR	RY "O" STATION	NS:			
	<ul> <li>Add the DSEs of each station</li> </ul>					
	Enter the sum here and in line	1 of part 5 of this	s schedule.		0.25	
2	Instructions:					
2	In the column headed "Call S	Sign": list the cal	II signs of all distant stations	s identified by t	the letter "O" in column 5	
Computation	of space G (page 3). In the column headed "DSE"	': for each inden	endent station, give the DSI	= as "1 0"· for	each network or noncom-	
of DSEs for	mercial educational station, give	ve the DSE as ".2	25."	_ 00 1.0 , 101	odom motwork or monoom	
Category "O"			CATEGORY "O" STATION	NS: DSEs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	WETP/WETPHD	0.250				
						·····
Add rows as						
necessary.		†				
Remember to copy		<b> </b>				
all formula into new						
rows.						
		<b>.</b>				

Nome	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#								
Name	BellSouth Te	elecommunications,	LLC					63184	
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station.  Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25."  Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.								
Capacity		C	ATEGORY LA	AC STATIONS:	COMPUTAT	ION OF DSEs			
	1. CALL SIGN	1. CALL 2. NUMBER 3. NUMBER 4. BASIS OF				F 5. T GE V	YPE 'ALUE	6. DSE	
			÷		=  -	x			
			······				=		
						x			
			÷		=	x	=		
					_	x x	=		
			÷		= =	x	=		
	Add the DSEs	OF CATEGORY LAC S of each station. m here and in line 2 of p		lule,	▶		0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efference broadcast of space I).     Column 2: at your option.     Column 3: Column 4: I	e the call sign of each start by your system in substant on October 19, 1976 (ne or more live, nonnetwork) or each station give the This figure should correst and the number of days Divide the figure in column of the station's DSE	itution for a progra as shown by the I ork programs durin number of live, no spond with the info s in the calendar y in 2 by the figure (For more informa	am that your syster etter "P" in column in that optional carronnetwork program ormation in space lear: 365, except in in column 3, and giation on rounding, s	n was permitted 7 of space I); an itage (as shown by as carried in substance a leap year. ve the result in conseepage (viii) of	to delete under FCC d y the word "Yes" in co stitution for program column 4. Round to the general instructi	C rules and regular olumn 2 of s that were delete no less than the thins in the paper	ed	
						PUTATION OF DSEs			
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAI	3. NUM OF D MS IN YI	AYS	
				=			÷	=	
		÷		=			÷	=	
		÷					÷	=	
		÷	-	=			÷	= =	
	Add the DSEs	OF SUBSTITUTE-BAS of each station. m here and in line 3 of p		lule,	▶		0.00		
5 Total Number of DSEs	number of DSEs  1. Number of  2. Number of	R OF DSEs: Give the ames applicable to your system  T DSEs from part 2 ●  DSEs from part 3 ●  DSEs from part 4 ●		ces in parts 2, 3, and	d 4 of this schedul	le and add them to p	0.25 0.00 0.00	0.25	
	I								

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

LEGAL NAME OF C							S	YSTEM ID# 63184	Name
Instructions: Bloc		•						03104	
In block A:  • If your answer if			oort 6 and part	7 of the DSE cohe	odulo blank a	nd complete p	art 9 (page 16) of	tho	6
schedule.			•	7 OF THE DOE SCH	edule blatik al	na complete pa	art o, (page 10) or	uie	U
If your answer if	"No," complete blo			ELEVISION M	ARKETS				Computation of
Is the cable system						ection 76.5 of	FCC rules and reg	gulations in	3.75 Fee
effect on June 24, Yes—Com		schedule—[	OO NOT COM	PLETE THE REMA	AINDER OF F	PART 6 AND 7	•		
	 lete blocks B and								
		BLOO	CK B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1:	List the call signs			part 2, 3, and 4 o			tem was permitte	d to carry	
CALL SIGN		ne DSE Sche	dule. (Note: TI	ne 25, 1981. For for ne letter M below r Act of 2010.)	•	•			
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rd A Stations carri 76.61(b)(c)] B Specialty stati	ules and reguled pursuant for as defined	lations cited be to the FCC ma d in 76.5(kk) (7	usis on which you on the properties of the pertain to the pertain to the pertain to the pertain to the pertain the	ose in effect of 76.57, 76.59(b) (e)(1), 76.63(a)	n June 24, 198 b), 76.61(b)(c), a) referring to 7	76.63(a) referring	j tc	
	D Grandfathered instructions for E Carried pursua *F A station pre	d station (76. or DSE sched ant to individe eviously carried JHF station w	65) (see parag lule). ual waiver of F ed on a part-tin vithin grade-B	raph regarding su CC rules (76.7) ne or substitute ba contour, [76.59(d)(	ibstitution of g	grandfathered so		(5)	
Column 3:	*(Note: For those this schedule to	e stations ide determine the	entified by the I	n parts 2, 3, and 4 etter "F" in column	n 2, you must	complete the v	. °	Т	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
WETP/WET	С	0.25							
							<u> </u>		
								<u> </u>	
								0.25	
		В	LOCK C: CO	MPUTATION OF	F 3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule					
Line 2: Enter the	sum of permitte	ed DSEs from	m block B ab	ove					
Line 3: Subtract (If zero, I				r of DSEs subject 7 of this schedu		rate.	,		
Line 4: Enter gro	ess receipts from	ı space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ine 4 by 0.0375	and enter si	um here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DS	Es from line	3				·		carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 aı	nd enter her	e and on line	2, block 3, spac	e L (page 7)	)		0.00	

	DF OWNER OF CABLE							4STEM ID# 63184	Name
		BLOCK	A: TELEVIS	ION MARKETS	S (CONTIN	UED)	ı		
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation of 3.75 Fee
							 	•••••	
								•••••	
		• • • • • • • • • • • • • • • • • • • •			• • • • • • • • • • • • • • • • • • • •			••••••	
								•••••	
		•••••			• • • • • • • • • • • • • • • • • • • •			•••••	
					•			•••••	
		•••••						••••••	
								••••••	
								••••••	
			- <mark></mark>						

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#:												
Name	BellSouth Telec	communica	ations, L	LC								63184	4
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												
		PERMITT	ED DSE FO	OR STA	TIONS CARRI	ED	ON A PAR	RT-TIME AN	ID SUBSTI	TUTE BASIS			
	1. CALL	2. PRIC			OUNTING		4. BASI			RESENT	6. P	ERMITTED	
	SIGN	DSE		PE	RIOD		CARRI	AGE		OSE		DSE	4
				••••••								••••••	
													••••
													_
Computation of the Syndicated	Instructions: Block A In block A: If your answer is If your answer is	"Yes," comple	ete blocks E locks B and	d C blank									
Exclusivity Surcharge	Is any portion of the control	aabla avatam v	vithin a ton	100 maia	r tolovicion ma	rko	as defeed l	by costion 7	'6 E of ECC	ruloo in offoot l	upo 24	10012	
Suicharge	l <u> </u>	•	•	100 majo	i television ma	INC	_	•		iules III ellect 3	une 24,	1901!	
	X Yes—Complete	DIOCKS D and	I C .				INO—	Proceed to	part o				
	BLOCK B: C:	arriage of VHF	F/Grade B (	Contour	Stations			BLOCK	C: Compu	tation of Exem	pt DSEs	<b>;</b>	
	Is any station listed in commercial VHF stati or in part, over the ca	n block B of pa ion that places	art 6 the prin	mary stre	eam of a		BLOCK C: Computation of Exempt DSEs  Was any station listed in block B of part 7 carried in any community served by the cable system prior to March 31, 1972? (reference for the former FCC rule 76.159)						
	Yes—List each si			riate pern	nitted DSE		lI		ation below on the state of the	with its appropria o part 8.	ate permi	tted DSE	
	CALL SIGN	DSE	CALL S	SIGN	DSE	ıl	CAL	L SIGN	DSE	CALL SIG	iN I	DSE	l
	JALL GIGIN	JOL	OALL S		DOL		CAL	_ 0.014	JUL	OALL GIG	. 1	JUL	l
													l
											ı		
													l
							••••						l
													ı
													l
			TOTAL	DSEs	0.00					TOTAL DS	Es	0.00	ı

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:  BellSouth Telecommunications, LLC	SYSTEM ID# 63184	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	8,478,164.28	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC?  Yes—Complete section 3 below.  X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?      X Yes—Complete part 9 of this schedule.  No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here	_	
	E. Add lines A and D. This is your surcharge.		
	Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET	•	
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS 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)	SE .	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge.		

	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM: SYS	TEM ID#								
Name	F	BellSouth Telecommunications, LLC	63184								
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.  A. Enter 0.00300 of gross receipts (the amount in section 1).  B. Enter 0.00189 of gross receipts (the amount in section 1).  C. Multiply line B by 3.000 and enter here.  D. Enter 0.00089 of gross receipts (the amount in section 1).  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.									
		Syndicated Exclusivity Curonalge.	······································								
8 Computation of Base Rate Fee	<ul> <li>In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.</li> <li>If your answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.</li> <li>If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below</li> </ul>										
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS									
	• Did y	rour cable system retransmit the signals of any partially distant television stations during the accounting period?									
	<u> </u>	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 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule.  (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)									
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.  A. Enter 0.01064 of gross receipts (the amount in section 1).									
		and in block 3, line 1, space L (page 7)  Base Rate Fee	0.00								
1		· · · · · · · · · · · · · · · · · · ·	·								

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

	AME OF OWNER OF CABLE SYSTEM: outh Telecommunications, LLC	SYSTEM ID# 63184	Name
Section 4	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4	A. Enter 0.01064 of gross receipts  (the amount in section 1)  ▶\$		8
	B. Enter 0.00701 of gross receipts  (the amount in section 1) \$		Computation
	C. Multiply line B by 3.000 and enter here	_	Base Rate Fee
	D. Enter 0.00330 of gross receipts  (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)  Base Rate Fee  \$	0.00	
instead	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcate be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channels.		ο
Space In Gen receipt		e, to exclude	Computation of Base Rate Fee
station DSEs a	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	the number of	and Syndicated Exclusivity Surcharge
also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in pute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B becable system is wholly located outside all major television markets, complete block A only.		for Partially Distant Stations, and
Step 1	Didentify a Subscriber Group for Partially Distant Stations:  For each community served, determine the local service area of each wholly distant and each partially distant state to that community.	tion you	for Partially Permitted Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were lost the station's local service area. A subscriber located outside the local service area of a station is distant to that state to the token, the station is distant to the subscriber.)		
subscr	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Compi	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your sys	tem's subscriber	
In each Identi Give	i section: fy the communities/areas represented by each subscriber group. the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to al bers in the group.	I of the	
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in this schedule; or,	n parts 2, 3,	
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 b 6 of this schedule.	olock B,	
• Add t	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 is apper SA3 form.	nstructions	
page. DSEs f	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need calculations on the form.	at is, the total	

# SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63184 **BellSouth Telecommunications, LLC** Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNE BellSouth Telecom						S	YSTEM ID# 63184	Name
Bl	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GROU	JP .		SECOND	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA 0				COMMUNITY/ ARE.			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<b></b>		<u> </u>	-		H		Base Rate Fee
			<b>+</b>				<del></del>	Syndicated
			<b>†</b>				<del></del>	Exclusivity
								Surcharge
								for
			<b></b>					Partially
			<b></b>					Distant
			<b></b>				<u></u>	Stations
			<b></b>			<b></b>	<del></del>	
			<b>†</b>					
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$ 6,503	,616.85	Gross Receipts Sec	ond Group	\$ 1,92	21,020.22	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Sec		\$	0.00	
	THIRD	SUBSCRIBER GROU				SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
WETP/WETPHD	0.25		<b></b>					
			<b></b>					
		-	<b></b>			-		
			<del> </del>				<del></del>	
			<del> </del>	-		<u> </u>		
			<b>*</b>					
		-	<b></b>					
			<b></b>			-		
	<b> </b>		<b></b>			-	<u></u>	
			<del> </del>				<del> </del>	
			<b>†</b>				<u></u>	
Total DSEs			0.25	Total DSEs			0.00	
Gross Receipts Third G	roup	\$ 53	,527.21	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	142.38	Base Rate Fee Fou	rth Group	\$	0.00	

LEGAL NAME OF OWNE						S	YSTEM ID#	Name
BellSouth Telecor	nmunica	tions, LLC					63184	
BI				ATE FEES FOR EAC			LID.	
COMMUNITY/ AREA	FIFTH	SUBSCRIBER GROU	JP <b>0</b>	COMMUNITY/ AREA		SUBSCRIBER GRO	UP <b>0</b>	9
COMMUNITY AREA				COMMUNITY AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
		-						Exclusivity Surcharge
	·							for
		-						Partially
								Distant
								Stations
							<u> </u>	
	<u>-</u>				····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	SEVENTH	SUBSCRIBER GROU	JP		EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					····			
		-						
						.		
Total DSEs			0.00	Total DSEs			0.00	
Total DSEs	_			Total DSEs				
Gross Receipts Third C	iroup	\$	0.00	Gross Receipts Four	tn Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				Ш				
Base Rate Fee: Add th	ne <b>base rat</b>	e fees for each subso	riber aroun	as shown in the boxes	above.			
Enter here and in block			<b>5</b> 11			\$		

### Nonpermitted 3.75 Stations

LEGAL NAME OF OW BellSouth Telec						S	YSTEM ID# 63184	Name
		COMPUTATION C		ATE FEES FOR EA		RIBER GROUP  SUBSCRIBER GROUP	UP	
COMMUNITY/ ARE			0	COMMUNITY/ ARE	0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	·····							Base Rate Fe
						-		Syndicated
	·····					-		Exclusivity Surcharge
						-		for
					<b></b>			Partially Distant
								Stations
						-		
	······				·····	-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Firs	t Group	\$ 6,50	3,616.85	Gross Receipts Sec	cond Group	\$ 1,9	21,020.22	
Base Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GRO	UP 0	
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					·····	<del>-                                     </del>		
	·····				·····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 53,527.21			Gross Receipts Fou	ırth Group	\$	0.00		
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
				<u>II</u>				
Base Rate Fee: Add Enter here and in bl			scriber group	as shown in the boxe	es above.	\$	0.00	
_inci noie allu III Di	OUN D, IIIIE I,	space L (page 1,				<del>*</del>	0.00	

LEGAL NAME OF OWNE BellSouth Telecom			_			S	YSTEM ID# 63184	Name
BL				TE FEES FOR EACH				
001111111111111111111111111111111111111	FIFTH	SUBSCRIBER GRO		001111111111111111111111111111111111111		SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
		-				-		Syndicated Exclusivity
						-		Surcharge
								for
								Partially
		-						Distant
		-				-		Stations
					<del></del>	-		
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
<b>Base Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
S	EVENTH	SUBSCRIBER GRO	UP		EIGHTH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			······································		<u></u>	<del>                                     </del>	····	
					<u></u>	<u> </u>	····	
						-		
					•	<del> </del>		
						H		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
<b>Base Rate Fee</b> Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
	e <b>base rat</b>			Base Rate Fee Fourth		\$	0.00	

ACCOUNTING PERIOD: 2018/1

FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name BellSouth Telecommunications, LLC 63184 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . . . . THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group . . . . . . . . . . . . . . . . Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

ACCOUNTING PERIOD: 2018/1

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name BellSouth Telecommunications, LLC 63184 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group . . . . . . . . . . . . . . . . SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group . . . . . . . . . . . . . . . . Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown