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

**STATEMENT OF ACCOUNT** for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

# SA3E Long Form

Return completed workbook by email to:

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| Α  | ACCOUNTING PERIOD COVERED B   | Y THIS STATEMENT:  |                                     |  |              |        |
|--|---|--|-------------------------------------|--|--------------|--------|
| Accounting<br>Period                       | 2018/1  |  |                                     |  |              |        |
| <b>B</b><br>Owner                          | Instructions:         Give the full legal name of the owner of the rate title of the subsidiary, not that of the parent List any other name or names under which <i>If there were different owners during the ac</i> a single statement of account and royalty fee particular the check here if this is the system's first film | corporation<br>the owner conducts the business of the<br>counting period, only the owner on the<br>ayment covering the entire accounting p | e cable syster<br>last day of th    | m<br>e accounting period should s                                    |              | 63241  |
|  | LEGAL NAME OF OWNER/MAILING ADDRE   | ESS OF CABLE SYSTEM  |                                     |  |              |        |
|  | BellSouth Telecommunication   | s, LLC   |                                     |  |              |        |
|  |   |  |                                     |  | 6324         | 120181 |
|  |   |  |                                     |  | 63241        | 2018/1 |
| С  | 1010 N. St. Mary's Street, Roon<br>San Antonio, TX 78215-2109<br>INSTRUCTIONS: In line 1, give any busine<br>names already appear in space B. In line 2   | ess or trade names used to identify the  |                                     |  |              |        |
| System                                     | IDENTIFICATION OF CABLE SYSTEM:   |  |                                     |  |              | D.     |
|  | MAILING ADDRESS OF CABLE SYSTEM:  |  |                                     |  |              |        |
|  | 2 (Number, street, rural route, apartment, or suite number  | n)   |                                     |  |              |        |
|  | (City, town, state, zip code)   |  |                                     |  |              |        |
| D  | Instructions: For complete space D instructions   | ctions, see page 1b. Identify only the   | e frst comm                         | unity served below and rel   | ist on page  | : 1b   |
| Area                                       | with all communities.   |  |                                     |  |              |        |
| Served                                     | CITY OR TOWN  | STATE  |                                     |  |              |        |
| First<br>Community                         | Greensboro  | NC   |                                     |  |              |        |
| connunty                                   | Below is a sample for reporting communi   | , , ,  | · ·                                 |  | 0110         | 000    |
|  | CITY OR TOWN (SAMPLE)   |  | TATE<br>MD                          | CH LINE UP   | SUB          | GRP#   |
| Sample                                     | Alliance  |  | MD                                  | B  |              | 2      |
|  | Gering  |  | MD                                  | В  |              | 3      |
| form in order to pro<br>numbers. By provid | e: Section 111 of title 17 of the United States Code author<br>cess your statement of account. PII is any personal infor<br>ting PII, you are agreeing to the routine use of it to estab<br>pared for the public. The effect of not providing the PII re  | rmation that can be used to identify or trace a<br>lish and maintain a public record, which inclu  | in individual, su<br>ides appearing | uch as name, address and teleph<br>in the Offce's public indexes and | none<br>d in |        |

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AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

8/27/2018

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:  |                    |                                       | SYSTEM ID#             |  |  |  |  |  |
| BellSouth Telecommunications, LLC63241  |                    |                                       |                        |  |  |  |  |  |
| <b>Instructions:</b> 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 frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. |                    |                                       |                        |  |  |  |  |  |
| <b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.  |                    |                                       |                        |  |  |  |  |  |
| f all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate<br>all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations<br>on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group,<br>designated by a number (based on your reporting from Part 9).   |                    |                                       |                        |  |  |  |  |  |
| When reporting the carriage of television broadcast stations on a community-by-commu<br>channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and<br>(based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns  | d a subscriber gro | iate each commun<br>oup designated by | ity with a<br>a number |  |  |  |  |  |
| CITY OR TOWN  | STATE              | CH LINE UP                            | SUB GRP#               |  |  |  |  |  |
| Greensboro  | NC                 |                                       |                        | First  |  |  |  |  |
| Alamance  | NC                 |                                       |                        | Community                                      |  |  |  |  |
| ALAMANCE UNINCORPORATED COUNTY  | NC                 |                                       |                        |  |  |  |  |  |
| Altamahaw   | NC                 | •                                     |                        |  |  |  |  |  |
| BURLINGTON  | NC                 |                                       |                        |  |  |  |  |  |
| CLEMMONS  | NC                 |                                       |                        |  |  |  |  |  |
| DAVIDSON UNINCORPORATED COUNTY  | NC NC              |                                       |                        | See instructions for<br>additional information |  |  |  |  |
|   |                    |                                       |                        | on alphabetization.                            |  |  |  |  |
|   | NC                 |                                       |                        | on aphabetization.                             |  |  |  |  |
| FORSYTH UNINCORPORATED COUNTY   | NC                 |                                       |                        |  |  |  |  |  |
| GRAHAM  | NC                 |                                       |                        |  |  |  |  |  |
| GUILFORD UNINCORPORATED COUNTY  | NC                 |                                       |                        |  |  |  |  |  |
| HIGH POINT  | NC                 |                                       |                        |  |  |  |  |  |
| Jamestown   | NC                 |                                       |                        |  |  |  |  |  |
| KERNERSVILLE  | NC                 |                                       |                        |  |  |  |  |  |
| Lewisville  | NC                 |                                       |                        |  |  |  |  |  |
| McLeansville  | NC                 |                                       |                        |  |  |  |  |  |
| Midway  | NC                 |                                       |                        |  |  |  |  |  |
| OAK RIDGE   | NC                 |                                       |                        |  |  |  |  |  |
| Pleasant Garden   | NC                 | •                                     |                        |  |  |  |  |  |
| Randolph Unincorporated County  | NC                 | •                                     |                        |  |  |  |  |  |
| REIDSVILLE  | NC                 |                                       |                        |  |  |  |  |  |
| ROCKINGHAM UNINCORPORATED COUNTY  | NC                 |                                       |                        |  |  |  |  |  |
| STOKESDALE  |                    |                                       |                        |  |  |  |  |  |
|   | NC                 |                                       |                        |  |  |  |  |  |
| SUMMERFIELD   | NC NC              |                                       |                        |  |  |  |  |  |
| Swepsonville  | NC                 |                                       |                        |  |  |  |  |  |
| WALKERTOWN  | NC                 |                                       |                        |  |  |  |  |  |
| Wallburg  | NC                 |                                       |                        |  |  |  |  |  |
| WELCOME   | NC                 |                                       |                        |  |  |  |  |  |
| Wentworth   | NC                 |                                       |                        |  |  |  |  |  |
| WINSTON SALEM   | NC                 |                                       |                        |  |  |  |  |  |
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| Name                      | LEGAL NAME OF OWNER OF CABL  | E SYSTEM:  |  |   |                  |                          |      |   | S  | YSTI       | EM ID  |  |  |  |  |  |  |
|---------------------------|--|--|--|---|------------------|--------------------------|------|---|--|------------|--|--|--|--|--|--|--|
| inallie                   | BellSouth Telecommun   | ications, LL   | C  |   |                  |                          |      |   |  |            | 6324   |  |  |  |  |  |  |
| F                         | SECONDARY TRANSMISSION   | SERVICE: SL  | IBSCR  | IBERS AND F   | ٢A               | TES                      |      |   |  |            |  |  |  |  |  |  |  |
| E                         | In General: The information in s   |  |  |   |                  |                          |      |   |  |            |  |  |  |  |  |  |  |
| Secondary                 | system, that is, the retransmission  |  |  |   |                  |                          |      |   |  |            |  |  |  |  |  |  |  |
| Secondary<br>Transmission | about other services (including p<br>last day of the accounting period   |  |  |   |                  |                          | eι   | nose exist  | ing on the   |            |  |  |  |  |  |  |  |
| Service: Sub-             |  |  |  |   |                  |                          | cat  | ole system  | , broken   |            |  |  |  |  |  |  |  |
| scribers and              | <b>Number of Subscribers:</b> 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   |  |  |   |                  |                          |      |   |  |            |  |  |  |  |  |  |  |
| Rates                     | each category by counting the number of billings in that category (the number of persons or organizations charged  |  |  |   |                  |                          |      |   |  |            |  |  |  |  |  |  |  |
|                           | separately for the particular service at the rate indicated-not the number of sets receiving service).   |  |  |   |                  |                          |      |   |  |            |  |  |  |  |  |  |  |
|                           | Rate: Give the standard rate 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.<br>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  |  |  |   |                  |                          |      |   |  |            |  |  |  |  |  |  |  |
|                           | that applies to your system. Not   |  |  |   |                  |                          |      |   |  |            |  |  |  |  |  |  |  |
|                           | categories, that person or entity  |  |  |   |                  |                          |      |   |  |            |  |  |  |  |  |  |  |
|                           | subscriber who pays extra for ca<br>first set" and would be counted of   |  |  |   |                  |                          | un   | der Servio  | ce to the  |            |  |  |  |  |  |  |  |
|                           | Block 2: If your cable system  |  |  |   |                  |                          | are  | different fi  | rom those  |            |  |  |  |  |  |  |  |
|                           | printed in block 1 (for example, t   | -  |  | •   |                  |                          |      |   |  |            |  |  |  |  |  |  |  |
|                           | with the number of subscribers a   | and rates, in the  | e right-ł  | hand block. A   | tw               | o- or three-word descri  | ipti | on of the s   | ervice is  |            |  |  |  |  |  |  |  |
|                           | sufficient.  | DCK 1  |  |   | П                |                          |      | BLOC  | K 2  |            |  |  |  |  |  |  |  |
|                           |  | NO. OF   |  |   | H                |                          |      | BLOG  | NO. OF   |            |  |  |  |  |  |  |  |
|                           | CATEGORY OF SERVICE  | SUBSCRIB   | ERS  | RATE  |                  | CATEGORY OF S            | SEF  | RVICE   | SUBSCRIBERS  | F          | RATE   |  |  |  |  |  |  |
|                           | Residential:   |  |  |   |                  |                          |      |   |  |            |  |  |  |  |  |  |  |
|                           | <ul> <li>Service to first set</li> </ul>   | 1(   | 6,833  | \$ 19.00  |                  | HD Tech Fee              |      |   | 14,201   | \$         | 10.0   |  |  |  |  |  |  |
|                           | <ul> <li>Service to additional set(s)</li> </ul>   |  |  |   | - Li             | Set-Top Box              |      |   | 16,876   |            | \$0-\$1  |  |  |  |  |  |  |
|                           | <ul> <li>FM radio (if separate rate)</li> </ul>  |  |  |   |                  | Broadcast TV Surcha      | arg  | e   | 16,833   | \$4.9      | 9-\$5.9  |  |  |  |  |  |  |
|                           | Motel, hotel   |  |  |   |                  |                          |      |   |  |            |  |  |  |  |  |  |  |
|                           | Commercial   |  | 43   | \$ 20.00  |                  |                          |      |   |  |            |  |  |  |  |  |  |  |
|                           | Converter  |  |  |   |                  |                          |      |   |  |            |  |  |  |  |  |  |  |
|                           | Residential  |  |  |   |                  |                          |      |   |  |            |  |  |  |  |  |  |  |
|                           | Non-residential  |  |  |   |                  |                          |      |   |  |            |  |  |  |  |  |  |  |
|                           | SERVICES OTHER THAN SEC  |  | NGMIG  |   | = 0              |                          |      |   |  |            |  |  |  |  |  |  |  |
| F                         | In General: Space F calls for rational   | -  |  |   |                  |                          | svs  | tem's serv  | ices that were   |            |  |  |  |  |  |  |  |
| F                         | not covered in space E, that is, t   | hose services  | that are   | not offered in  | С                | ombination with any se   | eco  | ndary tran  | smission   |            |  |  |  |  |  |  |  |
|                           | service for a single fee. There ar   |  | ,  |   |                  | 0                        |      |   |  |            |  |  |  |  |  |  |  |
| Services                  | furnished at cost or (2) services  |  |  |   |                  |                          |      |   |  |            |  |  |  |  |  |  |  |
| Other Than<br>Secondary   | amount of the charge and the ur<br>enter only the letters "PP" in the  |  | usually  | ollied. If any i  | a                | tes are charged on a va  | aria | able per-pr   | ogram basis,   |            |  |  |  |  |  |  |  |
| •                         | Block 1: Give the standard rat   | te charged by t  | he cabl  | e system for e  | a                | ch of the applicable ser | vio  | es listed.  |  |            |  |  |  |  |  |  |  |
| ransmissions:             |  | ,  | stem fu  | rnichod or offe   | re               | ed during the accountin  | g r  | period that   | were not   |            |  |  |  |  |  |  |  |
| Transmissions:<br>Rates   | Block 2: List any services that  |  |  |   |                  | معمائم مممطناتها اممط    |      | ices in the   | f  |            |  |  |  |  |  |  |  |
|                           | Block 2: List any services that listed in block 1 and for which a  | separate charg   | e was i  | made or estab   |                  | sned. List these other s | er   | brief (two- or three-word) description and include the rate for each.                     |  |            |  |  |  |  |  |  |  |
|                           | Block 2: List any services that listed in block 1 and for which a  | separate charg   | e was i  | made or estab   |                  | sned. List these other s | er   | 1   | e form of a  |            |  |  |  |  |  |  |  |
|                           | Block 2: List any services that listed in block 1 and for which a  | separate charg   | e was i<br>le the r  | made or estab   |                  | shed. List these other s | er   |   | BLOCK 2  |            |  |  |  |  |  |  |  |
|                           | Block 2: List any services that<br>listed in block 1 and for which a<br>brief (two- or three-word) descrip<br>CATEGORY OF SERVICE  | separate charg<br>ption and incluc<br>BLO(                   | le was i<br>le the ra<br>CK 1  | made or estab   | lis              |                          | er   |   |  | F          | RATE   |  |  |  |  |  |  |
|                           | Block 2: List any services that<br>listed in block 1 and for which a<br>brief (two- or three-word) descrip   | separate charg<br>ption and incluc<br>BLO(                   | e was i<br>le the ra<br>CK 1<br>CATEC  | made or estab<br>ate for each.  | lis<br>RV        | /ICE RATE                | erv  |   | BLOCK 2  | F          | RATE   |  |  |  |  |  |  |
|                           | Block 2: List any services that<br>listed in block 1 and for which a<br>brief (two- or three-word) descrip<br>CATEGORY OF SERVICE<br>Continuing Services:<br>• Pay cable   | separate charg<br>ption and incluc<br>BLO(                   | e was i<br>le the ra<br>CK 1<br>CATEC<br>Install<br>• Mo   | made or estab<br>ate for each.<br>GORY OF SEI<br>ation: Non-re  | lis<br>RV        | /ICE RATE                |      | CATEGO  | BLOCK 2  |            | \$0-\$10   |  |  |  |  |  |  |
|                           | Block 2: List any services that<br>listed in block 1 and for which a<br>brief (two- or three-word) descrip<br>CATEGORY OF SERVICE<br>Continuing Services:<br>• Pay cable<br>• Pay cable—add'l channel  | separate charg<br>ption and incluc<br>BLO(                   | e was i<br>le the ra<br>CK 1<br>CATEC<br>Install<br>• Mo<br>• Co   | made or estab<br>ate for each.<br>GORY OF SEI<br>ation: Non-re<br>otel, hotel<br>mmercial   | lis<br>RV        | /ICE RATE                |      | CATEGO  | BLOCK 2<br>ORY OF SERVICE  |            | 60-\$10<br>\$0-\$3   |  |  |  |  |  |  |
|                           | Block 2: List any services that<br>listed in block 1 and for which a<br>brief (two- or three-word) descrip<br>CATEGORY OF SERVICE<br>Continuing Services:<br>• Pay cable<br>• Pay cable<br>• Fire protection   | separate charg<br>otion and includ<br>BLO(<br>RATE           | e was i<br>le the ra<br>CK 1<br>CATEC<br>Install<br>• Mo<br>• Co<br>• Pa   | made or estab<br>ate for each.<br>GORY OF SEI<br>ation: Non-re<br>otel, hotel<br>mmercial<br>y cable  | RN<br>Si         | /ICE RATE                |      | CATEGO<br>Video on<br>Service /<br>Credit M   | BLOCK 2<br>DRY OF SERVICE<br>Demand<br>Activation Fee<br>anagement Fee   |            | \$0-\$10<br>\$0-\$3<br>\$0-\$44  |  |  |  |  |  |  |
|                           | Block 2: List any services that<br>listed in block 1 and for which a<br>brief (two- or three-word) descrip<br>CATEGORY OF SERVICE<br>Continuing Services:<br>• Pay cable<br>• Pay cable<br>• Fire protection<br>•Burglar protection  | separate charg<br>otion and includ<br>BLO(<br>RATE           | e was i<br>le the r<br>CK 1<br>CATE(<br>Install<br>• Mo<br>• Co<br>• Pa<br>• Pa  | made or estab<br>ate for each.<br>GORY OF SEI<br>ation: Non-re<br>otel, hotel<br>mmercial<br>y cable<br>y cable-add'l o   | RN<br>Si         | /ICE RATE                |      | CATEGO<br>Video or<br>Service /<br>Credit M<br>Dispatch                                   | BLOCK 2<br>DRY OF SERVICE<br>Demand<br>Activation Fee<br>anagement Fee<br>on Demand                                      |            | 60-\$10<br>\$0-\$3   |  |  |  |  |  |  |
|                           | Block 2: List any services that<br>listed in block 1 and for which a<br>brief (two- or three-word) descrip<br>CATEGORY OF SERVICE<br>Continuing Services:<br>• Pay cable<br>• Pay cable<br>• Pay cable—add'l channel<br>• Fire protection<br>•Burglar protection<br>Installation: Residential  | separate chargotion and include<br>BLOC<br>RATE<br>\$5-\$199 | e was i<br>le the r<br>CK 1<br>CATE(<br>Install<br>• Mo<br>• Co<br>• Pa<br>• Pa<br>• Fin   | made or estab<br>ate for each.<br>GORY OF SEI<br>ation: Non-re<br>otel, hotel<br>mmercial<br>y cable<br>y cable-add'l c<br>e protection   | llis<br>RV<br>si | /ICE RATE                |      | CATEGO<br>Video or<br>Service /<br>Credit M<br>Dispatch<br>Wireless                       | BLOCK 2<br>DRY OF SERVICE<br>Demand<br>Activation Fee<br>anagement Fee<br>on Demand<br>Receiver                          | \$9        | \$0-\$10<br>\$0-\$3<br>\$0-\$44  |  |  |  |  |  |  |
|                           | Block 2: List any services that<br>listed in block 1 and for which a<br>brief (two- or three-word) descrip<br>CATEGORY OF SERVICE<br>Continuing Services:<br>• Pay cable<br>• Pay cable<br>• Fire protection<br>•Burglar protection  | separate charg<br>otion and includ<br>BLO(<br>RATE           | e was i<br>le the ra<br>CK 1<br>CATE(<br>Install<br>• Mc<br>• Co<br>• Pa<br>• Pa<br>• Fin<br>• Bu                                      | made or estab<br>ate for each.<br>GORY OF SEI<br>ation: Non-re<br>otel, hotel<br>mmercial<br>y cable<br>y cable-add'l c<br>e protection<br>rglar protectio                          | llis<br>RV<br>si | /ICE RATE                |      | CATEGO<br>Video or<br>Service /<br>Credit M<br>Dispatch<br>Wireless<br>HD Prem            | BLOCK 2<br>DRY OF SERVICE<br>Demand<br>Activation Fee<br>anagement Fee<br>on Demand<br>Receiver<br>ium Tier              | \$9        | \$0-\$10<br>\$0-\$3<br>\$0-\$44<br>9 - \$1<br>\$10-\$4<br>\$                               |  |  |  |  |  |  |
|                           | Block 2: List any services that<br>listed in block 1 and for which a<br>brief (two- or three-word) descrip<br>CATEGORY OF SERVICE<br>Continuing Services:<br>• Pay cable<br>• Pay cable—add'l channel<br>• Fire protection<br>• Burglar protection<br>Installation: Residential<br>• First set<br>• Additional set(s)                                  | separate chargotion and include<br>BLOC<br>RATE<br>\$5-\$199 | e was i<br>le the r.<br>CK 1<br>CATE(<br>Install<br>• Mc<br>• Co<br>• Pa<br>• Pa<br>• Fin<br>• Bu<br>Other                             | made or estab<br>ate for each.<br>GORY OF SEI<br>ation: Non-re<br>otel, hotel<br>mmercial<br>y cable<br>y cable-add'l o<br>e protection<br>rglar protectio<br>services:             | llis<br>RV<br>si | /ICE RATE<br>dential     |      | CATEGO<br>Video on<br>Service /<br>Credit M<br>Dispatch<br>Wireless<br>HD Prem<br>DVR Upg | BLOCK 2<br>DRY OF SERVICE<br>Demand<br>Activation Fee<br>anagement Fee<br>on Demand<br>Receiver<br>Jum Tier<br>grade Fee | \$9<br>\$9 | \$0-\$10<br>\$0-\$3<br>\$0-\$44<br>9 - \$1<br>\$10-\$4<br>\$10-\$4<br>\$5                  |  |  |  |  |  |  |
|                           | Block 2: List any services that<br>listed in block 1 and for which a<br>brief (two- or three-word) descrip<br>CATEGORY OF SERVICE<br>Continuing Services:<br>• Pay cable<br>• Pay cable<br>• Pay cable—add'l channel<br>• Fire protection<br>• Burglar protection<br>Installation: Residential<br>• First set  | separate chargotion and include<br>BLOC<br>RATE<br>\$5-\$199 | e was i<br>le the r.<br>CK 1<br>CATE(<br>Install<br>• Mc<br>• Co<br>• Pa<br>• Pa<br>• Fin<br>• Bu<br>Other                             | made or estab<br>ate for each.<br>GORY OF SEI<br>ation: Non-re<br>otel, hotel<br>mmercial<br>y cable<br>y cable-add'l c<br>e protection<br>rglar protectio                          | llis<br>RV<br>si | /ICE RATE                |      | CATEGO<br>Video or<br>Service /<br>Credit M<br>Dispatch<br>Wireless<br>HD Prem            | BLOCK 2<br>DRY OF SERVICE<br>Demand<br>Activation Fee<br>anagement Fee<br>on Demand<br>Receiver<br>Jum Tier<br>grade Fee | \$9        | \$0-\$10<br>\$0-\$3<br>\$0-\$44<br>9 - \$1<br>\$10-\$4<br>\$                               |  |  |  |  |  |  |
|                           | Block 2: List any services that<br>listed in block 1 and for which a<br>brief (two- or three-word) descrip<br>CATEGORY OF SERVICE<br>Continuing Services:<br>• Pay cable<br>• Pay cable—add'l channel<br>• Fire protection<br>• Burglar protection<br>Installation: Residential<br>• First set<br>• Additional set(s)                                  | separate chargotion and include<br>BLOC<br>RATE<br>\$5-\$199 | e was i<br>le the r<br>CK 1<br>CATE(<br>Install<br>• Mo<br>• Co<br>• Pa<br>• Pa<br>• Fin<br>• Bu<br>Other<br>• Re                      | made or estab<br>ate for each.<br>GORY OF SEI<br>ation: Non-re<br>otel, hotel<br>mmercial<br>y cable<br>y cable-add'l o<br>e protection<br>rglar protectio<br>services:             | llis<br>RV<br>si | /ICE RATE<br>dential     |      | CATEGO<br>Video on<br>Service /<br>Credit M<br>Dispatch<br>Wireless<br>HD Prem<br>DVR Upg | BLOCK 2<br>DRY OF SERVICE<br>Demand<br>Activation Fee<br>anagement Fee<br>on Demand<br>Receiver<br>Jum Tier<br>grade Fee | \$9<br>\$9 | \$0-\$10<br>\$0-\$3<br>\$0-\$44<br>9 - \$1<br>\$10-\$4<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$ |  |  |  |  |  |  |
|                           | Block 2: List any services that<br>listed in block 1 and for which a<br>brief (two- or three-word) descrip<br>CATEGORY OF SERVICE<br>Continuing Services:<br>• Pay cable<br>• Pay cable—add'l channel<br>• Fire protection<br>• Burglar protection<br>Installation: Residential<br>• First set<br>• Additional set(s)<br>• FM radio (if separate rate) | separate chargotion and include<br>BLOC<br>RATE<br>\$5-\$199 | e was i<br>le the r.<br>CK 1<br>CATEC<br>Install<br>• Mc<br>• Co<br>• Pa<br>• Pa<br>• Fin<br>• Bu<br>• Bu<br>• Cother<br>• Re<br>• Dis | made or estab<br>ate for each.<br>GORY OF SEI<br>ation: Non-re<br>otel, hotel<br>mmercial<br>y cable<br>y cable-add'l of<br>e protection<br>rglar protectio<br>services:<br>connect | llis<br>RV<br>si | /ICE RATE<br>dential     |      | CATEGO<br>Video on<br>Service /<br>Credit M<br>Dispatch<br>Wireless<br>HD Prem<br>DVR Upg | BLOCK 2<br>DRY OF SERVICE<br>Demand<br>Activation Fee<br>anagement Fee<br>on Demand<br>Receiver<br>Jum Tier<br>grade Fee | \$9<br>\$9 | \$0-\$10<br>\$0-\$3<br>\$0-\$44<br>9 - \$1<br>\$10-\$4<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$ |  |  |  |  |  |  |

Name

G

Primary

Transmitters:

Television

SYSTEM ID#

63241

| PallSouth | Telecommunications, | 110 |
|-----------|---------------------|-----|
| Belisouth | relecommunications, |     |

LEGAL NAME OF OWNER OF CABLE SYSTEM

### PRIMARY TRANSMITTERS: TELEVISION

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

basis under specific FCC rules, regulations, or authorizations:

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

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

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

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

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

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

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

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

|                 |                                | CHANN                    | EL LINE-UP                 | ٨٨                                      |                        |  |
|-----------------|--------------------------------|--------------------------|----------------------------|---|------------------------|--|
|                 | 1                              | CHANN                    | EL LINE-UP                 | AA                                      |                        |  |
| 1. CALL<br>SIGN | 2. B'CAST<br>CHANNEL<br>NUMBER | 3. TYPE<br>OF<br>STATION | 4. DISTANT?<br>(Yes or No) | 5. BASIS OF<br>CARRIAGE<br>(If Distant) | 6. LOCATION OF STATION |  |
| WCWG/WCWGHE     | 20/1020                        | I                        | No                         |   | Lexington, NC          |  |
| WFMY/WFMYHD     | 2/1002                         | N                        | No                         |   | Greensboro, NC         | See instructions for                       |
| WGHP/WGHPHD     | 8/1008                         | I                        | No                         |   | High Point, NC         | additional information on alphabetization. |
| WGPX            | 16                             | I                        | No                         |   | Burlington, NC         |  |
| WGSR-LD         | 47                             | I                        | No                         |   | Reidsville, NC         |  |
| WLXI            | 61                             | I                        | No                         |   | Greensboro, NC         |  |
| WMYV/WMYVHD     | 48/1048                        | I                        | No                         |   | Greensboro, NC         |  |
| WUNL/WUNLHD     | 26/1026                        | E                        | No                         |   | Winston-Salem, NC      |  |
| WXII/WXIIHD     | 12/1012                        | N                        | No                         |   | Winston-Salem, NC      |  |
| WXLV/WXLVHD     | 45/1045                        | N                        | No                         |   | Winston-Salem, NC      |  |
|                 |                                |                          |                            |   |                        |  |
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|                 |                                |                          |                            |   |                        |  |
|                 |                                |                          |                            |   |                        |  |

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

Name

G

Primary

Transmitters:

Television

SYSTEM ID#

63241

# BellSouth Telecommunications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM:

### PRIMARY TRANSMITTERS: TELEVISION

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

basis under specific FCC rules, regulations, or authorizations:
Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the

 Do not list the station here in space G—but do list it in space I (t station was carried only on a substitute basis.

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**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.

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

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

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

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

|      |         | CHANN   | EL LINE-UP  | AB           |                        |
|------|---------|---------|-------------|--------------|------------------------|
|      |         |         |             |              | 6. LOCATION OF STATION |
| SIGN | CHANNEL |         | (Yes or No) | CARRIAGE     |                        |
|      | NUMBER  | STATION |             | (If Distant) |                        |
|      |         |         |             |              |                        |
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| Name                                   | LEGAL NAME OF C   |   |  |  |                           |  |   |  | SYSTEM ID#<br>63241                                    |
|--|---|---|--|--|---------------------------|--|---|--|--|
| H<br>Primary<br>Transmitters:<br>Radio | all-band basis v<br>Special Instruct<br>receivable if (1)<br>on the basis of<br>For detailed info<br>located in the p | t every radio s<br>whose signals<br>ctions Concer<br>it is carried by<br>monitoring, to<br>prmation abou<br>aper SA3 form | tation ca<br>were "ge<br>rning All<br>/ the sysi<br>be receiv<br>t the the<br>n. | rried on a separate and discr<br>nerally receivable" by your ca<br><b>-Band FM Carriage:</b> Under (<br>tem whenever it is received a<br>ved at the headend, with the s<br>Copyright Office regulations of | abl<br>Co<br>it tl<br>sy: | e system during<br>pyright Office re<br>he system's hea<br>stem's FM anter | g the accountine<br>gulations, an<br>adend, and (2)<br>nna, during ce | ng perio<br>FM sign<br>it can b<br>rtain sta | d.<br>al is generally<br>e expected,<br>ted intervals. |
|  | Column 2: S<br>Column 3: If<br>signal, indicate<br>Column 4: G  | tate whether t<br>the radio stati<br>this by placing<br>Give the station  | he statio<br>on's sigr<br>a check<br>a's locatio                                 | each station carried.<br>n is AM or FM.<br>nal was electronically process<br>mark in the "S/D" column.<br>on (the community to which the<br>the community with which the                                   | ne                        | station is licens  | ed by the FCC   |  |  |
|  | CALL SIGN   | AM or FM  | S/D  | LOCATION OF STATION  | П                         | CALL SIGN  | AM or FM  | S/D  | LOCATION OF STATION                                    |
|  | OALL SIGN   |   | 5,0  |  | Η                         |  |   | 5,0  |  |
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| LEGAL NAME OF OWNER OF O                                 |                             |                           |  |                                  |                         | SYSTEM ID#       | NI                      |
|--|-----------------------------|---------------------------|--|----------------------------------|-------------------------|------------------|-------------------------|
| BellSouth Telecommu                                      | nications                   | , LLC                     |  |                                  |                         | 63241            | Name                    |
| UBSTITUTE CARRIAGE                                       | : SPECIA                    |                           |  |                                  |                         |                  |                         |
|  |                             |                           |  |                                  |                         |                  |                         |
| n General: In space I, identi                            |                             |                           |  |                                  |                         |                  | •                       |
|  |                             |                           | cific present and former FC<br>n this log, see page (v) of the |                                  |                         |                  | Substitute              |
| SPECIAL STATEMENT  |                             |                           |  | •                                |                         |                  | Carriage:               |
|  |                             | ir cable system           | carry, on a substitute basi                                    | s, any nonne                     |                         |                  | Special<br>Statement ar |
| roadcast by a distant stat                               |                             |                           |  | 0.7                              |                         |                  | Program Lo              |
| lote: If your answer is "No"<br>og in block 2.           | , leave the                 | rest of this pag          | ge blank. If your answer is '                                  | Yes," you mu                     | ist complete the prog   | Iram             |                         |
| LOG OF SUBSTITUTE  | PROGRA                      | MS                        |  |                                  |                         |                  |                         |
|  |                             |                           | te line. Use abbreviations                                     | wherever pos                     | sible, if their meaning | g is             |                         |
| lear. If you need more space<br>Column 1: Give the title |                             |                           | ai pages.<br>ision program (substitute p                       | rogram) that,                    | during the accounting   | g                |                         |
|  |                             |                           | ur cable system substitute                                     |                                  |                         |                  |                         |
| A3 form for futher informat                              | guiations, o<br>tion. Do no | r authorization           | s. See page (vi) of the gen<br>categories like "movies", or    | eral instructio<br>"basketball". | List specific program   | ner              |                         |
| tles, for example, "I Love L                             | ucy" or "NE                 | BA Basketball:            | 76ers vs. Bulls."  |                                  |                         |                  |                         |
|  |                             |                           | r "Yes." Otherwise enter "N<br>Isting the substitute progra    |                                  |                         |                  |                         |
| Column 4: Give the broa                                  | dcast static                | on's location (th         | ne community to which the                                      | station is lice                  |                         | in               |                         |
|  |                             |                           | community with which the<br>tem carried the substitute         |                                  |                         | nonth            |                         |
| st. Example: for May 7 giv                               | /e "5/7."                   |                           | ·  | -                                |                         |                  |                         |
|  |                             |                           | gram was carried by your o<br>ed by a system from 6:01:        |                                  |                         | ately            |                         |
| tated as "6:00–6:30 p.m."                                |                             |                           |  | ·                                |                         |                  |                         |
| Column 7: Enter the lette<br>o delete under FCC rules a  |                             |                           | was substituted for progra                                     |                                  |                         |                  |                         |
| ram was substituted for pro                              | ogramming                   |                           |  |                                  |                         |                  |                         |
| ffect on October 19, 1976.                               |                             |                           |  |                                  |                         |                  |                         |
|  |                             |                           |  | WHE                              | EN SUBSTITUTE           |                  |                         |
| S  |                             | E PROGRAM                 |  |                                  | IAGE OCCURRED           | 7. REASON<br>FOR |                         |
| 1. TITLE OF PROGRAM                                      | 2. LIVE?<br>Yes or No       | 3. STATION'S<br>CALL SIGN | 4. STATION'S LOCATION  | 5. MONTH<br>AND DAY              | 6. TIMES<br>FROM – T    | DELETION         |                         |
|  |                             |                           |  |                                  | _                       | -                |                         |
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|  |                             |                           |  |                                  |                         |                  |                         |

FORM SA3E. PAGE 5.

| Name                              | LEGAL NAME OF   | OWNER OF CABLE   | SYSTEM:   |  |  |   |  |  | SYSTEM ID# |  |  |
|-----------------------------------|---|--|---|--|--|---|--|--|------------|--|--|
| Name                              | BellSouth Telecommunications, LLC 63241 PART-TIME CARRIAGE LOG  |  |   |  |  |   |  |  |            |  |  |
| J<br>Part-Time<br>Carriage<br>Log | In General: The<br>time carriage du<br>hours your syst<br>Column 1 (C<br>column 5 of spa<br>Column 2 (C<br>curred during th<br>• Give the mont<br>"4/10."<br>• State the start<br>television statio<br>"app." Example | is space ties in<br>ue to lack of act<br>em carried that<br><b>(all sign):</b> Give<br>ace G.<br><b>(ates and hour</b><br>he accounting p<br>th and day when<br>ting and ending<br>n's broadcast d<br>: "12:30 a.m 3 | with column 5 of sp<br>tivated channel cap<br>station. If you need<br>the call sign of eve<br><b>s of carriage):</b> For<br>eriod.<br>In the carriage occu<br>times of carriage to<br>lay, you may give a | acity, you are re<br>I more space, pl<br>ry distant station<br>each station, lis<br>rred. Use numer<br>the nearest qu<br>n approximate e | equir<br>ease<br>n wh<br>st the<br>rals,<br>arter<br>endir | ed to complete t<br>e attach addition<br>ose basis of car<br>e dates and hour<br>with the month f<br>hour. In any cas<br>ing hour, followed | his log giving th<br>al pages.<br>riage you identi<br>is when part-tim<br>irst. Example: fi<br>se where carria<br>I by the abbrevi | e total dates and<br>fied by "LAC" in<br>ne carriage oc-<br>or April 10 give<br>ge ran to the end c<br>ation | of the     |  |  |
|                                   |   | [  | DATES   | AND HOURS  | DF F   | PART-TIME CAF   | RIAGE  |  |            |  |  |
|                                   | CALL SIGN   | WHEN   | I CARRIAGE OCCI   | JRRED  |  | CALL SIGN   | WHEN   | I CARRIAGE OCC   | URRED      |  |  |
|                                   | CALL SIGN   | DATE   | HOU<br>FROM   | RS<br>TO   |  | CALL SIGN   | DATE   | HOU<br>FROM  | IRS<br>TO  |  |  |
|                                   |   | DATE   | _   | 10   |  |   | DATE   |  |            |  |  |
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| FORM   | SA3E. PAGE 7.  |                 |                        |   |
|--|--|-----------------|------------------------|---|
| LEGA   | L NAME OF OWNER OF CABLE SYSTEM:   |                 | SYSTEM ID#             | Name  |
| Bel  | ISouth Telecommunications, LLC   |                 | 63241                  | Name  |
| Inst<br>all a<br>(as<br>page   | DSS RECEIPTS         ructions: The figure you give in this space determines the form you fle and the amoun mounts (gross receipts) paid to your cable system by subscribers for the system's secondentifed in space E) during the accounting period. For a further explanation of how to ce (vii) of the general instructions.         Gross receipts from subscribers for secondary transmission service(s) during the accounting period.         ORTANT: You must complete a statement in space P concerning gross receipts.   | ondary          | y transmission service | K<br>Gross Receipts   |
|  |  |                 |                        |   |
| <ul> <li>Instru</li> <li>Con</li> <li>Con</li> <li>If you feet</li> <li>If you according to the second seco</li></ul> | <b>'RIGHT ROYALTY FEE</b><br><b>ctions</b> : Use the blocks in this space L to determine the royalty fee you owe:<br>nplete block 1, showing your minimum fee.<br>nplete block 2, showing whether your system carried any distant television stations.<br>ur system did not carry any distant television stations, leave block 3 blank. Enter the and<br>from block 1 on line 1 of block 4, and calculate the total royalty fee.<br>ur system did carry any distant television stations, you must complete the applicable pro-<br>pompanying this form and attach the schedule to your statement of account.<br>Int 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b  | arts of         | f the DSE Schedule     | L<br>Copyright<br>Royalty Fee                                       |
| bloc   | k 3 below.   |                 |                        |   |
| If pa<br>3 be  | rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be<br>low   | entere          | ed on line 2 in block  |   |
| ▶ If pa  | rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho<br>block 4 below.   | uld be          | e entered on line      |   |
|  | <b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.  |                 | 064 percent of the     |   |
|  | Line 1. Enter the amount of gross receipts from space K<br>Line 2. Multiply the amount in line 1 by 0.01064  |                 | \$ 5,741,601.66        |   |
|  | Enter the result here.   |                 |                        |   |
|  | This is your minimum fee.  | \$              | 61,090.64              |   |
| Block<br>2<br>Block<br>3   | <ul> <li>DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block.</li> <li>Did your cable system carry any distant television stations during the accounting peri Yes—Complete the DSE schedule.</li> <li>In a BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero</li> <li>Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero</li> </ul>   | mn 4, y<br>iod? | you must check         |   |
|  | Line 3. Add lines 1 and 2 and enter here   | \$              | -                      |   |
| Block<br>4   | <ul> <li>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</li> <li>Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, content 2, c</li></ul> |                 | \$ 61,090.64           | Cable systems<br>submitting   |
|  | <ul> <li>(block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.</li> <li>Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)</li></ul>  | I               | 0.00                   | additional<br>deposits under<br>Section 111(d)(7)<br>should contact |
|  | Line 4. FILING FEE.  |                 | \$ 725.00              | the Licensing<br>additional fees.<br>Division for the               |
|  | <b>TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.</b> Add Lines 1, 2 and 3 of block 4 and enter total here   | \$              | 61,815.64              | appropriate<br>form for<br>submitting the<br>additional fees.       |
|  | Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (<br>general instructions located in the paper SA3 form for more information.)  | See p           | age (i) of the         |   |

| ACCOUNTING PERIOD: | 2018/1 |
|--------------------|--------|
|--------------------|--------|

| ACCOUNTING PERI    | 00. 2018/1                                       |             |   |  | FORM SA3E. PAGE 8.          |
|--------------------|--|-------------|---|--|-----------------------------|
| Name               | LEGAL NAME OF OWNER C                            |             |   |  | SYSTEM ID#                  |
| Hamo               | BellSouth Telecon                                | nmunic      | ations, LLC   |  | 63241                       |
|                    | CHANNELS   |             |   |  |                             |
| М                  | Instructions: You m                              | iust give   | (1) the number of channels on which the   | cable system carried television broadcas   | st stations                 |
|                    | to its subscribers and                           | d (2) the   | cable system's total number of activated  | channels, during the accounting period.  |                             |
| Channels           |  |             |   |  |                             |
|                    |  |             | channels on which the cable   |  | 17                          |
|                    | system carried tele                              | vision b    | oadcast stations  |  |                             |
|                    | 2. Enter the total nun                           | nher of :   | activated channels  |  |                             |
|                    |  |             | carried television broadcast stations   |  |                             |
|                    |  | -           |   |  | 609                         |
|                    |  |             |   |  |                             |
| NI                 |  | CONT        | CTED IF FURTHER INFORMATION IS  |  |                             |
| Ν                  | we can contact abou                              |             |   |  |                             |
| Individual to      |  |             |   |  |                             |
| Be Contacted       |  |             |   |  |                             |
| for Further        | Name Diane E                                     | Belling     | er  | Telephone  | 210-351-4805                |
| Information        |  |             |   |  |                             |
|                    | Address 1010 N.                                  | St. M       | ary's Street, Room 13-59-B  |  |                             |
|                    | (Number, str                                     | reet, rural | route, apartment, or suite number)  |  |                             |
|                    |  |             | TX 78215  |  |                             |
|                    | (City, town, s                                   | state, zip) |   |  |                             |
|                    | Email  | da77        | 96@att.com  | Fax (optional) 210-246-  | -8199                       |
|                    |  | agri        |   |  |                             |
|                    |  |             |   |  |                             |
|                    | <b>CERTIFICATION</b> (This                       | s statem    | ent of account must be certifed and sign  | ed in accordance with Copyright Office re  | gulations.                  |
| 0                  |  |             |   |  |                             |
| Certifcation       | • I, the undersigned, he                         | ereby ce    | rtify that (Check one, <i>but only one</i> , of the b                                       | oxes.)   |                             |
|                    |  |             |   |  | 5                           |
|                    | (Owner other than                                | n corpor    | ation or partnership) I am the owner of th  | e cable system as identifed in line 1 of space   | ce B; or                    |
|                    | _  |             |   |  |                             |
|                    |  |             | n corporation or partnership) I am the du<br>I that the owner is not a corporation or parti | Ily authorized agent of the owner of the cab   | le system as identified     |
|                    |  |             |   |  |                             |
|                    | ·  | -           | an officer (if a corporation) or a partner (if a  | partnership) of the legal entity identifed as o  | owner of the cable system   |
|                    | in line 1 of spa                                 | се в.       |   |  |                             |
|                    |  |             |   | nalty of law that all statements of fact contai  | ned herein                  |
|                    | are true, complete, an<br>[18 U.S.C., Section 10 |             | t to the best of my knowledge, information,   | and belief, and are made in good faith.  |                             |
|                    | [10 0.0.0., 00000110                             | 501(1500    | 01  |  |                             |
|                    |  |             |   |  |                             |
|                    |  |             |   |  |                             |
|                    |  | Х           | /s/ Mike McGuire  |  |                             |
|                    | - •  |             |   |  |                             |
|                    |  |             | n electronic signature on the line above using  |  |                             |
|                    |  |             |   | rd slash of the /s/ signature, place your curso<br>the "F" button will avoid enabling Excel's Lotu |                             |
|                    |  | 12 00       | ton, then type /a/ and your name. Thesaing  |  | as company settings.        |
|                    |  | Typed       | or printed name: Mike McGuire   |  |                             |
|                    |  |             |   |  |                             |
|                    |  |             |   |  |                             |
|                    |  |             |   |  |                             |
|                    |  | Title:      | VP-Lightspeed<br>(Title of official position held in corporation or pa                      | rtnershin)   |                             |
|                    |  |             |   |  |                             |
|                    |  |             | August 00, 0010   |  |                             |
|                    |  | Date:       | August 23, 2018   |  |                             |
|                    | L  |             |   |  |                             |
| Privacy Act Notice | : Section 111 of title 17 o                      | of the Uni  | ted States Code authorizes the Copyright Of   | ice to collect the personally identifying inform   | ation (PII) requested on th |

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

| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>BellSouth Telecommunications, LLC   | SYSTEM ID#<br>63241   | Name   |
|---|---|--|
| <ul> <li>SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS         The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyr             lowing sentence:</li></ul> | ble system for the basic<br>ystem shall not include sub-<br>oursuant to section 119."<br>eneral instructions in the | P<br>Special<br>Statement<br>Concerning<br>Gross Receipts<br>Exclusion |
| YES. Enter the total here and list the satellite carrier(s) below.       \$         Name       Name   |   |  |
| Mailing Address Mailing Address   |   |  |
| INTEREST ASSESSMENTS  |   |  |
| You must complete this worksheet for those royalty payments submitted as a result of a late<br>For an explanation of interest assessment, see page (viii) of the general instructions in the p            |   | Q  |
| Line 1 Enter the amount of late payment or underpayment   |   | Interest<br>Assessment   |
| Line 2 Multiply line 1 by the interest rate* and enter the sum here   |   |  |
| Line 3 Multiply line 2 by the number of days late and enter the sum here  | xdays   |  |
| Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)  | \$  |  |
| * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. F contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.  | (interest charge)<br>or further assistance please   |  |
| ** This is the decimal equivalent of 1/365, which is the interest assessment for one day la   | ate.  |  |
| NOTE: If you are filing this worksheet covering a statement of account already submitted to the please list below the owner, address, first community served, accounting period, and ID num 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 person  | nally identifying information (PII) requested or  | n th   |

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

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

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

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

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

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

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

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

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

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

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

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

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

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

### TOTAL OF DSEs

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

### THE ROYALTY FEE

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

The 3.75 Fee. If a cable system located in whole or in part within  $\varepsilon$  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, in whole or in part, over the cable system that would have been subject to the FCC's syndicated exclusivity rules in effect on June 24, 1981

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

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

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following: 1) A station actually carried within any portion of a cable system prior

to June 25, 1981, pursuant to the former FCC rules. 2) A station first carried after June 24, 1981, which could have been

carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.

3) A station of the same type substituted for a carried network, noncommercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)] in effect on June 24, 1981.

4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.

5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

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

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

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

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

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

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

### DSE SCHEDULE. PAGE 11.

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

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

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

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

# 0.330% of gross receipts PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

If any of the stations were partially distant:

1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.

2. Identify the communities/areas represented by each subscriber group. 3. For each subscriber group, calculate the total number of DSEs of

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

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

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

TOTAL DSEs

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

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

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

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

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

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

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

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

CITY

Santa Rosa

Rapid City

Fairvale

Bodega Bay

DSE

1.0

1.0

0.083

0.139

0.25

2.472

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



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

Identification of Subscriber Groups

OUTSIDE LOCAL

Stations A and C

Stations A and C

Stations B. D. and E

TOTAL GROSS RECEIPTS

SERVICE AREA OF

Stations A, B, C, D ,E

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

GROSS RECEIPTS

\$310,000.00

100,000.00

70,000.00

120,000.00

\$600,000.00

FROM SUBSCRIBERS

## ACCOUNTING PERIOD: 2018/1

# DSE SCHEDULE. PAGE 11. (CONTINUED)

|   | LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID  |     |           |     |           |       |  |  |  |  |
|---|---|-----|-----------|-----|-----------|-------|--|--|--|--|
| 1   | BellSouth Telecommuni   |     |           |     |           | 63241 |  |  |  |  |
|   | SUM OF DSEs OF CATEGORY "O" STATIONS:         • Add the DSEs of each station.         Enter the sum here and in line 1 of part 5 of this schedule.         0.00   |     |           |     |           |       |  |  |  |  |
|   | Instructions:   |     |           |     |           |       |  |  |  |  |
| Computation                                   | In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3).<br>In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25." |     |           |     |           |       |  |  |  |  |
| Stations                                      | CATEGORY "O" STATIONS: DSEs CALL SIGN DSE CALL SIGN DSE CALL SIGN DS  |     |           |     |           |       |  |  |  |  |
| Stations                                      | CALL SIGN   | DGL | CALL SIGN | DSL | CALL SIGN | DSL   |  |  |  |  |
| Add rows as<br>necessary.<br>Remember to copy |   |     |           |     |           |       |  |  |  |  |
| all formula into new                          |   |     |           |     |           |       |  |  |  |  |
| rows.   |   |     |           |     |           |       |  |  |  |  |
|   |   |     |           |     |           |       |  |  |  |  |
|   |   |     |           |     |           |       |  |  |  |  |
|   |   |     |           |     |           |       |  |  |  |  |
|   |   |     |           |     |           |       |  |  |  |  |
|   |   |     |           |     |           |       |  |  |  |  |
|   |   |     |           |     |           |       |  |  |  |  |
|   |   |     |           |     |           |       |  |  |  |  |

| Name  |  | OWNER OF CABLE SYSTEM:  |   |  |  |  | 5   | YSTEM                |
|---|--|---|---|--|--|--|---|----------------------|
|   | BellSouth T  | [elecommunications  | , LLC   |  |  |  |   | 632                  |
| 3<br>Computation<br>of DSEs for<br>Stations<br>Carried Part<br>Time Due to<br>Lack of<br>Activated<br>Channel<br>Capacity | Column 1: L<br>Column<br>figure should<br>Column<br>Column<br>be carried ou<br>Column<br>give the type<br>Column   | <b>::</b> CAPACITY<br>ist the call sign of all dist.<br><b>2</b> : For each station, give<br>correspond with the info<br><b>3</b> : For each station, give<br><b>4</b> : Divide the figure in col<br>at at least to the third dect<br><b>5</b> : For each independent<br>e-value as ".25."<br><b>6</b> : Multiply the figure in col<br>point. This is the station   | the number of<br>rmation given i<br>the total numb<br>umn 2 by the f<br>imal point. This<br>station, give th<br>olumn 4 by the<br>s DSE. (For m   | hours your cable syst<br>in space J. Calculate of<br>er of hours that the sta<br>igure in column 3, and<br>s is the "basis of carria<br>ne "type-value" as "1.0<br>figure in column 5, ar<br>ore information on rou  | em carried the sta<br>only one DSE for<br>ation broadcast o<br>I give the result in<br>ge value" for the<br>." For each netwo<br>nd give the result<br>unding, see page  | ation during the accour<br>each station.<br>ver the air during the a<br>n decimals in column 4.<br>station.<br>ork or noncommercial e<br>in column 6. Round to<br>(viii) of the general inst                         | ccounting period.<br>. This figure must<br>educational station,<br>no less than the   |                      |
| oupdoily  |  | (   | CATEGORY  | LAC STATIONS   | : COMPUTAT   | ION OF DSEs  |   |                      |
|   | 1. CALL<br>SIGN  | 2. NUMBE<br>OF HO<br>CARRI<br>SYSTE   | URS<br>ED BY<br>M   | 3. NUMBER<br>OF HOURS<br>STATION<br>ON AIR   | 4. BASIS O<br>CARRIAG<br>VALUE   | GE VAL   | JUE   |                      |
|   |  |   |   |  |  |  |   |                      |
|   |  |   |   |  |  |  |   |                      |
|   |  |   | ÷   |  | =  | x  | =   |                      |
|   |  |   | ÷   |  | =  | x  | =   |                      |
|   |  |   | ÷   |  | =  | x<br>x   | =   |                      |
|   |  |   | ÷   |  | =  | x  | =   |                      |
|   | Enter the s<br>Instructions:<br>Column 1: Gi<br>• Was carrie<br>tions in eff<br>• Broadcast  | s of each station.<br>sum here and in line 2 of p   | bart 5 of this so<br>tation listed in s<br>titution for a pr<br>(as shown by t  | space I (page 5, the L<br>ogram that your syste<br>the letter "P" in columr  | og of Substitute F<br>m was permitted<br>1 7 of space I); ar   | Programs) if that station<br>to delete under FCC ru  | ules and regular-   |                      |
| Computation<br>of DSEs for<br>Substitute-   | Add the DSEs<br>Enter the s<br>Instructions:<br>Column 1: Gi<br>• Was carrie<br>tions in eff<br>• Broadcast<br>space I).<br>Column 2:<br>at your option.<br>Column 3:<br>Column 4:   | to f each station.<br>Sum here and in line 2 of p<br>we the call sign of each s<br>d by your system in subs<br>fect on October 19, 1976   | tation listed in st<br>titution for a pr<br>(as shown by t<br>york programs of<br>e number of liv<br>spond with the<br>s in the calend<br>nn 2 by the fig   | space I (page 5, the L<br>ogram that your syste<br>the letter "P" in columr<br>during that optional car<br>e, nonnetwork program<br>a information in space<br>lar year: 365, except in<br>ure in column 3, and g   | og of Substitute F<br>m was permitted<br>n 7 of space I); ar<br>riage (as shown b<br>ms carried in subs<br>I.<br>n a leap year.<br>give the result in c  | Programs) if that statior<br>to delete under FCC rund<br>y the word "Yes" in colum<br>stitution for programs th<br>column 4. Round to no   | n:<br>ules and regular-<br>nn 2 of<br>hat were deleted<br>less than the third   |                      |
| Computation<br>of DSEs for<br>Substitute-   | Add the DSEs<br>Enter the s<br>Instructions:<br>Column 1: Gi<br>• Was carrie<br>tions in eff<br>• Broadcast<br>space I).<br>Column 2:<br>at your option.<br>Column 3:<br>Column 4:   | to f each station.<br>Sum here and in line 2 of p<br>we the call sign of each s<br>d by your system in subs<br>fect on October 19, 1976<br>one or more live, nonnetv<br>For each station give the<br>. This figure should corre<br>the tent the number of day<br>to Divide the figure in colur<br>This is the station's DSE   | tation listed in st<br>titution for a pr<br>(as shown by t<br>york programs of<br>e number of liv<br>spond with the<br>s in the calend<br>nn 2 by the fig<br>(For more info   | space I (page 5, the L<br>ogram that your syste<br>the letter "P" in column<br>during that optional car<br>e information in space<br>lar year: 365, except in<br>ure in column 3, and g<br>ormation on rounding,   | og of Substitute F<br>m was permitted<br>n 7 of space I); ar<br>rriage (as shown b<br>ms carried in sub<br>I.<br>n a leap year.<br>give the result in c<br>see page (viii) of                                    | Programs) if that statior<br>to delete under FCC ru<br>id<br>y the word "Yes" in colur<br>stitution for programs th<br>column 4. Round to no<br>the general instruction  | n:<br>ules and regular-<br>nn 2 of<br>hat were deleted<br>less than the third   | m).                  |
| <b>4</b><br>Computation<br>of DSEs for<br>Substitute-<br>asis Stations  | Add the DSEs<br>Enter the s<br>Instructions:<br>Column 1: Gi<br>• Was carrie<br>tions in eff<br>• Broadcast<br>space I).<br>Column 2:<br>at your option.<br>Column 3:<br>Column 4:   | to f each station.<br>Sum here and in line 2 of p<br>we the call sign of each s<br>d by your system in subs<br>fect on October 19, 1976<br>one or more live, nonnetv<br>For each station give the<br>. This figure should corre<br>the tent the number of day<br>to Divide the figure in colur<br>This is the station's DSE   | tation listed in st<br>titution for a pr<br>(as shown by t<br>york programs of<br>e number of liv<br>spond with the<br>s in the calend<br>nn 2 by the fig<br>(For more info   | space I (page 5, the L<br>ogram that your syste<br>the letter "P" in column<br>during that optional can<br>a information in space<br>dar year: 365, except in<br>ure in column 3, and g<br>ormation on rounding,<br>-BASIS STATION<br>ER 4. DSE<br>YS  | og of Substitute F<br>m was permitted<br>n 7 of space I); ar<br>rriage (as shown b<br>ms carried in sub<br>I.<br>n a leap year.<br>give the result in c<br>see page (viii) of                                    | Programs) if that statior<br>to delete under FCC ru<br>id<br>y the word "Yes" in colur<br>stitution for programs th<br>column 4. Round to no<br>the general instruction  | n:<br>ules and regular-<br>mn 2 of<br>hat were deleted<br>less than the third<br>is in the paper SA3 fo<br>3. NUMBER<br>OF DAYS   | m).<br>4. DS         |
| Computation<br>of DSEs for<br>Substitute-   | Add the DSEs<br>Enter the s<br>Instructions:<br>Column 1: Gi<br>• Was carrie<br>tions in eff<br>• Broadcast<br>space I).<br>Column 2:<br>at your option.<br>Column 3:<br>Column 4:<br>decimal point.   | ve the call sign of each s<br>by the call sign of each s<br>by your system in subs<br>fect on October 19, 1976<br>one or more live, nonnetw<br>. This figure should correct<br>: Enter the number of day<br>: Divide the figure in colur<br>This is the station's DSE<br>SL<br>2. NUMBER<br>OF  | tation listed in stitution for a pr<br>(as shown by t<br>ork programs of<br>sin the calend<br>mn 2 by the fig<br>(For more info<br>(BSTITUTE)<br>3. NUMB<br>OF DA'<br>IN YEA  | space I (page 5, the L<br>ogram that your syste<br>the letter "P" in columr<br>during that optional car<br>e, nonnetwork program<br>e information in space<br>lar year: 365, except in<br>ure in column 3, and g<br>ormation on rounding,<br>-BASIS STATION<br>ER 4. DSE<br>R  | og of Substitute F<br>m was permitted<br>n 7 of space I); ar<br>rriage (as shown b<br>ns carried in sub-<br>l.<br>n a leap year.<br>give the result in c<br>see page (viii) of<br>NS: COMPUT,<br>SIGN            | Programs) if that station<br>to delete under FCC rund<br>y the word "Yes" in colum<br>stitution for programs the<br>column 4. Round to no<br>the general instruction<br>ATION OF DSEs<br>2. NUMBER<br>OF             | n:<br>ules and regular-<br>mn 2 of<br>hat were deleted<br>less than the third<br>is in the paper SA3 fo<br>3. NUMBER<br>OF DAYS<br>IN YEAR  | 4. DS                |
| Computation<br>of DSEs for<br>Substitute-   | Add the DSEs<br>Enter the s<br>Instructions:<br>Column 1: Gi<br>• Was carrie<br>tions in eff<br>• Broadcast<br>space I).<br>Column 2:<br>at your option.<br>Column 3:<br>Column 4:<br>decimal point.   | ve the call sign of each s<br>d by your system in subs<br>fect on October 19, 1976<br>one or more live, nonnetw<br>For each station give the<br>This figure should corres<br>Enter the number of day<br>Divide the figure in colur<br>This is the station's DSE<br>SL<br>2. NUMBER<br>OF<br>PROGRAMS  | tation listed in stitution for a pr<br>(as shown by t<br>vork programs of<br>spond with the<br>s in the calend<br>nn 2 by the fig:<br>(For more info<br>IBSTITUTE<br>3. NUMB<br>OF DA'<br>IN YEA<br>÷   | space I (page 5, the L<br>ogram that your syste<br>the letter "P" in column<br>during that optional car<br>e, nonnetwork program<br>e information in space<br>lar year: 365, except in<br>ure in column 3, and g<br>ormation on rounding,<br>-BASIS STATION<br>ER 4. DSE<br>R =<br>=   | og of Substitute F<br>m was permitted<br>n 7 of space I); ar<br>riage (as shown b<br>ms carried in sub-<br>l.<br>n a leap year.<br>give the result in c<br>see page (viii) of<br>NS: COMPUT,<br>1. CALL<br>SIGN  | Programs) if that station<br>to delete under FCC rund<br>y the word "Yes" in colum<br>stitution for programs the<br>column 4. Round to no<br>the general instruction<br>ATION OF DSES<br>2. NUMBER<br>OF<br>PROGRAMS | n:<br>ules and regular-<br>mn 2 of<br>hat were deleted<br>less than the third<br>is in the paper SA3 fo<br>3. NUMBER<br>OF DAYS<br>IN YEAR<br>÷   | 4. DS<br>=<br>=      |
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| Computation<br>of DSEs for<br>Substitute-<br>asis Stations  | Add the DSEs<br>Enter the s<br>Instructions:<br>Column 1: Gi<br>• Was carrie<br>tions in eff<br>• Broadcast<br>space 1).<br>Column 2:<br>at your option.<br>Column 3:<br>Column 4:<br>decimal point.<br>1. CALL<br>SIGN<br>1. CALL<br>SIGN<br>SUM OF DSE<br>Add the DSEs<br>Enter the s<br>number of DSE                               | a of each station.<br>sum here and in line 2 of p<br>we the call sign of each s<br>d by your system in subs<br>fect on October 19, 1976<br>one or more live, nonnetw<br>. This figure should correc<br>: Enter the number of day<br>: Divide the figure in colur<br>This is the station's DSE<br>SL<br>2. NUMBER<br>OF<br>PROGRAMS<br>  | tation listed in st<br>titution for a pr<br>(as shown by tr<br>ork programs of<br>shown by the<br>spond with the<br>sin the calend<br>(For more infor<br>IBSTITUTE<br>3. NUMB<br>OF DA'<br>IN YEA<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+  | space I (page 5, the L<br>ogram that your syste<br>the letter "P" in column<br>during that optional car<br>e, nonnetwork program<br>is information in space<br>tar year: 365, except in<br>ure in column 3, and g<br>ormation on rounding,<br>-BASIS STATION<br>ER 4. DSE<br>YS 4. DSE<br>State<br>= = = = = = = = = = = = = = = = = = = | og of Substitute F<br>m was permitted<br>n 7 of space I); ar<br>rriage (as shown b<br>ms carried in sub:<br>I.<br>n a leap year.<br>give the result in c<br>see page (viii) of<br>NS: COMPUT.<br>1. CALL<br>SIGN | Programs) if that station<br>to delete under FCC rund<br>y the word "Yes" in colum<br>stitution for programs the<br>column 4. Round to no<br>the general instruction<br>ATION OF DSES<br>2. NUMBER<br>OF<br>PROGRAMS | n:<br>ules and regular-<br>mn 2 of<br>hat were deleted<br>less than the third<br>is in the paper SA3 fo<br>3. NUMBER<br>OF DAYS<br>IN YEAR<br>÷<br>÷<br>÷<br>÷<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>• | 4. DS                |
| Computation<br>of DSEs for<br>Substitute-<br>asis Stations  | Add the DSEs<br>Enter the s<br>Instructions:<br>Column 1: Gi<br>• Was carrie<br>tions in eff<br>• Broadcast<br>space I).<br>Column 2:<br>at your option.<br>Column 3:<br>Column 4:<br>decimal point.<br>1. CALL<br>SIGN<br>1. CALL<br>SIGN<br>SUM OF DSE<br>Add the DSEs<br>Enter the s<br>TOTAL NUMB<br>number of DSE<br>1. Number of | a of each station.<br>Sum here and in line 2 of particular sectors of the station of the station's DSE<br>Sum the station of the station's DSE<br>Sum | tation listed in st<br>titution for a pr<br>(as shown by tr<br>ork programs of<br>shown by the<br>spond with the<br>sin the calend<br>(For more infor<br>IBSTITUTE<br>3. NUMB<br>OF DA'<br>IN YEA<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+  | space I (page 5, the L<br>ogram that your syste<br>the letter "P" in column<br>during that optional car<br>e, nonnetwork program<br>is information in space<br>tar year: 365, except in<br>ure in column 3, and g<br>ormation on rounding,<br>-BASIS STATION<br>ER 4. DSE<br>YS 4. DSE<br>State<br>= = = = = = = = = = = = = = = = = = = | og of Substitute F<br>m was permitted<br>n 7 of space I); ar<br>rriage (as shown b<br>ms carried in sub:<br>I.<br>n a leap year.<br>give the result in c<br>see page (viii) of<br>NS: COMPUT.<br>1. CALL<br>SIGN | Programs) if that station<br>to delete under FCC rund<br>y the word "Yes" in colum<br>stitution for programs the<br>column 4. Round to no<br>the general instruction<br>ATION OF DSES<br>2. NUMBER<br>OF<br>PROGRAMS | n:<br>ules and regular-<br>mn 2 of<br>hat were deleted<br>less than the third<br>is in the paper SA3 fo<br>3. NUMBER<br>OF DAYS<br>IN YEAR<br>÷<br>÷<br>÷<br>•<br>•   | 4. DS<br>=<br>=<br>= |
| Computation<br>of DSEs for<br>Substitute-<br>asis Stations  | Add the DSEs<br>Enter the s<br>Enter the s<br>Column 1: Gi<br>• Was carrie<br>tions in eff<br>• Broadcast<br>space 1).<br>Column 2:<br>at your option.<br>Column 3:<br>Column 4:<br>decimal point.<br>1. CALL<br>SIGN<br>1. CALL<br>SIGN<br>SUM OF DSE<br>Add the DSEs<br>Enter the s<br>TOTAL NUMB<br>number of DSE<br>1. Number of   | ve the call sign of each s<br>d by your system in subs<br>fect on October 19, 1976<br>one or more live, nonnetv<br>For each station give the<br>This figure should corre<br>Enter the number of day<br>Divide the figure in colur<br>This is the station's DSE<br><b>SL</b><br><b>2. NUMBER</b><br>OF<br>PROGRAMS<br><b>3. OF SUBSTITUTE-BAS</b><br>of each station.<br>sum here and in line 3 of p<br><b>3. DECEMPENDENTIAL STREET</b><br><b>3. OF SUBSTITUTE-BAS</b><br>of each station.  | tation listed in st<br>titution for a pr<br>(as shown by tr<br>ork programs of<br>shown by the<br>spond with the<br>sin the calend<br>(For more infor<br>IBSTITUTE<br>3. NUMB<br>OF DA'<br>IN YEA<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+<br>+  | space I (page 5, the L<br>ogram that your syste<br>the letter "P" in column<br>during that optional car<br>e, nonnetwork program<br>is information in space<br>tar year: 365, except in<br>ure in column 3, and g<br>ormation on rounding,<br>-BASIS STATION<br>ER 4. DSE<br>YS 4. DSE<br>State<br>= = = = = = = = = = = = = = = = = = = | og of Substitute F<br>m was permitted<br>n 7 of space I); ar<br>rriage (as shown b<br>ms carried in sub:<br>I.<br>n a leap year.<br>give the result in c<br>see page (viii) of<br>NS: COMPUT.<br>1. CALL<br>SIGN | Programs) if that station<br>to delete under FCC rund<br>y the word "Yes" in colum<br>stitution for programs the<br>column 4. Round to no<br>the general instruction<br>ATION OF DSES<br>2. NUMBER<br>OF<br>PROGRAMS | n:<br>ules and regular-<br>mn 2 of<br>hat were deleted<br>less than the third<br>is in the paper SA3 fo<br>3. NUMBER<br>OF DAYS<br>IN YEAR<br>÷<br>÷<br>÷<br>÷<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>• | 4. DS                |

| LEGAL NAME OF C  | WNER OF CABLE   | SYSTEM:  |   |  |   |   | S   | YSTEM ID#    |  |
|--|---|--|---|--|---|---|---|--------------|--|
| BellSouth Tele   | ecommunicati  | ons, LLC   |   |  |   |   |   | 63241        | Name   |
| Instructions: Bloc<br>In block A:<br>• If your answer if |   |  | part 6 and part   | 7 of the DSE sche  | edule blank a   | nd complete pa  | art 8, (page 16) of                                 | the          | 6  |
| <ul><li>schedule.</li><li>If your answer if</li></ul>    | "No," complete blo  | ocks B and C   | below.  |  |   |   |   |              |  |
|  | •   |  |   | ELEVISION M  | ARKETS  |   |   |              | Computation of                                   |
|  | 1981?   | schedule—D   |   | Iller markets as de  |   |   |   | gulations in | 3.75 Fee   |
|  |   | C below.   |   |  |   |   |   |              |  |
|  |   | BLOC   | CK B: CARR  | IAGE OF PERI   | MITTED DS   | SEs   |   |              |  |
| Column 1:<br>CALL SIGN                                   | under FCC rules   | and regulation of the second sec | ons prior to Jui<br>dule. (Note: Th   | part 2, 3, and 4 of<br>ne 25, 1981. For fu<br>ne letter M below r<br>Act of 2010.) | urther explana  | ation of permit   | ed stations, see t                                  | he           |  |
| Column 2:<br>BASIS OF<br>PERMITTED<br>CARRIAGE           | (Note the FCC ru<br>A Stations carrin<br>76.61(b)(c)]<br>B Specialty stati<br>C Noncommeric<br>D Grandfathered<br>instructions for<br>E Carried pursua:<br>*F A station pre | Iles and regu<br>ed pursuant t<br>on as defined<br>al educationa<br>d station (76.0<br>r DSE sched<br>ant to individu<br>viously carrie<br>JHF station w   | lations cited bo<br>o the FCC ma<br>d in 76.5(kk) (7<br>al station [76.5<br>65) (see parag<br>ule).<br>Jal waiver of F<br>ed on a part-tin<br>ithin grade-B ( | ne or substitute ba<br>contour, [76.59(d)(   | se in effect o<br>6.57, 76.59(b<br>e)(1), 76.63(a<br>63(a) referrin<br>bstitution of g<br>sis prior to Ju | n June 24, 198<br>p), 76.61(b)(c),<br>a) referring to 7<br>g to 76.61(d)<br>rrandfathered s<br>une 25, 198' | 76.63(a) referring<br>76.61(e)(1<br>stations in the |              |  |
| Column 3:  | *( <b>Note:</b> For those<br>this schedule to e   | e stations ide<br>determine the  | ntified by the I  | n parts 2, 3, and 4<br>etter "F" in column   |   |   |   | 1            |  |
| 1. CALL<br>SIGN  | 2. PERMITTED<br>BASIS   | 3. DSE   | 1. CALL<br>SIGN   | 2. PERMITTED<br>BASIS  | 3. DSE  | 1. CALL<br>SIGN   | 2. PERMITTED<br>BASIS                               | 3. DSE       |  |
|  |   |  |   |  |   |   |   |              |  |
|  |   |  |   |  |   |   |   |              |  |
|  |   |  |   |  |   |   | •   |              |  |
|  |   |  |   |  |   |   |   |              |  |
|  |   |  |   |  |   |   |   |              |  |
|  |   |  |   |  |   |   |   | 0.00         |  |
|  |   | В  | LOCK C: CO  | MPUTATION OF   | 3.75 FEE  |   |   |              |  |
| Line 1: Enter the  | total number of   | DSEs from  | part 5 of this  | schedule   |   |   |   | -            |  |
| Line 2: Enter the  |   |  |   |  |   |   |   | -            |  |
| Line 3: Subtract<br>(If zero, I                          |   |  |   | r of DSEs subjec<br>7 of this schedu   |   | i rate.   |   | 0.00         |  |
| Line 4: Enter gro  | oss receipts from   | space K (p   | age 7)  |  |   |   | x 0.03  | 375          | Do any of the<br>DSEs represent<br>partially     |
| Line 5: Multiply li                                      | ine 4 by 0.0375   | and enter su   | ım here   |  |   |   |   |              | permited/<br>partially<br>nonpermitted           |
| Line 6: Enter tota                                       | al number of DS   | Es from line   | 3   |  |   |   | X   |              | carriage?<br>If yes, see part<br>9 instructions. |
| Line 7: Multiply li                                      | ine 6 by line 5 ar  | nd enter her   | e and on line   | 2, block 3, spac   | e L (page 7)  |   |   | 0.00         |  |

DSE SCHEDULE. PAGE 13.

|                 | WNER OF CABLE         |          |                 |                       |           |                 | 51                    | *STEM ID<br>63241 | Name                      |
|-----------------|-----------------------|----------|-----------------|-----------------------|-----------|-----------------|-----------------------|-------------------|---------------------------|
|                 |                       | BLOCK    | A: TELEV        | ISION MARKET          | S (CONTIN | UED)            |                       |                   |                           |
| 1. CALL<br>SIGN | 2. PERMITTED<br>BASIS |          | 1. CALL<br>SIGN | 2. PERMITTED<br>BASIS |           | 1. CALL<br>SIGN | 2. PERMITTED<br>BASIS | 3. DSE            | 6                         |
| <br>            |                       |          |                 |                       |           |                 |                       |                   | Computation o<br>3.75 Fee |
| <br>            |                       |          |                 |                       |           |                 |                       |                   |                           |
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|   |  |  |   |          |                                     |                   |              | [          |            | JLE. PAGE 14. |  |
|---|--|--|---|----------|-------------------------------------|-------------------|--------------|------------|------------|---------------|--|
| Name  | LEGAL NAME OF OWN  |  |   |          |                                     |                   |              |            | SYSTEM ID# |               |  |
| Name  | BellSouth Tele   | communication  | s, LLC  |          |                                     |                   |              |            |            | 63241         |  |
| Worksheet for<br>Computating<br>the DSE<br>Schedule for<br>Permitted<br>Part-Time and<br>Substitute<br>Carriage | <ul> <li>Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.</li> <li>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</li> <li>Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981</li> <li>Column 3: Indicate the basis of carriage on which the carriage and DSE occurred (e.g., 1981/1)</li> <li>Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters</li> <li>(Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.</li> <li>A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, section: 76.59(d)(1), 76.61(e)(1), or 76.63 (referring to 76.61(e)(1)).</li> <li>B—Late-night programming: Carriage under FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form.</li> <li>Column 5: Indicate the DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule</li> <li>Column 5: Indicate the DSE for the station.</li> <li>IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verifcation from the designated statement of account on fle in the Licensing Division.</li> </ul> |  |   |          |                                     |                   |              |            |            |               |  |
|   |  |  |   |          |                                     |                   |              |            |            |               |  |
|   | 4.0411   |  |   |          | -00                                 | N A PART-TIME AN  |              |            |            |               |  |
|   | 1. CALL  | 2. PRIOR   |   |          |                                     | 4. BASIS OF       | -            | RESENT     |            | MITTED        |  |
|   | SIGN   | DSE  | Pt  | ERIOD    |                                     | CARRIAGE          | 1            | DSE        | D          | SE            |  |
|   |  |  |   |          |                                     |                   |              |            |            |               |  |
|   |  |  |   |          |                                     |                   |              |            |            |               |  |
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| 7<br>Computation<br>of the<br>Syndicated<br>Exclusivity   | Instructions: Block A must be completed.<br>In block A:<br>If your answer is "Yes," complete blocks B and C, below.<br>If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule.<br>BLOCK A: MAJOR TELEVISION MARKET   |  |   |          |                                     |                   |              |            |            |               |  |
| Surcharge   | • Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981?   |  |   |          |                                     |                   |              |            |            |               |  |
| e a change  |  | -  |   |          | 1                                   | No—Proceed to     |              |            |            |               |  |
|   | X Yes—Complete   | DIOCKS B and C.  |   |          | l                                   | No-Proceed to     | part 8       |            |            |               |  |
|   |  |  |   |          |                                     |                   |              |            |            |               |  |
|   | BLOCK B: C   | arriage of VHF/Grad  | e B Contour   | Stations | BLOCK C: Computation of Exempt DSEs |                   |              |            |            |               |  |
|   |  | ion that places a gra<br>ble system?<br>tation below with its ap | Was any station listed in block B of part 7 carried in any commu-<br>nity served by the cable system prior to March 31, 1972? (refe<br>to former FCC rule 76.159)<br>Yes—List each station below with its appropriate permitted DSE |          |                                     |                   | refe         |            |            |               |  |
|   | X No—Enter zero a  | and proceed to part 8.   |   |          | [                                   | X No—Enter zero a | nd proceed f | to part 8. |            |               |  |
|   |  | <u> </u>   |   |          | ,                                   |                   | I            |            |            |               |  |
|   | CALL SIGN  | DSE C  | ALL SIGN  | DSE      |                                     | CALL SIGN         | DSE          | CALL SIG   | iN         | DSE           |  |
|   |  | <mark>-</mark>   |   |          |                                     |                   |              |            |            |               |  |
|   |  |  |   |          |                                     |                   |              | -          |            |               |  |
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|   |  | └────┤┤───   |   | 0.00     |                                     |                   | <u> </u>     |            |            | 0.00          |  |
|   |  | TC   | TAL DSEs  | 0.00     |                                     |                   |              | TOTAL DS   | Es         | 0.00          |  |

| LEGAL NA      | ME OF OWNER OF CABLE SYSTEM:<br>BellSouth Telecommunications, LLC  | SYSTEM ID#<br>63241 | Name                      |
|---------------|--|---------------------|---------------------------|
|               | BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE   |                     |                           |
| Section<br>1  | Enter the amount of gross receipts from space K (page 7)   | 5,741,601.66        | 7                         |
| Section<br>2  | A. Enter the total DSEs from block B of part 7   | 0.00                | Computation<br>of the     |
|               | B. Enter the total number of exempt DSEs from block C of part 7  | 0.00                | Syndicated<br>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<br>3a | Did your cable system retransmit the signals of any partially distant television stations during the accounting period?     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 D 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.<br>Enter here and on line 2 of block 4 in space L (page 7)<br>Syndicated Exclusivity Surcharge   |                     |                           |
| Section<br>3b | If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.   |                     |                           |
| 0.0           | 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.<br>Enter here and on line 2 of block 4 in space L (page 7)<br>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<br>4a | Yes—Complete part 9 of this schedule. X 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 D is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.<br>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.<br>Enter here and on line 2 of block 4 in space L (page 7)<br>Syndicated Exclusivity Surcharge   |                     |                           |

| DSE | SCHED | ULE. | PAGE | 16 |
|-----|-------|------|------|----|

|   | LEGAL NAI  | DSE SCHEDULE. ME OF OWNER OF CABLE SYSTEM: SYST  | TEM ID#  |  |  |  |  |  |
|---|--|--|----------|--|--|--|--|--|
| Name  |  | BellSouth Telecommunications, LLC  | 63241    |  |  |  |  |  |
| <b>7</b><br>Computation<br>of the<br>Syndicated<br>Exclusivity<br>Surcharge | e       B. Enter 0.00189 of gross receipts (the amount in section 1).       \$         fy       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.<br>Enter here and on line 2, block 4, space L (page 7)<br>Syndicated Exclusivity Surcharge.  | <u></u> .  |          |  |  |  |  |  |
| <b>8</b><br>Computation<br>of<br>Base Rate Fee                              | <ul> <li>Interview of the point of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5.</li> <li>bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.</li> <li>ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.</li> <li>ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below c.</li> <li>is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.</li> </ul> | art 9. Leave block B below<br>me of your subscribers   |          |  |  |  |  |  |
|   |  | BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS  |          |  |  |  |  |  |
|   | • Did v  | your cable system retransmit the signals of any partially distant television stations during the accounting period?  |          |  |  |  |  |  |
|   |  | Yes—Complete part 9 of this schedule.  |          |  |  |  |  |  |
|   | L  |  |          |  |  |  |  |  |
|   | Section  | BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE  |          |  |  |  |  |  |
|   | 1  | Enter the amount of gross receipts from space K (page 7)   |          |  |  |  |  |  |
|   | Section<br>2   | Enter the total number of permitted DSEs from block B, part 6 of this schedule.<br>(If block A of part 6 was checked "Yes,"<br>use the total number of DSEs from part 5.)  |          |  |  |  |  |  |
|   | Section<br>3   | If the figure in section 2 is 4.000 or less, compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1) | <u> </u> |  |  |  |  |  |

| LEGAL N  | AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#   | Name  |  |  |  |  |  |
|--|--|---|--|--|--|--|--|
| BellS  | outh Telecommunications, LLC 63241   | ivallie                                       |  |  |  |  |  |
| Section 4  | If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.  | 8   |  |  |  |  |  |
|  | A. Enter 0.01064 of gross receipts (the amount in section 1)►\$  | Ū   |  |  |  |  |  |
|  | B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$  | Computation<br>of<br>Base Rate Fee            |  |  |  |  |  |
|  | C. Multiply line B by 3.000 and enter here   | Dase Nale 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.<br>Enter here and in block 3, line 1, space L (page 7)<br>Base Rate Fee ▶ \$ 0.00  |   |  |  |  |  |  |
|  |  |   |  |  |  |  |  |
|  | <b>TANT:</b> It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in G.  | 9   |  |  |  |  |  |
| receipts   | eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this  | Computation<br>of                             |  |  |  |  |  |
| exclusion  | on, you must:  | Base Rate Fee<br>and                          |  |  |  |  |  |
| station<br>DSEs a  | Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same<br>or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of<br>and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.<br>: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system. | Syndicated<br>Exclusivity<br>Surcharge<br>for |  |  |  |  |  |
| also co  | If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, cable system is wholly located outside all major television markets, complete block A only.  | Partially<br>Distant<br>Stations, and         |  |  |  |  |  |
| Step 1:  | Identify a Subscriber Group for Partially Distant Stations<br>For each community served, determine the local service area of each wholly distant and each partially distant station you<br>to that community.  | for Partially<br>Permitted<br>Stations        |  |  |  |  |  |
| outside  | For each wholly distant and each partially distant station you carried, determine which of your subscribers were located<br>the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by<br>ne token, the station is distant to the subscriber.)   |   |  |  |  |  |  |
| subscri  | Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.   |   |  |  |  |  |  |
| •  | iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber  |   |  |  |  |  |  |
|  | section:   |   |  |  |  |  |  |
| <ul> <li>Identify the communities/areas represented by each subscriber group.</li> <li>Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the subscribers in the group.</li> </ul> |  |   |  |  |  |  |  |
| <ul> <li>If:</li> <li>1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3,</li> </ul>  |  |   |  |  |  |  |  |
| <ul> <li>and 4 of this schedule; or,</li> <li>2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, part 6 of this schedule.</li> </ul>  |  |   |  |  |  |  |  |
| •  | ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.   |   |  |  |  |  |  |
|  | late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions paper SA3 form.   |   |  |  |  |  |  |
| page.<br>DSEs f  | ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding<br>In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total<br>or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your<br>calculations on the form.  |   |  |  |  |  |  |

| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: SYS  | STEM |
|------|---|------|
| Name | BellSouth Telecommunications, LLC   | 632  |
|      | 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.   |      |
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| FIRST   |                 | BASE RA             | TE FEES FOR EACH        | SUBSCR                                  | IBER GROUP      |      |                         |
|---|-----------------|---------------------|-------------------------|---|-----------------|------|-------------------------|
| 111101  | SUBSCRIBER GROU | Р                   |                         | P                                       | 0               |      |                         |
| COMMUNITY/ AREA   |                 | 0                   | COMMUNITY/ AREA 0       |   |                 |      | <b>9</b><br>Computation |
| CALL SIGN DSE   |                 |                     |                         | CALL SIGN DSE CALL SIGN DSE             |                 |      |                         |
|   |                 |                     |                         |   |                 |      | Base Rate Fee           |
|   |                 |                     |                         |   |                 |      | and                     |
|   |                 |                     |                         |   |                 |      | Syndicated              |
|   |                 |                     |                         |   |                 |      | Exclusivity             |
|   |                 |                     |                         |   |                 |      | Surcharge               |
|   |                 |                     |                         |   |                 |      | for                     |
|   |                 |                     |                         | ••••••••••••••••••••••••••••••••••••••• |                 |      | Partially<br>Distant    |
|   |                 |                     |                         | •••                                     |                 |      | Stations                |
|   |                 |                     |                         | •                                       |                 |      | Stations                |
|   |                 |                     |                         | •••                                     |                 |      |                         |
|   |                 |                     |                         |   |                 |      |                         |
|   |                 | ••••••              |                         | <b>.</b>                                |                 |      |                         |
|   |                 |                     |                         |   |                 |      |                         |
|   |                 |                     |                         |   |                 |      |                         |
| Total DSEs  |                 | 0.00                | Total DSEs              |   |                 | 0.00 |                         |
| Gross Receipts First Group  | \$ 5,741,       | 601.66              | Gross Receipts Seco     | nd Group                                | \$              | 0.00 |                         |
| Base Rate Fee First Group   | \$              | 0.00                | Base Rate Fee Secor     | nd Group                                | \$              | 0.00 |                         |
|   | SUBSCRIBER GROU | D                   |                         | FOURTH                                  | SUBSCRIBER GROU | D    |                         |
| COMMUNITY/ AREA   |                 | 0                   | COMMUNITY/ AREA         | 0                                       |                 |      |                         |
|   |                 |                     |                         |   |                 |      |                         |
| CALL SIGN DSE   | CALL SIGN       | DSE                 | CALL SIGN               | DSE                                     | CALL SIGN       | DSE  |                         |
|   |                 |                     |                         | •••                                     |                 |      |                         |
|   |                 |                     |                         | •                                       |                 |      |                         |
|   |                 |                     |                         |   |                 |      |                         |
|   |                 |                     |                         |   |                 |      |                         |
|   |                 |                     |                         |   |                 |      |                         |
|   |                 |                     |                         |   |                 |      |                         |
|   |                 |                     |                         |   |                 |      |                         |
|   |                 |                     |                         |   |                 |      |                         |
|   |                 |                     |                         |   |                 |      |                         |
|   |                 |                     |                         |   |                 |      |                         |
|   |                 |                     |                         |   |                 |      |                         |
|   |                 |                     |                         |   |                 |      |                         |
|   |                 |                     |                         | •••                                     |                 |      |                         |
| Total DSEs  |                 | 0.00                | Total DSEs              |   |                 | 0.00 |                         |
|   |                 |                     |                         |   | •               |      |                         |
| Gross Receipts Third Group \$ 0.00                                      |                 |                     | Gross Receipts Fourt    | n Group                                 | \$              | 0.00 |                         |
| Base Rate Fee Third Group   | 0.00            | Base Rate Fee Fourt | h Group                 | \$                                      | 0.00            |      |                         |
| Base Rate Fee: Add the base rat<br>Enter here and in block 3, line 1, s |                 | iber group          | as shown in the boxes a | above.                                  | \$              | 0.00 |                         |

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

| LEGAL NAME OF OWNER<br>BellSouth Telecom       |  |                 |            |  |         | SY        | STEM ID#<br>63241 | Name                 |
|--|--|-----------------|------------|--|---------|-----------|-------------------|----------------------|
| BL   |  |                 |            | TE FEES FOR EACH                         |         |           |                   |                      |
| COMMUNITY/ AREA                                | FIFTH  | SUBSCRIBER GROU | IP<br>0    | SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 |         |           |                   | 9                    |
|  |  |                 |            |  |         |           |                   | Computation          |
| CALL SIGN                                      | DSE  | CALL SIGN       | DSE        | CALL SIGN                                | DSE     | CALL SIGN | DSE               | of                   |
|  |  |                 |            |  |         |           |                   | Base Rate Fee        |
|  |  |                 |            |  |         | _         |                   | and<br>Syndicated    |
|  | •••••  |                 |            |  |         | -         |                   | Exclusivity          |
|  |  |                 |            |  |         | -         |                   | Surcharge            |
|  |  |                 |            |  |         |           |                   | for<br>Deutionly     |
|  |  |                 |            |  |         | <br>      |                   | Partially<br>Distant |
|  |  |                 |            |  |         |           |                   | Stations             |
|  |  |                 |            |  |         |           |                   |                      |
|  |  |                 |            |  |         |           |                   |                      |
|  |  |                 |            |  |         |           |                   |                      |
|  |  |                 |            |  |         |           |                   |                      |
|  |  |                 |            |  |         |           |                   |                      |
| Total DSEs                                     |  |                 | 0.00       | Total DSEs                               |         |           | 0.00              |                      |
| Gross Receipts First Gr                        | oup  | \$              | 0.00       | Gross Receipts Second Group \$ 0.00      |         |           | 0.00              |                      |
| Base Rate Fee First Gr                         | oup  | \$              | 0.00       | Base Rate Fee Second                     | d Group | \$        | 0.00              |                      |
|  | EVENTH                                       | SUBSCRIBER GROU |            |  |         |           |                   |                      |
| COMMUNITY/ AREA                                |  |                 | 0          | COMMUNITY/ AREA                          |         |           |                   |                      |
| CALL SIGN                                      | DSE  | CALL SIGN       | DSE        | CALL SIGN                                | DSE     | CALL SIGN | DSE               |                      |
|  |  |                 |            |  |         |           |                   |                      |
|  |  |                 |            |  |         |           |                   |                      |
|  |  |                 |            |  |         |           |                   |                      |
|  |  |                 |            |  |         |           |                   |                      |
|  |  |                 |            |  |         |           |                   |                      |
|  |  |                 |            |  |         |           |                   |                      |
|  |  |                 |            |  |         |           |                   |                      |
|  |  |                 |            |  |         | -         |                   |                      |
|  |  |                 |            |  |         |           |                   |                      |
|  |  |                 |            |  |         |           |                   |                      |
|  |  |                 |            |  |         |           |                   |                      |
| Total DSEs                                     | <u>ı                                    </u> |                 | 0.00       | Total DSEs                               | 1       |           | 0.00              |                      |
|  |  |                 | 0.00       |  |         |           | 0.00              |                      |
| Gross Receipts Third Group \$ 0.00             |  |                 | 0.00       |  | Joup    | <u>\$</u> | 0.00              |                      |
| Base Rate Fee Third G                          | roup   | \$              | 0.00       | Base Rate Fee Fourth                     | Group   | \$        | 0.00              |                      |
| Boos Bots Face Add th                          | . <b>ha</b> '                                |                 | ribor eres |  | bove    |           |                   |                      |
| Base Rate Fee: Add the Enter here and in block |  |                 | nber group | as shown in the boxes a                  | IDUVE.  | \$        |                   |                      |

# **Nonpermitted 3.75 Stations**

| LEGAL NAME OF OWNE<br>BellSouth Telecor  |               |                  |                      |   |           | S              | 63241 | Name                |
|--|---------------|------------------|----------------------|---|-----------|----------------|-------|---------------------|
| В  |               |                  |                      | TE FEES FOR EAC                           |           |                |       |                     |
| FIRST SUBSCRIBER GROUP COMMUNITY/ AREA 0   |               |                  |                      | SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0 |           |                |       | 9                   |
|  |               |                  |                      |   |           |                |       | Computation         |
| CALL SIGN  | DSE           | CALL SIGN        | DSE                  | CALL SIGN                                 | DSE       | CALL SIGN      | DSE   | of<br>Base Rate Fee |
|  |               |                  |                      |   |           |                |       | and                 |
|  |               |                  |                      |   |           |                |       | Syndicated          |
|  |               |                  |                      |   |           |                |       | Exclusivity         |
|  |               |                  |                      |   | ·····     |                |       | Surcharge           |
|  |               |                  |                      |   |           |                |       | for<br>Partially    |
|  |               |                  |                      |   |           |                |       | Distant             |
|  |               |                  |                      |   |           |                |       | Stations            |
|  |               |                  |                      |   |           |                |       |                     |
|  |               |                  |                      |   |           | ++             |       |                     |
|  |               |                  |                      |   |           | ++             |       |                     |
|  |               |                  |                      |   |           |                |       |                     |
|  |               |                  |                      |   |           |                |       |                     |
| Total DSEs   |               |                  | 0.00                 | Total DSEs                                |           |                | 0.00  |                     |
| Gross Receipts First G   | Group         | <u>\$</u> 5,741, | 601.66               | Gross Receipts Sec                        | ond Group | \$             | 0.00  |                     |
|  |               |                  |                      |   |           |                |       |                     |
| Base Rate Fee First G  | Group         | \$               | 0.00                 | Base Rate Fee Sec                         | ond Group | \$             | 0.00  |                     |
|  | THIRD         | SUBSCRIBER GROU  | JP                   |   | FOURTH    | SUBSCRIBER GRO | UP    |                     |
| COMMUNITY/ AREA  |               |                  | 0                    | COMMUNITY/ ARE                            | A         |                | 0     |                     |
| CALL SIGN  | DSE           | CALL SIGN        | DSE                  | CALL SIGN                                 | DSE       | CALL SIGN      | DSE   |                     |
|  |               |                  |                      |   | •••••     |                |       |                     |
|  |               |                  |                      |   |           | ++             |       |                     |
|  |               |                  |                      |   |           |                |       |                     |
|  |               |                  |                      |   |           |                |       |                     |
|  |               |                  |                      |   |           |                |       |                     |
|  |               |                  |                      |   |           | ++             |       |                     |
|  |               | ]                |                      | ]   |           |                |       |                     |
|  |               |                  |                      |   |           |                |       |                     |
|  | <mark></mark> |                  |                      |   | ·····     | +              |       |                     |
|  |               |                  |                      |   |           | ++             |       |                     |
|  |               |                  |                      |   |           |                |       |                     |
|  |               |                  |                      |   |           |                |       |                     |
| Total DSEs 0.00  |               | 0.00             | Total DSEs           |   |           | 0.00           |       |                     |
| Gross Receipts Third Group   |               | \$               | 0.00                 | Gross Receipts Fourth Group               |           | <u>\$ 0.00</u> |       |                     |
|  |               |                  |                      |   |           |                |       |                     |
| Base Rate Fee Third Group \$   |               | \$               | 0.00                 | Base Rate Fee Fou                         | rth Group | \$             | 0.00  |                     |
|  |               |                  |                      |   |           |                |       |                     |
| Base Rate Fee: Add the base rate fees for each subscriber group<br>Enter here and in block 3, line 1, space L (page 7) |               |                  | as shown in the boxe | es above.                                 | \$        | 0.00           |       |                     |
|  |               |                  |                      |   |           |                |       |                     |

| LEGAL NAME OF OWNE<br>BellSouth Telecor          |         |                |                                 |                        |            | S              | 63241 | Name             |
|--|---------|----------------|---------------------------------|------------------------|------------|----------------|-------|------------------|
| BI   | OCK A:  | COMPUTATION C  | F BASE RA                       | ATE FEES FOR EAG       |            | RIBER GROUP    |       |                  |
| FIFTH SUBSCRIBER GROUP                           |         |                |                                 | SIXTH SUBSCRIBER GROUP |            |                | UP    | •                |
| COMMUNITY/ AREA 0                                |         |                | 0                               | COMMUNITY/ AREA 0      |            |                | 0     | 9<br>Computation |
| CALL SIGN  | DSE     | CALL SIGN      | DSE                             | CALL SIGN              | DSE        | CALL SIGN      | DSE   | of               |
|  |         |                |                                 |                        |            |                |       | Base Rate Fe     |
|  |         |                |                                 |                        |            |                |       | and              |
|  |         |                |                                 |                        |            |                |       | Syndicated       |
|  |         |                |                                 |                        |            |                |       | Exclusivity      |
|  |         |                |                                 |                        |            |                |       | Surcharge        |
|  |         |                |                                 |                        |            |                |       | for              |
|  |         |                |                                 |                        |            |                |       | Partially        |
|  |         |                |                                 |                        |            |                |       | Distant          |
|  |         |                |                                 |                        |            |                |       | Stations         |
|  |         |                |                                 |                        |            |                |       | etatione         |
|  |         |                |                                 | •                      | •••••      |                |       |                  |
|  |         |                | <b></b>                         | •                      |            | •              |       |                  |
|  | ·       |                | <mark></mark>                   |                        |            |                |       |                  |
|  | ·       | -              | <mark></mark>                   |                        |            |                |       |                  |
|  |         |                | <mark></mark>                   |                        | •••••      |                |       |                  |
|  |         | 11             |                                 |                        |            | 11             |       |                  |
| Total DSEs                                       |         |                | 0.00                            | Total DSEs             |            |                | 0.00  |                  |
| Gross Receipts First G                           | roup    | \$             | 0.00                            | Gross Receipts Sec     | cond Group | \$             | 0.00  |                  |
| Base Rate Fee First G                            | roup    | \$             | 0.00                            | Base Rate Fee Sec      | ond Group  | \$             | 0.00  |                  |
|  | SEVENTH | SUBSCRIBER GRO | OUP                             | 1                      | EIGHTH     | SUBSCRIBER GRO | UP    |                  |
| COMMUNITY/ AREA                                  |         |                | 0                               | COMMUNITY/ ARE         | A          |                | 0     |                  |
| CALL SIGN  | DSE     | CALL SIGN      | DSE                             | CALL SIGN              | DSE        | CALL SIGN      | DSE   |                  |
|  |         |                | <mark></mark>                   |                        | ·····      |                |       |                  |
|  |         |                |                                 | -                      | ·····      |                |       |                  |
|  |         |                | <mark></mark>                   |                        | ·····      |                |       |                  |
|  |         |                | <mark></mark>                   |                        | ·····      |                |       |                  |
|  |         |                |                                 | -                      | ·····      |                |       |                  |
|  |         |                | <mark></mark>                   |                        | ·····      | •              | ····· |                  |
|  |         |                | <mark></mark>                   |                        |            | •              |       |                  |
|  | ·       |                | <mark></mark>                   |                        |            | •              |       |                  |
|  | ·       |                | <mark></mark>                   |                        |            | •              |       |                  |
|  | ·       |                | <mark></mark>                   |                        | •••••      | •              |       |                  |
|  | ·       |                | <mark></mark>                   |                        | •••••      |                |       |                  |
|  | ·       |                | <mark></mark>                   |                        |            | •              |       |                  |
|  | ·       |                | <mark></mark>                   |                        |            |                |       |                  |
|  |         | •              | <mark></mark>                   |                        |            |                |       |                  |
| Total DSEs                                       |         |                | 0.00                            | Total DSEs             |            |                | 0.00  |                  |
|  |         | 0.00           |                                 | uth Crown              | •          | 0.00           |       |                  |
| Gross Receipts Third G                           | Broup   | \$             | 0.00                            | Gross Receipts Fou     | irth Group | \$             | 0.00  |                  |
| Base Rate Fee Third Group \$ 0.00                |         | 0.00           | Base Rate Fee Fourth Group \$ 0 |                        | 0.00       |                |       |                  |
| Base Rate Fee: Add th<br>Enter here and in block |         |                | scriber group                   | as shown in the boxe   | es above.  | \$             |       |                  |

| N   | LEGAL NAME OF OWNER OF CABLE SYSTEM:   | FORM SA3E. PAGE 20.<br>SYSTEM ID#                                |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| Name  | BellSouth Telecommunications, LLC  | 63241  |  |  |  |  |  |
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP   |  |  |  |  |  |  |
| 9   | If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:   |  |  |  |  |  |  |
| Computation<br>of                             | First 50 major television market   Second 50 major television market   |  |  |  |  |  |  |
| Base Rate Fee                                 | INSTRUCTIONS:  |  |  |  |  |  |  |
| and<br>Syndicated<br>Exclusivity<br>Surcharge | <ul> <li>Step 1: In line 1, give the total DSEs by subscriber group for commerce this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group for Exempt DSEs in block C, part 7 of this schedule. If none enter the line 0, subtract line 2 for the schedule.</li> </ul>  | r the VHF Grade B contour stations that were classified as zero. |  |  |  |  |  |
| for<br>Partially<br>Distant<br>Stations       | <ul> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> <li>Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</li> </ul> |  |  |  |  |  |  |
|   | FIRST SUBSCRIBER GROUP   | SECOND SUBSCRIBER GROUP  |  |  |  |  |  |
|   | Ling 1: Enter the V/HE DSEe  | Line 1: Enter the V/HE DSEs                                      |  |  |  |  |  |
|   | Line 1: Enter the VHF DSEs   | Line 1: Enter the VHF DSEs                                       |  |  |  |  |  |
|   | Line 3: Subtract line 2 from line 1  | Line 2: Enter the Exempt DSES                                    |  |  |  |  |  |
|   | and enter here. This is the  | and enter here. This is the                                      |  |  |  |  |  |
|   | total number of DSEs for<br>this subscriber group  | total number of DSEs for<br>this subscriber group                |  |  |  |  |  |
|   | subject to the surcharge   | subject to the surcharge   |  |  |  |  |  |
|   | computation  | computation  |  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE   | SYNDICATED EXCLUSIVITY 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<br>total number of DSEs for  | and enter here. This is the total number of DSEs for             |  |  |  |  |  |
|   | this subscriber group<br>subject to the surcharge  | this subscriber group  |  |  |  |  |  |
|   | computation  | subject to the surcharge   |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   | SURCHARGE<br>Third Group   | SURCHARGE<br>Fourth Group  |  |  |  |  |  |
|   |  | ••••••••••••••••••••••••••••••••••••••                           |  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ea<br>in the boxes above. Enter here and in block 4, line 2 of space L (page 7   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |

| Name                                    | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>BellSouth Telecommunications, LLC  | FORM SA3E. PAGE 20.<br>SYSTEM ID#<br>63241   |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
|   | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP   |  |  |  |  |  |  |
| 9                                       | If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:   |  |  |  |  |  |  |
| Computation                             | First 50 major television market   | Second 50 major television market  |  |  |  |  |  |
| of<br>Base Rate Fee                     | INSTRUCTIONS:  |  |  |  |  |  |  |
| and                                     | Step 1: In line 1, give the total DSEs by subscriber group for commercial  | VHF Grade B contour stations listed in block A, part 9 of  |  |  |  |  |  |
| Syndicated<br>Exclusivity<br>Surcharge  | this schedule.<br>Step 2: In line 2, give the total number of DSEs by subscriber group for th<br>Exempt DSEs in block C, part 7 of this schedule. If none enter zz   | ero.   |  |  |  |  |  |
| for<br>Partially<br>Distant<br>Stations | <ul> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> <li>Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</li> </ul> |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   | 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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>First Group   | SYNDICATED EXCLUSIVITY<br>SURCHARGE<br>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<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation   | Line 3: Subtract line 2 from line 1<br>and enter here. This is the<br>total number of DSEs for<br>this subscriber group<br>subject to the surcharge<br>computation |  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE Third Group   | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group  |  |  |  |  |  |
|   | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each in the boxes above. Enter here and in block 4, line 2 of space L (page 7).  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |