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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY					
DATE RECEIVED	AMOUNT				
03/01/2019	\$ ALLOCATION NUMBER				

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:							
Accounting	2018/2							
Period								
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. 63023							
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM							
	The Ohio Bell Telephone Company							
				6302320182				
				63023 2018/2				
	1010 N. St. Mary's Street, Room 13-59-B							
	San Antonio, TX 78215-2109							
С	INSTRUCTIONS: In line 1, give any business or trade names used to							
C	names already appear in space B. In line 2, give the mailing address o	f the system, if di	fferent from the address giv	en in space B.				
System	1 IDENTIFICATION OF CABLE SYSTEM:							
	MAILING ADDRESS OF CABLE SYSTEM:							
	2 (Number, street, rural route, apartment, or suite number)							
	(City, town, state, zip code)							
	In the second se							
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst com	munity served below and r	elist on page 1b				
Area Served	with all communities.	lo						
	CITY OR TOWN	STATE						
First Community	nity							
	Below is a sample for reporting communities if you report multiple ch CITY OR TOWN (SAMPLE)	annel line-ups in S STATE	Space G. CH LINE UP	SUB GRP#				
	Alda	MD	A	1				
Sample	Alliance	MD	В	2				
	Gering	MD	В	3				

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

ACCOUNTING PERIOD: 2018/2 FORM SA3E. PAGE 1b. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 63023 The Ohio Bell Telephone Company Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CH LINE UP CITY OR TOWN STATE SUB GRP# **Dayton** OH First **Bath Township** OH Community **Beavercreek** OH **Beavercreek Township** OH **Bellbrook** OH Bethel OH See instructions for OH **Butler Township** additional information on alphabetization. Cedarville Township OH Centerville OH Clayton OH OH Fairborn German OH OH Harrison **Huber Heights** OH OH Kettering **Mad River Township** OH Miami Township OH OH Miamisburg **Moorefield Township** OH Moraine OH **New Carlisle** OH Oakwood OH Pike OH **Piqua** ОН Riverside OH **Spring Valley Township** OH **Springcreek** OH Springfield OH Sugar Creek Township ОН **Trotwood** OH Vandalia OH **Washington Township** OH **West Carrollton** OH Xenia OH **Xenia Township** OH

Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:
SYSTEM ID#
The Ohio Bell Telephone Company
63023

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1	BLOCK 2					
	NO. OF				NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS		RATE	CATEGORY OF SERVICE	SUBSCRIBERS	F	RATE
Residential:							
 Service to first set 	21,015	\$	19.00	HD Tech Fee	16,035	\$	10.00
 Service to additional set(s) 				Set-Top Box	21,114		\$0-\$15
 FM radio (if separate rate) 				Broadcast TV Surcharge	21,015	\$4.9	99-\$5.99
Motel, hotel							
Commercial	99	\$	20.00				
Converter							
Residential							
Non-residential		•					
	<u> </u>	†····					

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM Name 63023 The Ohio Bell Telephone Company PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if th∈ 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 othe 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 multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-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 channe 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 noncommercia 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 ex planation 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 you 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe 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 identifec Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL CARRIAGE SIGN OF (Yes or No) NUMBER **STATION** (If Distant) WBDT/WBDTHD 26/1026 I No Springfield, OH WDTN/WDTNHD 2/1002 Ν No Dayton, OH See instructions for additional information WHIO/WHIOHD 7/1007 Ν No Dayton, OH on alphabetization. WKEF/WKEFHD 22/1022 Ν No Dayton, OH WKOI 43 I No Richmond, IN WPTD/WPTDHD Ε 16/1016 No Dayton, OH WRGT/WRGTHD 45/1045 No Dayton, OH

FORM SA3E. PAGE 3.					/lecoolin	
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name
The Ohio Bell 1	elephone C	Company			63023	Name
PRIMARY TRANSMITTE	ERS: TELEVISI	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas	system during to ions in effect of 6.61(e)(2) and sis, as explaine	the accounting June 24, 19 (4), or 76.63 (ed in the next	g period except 981, permitting t (referring to 76.6 paragraph	(1) stations carrie he carriage of cer 61(e)(2) and (4))];	s and low power television stations) d only on a part-time basis under tain network programs [sections and (2) certain stations carried on a	Primary Transmitters: Television
basis under specifc F0	CC rules, regulation in the contract of the co	ations, or aut G—but do lis	horizations:		nent and Program Log)—if the	Television
• List the station here,	and also in spa	ace I, if the st			itute basis and also on some othe of the general instructions located	
Column 1: List each multicast stream	h station's call associated wit	th a station ac	ccording to its ov	ver-the-air design	es such as HBO, ESPN, etc. Identifi ation. For example, report multi ch stream separately; for example	
Column 2: Give the	se. For exampl	e, WRC is Ch	-		tion for broadcasting over-the-air ir s may be different from the channe	
Column 3: Indicate educational station, by (for independent multion For the meaning of the	e in each case rentering the le cast), "E" (for n ese terms, see	whether the setter "N" (for resonance of the page (v) of the p	network), "N-M" al educational), ne general instru	(for network multi or "E-M" (for nond actions located in	ependent station, or a noncommercia cast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form es". If not, enter "No". For an ex	
planation of local servi	ce area, see p ave entered "Y he distant stati	age (v) of the 'es" in columr on during the	general instruct a 4, you must co accounting per	tions located in the implete column 5, iod. Indicate by er	e paper SA3 form stating the basis on which you ntering "LAC" if your cable syster	
of a written agreement the cable system and tion "E" (exempt). For	entered into c a primary trans simulcasts, als	on or before J smitter or an a so enter "E". It	une 30, 2009, b association repre f you carried the	etween a cable sy esenting the prima channel on any o	y payment because it is the subjec /stem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe	
Column 6: Give the	e location of ea Canadian statio	ach station. Fo	or U.S. stations, ve the name of t	list the communithe community with	ed in the paper SA3 form by to which the station is licensed by the sh which the station is identifec channel line-up.	
,		•	EL LINE-UP	•	'	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

ACCOUNTING PERIOD: 2018/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63023 The Ohio Bell Telephone Company PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

FORM SA3E. PAGE 5.						ACCOUNTING	PERIOD: 2018/2
The Ohio Bell Telepho					S	63023	Name
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEME	NT AND PROGRAM LOC	a			
In General: In space I, ident substitute basis during the ac explanation of the programm form.	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regu	lations, or authorizations.	For a further	 Substitute
1. SPECIAL STATEMENT	CONCER	NING SUBSI	TITUTE CARRIAGE				Carriage:
During the accounting per				is, any nonn	etwork television program	m	Special
broadcast by a distant stat				·-, -··· , ······		XNo	Statement and Program Log
Note: If your answer is "No	", leave the	rest of this pag	ge blank. If your answer is	"Yes," you m	nust complete the progra	m	0 0
log in block 2.	- DDOOD A	МС					
2. LOG OF SUBSTITUTE In General: List each subst			ate line. Use abbreviations	wherever po	ssible, if their meaning is	3	
clear. If you need more spa	ce, please	attach addition	al pages.				
Column 1: Give the title period, was broadcast by a			rision program (substitute p			ation	
under certain FCC rules, re							
SA3 form for futher informa				"basketball"	'. List specific program		
titles, for example, "I Love L			/bers vs. Bulls." r "Yes." Otherwise enter "I	lo."			
Column 3: Give the call	sign of the s	station broadca	asting the substitute progra	ım.			
Column 4: Give the broathe case of Mexican or Can		•	ne community to which the				
			stem carried the substitute		,	nth	
first. Example: for May 7 giv	/e "5/7."			-			
Column 6: State the time to the nearest five minutes.			ogram was carried by your			ely	
stated as "6:00-6:30 p.m."	·	. 0		·	•		
			was substituted for progra			ed	
to delete under FCC rules a gram was substituted for pr							
effect on October 19, 1976.		, ,	•		· ·		
				\\/\LIE	EN SUBSTITUTE		
S	UBSTITUT	E PROGRAM	I		IAGE OCCURRED	7. REASON FOR	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	DELETION	
					_		
					_		
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ACCOUNTING PERIOD: 2018/2 FORM SA3E. PAGE 6.

Name	The Ohio Be	owner of cable ell Telephon								S	YSTEM ID# 63023
J Part-Time Carriage Log	Icolumn 5 of space (;										
		Г	DATI	ES /	AND HOURS ()F F	PART-TIME CAF	RRIAGE			
	CALL SIGN	WHEN	CARRIAGE OC				CALL SIGN	WHEN	CARRIAGE O		
		DATE	FROM	URS	TO			DATE	FROM	OUR	S TO
			-							_	
				=							
			-								
			-	_						_	
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LEGA	AL NAME OF OWNER OF CABLE SYSTEM: e Ohio Bell Telephone Company	SYSTEM ID# 63023	Name				
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.							
 COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account. If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of block 3 below. 							
3 be ▶ If pa 2 in	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered elow. art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be elock 4 below. MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are releast the minimum fee, regardless of whether they carried any distant stations. This fee is 1.06 system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K	entered on line quired to pay at					
Block 2	Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here. This is your minimum fee. DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the information space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column 4, you						
2	"Yes" in this block. • Did your cable system carry any distant television stations during the accounting period? Yes—Complete the DSE schedule. x No—Leave block 3 below blank and complete						
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE	\$ -					
	schedule. If none, enter zero Line 3. Add lines 1 and 2 and enter						
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7	\$ 76,171.74	Cable systems				
	(block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	submitting additional deposits under Section 111(d)(7) should contact the Licensing				
	Line 4. FILING FEE						
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	76,896.74 ge (i) of the	appropriate form for submitting the additional fees.				
	general instructions located in the paper SA3 form for more information.)						

ACCOUNTING PERIOD: 2018/2
FORM SA3E, PAGE 8.

		FURIVI SASE, PAGE 6.						
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: The Ohio Bell Telephone Company	SYSTEM ID# 63023						
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast station to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	ns						
	Enter the total number of channels on which the cable system carried television broadcast stations							
	Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	606						
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)							
Be Contacted for Further Information	er Name Diane Bellinger Telephone 210-351-4805							
	Address 1010 N. St. Mary's Street, Room 13-59-B (Number, street, rural route, apartment, or suite number)							
	San Antonio, TX 78215 (City, town, state, zip)							
	Email dg7796@att.com Fax (optional) 210-246-8199)						
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulation	s.)						
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)							
	(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or							
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable syster in line 1 of space B and that the owner is not a corporation or partnership; or	n as identified						
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of in line 1 of space B.	the cable system						
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained here are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	in						
	X /s/ Robert LaGrone							
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the t button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibili	•						
	Typed or printed name: Robert LaGrone							
	Title: Vice President – Finance (Title of official position held in corporation or partnership)							
	Date: February 22, 2019	111111111111111111111111111111111111111						

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on the 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 telephon numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of lav

LEGAL NAME OF OWNER OF CABLE	SYSTEM:	SYSTEM ID#	
The Ohio Bell Telephone	Company	63023	Name
The Satellite Home Viewer Ar lowing sentence: "In determining the tot service of providing sentences and amounts." For more information on when paper SA3 form. During the accounting period made by satellite carriers to sentence.	T CONCERNING GROSS RECEIPTS EXCLUS ct of 1988 amended Title 17, section 111(d)(1)(A), of the tal number of subscribers and the gross amounts paid to econdary transmissions of primary broadcast transmitter collected from subscribers receiving secondary transmin to exclude these amounts, see the note on page (vii) of did the cable system exclude any amounts of gross receivated lite dish owners?	c Copyright Act by adding the fol- the cable system for the basic s, the system shall not include sub- ssions pursuant to section 119." If the general instructions in the eipts for secondary transmissions	Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address	Name Mailing Address		
INTEREST ASSESSME	INTS		
	sheet for those royalty payments submitted as a result o t assessment, see page (viii) of the general instructions i		Q
Line 1 Enter the amount of l	ate payment or underpayment	x	Interest Assessment
Line 2 Multiply line 1 by the	interest rate* and enter the sum here	xdays	
Line 3 Multiply line 2 by the	number of days late and enter the sum here	x 0.00274	
	0274** enter here and on line 3, block 4, age 7)	(interest charge)	
	e chart click on www.copyright.gov/licensing/interest-rate ivision at (202) 707-8150 or licensing@loc.gov.	.pdf. For further assistance please	
** This is the decimal equ	ivalent of 1/365, which is the interest assessment for on	e day late.	
•	orksheet covering a statement of account already submined address, first community served, accounting period, and		
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 Office to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

Step 1: Determine the station's type-value. For purposes of computing DSEs, the Copyright Act gives different values to distant stations depending upon their type. If, as shown in space G of your statement of account (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 broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

Substitution of Grandfathered Stations. Under section 76.65 of the former FCC rules, a cable system was not required to delete any station 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 Syndicated 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 pursuant to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/or 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 in
 a major television market, part 7 does not have to be completed.
- Determine which station(s) reported in block B, part 6 are commercial VHF stations and place a grade B contour, in whole, or in part, over the cable system. If none of these stations are carried, part 7 does not have to be completed.
- Determine which of those stations reported in block b, part 7 of the DSE Schedule were carried before March 31,1972. These stations are exempt from the FCC's syndicated exclusivity rules in effect on June 24, 1981. If you qualify to calculate the royalty fee based upon the carriage of partially-distant stations, and you elect to do so, you must compute the surcharge in part 9 of this schedule.
- Subtract the exempt DSEs from the number of DSEs determined in block B of part 7. This is the total number of DSEs subject to the Syndicated Exclusivity Surcharge.
- Compute the Syndicated Exclusivity Surcharge based upon these DSEs and the appropriate formula for the system's market position.

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

SCHEDULE

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

- Calculate a separate base rate fee for each subscriber group, using
 the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

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

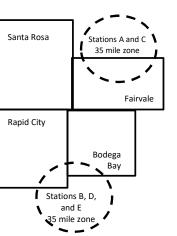
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

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



Distant Stations Carrie	d	Identification	of Subscriber Groups	
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
E (network)	<u>0.25</u>	Fairvale	Stations B, D, and E	120,000.00
TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00

Minimum Fee Total Gross Receipts	\$600,000.00
	x .01064
	\$6,384,00

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

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94

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

DOL SCHEDULL. FAG													
4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			S	STEM ID#							
I	The Ohio Bell Telephon	e Company				63023							
	SUM OF DSEs OF CATEGOR		NS.	1									
	Add the DSEs of each station		140.										
	Enter the sum here and in line		is schedule		0.00								
	Enter the sam here and in line	i oi pair o oi ai	io deriodalo.										
	Instructions:												
2	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5												
	of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-												
Computation	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."												
of DSEs for	CATEGORY "O" STATIONS: DSEs												
Category "O"		1			T								
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE							
Add rows as													
necessary.													
Remember to copy													
all formula into new													
rows.													
1				i l									

	LEGAL NAME OF C	OWNER OF CABLE SYSTEM:						S	YSTEM ID#				
Name	The Ohio Be	II Telephone Compa	ny						63023				
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	CAPACITY st the call sign of all dista the call sign of all dista the call sign of all dista the correspond with the infor- the figure in colu the the figure in colu the the third decir the figure in colu the third decir the figure in colu the figure in colupion.	he number of hours mation given in space he total number of humn 2 by the figure in mal point. This is the station, give the "typulumn 4 by the figure in the station.	your cable system ce J. Calculate or ours that the stat n column 3, and g "basis of carriag e-value" as "1.0." in column 5, and	m carried the standy one DSE for of ion broadcast ow give the result in e value" for the second reach netwood give the result i	tion during the each station. It is each station. It is each sair during the each station. It is on column 6. It is each station.	ring the accou column 4. This nmercial educ	inting period. Inting period. In figure must Intinational station, In the interest of the state					
Capacity		CATEGORY LAC STATIONS: COMPUTATION OF DSEs											
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	JRS O ED BY S' M O	UMBER F HOURS TATION N AIR	4. BASIS OF CARRIAG VALUE	SE	5. TYPE VALUE	6. DS	SE				
			÷			X		=					
			÷ ÷		= 	x x							
			÷		=	x		=					
			÷		=	X		=					
			÷			X		=					
			÷			x		=					
	Add the DSEs	of CATEGORY LAC Sof each station. Im here and in line 2 of p		9,			0.00						
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efferations in efferations in efferations. Broadcast of space I). Column 2: at your option. Column 3: Column 4:	the the call sign of each start by your system in substant on October 19, 1976 (one or more live, nonnetwork). This figure should correst enter the number of days Divide the figure in column This is the station's DSE	itution for a program as shown by the lett ork programs during number of live, non spond with the inforr s in the calendar yea in 2 by the figure in	that your system or "P" in column that optional carrinetwork program nation in space I. ir: 365, except in column 3, and give	was permitted of 7 of space I); an iage (as shown by s carried in substance) a leap year.	to delete und d / the word "Ye stitution for pr olumn 4. Rou	er FCC rules s" in column 2 ograms that w und to no less	of were deleted than the third	rm).				
		SU	BSTITUTE-BAS	IS STATION	S: COMPUTA	ATION OF	DSEs						
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUN OF PRO	MBER OGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE				
		÷		=			÷		=				
		÷ ÷		=			÷ ÷		=				
		÷		=			÷		=				
		÷		=			÷		=				
	Add the DSEs	÷ s OF SUBSTITUTE-BAS of each station. um here and in line 3 of p.	IS STATIONS:	e,			÷ 0.00		=				
5		ER OF DSEs: Give the am s applicable to your systen		in parts 2, 3, and	4 of this schedul	e and add the	m to provide tl	he total					
Total Number	1. Number o	f DSEs from part 2 ●				>		0.00					
of DSEs		f DSEs from part 3 ●				<u> </u>		0.00					
	3. Number o	f DSEs from part 4 ●				>	Г	0.00					
	TOTAL NUMBE	R OF DSEs					<u> </u>		0.00				

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2018/2

	OWNER OF CABLE S						S'	YSTEM ID# 63023	Name
	•							00020	
block A:	ck A must be comp								6
If your answer if chedule.	"Yes," leave the re	mainder of pa	art 6 and part 7	of the DSE sched	lule blank and	d complete part	8, (page 16) of the	Э	6
If your answer if	"No," complete blo			FEL EVIIOLONI NA	ADVETO				Computation o
the cable system	m located wholly or			TELEVISION MA		ction 76.5 of F	CC rules and regul	ations in	3.75 Fee
fect on June 24,	•	atolice of all fi	ajor and sina	ici marketa da dem	ned dilder 30	0.0011 70.0 011 0	50 raies and regar	auono m	
_	plete part 8 of the		O NOT COMP	LETE THE REMAI	NDER OF PA	ART 6 AND 7.			
X No—Comp	olete blocks B and	C below.							
		BLOG	CK B: CARF	RIAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulatio e DSE Sched	ns prior to Jun Iule. (Note: Th	part 2, 3, and 4 of t e 25, 1981. For fur e letter M below re Act of 2010.)	ther explanat	tion of permitte	d stations, see the		
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerica	les and regulated pursuant to on as defined all educational station (76.6 r DSE schedu	ations cited be the FCC mar in 76.5(kk) (70 I station [76.59 5) (see parago ile).	sis on which you callow pertain to thos ket quota rules [76 3.59(d)(1), 76.61(e)(c), 76.61(d), 76.6: aph regarding subsection (76.7)	e in effect on i.57, 76.59(b))(1), 76.63(a) 3(a) referring	June 24, 1981 , 76.61(b)(c), 7 referring to 76 to 76.61(d)]	6.63(a) referring to		
Column 3:	G Commercial U M Retransmissio	HF station wing of a distant seach distant sestations ider	thin grade-B c multicast stre tation listed in tified by the le	e or substitute bas ontour, [76.59(d)(5 am. parts 2, 3, and 4 o ttter "F" in column 2	f the schedule), 76.63(a) refe			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
				•					
								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		L				II		0.00	
		В	SLOCK C: CC	MPUTATION OF	3.75 FEE				
ne 1: Enter the	total number of	DSEs from p	part 5 of this	schedule					
ne 2: Enter the	sum of permitted	d DSEs from	ı block B abo	ve			m		
	line 2 from line 1 eave lines 4–7 bl			,		rate.		0.00	
ne 4: Enter gro	oss receipts from	space K (pa	ige 7)				ur-		Do any of the
ne 5: Multinly I	ine 4 by 0.0375 a	and enter su	m here				x 0.03	375	DSEs represer partially permited/ partially
.,	·						Х		nonpermitted carriage? If yes, see par
ne 6: Enter tot	al number of DSE	s from line	ა					-	9 instructions
ine 7: Multiply I	ine 6 by line 5 an	d enter here	and on line	2, block 3, space	L (page 7)			0.00	

Name	YSTEM ID# 63023	Sì						WNER OF CABLE Telephone Co		
			JED)	(CONTIN	SION MARKETS	A: TELEVIS	BLOCK			
6	3. DSE	2. PERMITTED BASIS		3. DSE	2. PERMITTED BASIS	1. CALL SIGN	3. DSE	2. PERMITTED BASIS	1. CALL SIGN	
Computation 3.75 Fee		27.010	01011		25 (0.00	O TOTA		<i>B</i> , (c) (c)	0.014	

ACCOUNTING PERIOD: 2018/2

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name The Ohio Bell Telephone Company 63023 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 Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B-Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN DSE PERIOD CARRIAGE DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. of the Syndicated **BLOCK A: MAJOR TELEVISION MARKET Exclusivity** 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? X Yes—Complete blocks B and C . No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer or in part, over the cable system? to former FCC rule 76.159) Yes-List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. No—Enter zero and proceed to part 8. CALL SIGN CALL SIGN CALL SIGN DSE DSE DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: The Ohio Bell Telephone Company	SYSTEM ID# 63023	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	7,158,997.94	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? \(\text{\text{X}} \) 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 3b blank. NOTE: If the DS	SE	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below. A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1).		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
0.2	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Tes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the Dis 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name		ME OF OWNER OF CABLE SYSTEM: The Ohio Bell Telephone Company 630
7 Computation	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$
of the Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$
Surcharge		C. Multiply line B by 3.000 and enter here
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ \$
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here
		F. Multiply line D by line E and enter here
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)
		Syndicated Exclusivity Surcharge
8 Computation	You m	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.
of Base Rate Fee	blank What i were lo	ar answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?
	L	Yes—Complete part 9 of this schedule. X No—Complete the following sections.
	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 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.). • 0.00
	Section 3	If the figure in section 2 is 4.000 or less, compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.
		A. Enter 0.01064 of gross receipts (the amount in section 1)
		B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ _ \$ 50,184.58
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here -
		D. Multiply line B by line C and enter here
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)
		Base Rate Fee.

		3 PERIOD: 2018/2
	IAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Nama
The C	Ohio Bell Telephone Company 63023	
Section 4	If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.	_
4	A. Enter 0.01064 of gross receipts	8
	(the amount in section 1)	
	B. Enter 0.00701 of gross receipts	
	(the amount in section 1) \$	Computation of
		Base Rate Fee
	C. Multiply line B by 3.000 and enter here >	
	D. Enter 0.00330 of gross receipts	
	(the amount in section 1) \$	
	E. Subtract 4.000 from total DSEs	
	(the figure in section 2) and enter here	
	F. Multiply line D by line E and enter here \$	
	G. Add lines A, C, and F. This is your base rate fee	
	Enter here and in block 3, line 1, space L (page 7) Base Rate Fee 0.00	
	Dase Rate Fee	
IMPOR	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals	
shall in	istead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line- Space G.	9
	neral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of clusion, you must:	of
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	Base Rate Fee
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number	and Syndicated
group.	s and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each	Exclusivity
	r: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge for
must a	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 lso compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. rer, if your cable system is wholly located outside all major television markets, complete block A only.	Partially Distant Stations, and
How to	o Identify a Subscriber Group for Partially Distant Stations	for Partially
	: For each community served, determine the local service area of each wholly distant and each partially distant station you	Permitted Stations
carried	to that community.	
outside	: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located the the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by ne token, the station is distant to the subscriber.)	
subscr	: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each iber 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.	
_	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's iber groups.	
	n section:	
• Identi	ify the communities/areas represented by each subscriber group.	
	the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the ibers in the group.	
• If:		
, -	r system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, of this schedule; or,	
, ,	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, t6 of this schedule.	
• Add t	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	ulate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions e paper SA3 form.	
page. DSEs t	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show ctual calculations on the form.	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63023 The Ohio Bell Telephone Company Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

	UCK V:		BASE DA	TE FEES FOR EACH	SLIBSUDI	RED CDOLID			
DI		SUBSCRIBER GROU		TE FEES FOR EACH		SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate	
		-						and	
		-						Syndicat	
		-						Exclusivi	
		-						Surcharg	
		-						for Partially	
								Distant	
								Stations	
		-						• • • • • • • • • • • • • • • • • • • •	
otal DSEs			0.00	Total DSEs			0.00		
iross Receipts First Gro	N.I.D.	¢ 7.159	,997.94	Gross Receipts Second	Croup	•	0.00		
1055 Receipts Filst Git	oup	\$ 7,158	,337.34	Gross Receipts Second	Gloup	\$	0.00		
ase Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00		
	THIRD	SUBSCRIBER GROU	P		FOURTH	SUBSCRIBER GROU	IP		
OMMUNITY/ AREA	1111110	CODOCI (IDEI) CITOC	0	COMMUNITY/ AREA	10011111	CODCONIDEN ONCO	0		
OMMONT I/ ARLA				COMMONT I/ AREA					
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	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
otal DSEs	DSE	CALL SIGN			DSE	CALL SIGN			
			0.00	Total DSEs			0.00		
		CALL SIGN				CALL SIGN			
Total DSEs Gross Receipts Third Gr			0.00	Total DSEs			0.00		
	oup		0.00	Total DSEs	Group		0.00		
ross Receipts Third Gr	oup	\$	0.00	Total DSEs Gross Receipts Fourth	Group	\$	0.00		

JTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	RIBER GROUD	ISHBSCDI		FRASEPA	COMPLITATION O	I OCK A.	R/	
TI .			TETELSTON LAC		SUBSCRIBER GRO			
0 COMMUNITY/ AREA		9,5,111	COMMUNITY/ AREA				COMMUNITY/ AREA	
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					-			
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U.00 IOUAL DISES U.0			TOTAL DOES	0.00			Olai DSES	
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	<u> </u>	a Group	Gross Receipts Seco	0.00	\$	loup	•	
	<u>*</u>	a Group	Gross Receipts Seco	0.00	\$	тоир	·	
0.00 Base Rate Fee Second Group \$ 0.0					\$			
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0.00 Base Rate Fee Second Group \$ 0.0 RIBER GROUP EIGHTH SUBSCRIBER GROUP	\$	d Group	Base Rate Fee Seco	0.00	\$	roup	Base Rate Fee First Gro	
0.00 Base Rate Fee Second Group \$ 0.0	\$	d Group	Base Rate Fee Seco	0.00	\$	roup	iase Rate Fee First Gro	
0.00 Base Rate Fee Second Group \$ 0.0 RIBER GROUP EIGHTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA	\$ H SUBSCRIBER (d Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First Gro	
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0.00 Base Rate Fee Second Group \$ 0.0 RIBER GROUP EIGHTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA	\$ H SUBSCRIBER (d Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First Gro	
0.00 Base Rate Fee Second Group \$ 0.0 RIBER GROUP EIGHTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA	\$ H SUBSCRIBER (d Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First Gro	
0.00 Base Rate Fee Second Group \$ 0.0 RIBER GROUP EIGHTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA	\$ H SUBSCRIBER (d Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First Gro	
0.00 Base Rate Fee Second Group \$ 0.0 RIBER GROUP EIGHTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA	\$ H SUBSCRIBER (d Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First Gro	
0.00 Base Rate Fee Second Group \$ 0.0 RIBER GROUP EIGHTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA	\$ H SUBSCRIBER (d Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First Gro	
0.00 Base Rate Fee Second Group \$ 0.0 RIBER GROUP EIGHTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA	\$ H SUBSCRIBER (d Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First Gro	
0.00 Base Rate Fee Second Group \$ 0.0 RIBER GROUP EIGHTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA	\$ H SUBSCRIBER (d Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First Gro	
0.00 Base Rate Fee Second Group \$ 0.0 RIBER GROUP EIGHTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA	\$ H SUBSCRIBER (d Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First Gro	
0.00 Base Rate Fee Second Group \$ 0.0 RIBER GROUP EIGHTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA	\$ H SUBSCRIBER (d Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First Gro	
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0.00 Base Rate Fee Second Group \$ 0.0 RIBER GROUP EIGHTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA	\$ H SUBSCRIBER (d Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First Gro	
0.00 Base Rate Fee Second Group \$ 0.0 RIBER GROUP EIGHTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA	\$ H SUBSCRIBER (d Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First Gro	
0.00 Base Rate Fee Second Group \$ 0.0 RIBER GROUP EIGHTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA	\$ H SUBSCRIBER (d Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First Gro	
0.00 Base Rate Fee Second Group \$ 0.0 RIBER GROUP EIGHTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA	\$ H SUBSCRIBER (d Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First Gro	
Base Rate Fee Second Group Base Rate Fee Second Group EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA L SIGN DSE CALL SIGN DSE CALL SIGN DSI DSI DSI DSI DSI DSI DSI DS	\$ H SUBSCRIBER (d Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 UP O DSE	\$ SUBSCRIBER GRO	SEVENTH	SOMMUNITY/ AREA	
0.00 Base Rate Fee Second Group \$ 0.0 RIBER GROUP EIGHTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA	\$ H SUBSCRIBER (d Group	COMMUNITY/ AREA	0.00 UP O DSE	\$ SUBSCRIBER GRO	SEVENTH	Sase Rate Fee First Grown Scommunity/ AREA	
Base Rate Fee Second Group Base Rate Fee Second Group EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA L SIGN DSE CALL SIGN DSE CALL SIGN DSI DSI DSI DSI DSI DSI DSI DS	SUBSCRIBER OF CALL SIGN	d Group EIGHTH DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 UP	\$ SUBSCRIBER GRO	SEVENTH	Sase Rate Fee First Gro	
0.00 Base Rate Fee Second Group \$ 0.0 COMMUNITY/ AREA L SIGN DSE CALL SIGN DSE CALL SIGN DSI DISTRIBUTION OF TOTAL DSES 0.00 Total DSES D.00	SUBSCRIBER OF CALL SIGN	d Group EIGHTH DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 UP	SUBSCRIBER GRO	SEVENTH	CALL SIGN Coll DSEs	
0.00 Base Rate Fee Second Group \$ 0.0 COMMUNITY/ AREA L SIGN DSE CALL SIGN DSE CALL SIGN DSI DISTRIBUTION OF TOTAL DSES 0.00 Total DSES D.00	\$ CALL SIGN	d Group	CALL SIGN CALL SIGN Total DSEs Gross Receipts Four	0.00 UP	SUBSCRIBER GRO	SEVENTH	Base Rate Fee First Gro	

LEGAL NAME OF OWNER The Ohio Bell Tele				micea 5.70 State		S	63023	Name
В				TE FEES FOR EACH				
COMMUNITY/ AREA	FIRST	SUBSCRIBER GROU	P 0	COMMUNITY/ AREA	SECOND	SUBSCRIBER GROU	JP 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and
		-						Syndicated Exclusivity
								Surcharge
								for
						-		Partially
								Distant Stations
					<u> </u>			Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$ 7,158,	997.94	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	Р		FOURTH	SUBSCRIBER GROU	JP	
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 G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the			iber group a	as shown in the boxes a	bove.			
Enter here and in block	3, line 1, s	pace L (page 7)				\$	0.00	

LEGAL NAME OF OWNER The Ohio Bell Tele				initiou 5.70 Stat		s	YSTEM ID# 63023	Name
Bl			TE FEES FOR EACH SUBSCRIBER GROUP					
	FIFTH	SUBSCRIBER GROU		SIXTH SUBSCRIBER GROUP				9
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
						_		Stations
						· · · · · · · · · · · · · · · · · · ·		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	auc	\$	0.00				0.00	
	•	· ·						
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Secon	d Group	\$	0.00	
S	SEVENTH	SUBSCRIBER GROU		EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs 0.00			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$		\$	0.00	Gross Receipts Fourth Group \$ 0.00		0.00		
Base Rate Fee Third Group \$		\$	0.00	Base Rate Fee Fourth Group \$		\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes al	oove.	\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: The Ohio Bell Telephone Company	SYSTEM ID# 63023							
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP								
9 Computation	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: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this								
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially									
Distant Stations	schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to she your actual calculations on this form.								
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP							
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs							
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE Second Group							
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP							
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs							
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation							
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group\$							
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)								

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:						
Name	The Ohio Bell Telephone Company SYSTEM 630						
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP						
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	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: First 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.						
	FIFTH SUBSCRIBER GROUP	SIXTH SUBSCRIBER GROUP					
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs					
	Line 2: Enter the Exempt Bols Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE Second Group					
	SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP						
	SEVENTI SOBSCRIBER GROOF	EIGHTT SUBSCRIBER GROOF					
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs					
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation					