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

STATEMENT OF ACCOUNT for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

SA3E Long Form

Return completed workbook by email to:

coplicsoa@loc.gov

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

Accounting Period 2019/1 Bows Owner Instructions: Cive the full legin name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate the of the subsidiary, on that of the parent or onducts the business of the cable system If there were different owners during period.com/ing period.org/the owner of the sold of the accounting period should submit a single statement of account and royally be payment covering the entire accounting period should submit a single statement of account and royally be payment covering the entire accounting period. Check here if this is the system's first filling. If not, enter the system's ID number assigned by the Licensing Division. 62985 LEGAL NAME OF OWNER/MALLING ADDRESS OF CABLE SYSTEM Illinois Bell Telephone Company 6298520191 6298520191 2270 Lakeside Blvd Richardson, TX 75082 6298520191 62985 2019/1 2270 Lakeside Blvd Richardson, TX 75082 1 Importance of company 6298520191 2 2270 Lakeside Blvd Richardson, TX 75082 1 Importance of company 62985 2 NSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. 1 1 Dentreications: Geometry business or trade names used to identify the business and operation of the system unless these names already appearin space B. In l	Α	ACCOUNTING PERIOD COVERED BY	THIS STATEMENT:			
B Give the full legal name of the cable system. If the owner is a subsidiary of another corporation, give the full corpo Ite the tot the subsidiary, not that of the parent corporation Give the subsidiary, not that of the parent corporation Give the full legal name of the corporation Ite the tot that of the parent corporation Give the subsidiary, not that of the parent corporation Give the subsidiary, not that of the parent corporation Ite the tot the subsidiary, not that of the parent corporation Give the subsidiary, not that of the parent corporation Give the subsidiary, not that of the parent corporation Ite fact. Have of the subsidiary, not that of the parent corporation Give the subsidiary, not that of the parent corporation Give the subsidiary, not that of the parent corporation Ite fact. Have of the is the system's first filling. If not, enter the system's ID number assigned by the Licensing Division. G2985 C Initian Corporation G2985 2019/1 Sign of the accounting period G2985 2019/1 G2985 2019/1 G2985 2019/1 G Initian Corporation G2985 2019/1 G Sign of the parent system's first filling. If not, enter the system's in the diverse system corporation of the system unless these names already appear in space B. In the 2, give the mailing address of the system, if different from the address given in space B.	-	2019/1				
Illinois Bell Telephone Company 6298520191 62985 2019/1 62985 2019/1 62985 2019/1 2270 Lakeside Blvd Richardson, TX 75082 NSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. System 1 IDENTIFICATION OF CABLE SYSTEM: 2 INMALING ADDRESS OF CABLE SYSTEM: 2 INMALING ADDRESS OF CABLE SYSTEM: 2 INSTRUCTIONS: To complete space D instructions, see page 1b. Identify only the frst community served below and relist on page 1b with all communities. Citry OR TOWN STATE Chicago IL Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE Sample Aida Aida 1 Aida 1 Alda MI Alda MD Aida 1	_	Give the full legal name of the owner of the or rate title of the subsidiary, not that of the parent of List any other name or names under which the If there were different owners during the account a single statement of account and royalty fee pay	corporation he owner conducts the business of the cable syste counting period, only the owner on the last day of t yment covering the entire accounting period	em <i>he accounting period should</i>	·	62985
Area Served Citry OR ToWN State Citry OR ToWN State First Citry OR ToWN State Citry OR ToWN State Sample Alda Allance MID A 1		LEGAL NAME OF OWNER/MAILING ADDRES	SS OF CABLE SYSTEM			
C INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. System Image: Dentification of cable system: 1 Dentification of cable system: 2 Mailung Address of cable system: 2 Mailung Address of cable system: 2 Image: Stread appear in space D instructions, see page 1b. Identify only the frst community served below and relist on page 1b. Area Instructions: For complete space D instructions, see page 1b. Identify only the frst community served below and relist on page 1b. Kread Citry OR TOWN STATE First Community Delow is a sample for reporting communities if you report multiple channel line-ups in Space G. Citry OR TOWN Sample Alda 1		Illinois Bell Telephone Compan	у			
2270 Lakeside Blvd Richardson, TX 75082 C INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. System 1 Dentification of CABLE SYSTEM: 2 MAILING ADDRESS OF CABLE SYSTEM: 2 2 MAILING ADDRESS OF CABLE SYSTEM: 2 2 Maile communities: 2 Maile communities if you report multiple channel line-ups in Space G. 2 Citry OR TOWN (SAMPLE) STATE Ch LINE UP SUB GRP# Sample Ada MD A 1					6298	520191
Richardson, TX 75082 C INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. System Image: already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. 1 Dentification of cable system: 2 Mailung address of cable system: 2 Mailung address of cable system: 2 Instructions: For complete space D instructions, see page 1b. Identify only the frst community served below and relist on page 1b Area CITY OR TOWN STATE Served Chicago IL Below is a sample for reporting communities if you report multiple channel line-ups in Space G. SUB GRP# Aida MID A 1 Aliance MD B 2					62985	2019/1
Vertical system names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. System 1 DENTIFICATION OF CABLE SYSTEM: MAILING ADDRESS OF CABLE SYSTEM: 2 INUmber, street, rural route, apartment, or suite number) (City, town, state, zp code) Instructions: For complete space D instructions, see page 1b. Identify only the frst community served below and relist on page 1b Area CITY OR TOWN String Chicago IL Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE Sample Alda Allance MD Allance MD						
1 MAILING ADDRESS OF CABLE SYSTEM: 2 MAILING ADDRESS OF CABLE SYSTEM: 2 (Number, street, rural route, apartment, or suite number) (City, town, state, zip code) (City, town, state, zip code) D Instructions: For complete space D instructions, see page 1b. Identify only the frst community served below and relist on page 1b Area with all communities. Served CITY OR TOWN First Chicago Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE Sample MD A Alda MD A Alliance MD B	С		,			
2 (Number: street, rural route, apartment, or suite number) (City, town, state, zip code) (City, town, state, zip code) Area Instructions: For complete space D instructions, see page 1b. Identify only the frst community served below and relist on page 1b Area CITY OR TOWN Served CITY OR TOWN First Chicago Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE Sample Alda MD Allaince MD B	System	1 IDENTIFICATION OF CABLE SYSTEM:				
Instructions: For complete space D instructions, see page 1b. Identify only the frst community served below and relist on page 1b Area Served Instructions: For complete space D instructions, see page 1b. Identify only the frst community served below and relist on page 1b Area Served CITY OR TOWN STATE First Community Chicago IL Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB GRP# Sample Alda MD A 1		MAILING ADDRESS OF CABLE SYSTEM:				
D Instructions: For complete space D instructions, see page 1b. Identify only the frst community served below and relist on page 1b Area with all communities. Served CITY OR TOWN First Chicago Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE Sample Alda Alda MD Alliance MD		2 (Number, street, rural route, apartment, or suite number)				
Area Served with all communities. First Community Chicago IL Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB GRP# Alda MD A 1 Alliance MD B 2		(City, town, state, zip code)				
Served CITY OR TOWN STATE First Chicago IL Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CH LINE UP SUB GRP# Sample Alda MD A 1 Alliance MD B 2	D	Instructions: For complete space D instruct	tions, see page 1b. Identify only the frst comm	nunity served below and re	elist on page	e 1b
First Community Chicago IL Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) Sample Alda MD A Alliance MD B 2			I			
Community Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB GRP# Alda MD A 1 Alliance MD B 2						
Sample State CH LINE UP SUB GRP# Alda MD A 1 Alliance MD B 2		Chicago				
Sample Alda MD A 1 Alliance MD B 2	Community					
Sample Alliance MD B 2					SUB	
	Sample					-
in the second seco						
						<u> </u>
	-					
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone	• •	ting PII, you are agreeing to the routine use of it to establi pared for the public. The effect of not providing the PII reg		•		

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.

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

8/29/2019

FORM SA3E. PAGE 1b.				
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	
Illinois Bell Telephone Company			62985	
Instructions: List each separate community served by the cable system. A "communin FCC rules: "a separate and distinct community or municipal entity (including unincompareas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The of system identification hereafter known as the "first community." Please use it as the	orporated communite frst community that	ties within unincorp t you list will serve a	orated	D Area Served
Note: Entities and properties such as hotels, apartments, condominiums, or mobile h below the identified city or town.	nome parks should l	be reported in pare	ntheses	
If all communities receive the same complement of television broadcast stations (i.e. all communities with the channel line-up "A" in the appropriate column below or leave on a partially distant or partially permitted basis in the DSE Schedule, associate each designated by a number (based on your reporting from Part 9).	e the column blank. n relevant communit	If you report any st ty with a subscriber	ations group,	
When reporting the carriage of television broadcast stations on a community-by-com channel line-up designated by an alpha-letter(s) (based on your Space G reporting) a (based on your reporting from Part 9 of the DSE Schedule) in the appropriate column	and a subscriber gro			
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	
Chicago	IL	AA	2	First
Addison	IL	AA	2	Community
Algonquin	IL	AA	1	.
Alsip	IL	AA	2	
Arlington Heights	IL	AA	1	
Aroma Park	IL	AA	2	See instructions for
Aurora	IL	AA	1	additional information
Bannockburn	IL	AA	1	on alphabetization.
Barrington	IL	AA	1	
Barrington Hills	IL	AA	1	
Bartlett	IL	AA	1	
Batavia	IL	AA	1	
Beach Park	IL	AA	1	
Bedford Park	IL	AA	2	
Bellwood	IL	AA	2	
Bensenville	IL	AA	2	
Berkeley	IL	AA	2	
Berwyn	IL	AA	2	
Bloomingdale	IL	AA	1	
Blue Island	IL	AA	2	
Bolingbrook	IL	AA	2	
Boulder Hill	IL	AA	1	
Bourbonnais	IL	AA	2	
Bradley	IL	AA	2	
Bridgeview	IL	AA	2	
Broadview	IL	AA	2	
Brookfield	IL	AA	2	
Buffalo Grove	IL	AA	1	
Bull Valley	IL	AA	1	
Burbank	IL	AA	2	
Burlington	IL	AA	1	
Burnham	IL	AA	2	
Burr Ridge	IL	AA	2	
Calumet City	IL	AA	2	
Calumet Park		AA	2	
	IL	AA	1	
		AA	1	
Campton Hills Carol Stream			•	
Carol Stream	·····	ΔΔ	1	
Carol Stream Carpentersville		ΑΑ ΔΔ	1	
Carol Stream Carpentersville Cary		AA	1 1 2	
Carol Stream Carpentersville			1 1 2 2	

Cicero	IL	AA	2	1
Clarendon Hills		 	2	
	·· II	<u> </u>	2	
Coal City	<u>الہ</u> 11			
Cook Unincorporated County (East)	IL II	<u> </u>	2	
Cook Unincorporated County (West)	<u>IL</u> 	<u> </u>	3	
Country Club Hills	IL	AA	2	
Countryside	IL	AA	2	
Crest Hill	IL	AA	2	Add rows as pasassan
Crestwood	IL	AA	2	Add rows as necessary.
Crystal Lake	IL	AA	1	
Darien	IL	AA	2	
Deer Park	IL	AA	1	
Deerfield		AA	1	
Des Plaines	IL	AA	2	
Dixmoor				
		AA	2	
Dolton	IL	AA	2	
Downers Grove	IL	AA	2	
Dupage Unincorporated County (East)	IL	AA	2	
Dupage Unincorporated County (West)	IL	AA	3	
East Dundee	IL	AA	1	
East Hazel Crest	IL	AA	2	
Elburn	IL	AA	1	
Elgin	IL	AA	1	
Elk Grove Village	IL	AA	-	
Elmhurst		AA AA	2	
			2	
Elmwood Park	IL 	AA	2	
Evanston	IL	AA	3	
Evergreen Park	IL	AA	2	
Fairmont	IL	AA	2	
Flossmoor	IL	AA	2	
Forest Park	IL	AA	2	
Forest View	IL	AA	3	
Fox Lake	IL	AA	1	
Fox River Grove	IL	AA	1	
Frankfort	IL	AA	2	
Franklin Park	IL	AA	2	
Geneva	IL	<u> </u>	1	
Gilberts				
	IL 	AA	1	
Glen Ellyn Glencoe	IL	AA	2	
Glencoe	IL	AA	1	
Glendale Heights	IL	AA	1	
Glenview	IL	AA	2	
Glenwood	IL	AA	2 2 2	
Golf	IL	AA	2	
Grayslake	IL	AA	1	
Green Oaks	IL	AA	2	
Grundy Unincorporated County	IL	AA	1	
	IL		1	
Gurnee Heinegyille		AA	4	
Hainesville	1L 	<u> </u>	1	
Hampshire	IL	AA	2	
Hanover Park	IL	AA	1	
Harvey	IL	AA	2	
Harwood Heights	IL	AA	2	
Hawthorn Woods	IL	AA	1	
Hazel Crest	IL	AA	2	
Hickory Hills	IL	AA	2	
Highland Park	IL	AA	- 1	
Highwood			1	
Highwood Hilloido	IL II			
Hillside	IL 	<u> </u>	2	
Hinsdale	IL	AA	2	

Hodakins	IL	AA	2
Hodgkins Hoffman Estates	IL	AA	1
Holiday Hills Homer Glen	IL	AA	1
Homer Glen	IL	AA	2
Hometown	IL	AA	2
Homewood Huntley Indian Creek		AA	2
Huntley		AA	
Indian Crook		AA	1
Indian Head Park		AA	2
	IL	AA	
Inverness Island Lake	IL		1
ISIAIIU LARE			ו ר
Itasca		AA	2
Johnsburg		AA	1
Joliet Justice	IL	AA	2
Justice	IL	AA	2
Kane Unincorporated County	IL	AA	1
NANKAKAA	IL	AA	2
Kankakee Unincorporated County	IL	AA	2
Kendall Unincorporated County	IL	AA	1
Kenilworth	IL	AA	3
Kildeer	IL	AA	1
Kildeer La Grange	IL	AA	2
La Grange Park	IL	AA	2
Lake Barrington	IL	AA	1
Lake Bluff	IL	AA	1
Lake Forest		AA	2
Lake in the Hills		AA	
Lake Unincorporated County		AA	1
Lake Villa		AA	1
Lake Zurich		AA	1
Lakemoor		AA	1
Lakewood	<u>IL</u>	AA	2
Lansing		AA	2
Lemont	IL	AA	1
Libertyville	IL	AA	1
Limestone	IL	AA	2
Lincolnshire	IL	AA	1
Lincolnwood	IL	AA	2
Lindenhurst	IL	AA	1
Lisle	IL	AA	2
Lockport	IL	AA	2
Lombard	IL	AA	2
Long Grove	IL	AA	1
Long Lake	IL	AA	1
Lynwood	IL	AA	2
Lýons	IL	AA	2
Manhattan	IL	AA	2
Marengo	IL	AA	1
Markham	IL	AA	2
Matteson	IL.	AA	2
Maywood		AA	2
McCullom Lake		AA	1
McConform Lake		AA	1
			4
Mchenry Unincorporated County			1
Melrose Park		AA	2
Merrionette Park	IL	AA	2
Mettawa	IL	AA	1
Midlothian	IL	AA	2
Minooka	IL	AA	2
Mokena		AA	2

Montgomory		AA	2
Montgomery Morris	IL IL	AA AA	2
Morton Grove	п <u>с</u> IL	AA	2
Morris Morton Grove Mount Prospect Mundelein Naperville New Lenox Niles Norridge Norridge	IL	ΔΔ	2
Mundelein		AA AA	1
Naperville		AA	2
New Lenox	IL	AA	2
Niles	IL	AA	2
Norridae		AA	2
North Aurora	IL	AA	1
North Barrington North Chicago North Riverside		AA	1
North Chicago	IL	AA	1
North Riverside		AA	2
Northbrook	 IL	AA	1
Northfield	IL	AA	2
Northfield Northlake		AA	3
Oak Brook	IL	AA	2
Oak Brook		AA	
Oak Forest Oak Lawn		AA AA	2
Oak Lawn Oak Park	IL IL	AA AA	2 2
Oakbrook Terrace	IL	AA ^ ^	2
Oakwood Hills Obversia Fielda	IL	AA	1
Olympia Fields	IL	AA	2
Orland Hills	IL	AA	2
Orland Park	IL	AA	2
Oswego	IL	AA	1
Palatine	IL	AA	1
Palos Heights	IL	AA	2
Palos Hills	IL	AA	2
Palos Park	IL	AA	2
Park City	IL	AA	1
Park Forest	IL	AA	2
Park Ridge	IL	AA	2
Phoenix	IL	AA	2
Pingree Grove	IL	AA	1
Pistakee Highlands	IL	AA	1
Plainfield	IL	AA	2
Plano	IL	AA	1
Port Barrington	IL	AA	1
Posen	IL	AA	2
Prairie Grove	IL	AA	1
Preston Heights	IL	AA	2
Prospect Heights	IL	AA	1
Richton Park	IL	AA	2
Ringwood	IL	AA	1
River Forest	IL	AA	2
River Grove	IL	AA	2
Riverdale	IL	AA	2
Riverside	IL	AA	2
Riverwoods	IL	AA	1
Robbins	IL	AA	2
Rockdale	IL	AA	2
Rolling Meadows	IL	AA	1
Romeoville	IL	AA	2
Rolling Meadows Romeoville Roselle	IL	AA	1
Rosemont	IL	AA	2
Round Lake	IL	AA	1
Round Lake Beach	IL	AA	1
Round Lake Heights	IL	AA	1

Saint Charles Schaumburg Schiller Park Shorewood Skokie	IL	AA	1
Schaumburg	IL	AA	1
Schiller Park	IL	AA	2
Shorewood	IL	AA	2
Skokie	IL		2
Skokle Sleepy Hollow South Barrington South Chicago Heights South Elgin South Holland	IL	AA	1
South Barrington	IL	AA	1
South Chicago Heights	IL	AA	2
South Flain	IL	AA	
South Light		<u> </u>	2
Stoaor		AA	
Steger Stickney Stone Park		AA	2
Stone Devic		AA AA	<u>2</u> 2
	IL 		<u> </u>
Streamwood	IL 	AA	1
Sugar Grove	IL	AA	2
Summit	IL	AA	2
Third Lake	IL	AA	1
Thornton	IL	AA	2
Tinley Park	IL	AA	2
Fower Lakes	IL	AA	1
Summit Third Lake Thornton Tinley Park Tower Lakes Trout Valley Venetian Village	IL	AA	1
Venetian Village	IL	AA	1
/ernon Hills	IL	AA	1
/illa Park		AA	2
Volo		AA	
Wadsworth		AA	1
Nausworth Norronvilla			4
Narrenville Neusanda	IL II	AA	1
Wauconda	IL.	AA	1
Waukegan	IL	AA	1
Wayne	IL	AA	1
Wayne West Chicago	IL	AA	1
West Dundee	IL	AA	1
Westchester	IL	AA	2
Western Springs	IL	AA	2
Westmont	IL	AA	2
Wheaton	IL	AA	1
Wheeling	IL	AA	1
Will Unincorporated County	IL	AA	2
Willow Springs	IL	AA	2
Willowbrook	·· II	AA	
Wilmette	·	AA	3
Wilmington		AA	ິັ ຳ
Winfield		AA	<u> </u>
Winnetka			2
	IL	AA	3
Winthrop Harbor	IL	AA	1
Nood Dale	IL	AA	2
Noodridge	IL	AA	2
Woodstock	IL	AA	1
Worth	IL	AA	2
York Center	IL	AA	2
Yorkville	IL	AA	1
Zion	IL	AA	1
Cedar Lake	IN	AA	2
Crown Point	IN	AA	2
Dyer	IN	AA	2
East Chicago	IN	AA	2
	IN	AA	
Gary Griffith			2
Griffith	IN		2
Hammond	IN	<u> </u>	2
Highland	IN	AA	2

La Porte Unincorporated County	IN	AA	2
_ake Unincorporated County	IN	AA	2
La Porte Unincorporated County Lake Unincorporated County Long Beach	IN	AA	2
Lowell	IN	AA	2
Merrillville	IN	AA	2
Michiana Shores	IN	AA	2
Michiana Shores Michigan City	IN	AA	2
Munster	IN	AA	2
Porter Unincorporated County	IN	AA	2
Munster Porter Unincorporated County Pottawattomie Park	IN	AA	2
Saint John	IN	AA	2
Saint John Schererville	IN	AA	2
Trail Creek	IN	AA	2
Winfield	IN	AA	2
	Į		<u> </u>

Name	LEGAL NAME OF OWNER OF CABL	E SYSTEM:							S			
name	Illinois Bell Telephone C	Company								6298		
Е	SECONDARY TRANSMISSION	SERVICE: SL	JBSCR	IBERS AND R	۲A	TES						
E		In General: The information in space E should cover all categories of secondary transmission service of the cable										
0	system, that is, the retransmission											
Secondary Transmission	about other services (including p							those ex	listing on the			
Service: Sub-	last day of the accounting period Number of Subscribers: Both							hle svst	em broken			
scribers and	down by categories of secondary							-				
Rates	each category by counting the n											
	separately for the particular serv								-			
	Rate: Give the standard rate of	-	-						-			
	unit in which it is generally billed					ny standar	rd rate variation	is within	a particular rate			
	category, but do not include disc Block 1: In the left-hand block					es of serv	ondary transmi	ssion se	rvice that cable			
	systems most commonly provide											
	that applies to your system. Not											
	categories, that person or entity	should be cour	nted as	a subscriber i	n e	each appl	icable category	. Examp	ole: a residential			
	subscriber who pays extra for ca						l in the count u	nder "Se	rvice to the			
	first set" and would be counted o						convice that ar	difforor	at from those			
	Block 2: If your cable system printed in block 1 (for example, t											
	with the number of subscribers a											
	sufficient.	,										
	BLO	DCK 1						BLO	DCK 2			
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE		CATE	EGORY OF SE	RVICE	NO. OF SUBSCRIBERS	RATE		
	Residential:				Π							
	Service to first set	26	4,601	\$ 19.00	HD Tech Fee				186,192	\$ 10.0		
	 Service to additional set(s) 				11	Set-Top	Box		266,106	\$0-\$1		
	• FM radio (if separate rate)				1	Broadcas	st TV Surchar	ge	264,601	\$4.99-\$7.9		
	Motel, hotel				1							
	Commercial		1,505	\$ 20.00	1							
	Converter				1							
	Residential				1							
	Non-residential											
_	SERVICES OTHER THAN SEC In General: Space F calls for rate						ll vour cable sv	stem's s	envices that were			
F	not covered in space E, that is, t	•	'			•	, ,					
Services	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											
Other Than	amount of the charge and the ur		usually	/ billed. If any r	at	tes are ch	arged on a var	iable per	-program basis,			
Secondary Fransmissions:	enter only the letters "PP" in the rate column.											
Rates	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 1						BLO					
	CATEGORY OF SERVICE	RATE	CATEGORY OF SER					GORY OF SERVICE	RATE			
	Continuing Services:		Install	ation: Non-re	si	dential						
	Pay cable		• Mc	otel, hotel				Video	on Demand	\$0-\$10		
	 Pay cable—add'l channel 	\$5-\$199	• Co	mmercial				Servio	e Activation Fee	\$0-\$3		
	Fire protection		Pay cable					Credit Management F		\$0-\$44		
	 Burglar protection 		• Pay cable-add'l c			annel		Dispatch on Demand		\$9		
	Installation: Residential	[Fire protection				Wireless Receiver		ess Receiver	\$0-\$4		
	First set	\$0-\$199	•			•••••••••••••••••••••••••••••••••••••••				emium Tier	\$	
	 Additional set(s) 	[services:			[Jpgrade Fee	\$5		
	• FM radio (if separate rate)	[• Re	connect			\$0-\$35	Vacat	ion Hold	\$ 7.0		
	• Converter	[• Dis	sconnect			[]			Ι		
		[۰Ou	Itlet relocation			\$0-\$55			Ι		
		1					r			Т		
			• MC	ove to new add	re	ess						

ERIOD: 2019/1

FORM SA3E. PAGE 3.					ACCOUN	TING PERIOD: 2019/
LEGAL NAME OF OWN	IER OF CABLE S	YSTEM:			SYSTEM ID	#
Illinois Bell Tel	ephone Cor	mpany			6298	Namo
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during t ions in effect or 6.61(e)(2) and (sis, as explaine	he accounting n June 24, 19 (4), or 76.63 (r ed in the next r	period, except 81, permitting th referring to 76.6 paragraph.	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections ind (2) certain stations carried on a able system on a substitute program	G Primary Transmitters: Television
basis under specifc FC	CC rules, regula	ations, or auth	orizations:		ent and Program Log)—if the	Television
basis. For further in in the paper SA3 fo	and also in spa formation conc rm.	ace I, if the sta cerning substit	ute basis statior	ns, see page (v) of	ute basis and also on some other f the general instructions located s such as HBO, ESPN, etc. Identify	
each multicast stream cast stream as "WETA WETA-simulcast).	associated with -2". Simulcast	h a station acc streams must	be reported in c	er-the-air designat column 1 (list each	ion. For example, report multi- i stream separately; for example on for broadcasting over-the-air in	
its community of licens on which your cable sy	e. For example stem carried th	e, WRC is Cha ne station.	annel 4 in Wash	ington, D.C. This i	pendent station, or a noncommercial	
(for independent multic For the meaning of the	cast), "E ["] (for n ese terms, see	oncommercia page (v) of the	l educational), o e general instruc	r "E-M" (for nonco ctions located in th		
planation of local servi Column 5: If you ha	ce area, see pa ave entered "Y	age (v) of the es" in column	general instructi 4, you must con	ons located in the nplete column 5, s	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system	
carried the distant stat For the retransmiss	ion on a part-tii ion of a distant	me basis beca multicast stre	ause of lack of a eam that is not s	ctivated channel c ubject to a royalty	• • •	
tion "E" (exempt). For a explanation of these the	simulcasts, also ree categories	o enter "E". If , see page (v)	you carried the of the general i	channel on any other of the second seco	y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form.	
					to which the station is licensed by the which the station is identified.	
Note: If you are utilizin		, ,,,		,		
		CHANN	EL LINE-UP	AA		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	1
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
WBBM/WBBMHD	2/1002	N	No		Chicago, IL	
						See instructions for
WCIU/WCIUHD	26/1026	I	No		Chicago, IL	additional information on alphabetization.
WCPX/WCPXHD	38/1038	l	No		Chicago, IL	
WESV-LD/WESVL	40/1040	<u> </u>	No		Chicago,, IL	
WFLD/WFLDHD	32/1032	<u> </u>	No		Chicago, IL	
WGBO/WGBOHD	66/1066	<u> </u>	No		Joliet, IL	
WGN9/WGN9HD	9/1009	I	No		Chicago, IL	
WJYS	62	I	No		Hammond, IN	
	1	1		1		1

Chicago, IL

Chicago, IL

Chicago, IL

Chicago, IL

Chicago, IL

Aurora, IL

Gary, IN

Chicago, IL

Chicago, IL

7/1007

5/1005

48

48

13/1013

24

50/1050

44/1044

11/1011

Ν

Ν

I

I

I

I

1

I

Е

No

No

No

No

No

No

No

No

No

WLS/WLSHD

WMEU

WMEU-CD

WPVN-LD

WMAQ/WMAQHD

WOCK-CD/WODK

WPWR/WPWRHD

WSNS/WSNSHD

WTTW/WTTWHD

Name

G

Primary

Transmitters:

Television

SYSTEM ID#

62985

FORM SA3E. PAGE 3.

Illinois Bell Telephone Company
LEGAL NAME OF OWNER OF CABLE SYSTEM:

PRIMARY TRANSMITTERS: TELEVISIO	ON

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

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

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

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

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	AA		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
WWME-CA	23	I	No		Chicago, IL	
wwто	35	I	No		LaSalle, IL	See instructions for
WXFT/WXFTHD	60/1060	I	No		Aurora, IL	additional information
WYCC	20	Е	No		Chicago, IL	on alphabetization.
WYIN/WYINHD	56/1056	E	Yes	0	Gary, IN	

ACCOUNTING PERIOD: 2019/1

FORM SA3E. PAGE 3.

FORM SA3E. PAGE 3.								
					SYSTEM ID 6298	Namo		
Illinois Bell Tel					6290	5		
PRIMARY TRANSMITT								
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:								
	here in space	G-but do list		e Special Stateme	ent and Program Log)—if the			
	formation conc				ute basis and also on some other f the general instructions located			
Column 1: List each each multicast stream	h station's call associated witl	n a station ac	cording to its ov	er-the-air designat	s such as HBO, ESPN, etc. Identify tion. For example, report multi-			
WETA-simulcast).				,	n stream separately; for example on for broadcasting over-the-air in			
its community of licens on which your cable sy	•		annel 4 in Wash	ington, D.C. This	may be different from the channel			
Column 3: Indicate	in each case v	whether the st			pendent station, or a noncommercial ast), "I" (for independent), "I-M"			
(for independent multi For the meaning of the	cast), "E" (for ne	oncommercia page (v) of the	l educational), o e general instruc	r "E-M" (for nonco ctions located in th	mmercial educational multicast). ne paper SA3 form.			
Column 4: If the st planation of local servi					s". If not, enter "No". For an ex- paper SA3 form.			
			•		stating the basis on which your ering "LAC" if your cable system			
carried the distant stat	ion on a part-tir	ne basis beca	ause of lack of a	ctivated channel o	capacity.			
					payment because it is the subject stem or an association representing			
the cable system and	a primary trans	mitter or an a	ssociation repre	senting the primar	y transmitter, enter the designa-			
					her basis, enter "O." For a further din the paper SA3 form.			
Column 6: Give the	e location of ea	ch station. Fo	or U.S. stations,	list the community	to which the station is licensed by the			
Note: If you are utilizir				•	which the station is identifed. channel line-up.			
-	<u> </u>	СНАМИ	EL LINE-UP	AC	· · · ·	_		
			_			_		
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
31011	NUMBER	STATION	````	(If Distant)				
					1			
					Į			

Name	LEGAL NAME OF C								SYSTEM ID# 62985	
H Primary Transmitters: Radio	 PRIMARY TRANSMITTERS: RADIO 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 receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, 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 2: S Column 3: If signal, indicate Column 4: G	state whether t the radio stati this by placing Give the station	he statio on's sigr a check a's locatio	each station carried. n is AM or FM. nal was electronically process a mark in the "S/D" column. on (the community to which the the community with which the	ne	station is licens	ed by the FCC			
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	Π	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
					Π					
					$\left \right $					
					1					
					$\left \right $					

LEGAL NAME OF OWNER OF	CABLE SYST	EM:				SYSTEM ID#			
Illinois Bell Telephone	Company	/				62985	Name		
SUBSTITUTE CARRIAGE	E: SPECIA			}					
				•			1		
n General: In space I, identi							•		
substitute basis during the ac explanation of the programmi							Substitute		
				general metal			Carriage: Special		
 SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program 									
broadcast by a distant station?									
Note: If your answer is "No"	', leave the i	rest of this page	e blank. If your answer is '	Yes," you mus	t complete the progra	m			
log in block 2. 2. LOG OF SUBSTITUTE		MS							
n General: List each subst	itute progra	m on a separat		vherever possi	ble, if their meaning is	3			
clear. If you need more space			l pages. sion program (substitute p	oaram) that d	uring the accounting				
period, was broadcast by a						tion			
under certain FCC rules, reg									
SA3 form for futher informat titles, for example, "I Love L				"basketball". L	list specific program				
Column 2: If the program	n was broad	cast live, enter	"Yes." Otherwise enter "N						
			sting the substitute progra e community to which the		sed by the FCC or in				
the case of Mexican or Can	adian statio	ns, if any, the c	community with which the	station is identi	fied).				
Column 5: Give the mon first. Example: for May 7 giv		when your syst	em carried the substitute p	orogram. Use n	umerals, with the mo	nth			
		substitute prog	gram was carried by your o	able system. L	ist the times accurate	ły			
to the nearest five minutes.									
stated as "6:00–6:30 p.m." Column 7: Enter the lette	er "R" if the l	isted program	was substituted for progra	mming that voi	ur system was require	d			
to delete under FCC rules a	nd regulatio	ns in effect du	ing the accounting period	enter the lette	r "P" if the listed pro	4			
gram was substituted for pro effect on October 19, 1976.		that your syste	m was permitted to delete	under FCC rul	es and regulations in				
				1.1					
q		E PROGRAM			N SUBSTITUTE	7. REASON			
1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIMES	FOR DELETION			
I. IIILE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM — TO				
					_				
					_				
				-	_				
				-	_				
				-					
	+								
				-	<u> </u>				
				-					
				-		······			
						·····			
						·····			
	 					·····			

FORM SA3E. PAGE 5.

ACCOUNTING PERIOD: 2019/1

Name	LEGAL NAME OF C	OWNER OF CABLE	SYSTEM:					:	SYSTEM ID#		
Name	Illinois Bell Telephone Company 62985										
J Part-Time Carriage Log	 Column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m 12:00 p.m." 										
			DATES	AND HOURS C)F F	PART-TIME CAR	RIAGE				
	CALL SIGN	WHEN	CARRIAGE OCCU			CALL SIGN	WHEN	I CARRIAGE OCCU			
	UALL DIGIN	DATE	HOUR FROM	s то		UALL DIGIN	DATE	HOUI FROM	RS TO		
		DATE	FROM	10			DATE	FROM	10		
			<u> </u>								
			_								
			_								
			_								

FORM	SA3E. PAGE 7.								
	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name						
Illir	nois Bell Telephone Company	62985							
Inst all a (as pag	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. 									
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b k 3 below.	de entered on line 1 of							
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be plow.	entered on line 2 in block							
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	build be entered on line							
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or mor least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period.								
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.	\$ 97,870,694.87							
	This is your minimum fee.	\$ 1,041,344.19							
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block. • Did your cable system carry any distant television stations during the accounting per X Yes—Complete the DSE schedule. No—Leave block 3 below blank and c	mn 4, you must check iod?							
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$ 90,554.65							
0	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00							
	Line 3. Add lines 1 and 2 and enter here	\$ 90,554.65							
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	\$ 1,041,344.19	Cable systems						
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente zero.	r 0.00	submitting additional deposits under						
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	Section 111(d)(7) should contact the Licensing						
	Line 4. FILING FEE	\$ 725.00	additional fees. Division for the						
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 1,042,069.19	appropriate form for submitting the additional fees.						
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See page (i) of the							

ACCOUNTING PERIOD:	2019/1
--------------------	--------

ACCOUNTING PERI	00. 2019/1						FORM SA3E	
Name	LEGAL NAME OF OWNER						SYS	TEM ID# 62985
			ompany					02300
N.4			(4) the sumbar of a				4 - 4 - 4 - 4	
Μ		•	. ,		cable system carried t channels, during the a		I STATIONS	
Channels					channels, during the c			_
	1. Enter the total nu						37	
	system carried tele	evision b	roadcast stations			••••••		
	2. Enter the total nu	mber of	activated channels					
	on which the cable	e system	carried television br	roadcast stations			768	
	and nonbroadcast	services	5			· · · · · · · · · · · · · · · · · · ·		
N	INDIVIDUAL TO BE		ACTED IF FURTHEI	R INFORMATION IS	NEEDED: (Identify an	individual		
Individual to	we can contact abo	ut this st	atement of account.))				
Be Contacted								
for Further	Name Susan	Reddi	ng			Telephone	972-269-1938	
Information								
	Address 2270 L	akesid	e Blvd	o pumbor)				
			TX 75082	e number)				
	(City, town,							
		or707	2000tt 00m		F . (Rece D		
	Email	51721	'2@att.com		Fax (op	ntional)		
		:1-1				Oanumiaht Office and		
0	CERTIFICATION (In	ils staten	nent of account mus	t be certired and signe	ed in accordance with	Copyright Office rec	julations.	
Certifcation	• I, the undersigned, I	hereby ce	ertify that (Check one	, <i>but only one</i> , of the b	oxes.)			
	(Owner other tha	n corpoi	ation or partnership	b) I am the owner of the	e cable system as identi	ifed in line 1 of space	e B; or	
	C (a mont of sumon			utu analain) Laur tha du			e evetere es identified	
				a corporation or partn	ly authorized agent of th ership; or		e system as identified	
	X (Officer or partn	er) I am a	an officer (if a corpora	ation) or a partner (if a j	partnership) of the legal	entity identifed as o	wner of the cable system	
	in line 1 of spa				., .			
	I have examined the	e stateme	ent of account and he	reby declare under per	alty of law that all state	ments of fact contair	ned herein	
	are true, complete, a [18 U.S.C., Section 1			nowledge, information,	and belief, and are mad	le in good faith.		
			- /1					
		X	/s/ Michael Sar	ntogrossi				
		Enter a	n electronic signature	on the line above using	an "/s/" signature to cert	tify this statement.		
					d slash of the /s/ signatu he "F" button will avoid e		in the box and press the s compatibility settings.	
						-		
		туреа	or printed name: I	Nichael Santogr	0551			
			Vice Dry 11	4 F lasses				
		Title:	Vice Presider (Title of official positio	nt – Finance In held in corporation or pa	tnership)			
				· · · · · ·				
		Date:	August 26, 2019					
	: Section 111 of title 17						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 telephonous process 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 the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law

LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#Illinois Bell Telephone Company62985	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.	Concerning Gross Receipts Exclusion
During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO	
YES. Enter the total here and list the satellite carrier(s) below	
Name Name Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
xLine 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	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7) \$	
(interest charge) * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.	
Owner Address	
First community served	
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested	on th

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 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 LISTED IN SPACE G OF SA3E (LONG FORM)

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

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

Step 2: Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space 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 particula station's DSE for the accounting period.

TOTAL OF DSEs

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

THE ROYALTY FEE

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

The 3.75 Fee. If a cable system located in whole or in part within 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 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 beer 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 catego ries, please attach written documentation to the statement of account detailing the basis for its classifcation.

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 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 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 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.

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

 If none of the stations were partially distant, calculate your base rate fee according to the following rates—for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable.
 First DSE 1.064% of gross receipts
 Each of the second, third, and fourth DSEs 0.701% of gross receipts

The fifth and each additional DSE 0.330% of gross receipts 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.

 Identify the communities/areas represented by each subscriber group.
 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.

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

Santa Rosa

Rapid City

CITY

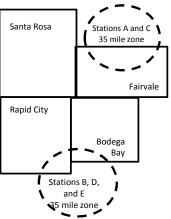
DSF

1.0

1.0

0.083

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



D (part-time)	0.139	Bodega Bay	Stations A and	d C		70,000.00
E (network)	<u>0.25</u>	Fairvale	Stations B, D,	and E		120,000.00
TOTAL DSEs	2.472		TOTAL GRO	SS RECEIPTS		\$600,000.00
Minimum Fee Total Gross	Receipts		\$600,000.00			
			x .01064			
			\$6,384.00			
First Subscriber Group		Second Subsc	riber 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 .010	64 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 .007	01 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

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

FROM SUBSCRIBERS

DSE SCHEDULE. PAGE 11. (CONTINUED)

1	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYS										
1	Illinois Bell Telephone Company 62985										
	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. 0.25										
	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3)										
Computation	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- mercial educational station, give the DSE as ".25."										
Category "O"			CATEGORY "O" STATION	S: DSEs							
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
	WYIN/WYINHD	0.250									
					-						
Add rows as											
necessary.											
Remember to copy all											
formula into new											
rows.											
					•••••••••••••••••••••••••••••••••••••••						

Name	LEGAL NAME OF	OWNER OF CABLE S	YSTEM:						DSE SCHEDU	YSTEM
	-	Telephone Co								629
3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 be carried out Column 5 give the type- Column 6	ist the call sign of 2: For each station correspond with t 3: For each station 4: Divide the figure t at least to the th 5: For each indep -value as ".25." 6: Multiply the figu	all distant stations n, give the number the information give n, give the total nur e in column 2 by th ird decimal point. T endent station, give ure in column 4 by t station's DSE. (For	of hours yo en in space of mber of hour e figure in c his is the "b e the "type-v he figure in	ur cable syste J. Calculate or rs that the stat olumn 3, and asis of carriag value" as "1.0.' column 5, and	m carried the s hly one DSE fo ion broadcast give the result e value" for th For each net	station during or each station over the air d in decimals ir e station. work or nonco It in column 6.	uring the accou l column 4. Thi mmercial educ . Round to no l	unting period. is figure must cational station, ess than the	
Capacity			CATEGOF	RY LAC S	TATIONS:	COMPUTA		SEs		
	1. CALL SIGN		IUMBER DF HOURS CARRIED BY SYSTEM		HOURS TION AIR	4. BASIS CARRI/ VALUE	AGE	5. TYPE VALUE		SE
								x x	=	
				÷		=		x	=	
				÷				v		
4	Instructions: Column 1: Giv • Was carried	ve the call sign of	each station listed	schedule, in space I (p	page 5. the Lo	a of Substitute	e Programs) if	0.00 that station: der FCC rules	and regular-	
Computation of DSEs for Substitute-	Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4:	d by your system ect on October 19 one or more live, r For each station (This figure should Enter the number Divide the figure	each station listed in substitution for a), 1976 (as shown b nonnetwork program give the number of d correspond with r of days in the cale in column 2 by the i's DSE (For more i	in space I (p program th y the letter is during that live, nonnet the informat indar year: 3 figure in col	bage 5, the Lo at your systen "P" in column it optional carr twork program tion in space I 365, except in umn 3, and gi	g of Substitute n was permitte 7 of space I); a age (as shown s carried in su a leap year. ve the result ir	d to delete un and by the word "Y Ibstitution for p a column 4. Rc	that station: der FCC rules 'es" in column 2 programs that v	of were deleted than the third	rm).
Computation of DSEs for Substitute-	Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4:	d by your system ect on October 19 one or more live, r For each station (This figure should Enter the number Divide the figure	in substitution for a 1, 1976 (as shown b 1000 to the number of 1 correspond with 1 r of days in the cale in column 2 by the	in space I (r program th y the letter as during that live, nonnel the informat endar year: 3 figure in col nformation of	bage 5, the Lo at your systen "P" in column at optional carr twork program tion in space I 365, except in umn 3, and gi on rounding, s	g of Substitute n was permitte 7 of space I); iage (as shown s carried in su a leap year. ve the result in ee page (viii) o	d to delete un and by the word "Y ibstitution for p i column 4. Ro of the general	that station: der FCC rules 'es" in column 2 programs that v pund to no less instructions in	of were deleted than the third	rm).
Computation of DSEs for Substitute-	Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4:	d by your system ect on October 19 one or more live, r For each station (This figure should Enter the number Divide the figure	in substitution for a , 1976 (as shown b nonnetwork program give the number of d correspond with r of days in the cale in column 2 by the 's DSE (For more i SUBSTITUT 3. NUM OF D	in space I (p program th by the letter is during that live, nonnet the informat indar year: 3 figure in col nformation of E-BASIS IBER IAYS EAR	bage 5, the Lo at your systen "P" in column at optional carr twork program tion in space I 365, except in umn 3, and gi on rounding, s	g of Substitute n was permitte 7 of space I); iage (as shown s carried in su a leap year. ve the result in ee page (viii) o	d to delete un and by the word "Y bstitution for p column 4. Rc of the general TATION OF 2. NU OF	that station: der FCC rules programs that v pund to no less instructions in DSEs MBER OGRAMS	of were deleted than the third	4. DS
Computation of DSEs for Substitute-	Column 1: Giv • Was carried tions in effe • Broadcast of space 1). Column 2: at your option. Column 3: Column 4: decimal point. 1. CALL	d by your system ect on October 19 one or more live, r For each station g This figure should Enter the number Divide the figure This is the station 2. NUMBER OF	in substitution for a , 1976 (as shown b nonnetwork program give the number of d correspond with r of days in the cale in column 2 by the 's DSE (For more i SUBSTITUT 3. NUM OF D	in space I (p program th by the letter is during that live, nonnet the informat indar year: 3 figure in col nformation of E-BASIS IBER IAYS	bage 5, the Lo at your system "P" in column it optional carr twork program tion in space I 365, except in umn 3, and gi on rounding, s STATION 4. DSE	g of Substitute n was permitte 7 of space I); a lage (as shown s carried in su a leap year. ve the result in ee page (viii) o S: COMPU 1. CALL	d to delete un and by the word "Y bstitution for p column 4. Rc of the general TATION OF 2. NU OF	that station: der FCC rules orograms that v pund to no less instructions in <u>FDSEs</u> MBER	of were deleted than the third the paper SA3 for 3. NUMBER OF DAYS	
- Computation of DSEs for Substitute-	Column 1: Giv • Was carried tions in effe • Broadcast of space 1). Column 2: at your option. Column 3: Column 4: decimal point. 1. CALL	d by your system ect on October 19 one or more live, r For each station g This figure should Enter the number Divide the figure This is the station 2. NUMBER OF	in substitution for a , 1976 (as shown b nonnetwork program give the number of d correspond with r of days in the cale in column 2 by the 's DSE (For more i SUBSTITUT 3. NUM OF D	in space I (p program th by the letter is during that live, nonnet the informat indar year: 3 figure in col nformation of E-BASIS IBER IAYS EAR	bage 5, the Lo at your systen "P" in column it optional carr twork program tion in space I. 365, except in umn 3, and gi on rounding, s	g of Substitute n was permitte 7 of space I); a lage (as shown s carried in su a leap year. ve the result in ee page (viii) o S: COMPU 1. CALL	d to delete un and by the word "Y bstitution for p column 4. Rc of the general TATION OF 2. NU OF	that station: der FCC rules programs that v pund to no less instructions in DSEs MBER OGRAMS	of were deleted than the third the paper SA3 for 3. NUMBER OF DAYS	4. D
- Computation of DSEs for Substitute-	Column 1: Giv • Was carried tions in effe • Broadcast of space 1). Column 2: at your option. Column 3: Column 4: decimal point. 1. CALL	d by your system ect on October 19 one or more live, r For each station of This figure should Enter the number Divide the figure i This is the station 2. NUMBER OF PROGRAM	in substitution for a , 1976 (as shown b nonnetwork program give the number of d correspond with r of days in the cale in column 2 by the 's DSE (For more i SUBSTITUT 3. NUM OF D	in space I (p program th yy the letter as during that live, nonnet the information figure in col nformation of E-BASIS IBER AYS EAR	bage 5, the Lo at your system "P" in column it optional carr twork program dison in space I 365, except in umn 3, and gi on rounding, s STATION 4. DSE	g of Substitute n was permitte 7 of space I); a lage (as shown s carried in su a leap year. ve the result in ee page (viii) o S: COMPU 1. CALL	d to delete un and by the word "Y botitution for p column 4. Ro of the general TATION OF 2. NU OF PR	that station: der FCC rules fes" in column 2 programs that w pound to no less instructions in DSEs MBER OGRAMS	of were deleted than the third the paper SA3 for 3. NUMBER OF DAYS	4. D3
Computation of DSEs for Substitute-	Column 1: Giv • Was carried tions in effe • Broadcast of space 1). Column 2: at your option. Column 3: Column 4: decimal point. 1. CALL	d by your system ect on October 19 one or more live, r For each station of This figure should Enter the number Divide the figure i This is the station 2. NUMBER OF PROGRAM	in substitution for a , 1976 (as shown b honnetwork program give the number of d correspond with ' r of days in the cale in column 2 by the 's DSE (For more i SUBSTITUT SUBSTITUT 3. NUM OF D IS IN YE + +	in space I (p program th yy the letter as during that live, nonnet the information figure in col nformation of E-BASIS IBER AYS EAR	bage 5, the Lo at your system "P" in column it optional carr twork program dison in space I 365, except in umn 3, and gi on rounding, s STATION 4. DSE	g of Substitute n was permitte 7 of space I); a iage (as shown s carried in su a leap year. ve the result ir ee page (viii) o S: COMPU 1. CALL SIGN	d to delete un and by the word "Y botitution for p column 4. Ro of the general TATION OF 2. NU OF PR	that station: der FCC rules fes" in column 2 programs that w pound to no less instructions in DSEs MBER OGRAMS	of were deleted the paper SA3 for 3. NUMBER OF DAYS IN YEAR	4. D3
Computation of DSEs for Substitute-	Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4: decimal point. 1. CALL SIGN SUM OF DSEs Add the DSEs	d by your system ect on October 19 one or more live, r For each station of This figure should Enter the number Divide the figure I This is the station 2. NUMBER OF PROGRAM	in substitution for a , 1976 (as shown b honnetwork program give the number of d correspond with r of days in the cale in column 2 by the i's DSE (For more i SUBSTITUT SUBSTITUT 3. NUM OF D IS iN YE ÷ ÷ ÷	in space I (p program th by the letter is during that live, nonnel the information of figure in col nformation of E-BASIS IBER DAYS EAR	bage 5, the Lo at your system "P" in column it optional carr twork program tion in space I. 365, except in umn 3, and gi on rounding, s STATION 4. DSE	g of Substitute h was permitte 7 of space I); a lage (as shown s carried in su a leap year. ve the result in ee page (viii) o S: COMPUT 1. CALL SIGN	d to delete un and by the word "Y botitution for p column 4. Ro of the general TATION OF 2. NU OF PR	that station: der FCC rules res" in column 2 programs that w pound to no less instructions in F DSEs MBER OGRAMS + + + +	of were deleted the paper SA3 for 3. NUMBER OF DAYS IN YEAR	4. D:
Computation of DSEs for Substitute-	Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4: decimal point. 1. CALL SIGN SIGN SUM OF DSEs Add the DSEs Enter the su	d by your system ect on October 19 one or more live, r For each station of This figure should Enter the number Divide the figure i This is the station 2. NUMBER OF PROGRAM	in substitution for a , 1976 (as shown b nonnetwork program give the number of d correspond with r of days in the cale in column 2 by the r's DSE (For more i SUBSTITUT 3. NUM OF D IS iNUM OF D IS in the cale in column 2 by the r's DSE (For more i substitution of the substitution in the cale in column 2 by the results of the substitution in the cale in column 2 by the results of part 5 of this e the amounts from the substitution in the cale in column 2 by the results of part 5 of the substitution in the cale in column 2 by the results of part 5 of the substitution in the cale in column 2 by the results of part 5 of the substitution in the cale in column 2 by the results of part 5 of the substitution in the cale in column 2 by the results of the substitution in the cale in column 2 by the results of part 5 of the substitution in the cale in column 2 by the results of the cale in the cale in column 2 by the results of the cale in t	in space I (p program th by the letter is during that live, nonnet the information of E-BASIS IBER AYS EAR = = = = = = = = = =	bage 5, the Lo at your system "P" in column it optional carr twork program tion in space I. 365, except in umn 3, and gi on rounding, s STATION: 4. DSE	g of Substitute h was permitte 7 of space I); a lage (as shown s carried in su a leap year. ve the result in ee page (viii) of S: COMPUT 1. CALL SIGN	d to delete un and by the word "Y obstitution for p occlumn 4. Ro of the general TATION OF 2. NU OF PR	that station: der FCC rules ires" in column 2 programs that v pound to no less instructions in DSEs MBER OGRAMS + + + + + + + + + + + +	of were deleted than the third the paper SA3 for 3. NUMBER OF DAYS IN YEAR	4. DS
Computation of DSEs for Substitute- Basis Stations	Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4: decimal point. 1. CALL SIGN SUM OF DSEs Add the DSEs Enter the su TOTAL NUMBI number of DSE	d by your system ect on October 19 one or more live, r For each station of This figure should Enter the number Divide the figure i This is the station 2. NUMBER OF PROGRAM B OF SUBSTITUT of each station. um here and in lin	in substitution for a , 1976 (as shown b honnetwork program give the number of d correspond with ' r of days in the cale in column 2 by the 's DSE (For more i SUBSTITUT 3. NUN OF D IS IS IN VE + + + TE-BASIS STATION the 3 of part 5 of this the amounts from the system.	in space I (p program th by the letter is during that live, nonnet the information of E-BASIS IBER AYS EAR = = = = = = = = = =	bage 5, the Lo at your system "P" in column it optional carr twork program tion in space I. 365, except in umn 3, and gi on rounding, s STATION: 4. DSE	g of Substitute h was permitte 7 of space I); a lage (as shown s carried in su a leap year. ve the result in ee page (viii) of S: COMPUT 1. CALL SIGN	d to delete un and by the word "Y obstitution for p occlumn 4. Ro of the general TATION OF 2. NU OF PR	that station: der FCC rules ires" in column 2 programs that v pound to no less instructions in DSEs MBER OGRAMS + + + + + + + + + + + +	the tota	4. DS
Computation of DSEs for Substitute- Basis Stations	Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4: decimal point. 1. CALL SIGN 	d by your system ect on October 19 one or more live, r For each station of This figure should Enter the number Divide the figure i This is the station 2. NUMBER OF PROGRAM S OF SUBSTITUT of each station. um here and in lin ER OF DSEs: Give is applicable to you	in substitution for a , 1976 (as shown b honnetwork program give the number of d correspond with r of days in the cale in column 2 by the r's DSE (For more i SUBSTITUT 3. NUM OF D IS iN NUM OF D IS iN YE ÷ ÷ ÷ ÷ * * * * * * * * * * * * * * *	in space I (p program th by the letter is during that live, nonnet the information of E-BASIS IBER JAYS EAR	bage 5, the Lo at your system "P" in column it optional carr twork program tion in space I. 365, except in umn 3, and gi on rounding, s STATION: 4. DSE	g of Substitute h was permitte 7 of space I); a lage (as shown s carried in su a leap year. ve the result in ee page (viii) of S: COMPUT 1. CALL SIGN	d to delete un and by the word "Y obstitution for p occlumn 4. Ro of the general TATION OF 2. NU OF PR	that station: der FCC rules ires" in column 2 programs that v pound to no less instructions in DSEs MBER OGRAMS + + + + + + + + + + + +	the tota	4. DS = = = =

Illinois Bell Te	OWNER OF CABLE						S	/STEM ID# 62985	Name
Instructions: Blo	ck A must be com	pleted.							
schedule.	"Yes," leave the re		·	7 of the DSE sche	edule blank a	nd complete p	art 8, (page 16) o	fthe	6
 If your answer if 	"No," complete blo			ELEVISION M	ADVETS				Computation
Is the cable syste	m located wholly c					ection 76.5 of	FCC rules and re	gulations in	3.75 Fee
effect on June 24	•		- ,					0	
	nplete part 8 of the		DO NOT COM	PLETE THE REM	AINDER OF	PART 6 AND	7		
X No-Com	plete blocks B and	C below.							
		BLOC	CK B: CARR	IAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN	under FCC rules	and regulati	ons prior to Ju edule. (Note: T	n part 2, 3, and 4 o ne 25, 1981. For fi he letter M below i Act of 2010.)	urther explan	ation of permit	tted stations, see	the	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rr A Stations carri 76.61(b)(c)] B Specialty stat C Noncommeric D Grandfathere instructions for E Carried pursu *F A station pre-	ules and regu- ied pursuant cal education d station (76. or DSE scheo- lant to individ eviously carrie UHF station v	ulations cited b to the FCC ma d in 76.5(kk) (al station [76.4 65) (see para dule). ual waiver of f ed on a part-tii vithin grade-B	ne or substitute ba contour, [76.59(d)	ose in effect c 76.57, 76.59(I (e)(1), 76.63(63(a) referrin Ibstitution of c asis prior to J	n June 24, 19 b), 76.61(b)(c) a) referring to g to 76.61(d) grandfathered une 25, 1981	, 76.63(a) referrin 76.61(e)(1 stations in the	-	
Column 3:	*(Note: For thos this schedule to 2. PERMITTED	e stations ide determine the	entified by the e DSE.)	n parts 2, 3, and 4 letter "F" in column 2. PERMITTED		complete the 1. CALL	2. PERMITTED	e 14 of 3. DSE	
SIGN WYIN/WYI	BASIS C	0.25	SIGN	BASIS		SIGN	BASIS		
		0.25							

Line 1: Enter the total number of DSEs from part 5 of this schedule
Line 2: Enter the sum of permitted DSEs from block B above
Line 3: Subtract line 2 from line 1. This is the total number of DSEs subject to the 3

(If zero, leave lines 4–7 blank and proceed to part 7 of this schedule)	3: Subtract line 2 from line 1. This is the total number of DSEs subject to the 3.75 rate	э.
	(If zero, leave lines 4–7 blank and proceed to part 7 of this schedule)	

x 0.0375	Do any of the DSEs represent partially
	permited/ partially nonpermitted
	carriage? If yes, see part 9 instructions.
0.00	
	x

2019/1

LEGAL NAME OF C	WNER OF CABLE					S	YSTEM ID# 62985	Name
							02303	
1. CALL SIGN	2. PERMITTED BASIS		A: TELEVIS	2. PERMITTED BASIS	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
	Briefe			Briefe	Cloit	D/ 1010		Computation
								3.75 Fee
			+		 			
			•		 			
			11					
			•		 			
			•		 			
	•••				 			
			•		 			
			+		 			
			**		 			
			+		 			
	•••				 			
		.			 			
		1						
]	
		·			 			

	LEGAL NAME OF OWN	NER OF CABLE	SYSTEM:						S	YSTEM ID#
Name	Illinois Bell Tel	ephone Co	mpany							62985
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the F A—Part-time sp 76.59) B—Late-night p 76.61 S—Substitute ca gener Column 5: Indicate Column 6: Compar in block	or to June 25, call sign for ea the DSE for the the accountin the basis of c CC rules and ecialty progra (d)(1),76.61(e) rogramming: ((e)(3)). arriage under al instructions the station's I e the DSE figu B, column 3 c information yo	1981, under forme ach distant station in is station for a sin g period and year arriage on which the regulations cited boot mming: Carriage, co (1), or 76.63 (refer Carriage under FCC certain FCC rules, in the paper SA3 for DSE for the current ures listed in column of part 6 for this state ou give in columns	r FCC rules go identifed by the gle accounting in which the ca he station was of elow pertain to on a part-time b rring to 76.61(e C rules, section regulations, or form. accounting pe ins 2 and 5 and tion. 2, 3, and 4 mu	ver let pe rria cari thc asi)(1 is 7 au rioo	entifed by the letter "F" ning part-time and sub tter "F" in column 2 of p riod, occurring between age and DSE occurred ried by listing one of th ose in effect on June 24 is, of specialty program)). 76.59(d)(3), 76.61(e)(3) thorizations. For furthe d as computed in parts at the smaller of the two pe accurate and is subj	estitute carri part 6 of the n January 1 (e.g., 1981. e following 4, 1981.) nming unde 0, or 76.63 (er explanatio 2, 3, and 4 p figures he	age.) DSE schedule , 1978 and Jun (1). letters: r FCC rules, se referring to on, see page (v of this schedu re. This figure	e. ne 30, 19 ections vi) of the ule. should b	981. De entered
	1. CALL SIGN	PERMITT 2. PRIC DSE	DR 3. ACC	TIONS CARRI COUNTING ERIOD	ED	ON A PART-TIME AN 4. BASIS OF CARRIAGE	5. PF	TUTE BASIS RESENT DSE	6. P	ERMITTED DSE
7 Computation of the	-	"Yes," comple	ete blocks B and C ocks B and C blan	k and complete	•	art 8 of the DSE sched				
Syndicated			BLOCI	K A: MAJOR	T	ELEVISION MARK	ET			
Exclusivity Surcharge	 Is any portion of the 	cable system w	vithin a ton 100 mai	or television ma	rke	t as defned by section 7	6.5 of ECC	rules in effect .	une 24	19812
Curonargo	X Yes—Complete	-				No—Proceed to			uno 2 1,	
			0.		_		parto			
	BLOCK B: C	arriage of VHF	Grade B Contour	Stations		BLOCK	C: Compu	tation of Exem	pt DSEs	5
	Is any station listed ir commercial VHF stat or in part, over the ca	ion that places				Was any station listed nity served by the cab to former FCC rule 76	le system p	•		
	Yes—List each s X No—Enter zero a		h its appropriate per part 8.	mitted DSE		Yes—List each sta X No—Enter zero an			ate permi	tted DSE
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	iN	DSE
		552	U. LE UIUIT	202				SALE SIC		
			TOTAL DSEs	0.00				TOTAL DS	Es	0.00

DSE SCHEDULE. PAGE 14.

LEGAL NA	AME OF OWNER OF CABLE SYSTEM: Illinois Bell Telephone Company	SYSTEM ID# 62985	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section	Enter the amount of gross receipts from space K (page 7)	97,870,694.87	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Exclusivity Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? X Yes—Complete section 3 below. No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the 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. 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.		
0.0	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. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

ACCOUNTING PERIOD: 2019/1

DSE	SCHED	ULE.	PAGE	16

Name			ILE. PAGE 16. YSTEM ID# 62985
7	Section		02000
	4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1)	
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)	
Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1)	
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here	
		F. Multiply line D by line E and enter here ► \$	
		G. Add lines A, C, and F. This is your surcharge.	
		Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge.	<u></u> .
	Instru	ctions:	
8		ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part	t
-		checked "Yes," use the total number of DSEs from part 5. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation of	-	Ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. Ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belov	.,
Base Rate Fee	blank		v
		is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local	
		e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7)	
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)▶	
	Section		
	3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts	
		(the amount in section 1)	_
		B. Enter 0.00701 of gross receipts	
		(the amount in section 1)	
		C. Subtract 1.000 from total DSEs	
		(the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	_
		E. Add lines A, and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7)	0.00
		Base Rate Fee	

DSE SCHEDULE. PAGE 17.

	AME OF OWNER OF CABLE SYSTEM:SYSTEM IDs Bell Telephone Company62985	Namo
Section	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	Computation
	(the amount in section 1) ▶ \$	of
	C. Multiply line B by 3.000 and enter here	Base Rate Fe
	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 5 0.00	
MPOF	TANT: 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	9
	eral: 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 Base Rate Fe
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	and
station	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of	Syndicated Exclusivity
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.	Exclusivity Surcharge
-	: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system. 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	for Porticily
nust a	Iso compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. er, if your cable system is wholly located outside all major television markets, complete block A only.	Partially Distant Stations, and
How to	Identify a Subscriber Group for Partially Distant Stations	for Partially Permitted
	: For each community served, determine the local service area of each wholly distant and each partially distant station you to that community.	Stations
Step 2	: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located 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 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.	
Comp	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's ber groups.	
	e section:	
	fy the communities/areas represented by each subscriber group.	
	the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the bers in the group.	
lf:		
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, of this schedule; or,	
	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, 6 of this schedule.	
Add t	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions paper SA3 form.	
Comp bage. DSEs f	bute 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 or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your calculations on the form.	

N.a.	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYS	STEM I
Name	Illinois Bell Telephone Company	629
	Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals	
	Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and	
	partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these	
	subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant	
	signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by	
	.0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported	
	for each part 9 used in steps 1 and 2 must equal the amount reported in space K.	
	Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant	
	signals from step 1 that is subject to this surcharge.	
	Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams	
	Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from	
	a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate	
	and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement	
	entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary	
	transmitter or an association representing the primary transmitter.	

LEGAL NAME OF OWNER Illinois Bell Teleph						SY	STEM ID# 62985	Name
BL				TE FEES FOR EACH				
FIRST SUBSCRIBER GROUP					SECOND	SUBSCRIBER GROUP		9
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA 0			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
WYIN/WYINHD	0.25							Base Rate Fee
								and
								Syndicated
								Exclusivity
						-		Surcharge
								for Partially
								Distant
								Stations
						_		
						=		
Total DSEs			0.25	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$ 30,881,	534.75	Gross Receipts Secon	d Group	\$ 63,827	7,592.68	
Base Rate Fee First Gr	oup	\$ 82,	144.88	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	Р		FOURTH	SUBSCRIBER GROUP	þ	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
WYIN/WYINHD	0.25							
						=		
						_		
Total DSEs			0.25	Total DSEs			0.00	
Gross Receipts Third Group \$ 3,161,567.44		567.44	Gross Receipts Fourth	Group	\$	0.00		
Base Rate Fee Third Group \$ 8,409.77		409.77	Base Rate Fee Fourth	Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes a	bove.	\$ 90	0,554.65	

FORM SA3E.	PAGE	19
------------	------	----

LEGAL NAME OF OWNE Illinois Bell Teleph						SY	STEM ID# 62985	Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
FIFTH SUBSCRIBER GROUP					SIXTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA 0			U	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
Total DSEs	II		0.00	Total DSEs	ļ		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Second		\$	0.00	
	EVENTH	SUBSCRIBER GROU			EIGHTH	SUBSCRIBER GROU	P 0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			U	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	II		0.00	Total DSEs	I		0.00	
Gross Receipts Third Group \$ 0.00			Gross Receipts Fourth	Group	\$	0.00		
Base Rate Fee Third Group \$ 0.00			0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNE						SY	STEM ID# 62985	Name
BL	.OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	BER GROUP		
FIRST SUBSCRIBER GROUP				SECOND SUBSCRIBER GROUP			C	0
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA 0			0	9
	DOF		DOF				DOF	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
				•				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$ 30,881,	534.75	Gross Receipts Secon	d Group	\$ 63,827	7,592.68	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	IP		FOURTH	SUBSCRIBER GROUP	c	
COMMUNITY/ AREA			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 G	roup	\$ 3,161,	567.44	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Group \$ 0.00			0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes a	above.	\$	0.00	

LEGAL NAME OF OW Illinois Bell Tele						S	62985	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA 0					I SUBSCRIBER GRO	UP	•	
						0	9 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
					···	•	·····	Stations
				•	••••••••••••••••••••••••••••••••••••••	•		
					···		•••••	
	•••••				••• <mark>•</mark> ••••••		•••••	
	•••••				•••	•	•••••	
		+	····		••••	•	·····	
						11		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Second Group		\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
					FIGUE			
		SUBSCRIBER GRO				I SUBSCRIBER GRO		
COMMUNITY/ ARE/	4		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	•••••		••••		•••	•	•••••	
	•••••		····		••••			
	•••••		····		••••••••••••••••••••••••••••••••••••••	•	·····	
	•••••		••••		•••	•	•••••	
	•••••				····			
	•••••				•••	·	•••••	
					···	•	·····	
	•••••		••••	•	•••••••••••••••••••••••••••••••••••••••	•		
				•	••••••••••••••••••••••••••••••••••••••	•		
				•	••••••••••••••••••••••••••••••••••••••	•		
	•••••		••••		••••	++		
			<mark></mark>		••••			
					···	•	·····	
		+	••••	•	•••	•		
Total DSEs			0.00	Total DSEs		11	0.00	
Gross Receipts Third Group \$ 0.00		Gross Receipts Four	h Group	\$	0.00			
	- 0.00p		0.00		0.000	<u>-</u>	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxes	above.	\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Illinois Bell Telephone Company	SYSTEM ID#				
9	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSI If your cable system is located within a top 100 television market and the Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981:	e station is not exempt in Part 7, you mustalso compute a				
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	First 50 major television market					
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP				
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs				
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs				
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation				
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group				
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP				
	THIRD SUBSCRIBER GROUP Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs				

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Illinois Bell Telephone Company	SYSTEM ID#				
9	If your cable system is located within a top 100 television market and the Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981:					
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	☐ First 50 major television market ☐ Second 50 major television market					
	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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation				
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group				
	SEVENTH SUBSCRIBER GROUP	EIGHTH SUBSCRIBER GROUP				
	Line 1: Enter the VHF DSEs Line 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 1: Enter the VHF DSEs				