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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT	OFFICE USE ONLY
DATE RECEIVED	AMOUNT
02/27/20	\$ ALLOCATION NUMBER

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:			
Accounting	2019/2			
Period				
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the busine If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account. Check here if this is the system's first filing. If not, enter the system's ID	ss of the cable system on the last day of the counting perion	em the accounting period should s	
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM			
	Pacific Bell Telephone Company			
				6282720192
				62827 2019/2
	2260 E Imperial Hwy Room 839			
	El Segundo, CA 90245			
С	INSTRUCTIONS: In line 1, give any business or trade names used to id			
C	names already appear in space B. In line 2, give the mailing address of	the system, if diffe	erent from the address give	n in space B.
System	1 IDENTIFICATION OF CABLE SYSTEM:			
	MAILING ADDRESS OF CABLE SYSTEM:			
	2 (Number, street, rural route, apartment, or suite number)			
	(City, town, state, zip code)			
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and rel	ist on page 1b
Area	with all communities.	•	·	. 0
Served	CITY OR TOWN	STATE		
First	Los Angeles	CA		
Community	Below is a sample for reporting communities if you report multiple cha	nnel line-ups in S	pace G.	
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#
Sample	Alda	MD	A	1
,	Alliance	MD	В	2
	Gering	MD	В	3

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

FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 62827 **Pacific Bell Telephone Company** Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# CA AA Los Angeles First **Agoura Hills** CA AA Community Alhambra CA AA Aliso Viejo CA AA Altadena AA 1 CA Anaheim CA AA See instructions for CA AA Arcadia additional information on alphabetization. Beaumont CA AA 1 Bell CA AA 1 **Bell Gardens** CA AA CA Bellflower AA **Beverly Hills** CA AA 1 Bloomington CA AA Brea CA AA **Buena Park** CA AA Burbank CA AA Carson CA AA CA Castaic AA Chino Hills CA AA Claremont CA AA Colton CA AA Commerce CA AA Compton CA AA Corona CA AA Costa Mesa CA AA Culver City CA AA Cypress CA AA Dana Point CA AA Downey CA AA **East San Gabriel** CA AA CA AA Eastvale **El Monte** 1 CA AA El Segundo CA AA **Fontana** CA AA Fountain Valley CA AA **Fullerton** CA AA CA **Garden Grove** AA Gardena CA AA Glendale AA CA

CA

CA

CA

AA

AA

AA

1

Grand Terrace

Hawthorne

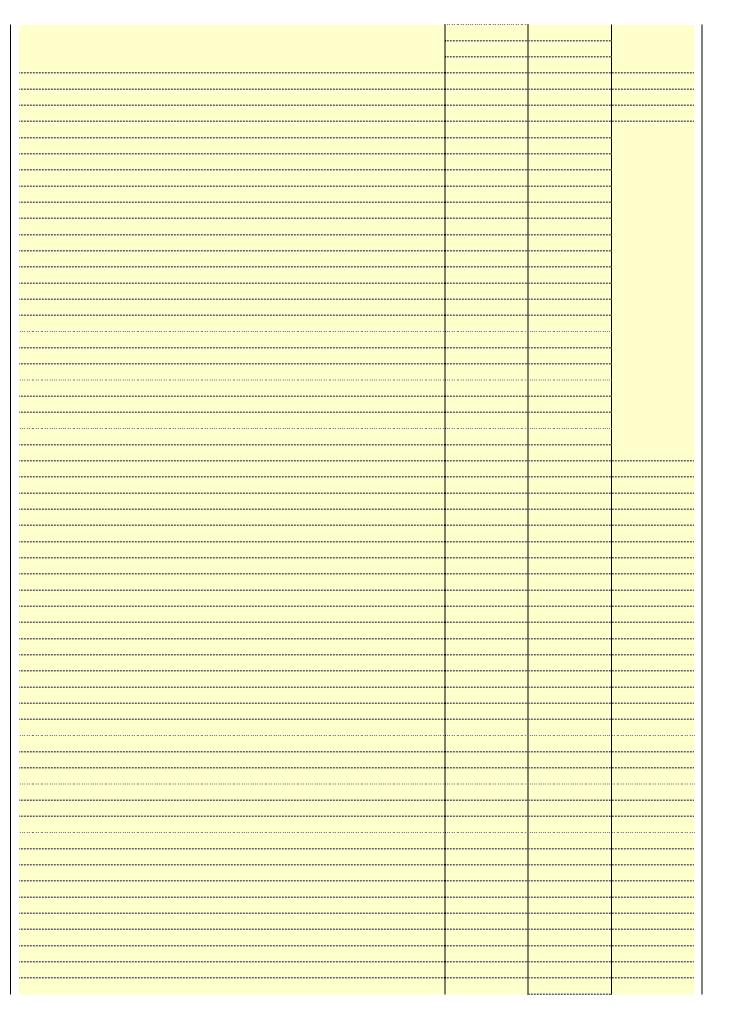
Hidden Hills

lighland	CA	AA	1
luntington Park	CA	AA	1
nglewood	CA	AA	1
rvine	CA	AA	1
lurupa Valley	CA	AA	1
a Canada Flintridge	CA	AA	1
a Crescenta-Montrose	CA	AA	1
.a Grescenta-Montrose .a Habra			l A
	CA	AA	1
.a Mirada	CA	AA	1
a Palma	CA	AA	1
adera Ranch	CA	AA	1
aguna Hills.	CA	AA	1
aguna Niguel	CA	AA	1
aguna Woods	CA	AA	1
ake Forest	CA	AA	1
.akewood	CA	AA	1
ancaster	CA	AA	1
awndale	CA	AA	1
oma Linda	CA	AA	1
.omita	CA	AA	1
ong Beach	CA	AA	1
os Angeles Unincorporated County	CA	AA	1
ynwood	CA	AA	1
laywood	CA	AA	1
Aission Viejo	CA	AA	1
Monrovia	CA	AA	1
Montebello	CA		I A
		AA	1
Nonterey Park	CA	AA	1
Noorpark	CA	AA	1
/loreno Valley	CA	AA	1
lewport Beach	CA	AA	1
lorco	CA	AA	1
Dak Park	CA	AA	1
Djai	CA	AB	2
Drange	CA	AA	
Drange Unincorporated County	CA	AA	1
	CA	AA AA	
Palmdale			1
Paramount	CA	AA	1
² asadena	CA	AA	1
Placentia	CA	AA	1
Pomona	CA	AA	1
Rancho Palos Verdes	CA	AA	1
Rancho Santa Margarita	CA	AA	1
Rialto	CA	AA	1
Riverside	CA	AA	1
Riverside Unincorporated County	CA	AA	1
Rosemead	CA	AA	1
San Bernardino	CA	AA	1
an Bernardino Unincorporated County	CA	AA	1
an Clemente	CA	AA	1
an Gabriel	CA	AA	1
an Juan Capistrano	CA	AA	1
an Marino	CA	AA	1
anta Ana	CA	AA	1
Santa Clarita	CA	AA	1
Simi Valley	CA	AA	1
South El Monte	CA	AA	1
South Gate	CA	AA	1
South Pasadena	CA	AA	1
			•

Add rows as necessary.

Stevenson Ranch	CA	AA	1
Stevenson Ranch Temple City Thousand Oaks	CA	AA	1
Thousand Oaks	CA	AA	1
Topanga Torrance	CA	AA	1
Torrance	CA	AA	1
Tuetin	CA	AA	1
Vontura	CA	AC	3
Ventura Unincorporated County	CA	AA	1
Villa Park	CA	AA	1
Ventura Ventura Unincorporated County Villa Park West Hollywood Westlake Village	CA	AA	1
Westlake Village	CA	AA	1
Westminster	CA	AA	1
Westmont	CA	AA	1
Westmont Yorba Linda	CA	AA	1

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Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

Pacific Bell Telephone Company

SYSTEM ID#
62827

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1		BLOC	CK 2	
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE
Residential:					
 Service to first set 	146,622	\$ 19.00	HD Tech Fee	94,812	\$ 10.00
 Service to additional set(s) 			Set-Top Box	147,891	\$0-\$15
• FM radio (if separate rate)			Broadcast TV Surcharge	146,622	\$6.99-\$9.99
Motel, hotel					
Commercial	1,269	\$ 20.00			
Converter					
Residential					
Non-residential					
İ		T	1	· [T

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLO	CK 1		BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
 Pay cable 		Motel, hotel		Video on Demand	\$0-\$100
 Pay cable—add'l channel 	\$5-\$199	Commercial		Service Activation Fee	\$0-\$35
 Fire protection 		Pay cable		Credit Management Fee	\$0-\$449
Burglar protection		Pay cable-add'l channel		Dispatch on Demand	\$99
Installation: Residential		Fire protection		Wireless Receiver	\$0-\$49
• First set	\$0-\$199	Burglar protection		HD Premium Tier	\$10
 Additional set(s) 		Other services:		DVR Upgrade Fee	\$15
 FM radio (if separate rate) 		Reconnect	\$0-\$35	Vacation Hold	\$7
Converter		Disconnect			
		Outlet relocation	\$0-\$55		
		 Move to new address 			

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **Pacific Bell Telephone Company** 62827 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. **CHANNEL LINE-UP AA** 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF CARRIAGE (Yes or No) NUMBER **STATION** (If Distant) KABC/KABCHD 7/1007 Ν No Los Angeles, CA KAZA/KAZAHD 54/1054 ı No Avalon, CA See instructions for additional information **KBEH** 63 ı No Oxnard, CA on alphabetization. KCAL/KCALHD 9/1009 No Los Angeles, CA Ν KCBS/KCBSHD 2/1002 No Los Angeles, CA KCET/KCETHD 28/1028 Ε No Los Angeles, CA KCOP/KCOPHD 13/1013 No Los Angeles, CA ı 56/1056 KDOC/KDOCHD ı No Anaheim, CA KFTR/KFTRHD 46/1046 ı No Ontario. CA KIIO-LD 10 No Los Angeles, CA Barstow, CA KILM 64 ı No KJLA/KJLAHD 57/1057 No Ventura, CA ı **KLCS** 58 Ε No Los Angeles, CA KMEX/KMEXHD 34/1034 ı No Los Angeles, CA KNBC/KNBCHD 4/1004 Ν No Los Angeles, CA Ε KOCE/KOCEHD 50/1050 No Huntington Beach, CA KPXN/KPXNHD 30/1030 I No San Bernardino, CA KRCA/KRCAHD 62/1062 Riverside, CA ı No

Pacific Bell Telephone Company 62827 **RIMARY TRANSMITTERS: TELEVISION General: In page G, identify every television station (including translator stations and low power television stations) arrived by your cable system during the accounting period, except (1) stations carried only on a part-fine basis under CPC rules and regulations in effect on June 24, 1981, permitting the carriage of cetain network programs (sections 76,596(4)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 unabstitute Basis Stations. With respect to any distant stations carried by your cable system 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, 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 PCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space (1 the Special Statement and Program Log)—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: It states are as season stream stream as associated with a station according to sever-fine-air designation. For example, report multi-activations with the station of the column station of the column station and sections are station as a series of the station. ETA-simultast stream as section is a network station, an independent station, or a nenocommercial educational professor. In the station is community of the season or visited the distant action or a part file the station is could be station or a station or a section or section station or a part file station or a section or section station or a part file station or a station or a part file	LECAL NAME OF OWN	ED OF CARLE C	VOTEM.			SYSTEM ID#	
Ribbary TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) arrained by your cable system during the accounting period, except (1) stations carried only on a part-time basis under PCC rules and regulations in reflect on June 24, 1881, permitting the carriage of certain network programs (sections PGS 569(f))2 and (1), 68 (1) (2) and (4)), 68 (1) (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 PCC rules, regulations, or authorizations: One onlie title station here in space —D-but of last if it in space (10th Special Statement and Program Log)—if the station was carried only on a substitute basis station, as page (1) of the general instructions located in the paper SA3 form. Column 1: Lies data shation as ill sign. Do not reported in column (1) fils each stream separately, for example with a station according to its over-the-air designation. For example, report multi-sast stream as was claim as the same associated with a station or committed to committy of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cash system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial seducational multicast). The rice the meaning of base items, see page (v) of the general instructions located in the paper SA3 form. Column 5: Indy but have entered "Fee" in column 4, you must complete column 5, stating the basis on which your sable system carried the distant station or apart-time basis to be subscent or large visual papers and primary transmitter or an association representi							
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CC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL SIGN 2. B'CAST CHANNEL OF CH	PRIMARY TRANSMITTE In General: In space Colorride by your cable is FCC rules and regulation of the Substitute program has substitute Basis Solation of the station of the station was carried. List the station was carried in the paper SA3 for Column 1: List each multicast stream has stream as "WETA WETA-simulcast). Column 2: Give the station was carried the deducational station, by Column 3: Indicate adducational station, by for independent multice of the meaning of the Column 4: If the stational to food the system carried the distant staticarried the distant staticarried the distant staticarried the distant staticarried by your cable system carried the distant staticarried th	ERS: TELEVISIO G, identify everystem during toons in effect or i.61(e)(2) and (isis, as explaine itations: With the control of the control	y television st he accounting In June 24, 19 (4), or 76.63 (1) and in the next prespect to any ations, or auth G—but do listitute basis. ace I, if the stateming substitute basis ber the FCC In the station ac streams must be the FCC In the station. Whether the station whether the station whether the station ac streams must be the local sent age (v) of the station acronomercial page (v) of the the local sent age (v) of the es" in column on during the me basis because of the local sent age to the local sent age (v) of the me basis because of the local sent age (v) of the local sent age	g period, except g period, except 81, permitting the referring to 76.6 paragraph. It is shown in the station was carried tute basis station report origination cording to its own the reported in the station is a network and a sassigned to annel 4 in Wash tation is a network of the station is a network of the s	(1) stations carried carriage of certal (e)(2) and (4))]; is carried by your discontinuous security of the Special Statement of both on a substitus, see page (v) of the program service er-the-air designation of the television statington, D.C. This ork station, an indiffer network multipor "E-M" (for none citions located in the distant"), enter "Y ions located in the mplete column 5, and. Indicate by enactivated channel subject to a royalt	s and low power television stations) ed only on a part-time basis under tain network programs [sections and (2) certain stations carried on a cable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi- th stream separately; for example tion for broadcasting over-the-air in may be different from the channel espendent station, or a noncommercial cast), "I" (for independent), "I-M" commercial educational multicast). the paper SA3 form. es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your stering "LAC" if your cable system capacity.	Primary Transmitters:
CHANNEL LINE-UP AA	f a written agreement ne cable system and a on "E" (exempt). For s	a primary trans simulcasts, als	mitter or an a o enter "E". If	ssociation repre you carried the	senting the prima channel on any o	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further	
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Transmitters:

Television

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **Pacific Bell Telephone Company** 62827 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections **Primary**

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	AB			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
KABC/KABCHD	7/1007	N	No		Los Angeles, CA		
KAZA/KAZAHD	54/1054	I	No		Avalon, CA		
KBEH	63	I	No		Oxnard, CA		
KCAL/KCALHD	9/1009	I	No		Los Angeles, CA		
KCBS/KCBSHD	2/1002	N	No		Los Angeles, CA		
KCET/KCETHD	28/1028	Е	Yes	0	Los Angeles, CA		
KCOP/KCOPHD	13/1013	I	No		Los Angeles, CA		
KDOC/KDOCHD	56/1056	I	No		Anaheim, CA		
KFTR/KFTRHD	46/1046	I	No		Ontario. CA		
KIIO-LD	10	I	No		Los Angeles, CA		
KILM	64	I	No		Barstow, CA		
KJLA/KJLAHD	57/1057	I	No		Ventura, CA		
KLCS	58	E	Yes	0	Los Angeles, CA		
KMEX/KMEXHD	34/1034	I	No		Los Angeles, CA		
KNBC/KNBCHD	4/1004	N	No		Los Angeles, CA		
KOCE/KOCEHD	50/1050	E	Yes	0	Huntington Beach, CA		
KPXN/KPXNHD	30/1030	I	No		San Bernardino, CA		
KRCA/KRCAHD	62/1062	I	No		Riverside, CA		

ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **Pacific Bell Telephone Company** 62827 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AB 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF CARRIAGE (Yes or No) NUMBER **STATION** (If Distant) **KSCI** 18 ı No Long Beach, CA **KTBN** 40 No Santa Ana, CA 5/1005 KTLA/KTLAHD ı No Los Angeles, CA No KTTV/KTTVHD 11/1011 Los Angeles, CA San Bernardino, CA 24 Ε 0 **KVCR** Yes KVEA/KVEAHD 52/1052 ı No Corona, CA KVMD/KVMDHD 31/1031 No Twentynine Palms, CA ı **KVME** 20 ı No Bishop, CA KWHY/KWHYHD 22/1022 ı No Los Angeles, CA KXLA/KLXAHD 44/1044 ı No Rancho Palos Verdes, CA **KZSW-LP** 27 No Riverside, CA

ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **Pacific Bell Telephone Company** 62827 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television

basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

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

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

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

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

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

		CHANN	AC		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KABC/KABCHD	7/1007	N	No		Los Angeles, CA
KAZA/KAZAHD	54/1054	I	No		Avalon, CA
KBEH	63	l	No		Oxnard, CA
KCAL/KCALHD	9/1009	I	No		Los Angeles, CA
KCBS/KCBSHD	2/1002	N	No		Los Angeles, CA
KCET/KCETHD	28/1028	E	Yes	0	Los Angeles, CA
KCOP/KCOPHD	13/1013	I	No		Los Angeles, CA
KDOC/KDOCHD	56/1056	I	No		Anaheim, CA
KFTR/KFTRHD	46/1046	I	No		Ontario. CA
KIIO-LD	10	I	No		Los Angeles, CA
KILM	64	I	No		Barstow, CA
KJLA/KJLAHD	57/1057	I	No		Ventura, CA
KLCS	58	Е	No		Los Angeles, CA
KMEX/KMEXHD	34/1034	I	No		Los Angeles, CA
KNBC/KNBCHD	4/1004	N	No	-	Los Angeles, CA
KOCE/KOCEHD	50/1050	Е	No		Huntington Beach, CA
KPXN/KPXNHD	30/1030	I	No		San Bernardino, CA
KRCA/KRCAHD	62/1062	I	No		Riverside, CA

ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **Pacific Bell Telephone Company** 62827 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

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		CHANN	EL LINE-UP	AC	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KSCI	18	I	No		Long Beach, CA
KTBN	40	l	No		Santa Ana, CA
KTLA/KTLAHD	5/1005	I	No		Los Angeles, CA
KTTV/KTTVHD	11/1011	I	No		Los Angeles, CA
KVCR	24	Е	Yes	0	San Bernardino, CA
KVEA/KVEAHD	52/1052	I	No		Corona, CA
KVMD/KVMDHD	31/1031	l	No		Twentynine Palms, CA
KVME	20	I	No		Bishop, CA
KWHY/KWHYHD	22/1022	l	No		Los Angeles, CA
KXLA/KLXAHD	44/1044	l	No		Rancho Palos Verdes, CA
KZSW-LP	27	I	No		Riverside, CA
	I	1			

	AL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#					
	cific Bell Telephone Company			62827	Name				
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. (Amount of gross receipts)								
COPY Instru • Cor • Cor • If you fee • If you	(RIGHT ROYALTY FEE citions: Use the blocks in this space L to determine the royalty fee you owe: inplete block 1, showing your minimum fee. inplete block 2, showing whether your system carried any distant television stations. Our system did not carry any distant television stations, leave block 3 blank. Enter the air from block 1 on line 1 of block 4, and calculate the total royalty fee. Our system did carry any distant television stations, you must complete the applicable prompanying this form and attach the schedule to your statement of account.		of the m	inimum	L Copyright Royalty Fee				
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b $pprox$ 8 below.	e ente	red on li	ne 1 of					
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.	entere	d 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.	uld be	entered	on line					
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.		064 perd	ent of the					
	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.		\$	53,794,557.03					
	This is your minimum fee.	\$		572,374.09					
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 peri X Yes—Complete the DSE schedule. No—Leave block 3 below blank and co	nn 4, y od?	ou mus	t check					
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		\$	944.94					
	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	\$		944.94					
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		\$	572,374.09	Cable systems				
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter 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 appropriate				
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$		573,099.09	form for submitting the additional fees.				
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See page (i) of the general instructions located in the paper SA3 form for more information.)								

Nome	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYS	TEM ID#
Name	Pacific Bell Telephone Company	62827
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	
Channels	1. Enter the total number of channels on which the cable system carried television broadcast stations	
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services. 700]
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
Be Contacted for Further Information	Name Myriam Nassif Telephone 310-964-1930	
	Address 2260 E Imperial Hwy Room 839 (Number, street, rural route, apartment, or suite number)	
	El Segundo, CA 90245 (City, town, state, zip)	
	Email mn112s@att.com Fax (optional)	
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.	
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.	
	 I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	
	X /s/ Michael Santogrossi	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	
	Typed or printed name: Michael Santogrossi	
	Title: Vice President – Finance (Title of official position held in corporation or partnership)	
	Date: February 26, 2020	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nome
Pacific Bell Telephone Company	62827	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 act lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for service of providing secondary transmissions of primary broadcast transmitters, the system shall rescribers and amounts collected from subscribers receiving secondary transmissions pursuant to see For more information on when to exclude these amounts, see the note on page (vii) of the general instruction paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions pursuants of gross receipts for secondary transmissions.	or the basic not include sub- ection 119."	Special Statement Concerning Gross Receipts Exclusion
X NO		
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or unforced for an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 for		Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-	
Line 3 Multiply line 2 by the number of days late and enter the sum here	days < 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)		
(inte	erest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further ass contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	sistance please	
** 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 please list below the owner, address, first community served, accounting period, and ID number as given filing.		
Owner Address		
First community served Accounting period ID number		

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

ACCOUNTING PERIOD: 2019/2

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

Note that local stations are not counted at all in computing DSEs.

Step 2: Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space C of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number or 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 ε television market added stations after June 24, 1981, that would not have been permitted under FCC rules, regulations, and authorizations (hereafter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge

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

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

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

- 1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
- 2) A station first carried after June 24, 1981, which could have 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, non-commercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)] in effect on June 24, 1981.
- 4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.
- 5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

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

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

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

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

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

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

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

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

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

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

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

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

EXAMPLE:

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

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

Santa Rosa	Stations A and C 35 mile zone
\ an	Bodega Bay ns B, D, id E le zone

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

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x .01064
 \$6.384.00

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

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

ACCOUNTING PERIOD: 2019/2

DSE SCHEDULE. PAG													
1	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			S'	YSTEM ID#							
I	Pacific Bell Telephone (Company				62827							
2	SUM OF DSEs OF CATEGOR	RY "O" STATIOI	NS:										
	Add the DSEs of each station.												
	Enter the sum here and in line	1 of part 5 of thi	s schedule.		1.00	ļ							
	Instructions:					-							
2	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5												
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-												
Computation of DSEs for	mercial educational station, give the DSE as ".25."												
Category "O"			CATEGORY "O" STATION	NS: DSEs									
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE							
	KCET/KCETHD	0.250											
	KLCS	0.250											
	KOCE/KOCEHD	0.250											
	KVCR	0.250											
Add rows as	шинишинишинишинишинишинишинишинишинишин												
necessary.													
Remember to copy													
all formula into new													
rows.													
I		ı				I							

Name	Pacific Bell Tele		/				S	62827				
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	figure should corre Column 3: For Column 4: Div be carried out at le Column 5: For give the type-value Column 6: Mu	tion during the accounti each station. /er the air during the acc decimals in column 4. T	counting period. This figure must ucational station,									
Capacity		CATEGORY LAC STATIONS: COMPUTATION OF DSEs										
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	ER 3. JRS ED BY	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	5. TYPE		SE				
			÷		=	x	=					
			÷ ÷		=	x x						
					=	x	=					
			÷		=	x	=					
			÷		= 	x x	=					
			÷		=	x	=					
	SUM OF DSEs OF Add the DSEs of ea Enter the sum he			dule,	⊁	0.00	ם					
Computation of DSEs for Substitute-Basis Stations	Was carried by y tions in effect or Broadcast one o space I). Column 2: For eat your option. This Column 3: Enter Column 4: Divide	your system in substant October 19, 1976 (or more live, nonnetwork station give the figure should correct the number of days the figure in columns.	titution for a progra (as shown by the look programs during a number of live, no spond with the infinity in the calendar your 2 by the figure	am that your system letter "P" in columning that optional carrionnetwork program ormation in space I. Jear: 365, except in in column 3, and given.	n was permitted to the properties of space (); and the properties of the properties	rograms) if that station: to delete under FCC rule d the word "Yes" in column stitution for programs tha olumn 4. Round to no le the general instructions	2 of It were deleted	rm).				
	•	SU	BSTITUTE-BA	ASIS STATION	S: COMPUTA	ATION OF DSEs						
	SIGN	NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE				
			-	=			÷	=				
							÷					
		-	=	=			÷	=				
			-	=			÷	=				
	SUM OF DSEs OF Add the DSEs of ea Enter the sum he	SUBSTITUTE-BAS	IS STATIONS:	dule,		0.00	<u> </u>					
5	number of DSEs app	olicable to your syster		xes in parts 2, 3, and	4 of this schedul	e and add them to provid						
Total Number	Number of DSE Number of DSE	·				<u></u>	1.00 0.00					
of DSEs	Number of DSB Number of DSB	·				<u> </u>	0.00					
	TOTAL NUMBER OF	F DSEs					•	1.00				

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2019/2

LEGAL NAME OF C							S	YSTEM ID# 62827	Name	
Instructions: Bloo		· •								
In block A: • If your answer if "Yes," leave the remainder of part 6 and part 7 of the DSE schedule blank and complete part 8, (page 16) of the										
schedule.										
If your answer if "No," complete blocks B and C below. BLOCK A: TELEVISION MARKETS										
s the cable system located wholly outside of all major and smaller markets as defined under section 76.5 of FCC rules and regulations in										
,	effect on June 24, 1981? Yes—Complete part 8 of the schedule—DO NOT COMPLETE THE REMAINDER OF PART 6 AND 7									
X No—Complete blocks B and C below.										
		BLOC	K B: CARR	IAGE OF PERI	MITTED DS	Es				
Column 1:	List the call signs			part 2, 3, and 4 o			tem was permitte	d to carry		
CALL SIGN		ne DSE Sched	dule. (Note: Ti	ne 25, 1981. For for the letter M below r Act of 2010.)	•	•				
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru	ıles and regul	ations cited b	asis on which you o elow pertain to tho urket quota rules [7	se in effect o	n June 24, 198		j tc		
	B Specialty stati C Noncommeric	al educationa d station (76.6	ll station [76.5 35) (see parag	76.59(d)(1), 76.61(9(c), 76.61(d), 76. graph regarding su	63(a) referring	g to 76.61(d)				
	E Carried pursua	ant to individu	ıal waiver of F	CC rules (76.7) ne or substitute ba	usis prior to lu	ine 25 1081				
	•	JHF station w	ithin grade-B	contour, [76.59(d)	•		erring to 76.61(e)	(5)		
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on pag	e 14 of		
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE		
KCET/KCE	C	0.25								
KLCS KOCE/KOC	C	0.25 0.25								
KVCR	С	0.25								
								1.00		
		В	LOCK C: CO	MPUTATION OF	3.75 FEE					
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule			'			
Line 2: Enter the	sum of permitte	d DSEs fron	n block B ab	ove			,			
Line 3: Subtract (If zero, le				r of DSEs subject 7 of this schedu		rate.				
Line 4: Enter gro	ss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially	
Line 5: Multiply li	ne 4 by 0.0375	and enter su	ım here						permited/ partially nonpermitted	
Line 6: Enter tota	al number of DS	Es from line	3				,x		carriage? If yes, see part 9 instructions.	
Line 7: Multiply li	ne 6 by line 5 ar	nd enter here	e and on line	2, block 3, spac	e L (page 7)			0.00		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Pacific Bell Telephone Company 62827								Name	
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS		UED) 1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
SIGN	BASIS		SIGN	BASIS		SIGN	BASIS		Computation of
									3.75 Fee

Name		LEGAL NAME OF OWNER OF CABLE SYSTEM: Pacific Bell Telephone Company 62827										
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters											
		PERMITT	ED DSE FOR STA	TIONS CARRIE	ΞD	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS				
	1. CALL	2. PRIC	OR 3. ACC	COUNTING		4. BASIS OF	5. PF	RESENT	6. P	ERMITTED		
	SIGN	DSE	P	ERIOD		CARRIAGE	[DSE		DSE		

7 Computation of the	,	"Yes," comple	ete blocks B and C		pai	rt 8 of the DSE sched	ule.					
Syndicated			BLOCI	K A: MAJOR	TE	LEVISION MARK	ET					
Exclusivity									0.4	10010		
Surcharge		•		or television mari	ket	as defined by section 7		rules in effect J	une 24,	1981?		
	X Yes—Complete	blocks B and	IC.			No—Proceed to	part 8					
	BLOCK B: Ca	arriage of VHI	F/Grade B Contour	Stations		BLOCK	C: Compu	tation of Exem	not DSEs	i		
	Is any station listed in commercial VHF stati or in part, over the ca	block B of pa	art 6 the primary str	eam of a	H	Was any station listed nity served by the cab to former FCC rule 76	in block B le system p	of part 7 carrie	d in any	commu-		
	Yes—List each s X No—Enter zero a		th its appropriate per part 8.	mitted DSE		Yes—List each st X No—Enter zero a			ate permi	tted DSE		
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	_{IN} T	DSE		
	O, LE OIOIY	232	O, LE OIOIY	552		O, ILL OIOIY	DOL	JALL GIG		502		
		•										
			TOTAL DSEs	0.00			<u> </u>	TOTAL DS	Es	0.00		
				7.00	- 11							

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Pacific Bell Telephone Company	SYSTEM ID# 62827	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	53,794,557.03	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? X Yes—Complete section 3 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.		
	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		
	CECTION 4: SECOND 50 TELEVISION MARKET	1	
	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		

	LEGAL NAM	//E OF OWNER OF CABLE SYSTEM:	YSTEM ID#
Name	F	Pacific Bell Telephone Company	62827
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. A. Enter 0.00300 of gross receipts (the amount in section 1). B. Enter 0.00189 of gross receipts (the amount in section 1). C. Multiply line B by 3.000 and enter here. D. Enter 0.00089 of gross receipts (the amount in section 1). \$ E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here. F. Multiply line D by line E and enter here. G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
8 Computation of Base Rate Fee	You mu 6 was 6 In blo If you If you blank What if	s 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 ye	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.	
	Ľ	163—Complete part 3 of this scriedule.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ _ \$	_
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.) ▶	_
	Section 3	If the figure in section 2 is 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).	_
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee	0.00

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2019/2

	AME OF OWNER OF CABLE SYSTEM: c Bell Telephone Company	SYSTEM ID# 62827	Name
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 (the amount in section 1) **State Control of the Indian Control of the In		8
	B. Enter 0.00701 of gross receipts (the amount in section 1) \$ \\$		Computation of Base Rate Fee
	C. Multiply line B by 3.000 and enter here		base Rate Fee
	D. Enter 0.00330 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here \$		
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$	0.00	
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channels.	•	9
In Gen	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee s from subscribers located within the station's local service area, from your system's total gross receipts. To take a on, you must:		Computation of Base Rate Fee
First: [station DSEs a	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	the number of	and Syndicated Exclusivity Surcharge
NOTE: also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B becable system is wholly located outside all major television markets, complete block A only.	' '	for Partially Distant Stations, and
Step 1	Identify a Subscriber Group for Partially Distant Stations For each community served, determine the local service area of each wholly distant and each partially distant state to that community.	tion you	for Partially Permitted Stations
Step 2 outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were look the station's local service area. A subscriber located outside the local service area of a station is distant to that state to the station is distant to the subscriber.)		
Step 3 subscri	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
groups	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system.	stem's subscriber	
IdentiGive to subscrip	fy the communities/areas represented by each subscriber group. the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to al bers in the group.	l of the	
and 4 d	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it i 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 b		
part	6 of this schedule. ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.	,	
• Calcu	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general	instructions	
• Comp page.	epaper SA3 form. Bute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (th or that group's complement of stations and total gross receipts from the subscribers in that group). You do not nece	at is, the total	

U.S. Copyright Office Form SA3E Long Form (Rev. 05-17)

actual calculations on the form.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62827 Pacific Bell Telephone Company Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

CALL SIGN DSE CALL SIGN	EGAL NAME OF OWN Pacific Bell Telep						S	62827	Name
OMMUNITY AREA O	E	BLOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP		
CALL SIGN DSE CALL SIGN		FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GRO	UP	0
CALL SIGN DSE CALL SIGN CALL	COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN	DSE	of
						···			Base Rate
Exclusis Station Control Contro						··			
Surchar for Partial Distan Station otal DSEs					KLCS	•			
					KOCE/KOCEHD	0.25			
Partial Distant Statutor lotal DSEs									
Distant Station Total DSEs Total DSE									Partially
otal DSEs ross Receipts First Group s									Distant
ase Rate Fee First Group \$ 53,632,270.67 Gross Receipts Second Group \$ 15,334.80 Base Rate Fee Second Group THIRD SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN 0.25 CETTKCETHD 0.25 COMMUNITY/ AREA 0 COMMUNITY/ AREA									Stations
ase Rate Fee First Group \$ 53,632,270.67 Gross Receipts Second Group \$ 15,334.80 Base Rate Fee Second Group THIRD SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN 0.25 CETTKCETHD 0.25 COMMUNITY/ AREA 0 COMMUNITY/ AREA									
ase Rate Fee First Group \$ 53,632,270.67 Gross Receipts Second Group \$ 15,334.80 Base Rate Fee Second Group THIRD SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN 0.25 CETTKCETHD 0.25 COMMUNITY/ AREA 0 COMMUNITY/ AREA									
ase Rate Fee First Group \$ 53,632,270.67 Gross Receipts Second Group \$ 15,334.80 Base Rate Fee Second Group THIRD SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN 0.25 CETTKCETHD 0.25 COMMUNITY/ AREA 0 COMMUNITY/ AREA									
ase Rate Fee First Group \$ 53,632,270.67 Gross Receipts Second Group \$ 15,334.80 Base Rate Fee Second Group THIRD SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN 0.25 CETTKCETHD 0.25 COMMUNITY/ AREA 0 COMMUNITY/ AREA									
ase Rate Fee First Group \$ 53,632,270.67 Gross Receipts Second Group \$ 15,334.80 Base Rate Fee Second Group THIRD SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN 0.25 CETTKCETHD 0.25 COMMUNITY/ AREA 0 COMMUNITY/ AREA									
ase Rate Fee First Group \$ 53,632,270.67 Gross Receipts Second Group \$ 15,334.80 Base Rate Fee Second Group THIRD SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN 0.25 CETTKCETHD 0.25 COMMUNITY/ AREA 0 COMMUNITY/ AREA	otal DSEs	<u> </u>		0.00	Total DSEs	<u> </u>		1.00	
ase Rate Fee First Group THIRD SUBSCRIBER GROUP OMMUNITY/ AREA OCALL SIGN DSE CALL SIGN O.25 COMMUNITY/ AREA ODSE CALL SIGN O									
THIRD SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN	Gross Receipts First C	eroup	\$ 53,632	,270.67	Gross Receipts Secon	id Group	\$	15,334.80	
OMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CCET/KCETHD 0.25 IVCR 0.25 <td>Base Rate Fee First C</td> <td>Group</td> <td>\$</td> <td>0.00</td> <td>Base Rate Fee Secon</td> <td>d Group</td> <td>\$</td> <td>163.16</td> <td></td>	Base Rate Fee First C	Group	\$	0.00	Base Rate Fee Secon	d Group	\$	163.16	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CET/KCETHD 0.25 CALL SIGN DSE CALL SIGN DSE CET/KCETHD 0.25 CALL SIGN DSE CALL SIGN DS		THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GRO	UP	
CET/KCETHD 0.25	COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
otal DSEs	CALL SIGN		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs									
siross Receipts Third Group \$ 146,951.56 Gross Receipts Fourth Group \$ 0.00 ase Rate Fee Third Group \$ 781.78 Base Rate Fee Fourth Group \$ 0.00 ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	AVCR	0.25							
siross Receipts Third Group \$ 146,951.56 Gross Receipts Fourth Group \$ 0.00 ase Rate Fee Third Group \$ 781.78 Base Rate Fee Fourth Group \$ 0.00 ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
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siross Receipts Third Group \$ 146,951.56 Gross Receipts Fourth Group \$ 0.00 ase Rate Fee Third Group \$ 781.78 Base Rate Fee Fourth Group \$ 0.00 ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
siross Receipts Third Group \$ 146,951.56 Gross Receipts Fourth Group \$ 0.00 ase Rate Fee Third Group \$ 781.78 Base Rate Fee Fourth Group \$ 0.00 ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
siross Receipts Third Group \$ 146,951.56 Gross Receipts Fourth Group \$ 0.00 ase Rate Fee Third Group \$ 781.78 Base Rate Fee Fourth Group \$ 0.00 ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
siross Receipts Third Group \$ 146,951.56 Gross Receipts Fourth Group \$ 0.00 ase Rate Fee Third Group \$ 781.78 Base Rate Fee Fourth Group \$ 0.00 ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
siross Receipts Third Group \$ 146,951.56 Gross Receipts Fourth Group \$ 0.00 ase Rate Fee Third Group \$ 781.78 Base Rate Fee Fourth Group \$ 0.00 ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
siross Receipts Third Group \$ 146,951.56 Gross Receipts Fourth Group \$ 0.00 ase Rate Fee Third Group \$ 781.78 Base Rate Fee Fourth Group \$ 0.00 ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
siross Receipts Third Group \$ 146,951.56 Gross Receipts Fourth Group \$ 0.00 ase Rate Fee Third Group \$ 781.78 Base Rate Fee Fourth Group \$ 0.00 ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
siross Receipts Third Group \$ 146,951.56 Gross Receipts Fourth Group \$ 0.00 ase Rate Fee Third Group \$ 781.78 Base Rate Fee Fourth Group \$ 0.00 ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.			•						
siross Receipts Third Group \$ 146,951.56 Gross Receipts Fourth Group \$ 0.00 ase Rate Fee Third Group \$ 781.78 Base Rate Fee Fourth Group \$ 0.00 ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
ase Rate Fee Third Group \$ 781.78 Base Rate Fee Fourth Group \$ 0.00 ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Total DSEs			0.50	Total DSEs			0.00	
ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Gross Receipts Third	Group	<u>\$ 146</u>	,951.56	Gross Receipts Fourth	Group	\$	0.00	
ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
	Base Rate Fee Third	Group	\$	781.78	Base Rate Fee Fourth	Group	\$	0.00	
	Base Rate Fee: Add t	he base rat	e fees for each subso	riber group	as shown in the boxes a	bove.			
				. J P	212 23730 4		\$	944.94	

LEGAL NAME OF OWNE Pacific Bell Teleph						S	YSTEM ID# 62827	Name
BL	OCK A: (COMPUTATION O	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	FIFTH	SUBSCRIBER GRO				SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
		0.122.0.0						Base Rate Fee
								and
								Syndicated
		_						Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
			2.00				0.00	
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
S	SEVENTH	SUBSCRIBER GRO	UP			SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block	e base rat 3, line 1, s	te fees for each subs	criber group	as shown in the boxes	s above.	\$		

В							62827	
				TE FEES FOR EAC			LID	
COMMUNITY/ AREA	- IK91	SUBSCRIBER GRO	<u>0</u>	COMMUNITY/ AREA		SUBSCRIBER GRO	0	9
COMMONTT // AREA				COMMONT T/ AREA				Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
		-						Syndicat
		H						Exclusiv
								Surcharg
								for Partially
								Distant
						- 		Stations
		,						
otal DSEs			0.00	Total DSEs		_	0.00	
ross Receipts First G	roup	\$ 53,632	,270.67	Gross Receipts Seco	ond Group	\$	15,334.80	
ase Rate Fee First G	roup	¢	0.00	Base Rate Fee Seco	and Group	\$	0.00	
ase Nate Fee First O		\$	0.00	Base Nate I ee occ	ліа Огоар	ð.	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN								
CALL SIGN	Dec	T CALL SICN	Dec	CALL SICN	Dec	II CALL SICN	Dec	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	DSE	CALL SIGN	DSE	Total DSEs	DSE	CALL SIGN	DSE	
otal DSEs			0.00	Total DSEs			0.00	
otal DSEs						CALL SIGN		
Total DSEs Gross Receipts Third (0.00	Total DSEs			0.00	
otal DSEs	Group		0.00	Total DSEs	th Group		0.00	
otal DSEs	Group	\$ 146	0.00	Total DSEs Gross Receipts Four	th Group	\$	0.00	
otal DSEs Fross Receipts Third (Group	s 146	0.00 ,951.56	Total DSEs Gross Receipts Four	th Group	\$	0.00	

Nonpermitted 3.75 Stations

EGAL NAME OF OWN Pacific Bell Tele						S	62827	Name
-				TE FEES FOR EAC				
		SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA 0			COMMUNITY/ ARE	Α		0	Computa	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
								Syndica
		_				H		Exclusiv Surchar
								for
								Partiall
								Distan
								Station
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO	UP		EIGHTH	SUBSCRIBER GRO	UP	
OMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
ase Rate Fee: Add	the base ra	te fees for each subs	criber group	as shown in the boxe	es above.			

ACCOUNTING PERIOD: 2019/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Pacific Bell Telephone Company 62827 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2019/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Pacific Bell Telephone Company 62827 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown