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

**STATEMENT OF ACCOUNT** for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

# SA3E Long Form

Return completed workbook by email to:

#### <u>coplicsoa@loc.gov</u>

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

Α	ACCOUNTING PERIOD COVERED BY THIS	STATEMENT:					
Accounting Period	2019/2						
<b>B</b> Owner	Instructions:         Give the full legal name of the owner of the cable syst         rate title of the subsidiary, not that of the parent corporation         List any other name or names under which the owner         If there were different owners during the accounting p         a single statement of account and royalty fee payment cov         Check here if this is the system's first filing. If not, e	n conducts the business of period, only the owner on the vering the entire accounting	the cable syste <i>he last day of th</i> g period	m e accounting period should a		62981	
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CA	ABLE SYSTEM					
	Michigan Bell Telephone Company						
					6298	120192	
					62981	2019/2	
	2260 E Imperial Hwy Room 839 El Segundo, CA 90245						
С	<b>INSTRUCTIONS:</b> In line 1, give any business or trad names already appear in space B. In line 2, give the						
System	1						
	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	e page 1b. Identify only	the frst comm	unity served below and re	list on page	; 1b	
Area	with all communities.						
Served	CITY OR TOWN	STA	TE				
First Community	Grand Rapids	MI					
Community	Below is a sample for reporting communities if you	report multiple channel	line-ups in Sp				
	CITY OR TOWN (SAMPLE)		STATE	CH LINE UP	SUB	GRP#	
Sample	Alda		MD	<u>A</u>		1	
	Alliance Gering		MD MD	<u> </u>		2 3	
	Gening			B		3	
form in order to pro numbers. By provid search reports pre	e: Section 111 of title 17 of the United States Code authorizes the Co occess your statement of account. PII is any personal information that ding PII, you are agreeing to the routine use of it to establish and mai pared for the public. The effect of not providing the PII requested is th of statements of account, and it may affect the legal sufficiency of the	can be used to identify or trac intain a public record, which in hat it may delay processing of	e an individual, s icludes appearing your statement o	uch as name, address and telep in the Offce's public indexes an f account and its placement in th	hone d in		

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

02/27/20

Form SA3E Long Form (Rev. 05-17)

FORM SA3E. PAGE 1b.				1			
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#				
Michigan Bell Telephone Company62981							
<b>Instructions:</b> List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.							
<b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile hom below the identified city or town.	e parks should b	e reported in pare	ntheses				
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 channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns be	a subscriber gro			-			
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	-			
Grand Rapids Ada Township	MI MI			First Community			
Alamo Township Algoma Township	MI						
Allegan Unincorporated County	MI						
Alpine Township	MI						
Antwerp Township Battle Creek	MI			See instructions for additional information			
Bedford Township	MI			on alphabetization.			
Blendon Township Byron Township	MI						
Caledonia Township	MI						
Calhoun Unincorporated County Cannon Township	MI						
Cascade Township	MI						
Cedar Springs	MI						
Comstock Township Convis Township	MI						
Cooper Township	MI						
Crockery Township East Grand Rapids	MI						
Emmett Township	MI						
Ferrysburg	MI						
Fillmore Township Fruitport Township	MI						
Gaines Township	MI						
Georgetown Township	MI						
Grand Haven Grand Haven Township	MI						
Grand Rapids Township	MI						
Grandville Hastings	MI						
Hastings Township	MI						
Holland	MI						
Holland Township Hudsonville	MI						
Ionia	MI						
Ionia Township	MI						
Jamestown Township Kalamazoo	MI						
Kalamazoo Township	MI						
Kent Unincorporated County	MI						

Kentwood	MI		
Laketown Township	MI		
Leavitt Township	MI		
Leighton Township	MI		
Marengo Township	MI		
Marshall	MI	 	
Marshall Township	MI	 	
Mattawan	MI		
Nelson Township	MI		
Olive Township	MI	 	
Oshtemo Township	MI	 	
Otsego Township	MI	 	
Parchment	MI	 	
Park Township	MI	 	Add rows as necessary
Pavilion Township	MI	 	Add rows as necessary
Pennfield Township	MI	 	
Plainfield Township	MI	 	
Port Sheldon Township	MI	 	
Portage	MI	 	
Richland Township	MI	 	
Robinson Township	MI	 	
Rockford		 	
Rutland Township	MI	 	
Schoolcraft Township	MI	 	
Solon Township	MI	 	
Sparta Township	MI	 	
Spring Lake	MI	 	
Spring Lake Township	MI	 	
Springfield	MI	 	
Sullivan Township	MI	 	
Tallmadge Township	MI	 	
Texas Township	MI	 	
Thornapple Township	MI	 	
Vergennes Township	MI	 	
Walker	MI	 	
Wyoming	MI	 	
Zeeland	MI	 	
Zeeland Township	MI	 	
		ļ	1




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Name	LEGAL NAME OF OWNER OF CABLE	E SYSTEM:								S	YSTEM II	
Name	Michigan Bell Telephon	e Company									6298	
Е	SECONDARY TRANSMISSION		-	-		-						
<b>L</b>	In General: The information in space E should cover all categories of secondary transmission service of the cable											
Secondary	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											
Transmission	last day of the accounting period							11000	oxioting	y on the		
Service: Sub-	Number of Subscribers: Both							able sy	stem, b	oroken		
scribers and	down by categories of secondary											
Rates	each category by counting the ni separately for the particular serv								tions ch	narged		
	<b>Rate:</b> Give the standard rate c								charge	and the		
	unit in which it is generally billed	-	-						-			
	category, but do not include disc	counts allowed	for adv	ance payment.								
	Block 1: In the left-hand block											
	systems most commonly provide that applies to your system. <b>Not</b>											
	categories, that person or entity			-			-					
	subscriber who pays extra for ca											
	first set" and would be counted o											
	Block 2: If your cable system											
	printed in block 1 (for example, t with the number of subscribers a											
	sufficient.		= nynt-i	Ianu Diock. A l	w0- (		-word descrip			VICE IS		
		OCK 1						В	LOCK	2		
		NO. OF		DATE		CATE			-	NO. OF	DATE	
	CATEGORY OF SERVICE Residential:	SUBSCRIBI	-R5	RATE		CATE	GORY OF SE	RVICE	-	SUBSCRIBERS	RATE	
	Service to first set	3	1.618	\$ 19.00	нг	) Toch I	Foo			19,271	\$ 10.0	
	Service to additional set(s)	3	1,010	φ 13.00	9.00 HD Tech Fee Set-Top Box			31,751	\$ 10.0 \$0-\$1			
	• FM radio (if separate rate)		Broadcast TV Surcharge			31,618						
	Motel, hotel					ouuouo		9~		01,010	ψ0.00 ψ0.0	
	Commercial		133	\$ 20.00								
	Converter											
	Residential											
	Non-residential											
											1	
	SERVICES OTHER THAN SEC	-			-							
F	In General: Space F calls for rat	<b>`</b>	,				, ,					
•	not covered in space E, that is, t service for a single fee. There ar							-				
Services	furnished at cost or (2) services											
Other Than	amount of the charge and the ur											
Secondary	enter only the letters "PP" in the						-					
ransmissions:	Block 1: Give the standard rat											
Rates	Block 2: List any services that											
	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.											
	priet (two- or three-word) describ											
	brief (two- or three-word) descrip											
		BLO			2IVIC	F	RATE	CAI	FGOR	BLOCK 2	RATE	
	CATEGORY OF SERVICE		CATE	GORY OF SEF			RATE	CAT	EGOR	BLOCK 2 Y OF SERVICE	RATE	
	CATEGORY OF SERVICE Continuing Services:	BLO	CATE(	GORY OF SEF ation: Non-re			RATE					
	CATEGORY OF SERVICE	BLO	CATE Install • Mo	GORY OF SEF			RATE	Vide	eo on D	Y OF SERVICE	RATE \$0-\$10 \$0-\$3	
	CATEGORY OF SERVICE Continuing Services: • Pay cable	BLO( RATE	CATE Install • Mo • Co	GORY OF SEF ation: Non-res			RATE	Vide Serv	eo on D /ice Ac	Y OF SERVICE	\$0-\$10	
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	BLO( RATE	CATEC Install • Mo • Co • Pa	GORY OF SEF ation: Non-res otel, hotel mmercial	sideı	ntial	RATE	Vide Serv Cree	eo on D vice Ac dit Man	Y OF SERVICE Demand tivation Fee	\$0-\$10 \$0-\$3	
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	BLO( RATE	CATEC Install • Mc • Co • Pa • Pa	GORY OF SEF ation: Non-res otel, hotel mmercial y cable	sideı	ntial	RATE	Vide Ser Cre Dis	eo on D vice Ac dit Man patch o	Y OF SERVICE Demand tivation Fee aggement Fee	\$0-\$10 \$0-\$3 \$0-\$44	
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection •Burglar protection	BLO( RATE	CATEC Install • Mo • Co • Pa • Pa • Fire	GORY OF SEF ation: Non-rea otel, hotel mmercial y cable y cable-add'l c	<b>ide</b> i hanr	ntial	RATE	Vide Ser Cre Dis Wire HD	eo on D vice Ac dit Man oatch o eless R Premiu	Y OF SERVICE Demand Litivation Fee hagement Fee n Demand leceiver m Tier	\$0-\$10 \$0-\$3 \$0-\$44 \$9	
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential	BLO( RATE \$5-\$199	CATEC Install • Mo • Co • Pa • Pa • Fin • Bu	GORY OF SEF ation: Non-res otel, hotel mmercial y cable y cable-add'l c e protection	<b>ide</b> i hanr	ntial	RATE	Vide Serr Cree Disp Wire HD	eo on D vice Ac dit Man patch o eless R Premiu R Upgra	Y OF SERVICE Demand tivation Fee lagement Fee In Demand leceiver Im Tier ade Fee	\$0-\$10 \$0-\$3 \$0-\$44 \$9 \$0-\$4	
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	BLO( RATE \$5-\$199	CATE Install • Mc • Co • Pa • Pa • Fir • Bu Other	GORY OF SEF ation: Non-reso otel, hotel mmercial y cable y cable-add'l c e protection rglar protectior	<b>ide</b> i hanr	ntial	RATE \$0-\$35	Vide Serr Cree Disp Wire HD	eo on D vice Ac dit Man oatch o eless R Premiu	Y OF SERVICE Demand tivation Fee lagement Fee In Demand leceiver Im Tier ade Fee	\$0-\$10 \$0-\$3 \$0-\$44 \$9 \$0-\$4 \$0-\$4	
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	BLO( RATE \$5-\$199	CATE( Install • Mc • Co • Pa • Pa • Fir • Bu • Bu • Re	GORY OF SEF ation: Non-reso otel, hotel mmercial y cable y cable-add'l c e protection rglar protectior services:	<b>ide</b> i hanr	ntial	\$0-\$35	Vide Serr Cree Disp Wire HD	eo on D vice Ac dit Man patch o eless R Premiu R Upgra	Y OF SERVICE Demand tivation Fee lagement Fee In Demand leceiver Im Tier ade Fee	\$0-\$10 \$0-\$3 \$0-\$44 \$9 \$0-\$4 \$0-\$4 \$1 \$1 \$1	
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	BLO( RATE \$5-\$199	CATE( Install • Mc • Co • Pa • Pa • Fin • Bu Other • Re • Dis	GORY OF SEF ation: Non-reso otel, hotel mmercial y cable y cable-add'l c e protection rglar protection services: connect	<b>ide</b> i hanr	ntial		Vide Serr Cree Disp Wire HD	eo on D vice Ac dit Man patch o eless R Premiu R Upgra	Y OF SERVICE Demand tivation Fee lagement Fee In Demand leceiver Im Tier ade Fee	\$0-\$10 \$0-\$3 \$0-\$44 \$9 \$0-\$4 \$0-\$4 \$1 \$1 \$1	

Name

G

Primary

Transmitters:

Television

SYSTEM ID#

62981

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

#### PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	AA		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
WGVU-DT/HD	35/1035	Е	No		Grand Rapids, MI	
WLLA-DT	64	I	No		Kalamazoo, MI	See instructions for
WOOD-DT/HD	8/1008	N	No		Grand Rapids, MI	additional informatio
WOTV-DT/HD	41/1041	N	No		Battle Creek, MI	on alphabetization.
WTLJ-DT	54	I	No		Muskegon, MI	
WWMT-DT/HD	3/1003	N	No		Kalamazoo, MI	
WXMI-DT/HD	17/1017	I	No		Grand Rapids, MI	
WXSP-CD/WXSPI	15/1015	I	No		Grand Rapids, MI	
WZPX-DT/WZPXH	43/1043	I	No		Battle Creek, MI	
WZZM-DT/HD	13/1013	N	No		Grand Rapids, MI	

Name

G

Primary

Transmitters:

Television

SYSTEM ID#

62981

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

#### PRIMARY TRANSMITTERS: TELEVISION

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

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under 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.

1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	
	NUMBER	STATION		(If Distant)	

FORM	SA3E. PAGE 7.								
LEGA	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name						
Mic	higan Bell Telephone Company	62981	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.								
<ul> <li>Instru</li> <li>Con</li> <li>Con</li> <li>If you fee</li> <li>If you account</li> </ul>	<b>(RIGHT ROYALTY FEE</b> <b>ctions</b> : Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the a from block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable p ompanying this form and attach the schedule to your statement of account. Int 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b	arts of the DSE Schedule	L Copyright Royalty Fee						
bloc	k 3 below. Irt 6 of the DSE schedule was completed, the amount from line 7 of block C should be								
3 be ▶ If pa	low. Irt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.								
	<b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or mor least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period.	e is 1.064 percent 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.	\$ 11,988,129.13							
	This is your minimum fee.	\$ 127,553.69							
2 Block 3	<ul> <li>DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block.</li> <li>Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule.</li> <li>In a space Complete the DSE schedule.</li> <li>No—Leave block 3 below blank and control to the DSE schedule.</li> <li>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</li> <li>Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE</li> </ul>	nn 4, you must check							
	schedule. If none, enter zero								
	Line 3. Add lines 1 and 2 and enter here	\$							
4	<ul> <li>Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger</li> <li>Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente zero.</li> </ul>	\$ 127,553.69 0.00	Cable systems 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						
	Line 4. FILING FEE	\$ 725.00	the Licensing 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	\$ 128,278.69	form for submitting the additional fees.						
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. ( general instructions located in the paper SA3 form for more information.)	See page (i) of the	auantonai 1665.						

## ACCOUNTING PERIOD: 2019/2

ACCOUNTING PERI	00: 2019/2	FORM SA3E. PAGE 8.											
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#											
Namo	Michigan Bell Telephone Company	62981											
	CHANNELS												
М	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast s	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       18         system carried television broadcast stations       18												
	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	620											
N Individual to Be Contacted	<b>INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED</b> : (Identify an individual we can contact about this statement of account.)												
for Further Information	Name Myriam Nassif Telephone 3	10-964-1930											
information	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 regu	lations.											
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 I	3; or											
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable in line 1 of space B and that the owner is not a corporation or partnership; or	system as identified											
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as own in line 1 of space B.	ner of the cable system											
	<ul> <li>I have examined the statement of account and hereby declare under penalty of law that all statements of fact containe</li> </ul>	d 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)]												
	/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 "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus (												
		sompationity octango.											
	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 informati	on (PII) requested on th											

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

FORM SA3E. PAGES	FORM	SA3E.	PAGE9
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LEGAL NAME OF OWNER OF CABLE SYSTEM: Michigan Bell Telephone Company	SYSTEM ID# 62981	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 lowing sentence: <ul> <li>"In determining the total number of subscribers and the gross amounts paid to the cable system service of providing secondary transmissions of primary broadcast transmitters, the system shall scribers and amounts collected from subscribers receiving secondary transmissions pursuant to</li> </ul> For more information on when to exclude these amounts, see the note on page (vii) of the general instrpaper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary made by satellite carriers to satellite dish owners? X NO	for the basic not include sub- section 119." uctions in the	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below.       \$         Name       Name         Mailing Address       Mailing Address		
<b>INTEREST ASSESSMENTS</b> You must complete this worksheet for those royalty payments submitted as a result of a late payment o For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 fi		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	x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	erest charge)	
* To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf</i> . For further a contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	0,	
** 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 Copyrig please list below the owner, address, first community served, accounting period, and ID number as give 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 identifyin	g information (PII) requested	on th

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.

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

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

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

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

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

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

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

**Step 2:** Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space G of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station 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 anc the base rate fee. In addition, cable systems located within certain television market areas may be required to calculate the 3.75 fee and/or the Syndicated Exclusivity Surcharge. Note: Distant multicast streams are not subject to the 3.75 fee or the Syndicated Exclusivity Surcharge. Distant simulcast streams are not subject to any royalty payment

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

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

U.S. Copyright Office

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

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

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

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

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

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

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

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

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

## DSE SCHEDULE. PAGE 11.

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

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

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

The fifth and each additional DSE 0.300% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE
If any of the stations were partially distant:

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

 Identify the communities/areas represented by each subscriber group.
 For each subscriber group, calculate the total number of DSEs of that group's complement of stations.

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

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

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

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

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

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

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

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

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

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

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

Santa Rosa

Rapid City

CITY

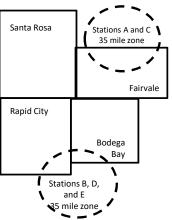
DSE

1.0

10

0.083

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



	0.000					
D (part-time)	0.139	Bodega Bay	Stations A an	d C		70,000.00
E (network)	0.25	Fairvale	Stations B, D,	, and E		120,000.00
TOTAL DSEs	2.472		TOTAL GRO	SS RECEIPTS		\$600,000.00
Minimum Fee Total Gross I	Receipts		\$600,000.00			
			x .01064			
			\$6,384.00			
First Subscriber Group		Second Subsc	riber Group		Third Subscriber Group	
(Santa Rosa)	(Santa Rosa)				(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts		\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs		1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee		\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .010	64 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .007	01 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6.497.20	Base rate fee	-	\$1.907.71	Base rate fee	\$1,604.03

Identification of Subscriber Groups

OUTSIDE LOCAL

Stations A and C

SERVICE AREA OF

Stations A, B, C, D ,E

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

GROSS RECEIPTS

\$310,000.00

100,000.00

FROM SUBSCRIBERS

## DSE SCHEDULE. PAGE 11. (CONTINUED)

1	LEGAL NAME OF OWNER OF CABLE SYSTEM:											
ł	Michigan Bell Telephone Company											
	SUM OF DSEs OF CATEGORY "O" STATIONS:         • Add the DSEs of each station.         Enter the sum here and in line 1 of part 5 of this schedule.         0.00											
	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5											
	of space G (page 3).											
Computation	In the column headed "DSE"	': for each indep	pendent station, give the DS	E as "1.0";  for e	each network or noncom-							
of DSEs for	mercial educational station, give the DSE as ".25." CATEGORY "O" STATIONS: DSEs											
Category "O" Stations	CATEGORY O STATIONS: DSES											
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
Add rows as												
necessary.												
Remember to copy all formula into new												
rows.												
10003.												

Name

3

Computation

of DSEs for

Stations

**Carried Part** Time Due to

> Lack of Activated

502.001	
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Michigan Bell Telephone Company	62981
Instructions: CAPACITY	
<b>Column 1:</b> List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3).	
Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This	
figure should correspond with the information given in space J. Calculate only one DSE for each station.	
Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period	

Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station.

Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25."

Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form

Channel	SA3 form.												
Capacity		(	CATEGORY L	AC STATIONS	COMPUTATI	ON OF DSEs							
	1. CALL SIGN	2. NUMBE OF HO CARRI SYSTE	ER 3 URS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	5. TYPE	E 6. DS	3E					
			÷		=	x	=						
			÷ ÷		=	x x							
			÷		=	x	=						
			÷		.=	x	=						
			÷ ÷		=	x x	=						
			÷		=	x	=						
	Add the DSEs	OF CATEGORY LAC so of each station. Im here and in line 2 of p		edule,		0.00	]						
<b>4</b> Computation of DSEs for Substitute- Basis Stations	Was carried tions in efference Broadcast of space I). Column 2: at your option. Column 3: I Column 4: I	ect on October 19, 1976 one or more live, nonnetv For each station give the This figure should corre Enter the number of day Divide the figure in colur	titution for a prog (as shown by the vork programs dur e number of live, spond with the ir s in the calendar nn 2 by the figure	gram that your syste letter "P" in column ring that optional car nonnetwork program formation in space year: 365, except in e in column 3, and g	m was permitted t 7 of space I); and riage (as shown by ns carried in subs I. n a leap year. ive the result in ca	to delete under FCC rules	2 of were deleted s than the third	rm).					
		SU	BSTITUTE-B	ASIS STATION	IS: COMPUTA	TION OF DSEs							
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	6	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE					
			•	=		•		=					
			÷			+		=					
			•				•••••••						
			÷	=		÷	•	=					
			÷	=		÷		=					
	Add the DSEs	oF SUBSTITUTE-BAS of each station. Im here and in line 3 of p		edule,		0.00	]						
Capacity Capacity		ER OF DSEs: Give the ar s applicable to your syste		oxes in parts 2, 3, an	d 4 of this schedul	e and add them to provide	the tota						
Total Number		f DSEs from part 2●				▶ <u> </u>	0.00						
of DSEs		f DSEs from part 3●				<u> </u>	0.00						
	3. Number of	f DSEs from part 4 ●				▶	0.00						
	TOTAL NUMBE	R OF DSEs				Þ		0.00					

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#												
Michigan Bell	Telephone Co	mpany						62981	Name			
Instructions: Bloc In block A: • If your answer if ' schedule.			part 6 and part	7 of the DSE sche	edule blank a	nd complete p	art 8, (page 16) o	f the	6			
	If your answer if "No," complete blocks B and C below.											
	BLOCK A: TELEVISION MARKETS											
effect on June 24, Yes—Com X No—Comp Column 1: CALL SIGN	CALL SIGN under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.)											
BASIS OF PERMITTED CARRIAGE	PERMITTED A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to											
Column 3:		e stations ide	entified by the	n parts 2, 3, and 4 letter "F" in columr			worksheet on paç	ge 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				
								0.00				
		В	LOCK C: CO	MPUTATION OF	3.75 FEE							
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule				-				
Line 2: Enter the	sum of permitte	d DSEs froi	m block B ab	ove								
Line 3: Subtract (If zero, le				r of DSEs subjec 7 of this schedu		i rate.		0.00				
Line 4: Enter gro	ss receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent			
Line 5: Multiply li	ine 4 by 0.0375 a	and enter si	um here				X		partially permited/ partially nonpermitted			
Line 6: Enter tota	al number of DSI	Es from line	3						carriage? If yes, see part 9 instructions.			
Line 7: Multiply li	ine 6 by line 5 ar	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00				

DSE SCHEDULE. PAGE 13.

ACCOUNTING PERIOD: 2019/2

	62981	EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM Alichigan Bell Telephone Company 629							Лiс	
+	02001		ור		ION MARKETS				<u>J</u>	=
6	3. DSE	2. PERMITTED BASIS	1. CALL SIGN	3. DSE	2. PERMITTED BASIS	1. CALL SIGN	3. DSE	2. PERMITTED BASIS	1. CALL SIGN	
Comput 3.75										
										••••

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM:													
Name	Michigan Bell Telephone Company													
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	<ul> <li>Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.)</li> <li>Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule.</li> <li>Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981.</li> <li>Column 3: Indicate the basis of carriage on which the station was carried by listing one of the following letters:         <ul> <li>(Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)</li> <li>A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)).</li> <li>B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)).</li> <li>S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form.</li> <li>Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule.</li> <li>Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be enter in block B, column 3 of part 6 for this station.</li> </ul> </li> <li>IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division.</li> </ul>													
	1 0 4 1				ЕD	ON A PART-TIME A	1							
	1. CALL SIGN	2. PRI DSE		COUNTING ERIOD		4. BASIS OF CARRIAGE		RESENT DSE	6. PI	ERMITTED DSE				
	31011	DSE		ERIOD		CARRIAGE		JSE		DSE				
<b>7</b> Computation	Instructions: Block A must be completed. In block A: If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule.													
of the	If your answer is													
Syndicated			BLOCH	( A: Major	TE	ELEVISION MARK	ΈT							
Exclusivity														
Surcharge		-		or television ma	rke	t as defned by section	76.5 of FCC	rules in effect J	une 24, <sup>-</sup>	1981?				
	X Yes—Complete	e blocks B and	IC.			No—Proceed to	o part 8							
	BLOCK B: C	Itation of Exem	nt DSEs											
	Is any station listed in	Ŧ				-			•					
	commercial VHF stat					Was any station listed nity served by the cal		•						
	or in part, over the ca		e a grade 2 contea.	,		to former FCC rule 76			.,	(				
	Yes—List each s	tation below wi	th its appropriate peri	mitted DSE		Yes—List each s	tation below	with its appropria	te permit	ted DSE				
	X No—Enter zero a	and proceed to	part 8.			X No—Enter zero a	and proceed t	o part 8.						
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	N	DSE				
								-						
			-											
			TOTAL DSEs	0.00				TOTAL DS	Es	0.00				

DSE SCHEDULE. PAGE 14.

LEGAL NA	AME OF OWNER OF CABLE SYSTEM: Michigan Bell Telephone Company	SYSTEM ID# 62981	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	11,988,129.13	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Exclusivity Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?     Yes—Complete part 9 of this schedule.     X No—Complete the applicable section below. If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the E	DSE	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below. A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00397 of gross receipts (the amount in section.1)		
Section 3b	Syndicated Exclusivity Surcharge         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		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Yes—Complete part 9 of this schedule. X No—Complete the applicable section below.		
4a	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)	DSE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

### ACCOUNTING PERIOD: 2019/2

DSE SCHEDULE. PAGE 16

Name			0LE. PAGE 16. SYSTEM ID# 62981							
7	Section									
-	4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.								
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1)								
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)	_							
Surcharge		C. Multiply line B by 3.000 and enter here								
		E. Subtract 4.000 from the total DSEs (the figure on line C in								
		section 2) 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.									
		Synoicated Exclusivity Surcharge.	<u></u> .							
	Instru	ctions:								
8		nust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of par checked "Yes," use the total number of DSEs from part 5.	rt							
	• In blo	ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.								
Computation of	-	ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belo	w							
Base Rate Fee	blank									
		is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local	I							
		e area," see page (v) of the general instructions.	1							
	• Did v	OUT cable system retransmit the signals of any partially distant television stations during the accounting period?								
		Yes—Complete part 9 of this schedule.								
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE								
	Section 1		•							
		Enter the amount of gross receipts from space K (page 7) <b>§</b> 11,988,129.1	3							
	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.)	00							
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.								
	Ű	NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.								
		A. Enter 0.01064 of gross receipts								
		(the amount in section 1)	—							
		B. Enter 0.00701 of gross receipts								
		(the amount in section 1)▶ <u>\$ 84,036.79</u>								
		C. Subtract 1.000 from total DSEs								
		(the figure in section 2) and enter here								
		D. Multiply line B by line C and enter here	_							
		E. Add lines A, and D. This is your base rate fee. Enter here								
		and in block 3, line 1, space L (page 7)								
		Base Rate Fee	<u></u> l.							

#### DSE SCHEDULE. PAGE 17.

EGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
Michigan Bell Telephone Company	62981	
Section If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
A. Enter 0.01064 of gross receipts		8
(the amount in section 1)		
B. Enter 0.00701 of gross receipts		Computation
(the amount in section 1) <b>§</b>		of
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 S	0.00	
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broa nstead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple cha	•	•
Space G.		9
n General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate eccipts from subscribers located within the station's local service area, from your system's total gross receipts. To tak		Computation of
nis exclusion, you must:		Base Rate Fe
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are dista		and Syndicated
station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determ DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee		Exclusivity
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		Surcharge for
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt		Partially
must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A However, if your cable system is wholly located outside all major television markets, complete block A only.	and B below.	Distant Stations, and
How to Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
Step 1: For each community served, determine the local service area of each wholly distant and each partially distant	station you	Stations
carried to that community. <b>Step 2:</b> For each wholly distant and each partially distant station you carried, determine which of your subscribers wer	re located	
outside the station's local service area. A subscriber located outside the local service area of a station is distant to tha		
the same token, the station is distant to the subscriber.) <b>Step 3:</b> Divide your subscribers into subscriber groups according to the complement of stations to which they are dista	ant. Each	
subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Not		
system will have only one subscriber group when the distant stations it carried have local service areas that coincide.	oveto milo	
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your subscriber groups.	system s	
n each section:		
<ul> <li>Identify the communities/areas represented by each subscriber group.</li> <li>Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to</li> </ul>	o all of the	
subscribers in the group.		
• If:		
<ol> <li>your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave and 4 of this schedule; or,</li> </ol>	e it in parts 2, 3,	
<ol> <li>any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it part 6 of this schedule.</li> </ol>	in block B,	
Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
<ul> <li>Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the gene</li> </ul>	ral instructions	
in the paper SA3 form.		
<ul> <li>Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not actual calculations on the form.</li> </ul>	(that is, the total	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYS	STEN
	Michigan Bell Telephone Company	62
	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.	

FORM SA3E. PAGE	19.
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LEGAL NAME OF OWNER OF CABLE SYSTEM:       SYSTEM ID#         Michigan Bell Telephone Company       62981							Name	
BL				TE FEES FOR EACH	SUBSCR	IBER GROUP		
FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP							9	
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	CALL SIGN DSE CALL SIGN DSE			
								of Base Rate Fee
						-		and
								Syndicated Exclusivity
		-						Surcharge
		-						for
						-		Partially Distant
								Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	<u>\$</u> 11,988,	129.13	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU			FOURTH	SUBSCRIBER GROUI	> 0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs	1	······	0.00	
Gross Receipts Third Group \$ 0.00			0.00	Gross Receipts Fourth	n Group	\$	0.00	
					-			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	I Group	\$	0.00	
			iber group	as shown in the boxes a	bove.	¢	0.00	
Enter here and in block	3, iine 1, s	space L (page /)				۵	0.00	

FORM S	SA3E.	PAGE	19.
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LEGAL NAME OF OWNE Michigan Bell Tele						S	YSTEM ID# 62981	Name
B				TE FEES FOR EAC				
	FIFTH	SUBSCRIBER GROU				I SUBSCRIBER GRO		9
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA 0			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						n <b>-</b>		and Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
						n <b>-</b> 1		Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GROU	JP		EIGHTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						+		
						•		
Total DSEs			0.00	Total DSEs			0.00	
		0.00	Gross Receipts Four	rth Group	\$	0.00		
	Joup	\$	5.00		an Group	4	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	s above.	\$		
						L		

LEGAL NAME OF OWN Michigan Bell Tel			•			S	62981	Name
E				TE FEES FOR EAC				
FIRST SUBSCRIBER GROUP     SECOND SUBSCRIBER GROUP       COMMUNITY/ AREA     0						0 0	9	
				A		U	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						n <mark>-</mark>		and Syndicated
		-				n <mark>-</mark>		Exclusivity
		-						Surcharge
								for
		-						Partially
						n <mark>-</mark>		Distant Stations
		-						otations
Total DSEs		11	0.00				0.00	
Gross Receipts First (	Froup	\$ 11,988	,129.13	Total DSEs Gross Receipts Sec	and Group	\$	0.00	
	Sloup	÷ 11,000	,120.10			<u>•</u>	0.00	
Base Rate Fee First C	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						n <mark>-</mark>		
						••••••••••••••••••••••••••••••••••••••		
		-						
		-						
Total 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	
Base Rate Fee: Add t Enter here and in bloc			riber group	as shown in the boxe	s above.	\$	0.00	
	0, 1110 1, 1	-F 200 - (bago ()				-	0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM:     SYSTEM ID#       Michigan Bell Telephone Company     62981							Name	
BL				TE FEES FOR EACH				
FIFTH SUBSCRIBER GROUP				SIXTH SUBSCRIBER GROUP			Р	9
COMMUNITY/ AREA 0			COMMUNITY/ AREA 0			-		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatior of
CALL SIGN	DGL	CALL SIGN	DSL	CALL SIGN	DGL	CALL SIGN	DGL	Base Rate Fe
								and
								Syndicated
								Exclusivity
						-		Surcharge
								for Partially
						-		Distant
								Stations
						-		
Total DSEs			0.00	Total DSEs	-		0.00	
Gross Receipts First G	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	SEVENTH	SUBSCRIBER GROU				SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
		-						
						-		
						-		
Total DSEs	1		0.00	Total DSEs		11	0.00	
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group \$ 0.00			0.00	
Base Rate Fee Third Group		\$	0.00	Base Rate Fee Fourth Group		\$ 0.00		
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	above.	\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Michigan Bell Telephone Company	SYSTEM ID# 62981							
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER (								
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:								
Computation of	☐ First 50 major television market ☐ Second 50 major tel	levision market							
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	<ul> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> <li>Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</li> </ul>								
	FIRST SUBSCRIBER GROUP SE	ECOND SUBSCRIBER GROUP							
	Line 1: Enter the VHF DSEs								
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surchargeLine 3: Subtract line and enter h total number total number this subscriber group subject to the subject to the	ere. This is the er of DSEs for							
	SYNDICATED EXCLUSIVITY       SYNDICATED EXC         SURCHARGE       First Group         First Group       \$	up							
	THIRD SUBSCRIBER GROUP FC	FOURTH SUBSCRIBER GROUP							
	total number of DSEs for       total number         this subscriber group       this subscriber         subject to the surcharge       subject to the         computation       -         SYNDICATED EXCLUSIVITY       SYNDICATED EXCLUSIVITY         SURCHARGE       SURCHARGE	xempt DSEs e 2 from line 1 iere. This is the er of DSEs for ber group he surcharge n							
	SURCHARGE Third Group								

N	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#						
Name	Michigan Bell Telephone Company	62981						
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP							
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:							
Computation of	First 50 major television market	Second 50 major television market						
Base Rate Fee	INSTRUCTIONS:							
and Syndicated Exclusivity Surcharge for Partially Distant Stations	<ul> <li>Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> <li>Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</li> </ul>							
	FIFTH SUBSCRIBER GROUP	SIXTH SUBSCRIBER GROUP						
		SIATH SUBSCRIDER GROUP						
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs						
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs						
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation						
	SURCHARGE First Group	SURCHARGE Second Group						
	SEVENTH SUBSCRIBER GROUP	EIGHTH SUBSCRIBER GROUP						
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total enumber of DSEs for						
	total number of DSEs for this subscriber group subject to the surcharge computation	total number of DSEs for this subscriber group subject to the surcharge computation						
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group						
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown In the boxes above. Enter here and in block 4, line 2 of space L (page 7)							