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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

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

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting	2018/2				
Period					
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a 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 accounted. 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 unting period.	em. he accounting period should st		62832
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM				
	Michigan Bell Telephone Company				
				62832	220182
				62832	2018/2
	1010 N. St. Mary's Street, Room 13-59-B				
	San Antonio, TX 78215-2109				
•	INSTRUCTIONS: In line 1, give any business or trade names used to i	dentify the busine	ess and operation of the sys	stem unless	s these
С	names already appear in space B. In line 2, give the mailing address o	f the system, if dif	ferent from the address given	en in space	e 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)				
	(Gity, town, state, zip code)				
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst com	munity served below and r	elist on pag	je 1b
Area	with all communities.	Γ.			
Served	CITY OR TOWN	STATE			
First Community	Detroit	MI			
Community	Below is a sample for reporting communities if you report multiple ch			OLID	000"
	CITY OR TOWN (SAMPLE) Alda	STATE MD	CH LINE UP A		GRP#
Sample	Alliance	MD	В		2
	Gering	MD	В		3

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the 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.

FORM SA3E. PAGE 1b. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 62832 Michigan 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 of system identification hereafter known as the "first community." Please use it as the first community on all future filings.

Area 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#
Detroit	MI	AA	
Addison Township	MI	AA	
Algonac	MI	AA	
Allen Park	MI	AA	
Ann Arbor	MI	AA	
Ann Arbor Township	MI	AA	
Ash Township	MI	AA	
Attica Township	MI	AA	
Auburn Hills	MI	AA	
Augusta Township	MI	AA	
Barton Hills	MI	AA	
Belleville	MI	AA	
Berkley	MI	AA	
Berlin Township	MI	AA	
Beverly Hills	MI	AA	
Bingham Farms	MI	AA	
Birmingham	MI	AA	
Bloomfield Hills	MI	AA	
Bloomfield Township	MI	AA	
Brandon Township	MI	AA	
Brighton	MI	AA	
Brighton Township	MI	AA	
Brownstown Township	MI	AA	
Bruce Township	MI	AA	
Burtchville Township	MI	AA	
Canton Township	Mi	AA	
Carleton	MI	AA	
Center Line	Mi	AA	
Chesterfield Township	MI	AA	
China Township	MI	AA	
Clawson	MI	AA	
Clay Township	MI	AA	
Clinton Township	MI	AA	
Clyde Township	MI	AA	
Cohoctah Township	MI	AA	
Commerce Township	MI	AA	
Dearborn	MI	AA	
Dearborn Heights	MI	AA	
Deerfield Township	MI	AA	

First Community

See instructions for additional information on alphabetization.

Dexter	MI	Λ Λ	
	MI	AA	
Dexter Township	MI	AA	
East China Township	MI	AA	
Eastpointe	MI	AA	
Ecorse	MI	AA	
Elba Township	MI	AA	
Farmington	MI	AA	
Farmington Hills	MI	AA	
Ferndale	MI	AA	
Flat Rock	MI	AA	
Fort Gratiot Township	MI	AA	
Franklin	MI	AA	
Fraser	MI	AA	
Frenchtown Township	MI	AA	
		AA	
Garden City	MI		
Genoa Township	MI	AA	
Gibraltar	MI	AA	
Green Oak Township	MI	AA	
Grosse lle Township	MI	AA	
Grosse Pointe	MI	AA	
Grosse Pointe Farms	MI	AA	
Grosse Pointe Park	MI	AA	
Grosse Pointe Shores	MI	AA	
Grosse Pointe Woods	MI	AA	
Groveland Township	MI	AA	
Hadley Township	MI	AA	
Hamburg Township	MI	AA	
Harper Woods	MI	AA	
Harrison Township	MI	AA	
Hartland Township	MI	AA	
Hazel Park	MI	AA	
Highland Park	MI	AA	
Holly	MI	AA	
Holly Township	MI	AA	
Howell	MI	AA	
Howell Township	MI	AA	
Huntington Woods	MI	AA	
Huron Township	MI	AA	
Independence Township	MI	AA	
Inkster	MI	AA	
Ira Township	MI	AA	
Keego Harbor	MI	AA	
Kimball Township	MI	AA	
La Salle Township	MI	AA	
Lake Angelus	MI	AA	
Lake Orion	MI	AA	
Lapeer	MI	AA	
Lathrup Village	MI	AA	
Lenox Township	MI	AA	
Leonard	MI	AA	
Lima Township	MI	AA	
Lincoln Park	MI	AA	
Livonia	MI	AA	
Lodi Township	MI	AA	
Lyon Township	MI	AA	
Macomb Township Macomb Unincorporated County	MI	AA	
	MI	AA	

Add rows as necessary.

Madison Heights	MI	AA	
Marion Township	MI	AA	
Marysville	MI	AA	
Mayfield Township	MI	AA	
Melvindale	MI	AA	
Metamora Township	MI	AA	
Milford Township	MI	AA	
	MI	AA	
Monroe			
Monroe Township	MI	AA	
Mount Clemens	MI	AA	
New Baltimore	MI	AA	
New Haven	MI	AA	
Northfield Township	Mi	AA	
Northville	MI	AA	
Northville Township	MI	AA	
Novi		AA AA	
	MI		
Novi Township	MI	AA	
Oak Park	MI	AA	
Oakland Township	MI	AA	
Oceola Township	MI	AA	
Orchard Lake Village	MI	AA	
Orion Township	MI	AA	
Oxford	MI	AA	
Oxford Township	MI	AA	
Pittsfield Township	MI	AA	
Pleasant Ridge	MI	AA	
Plymouth	MI	AA	
Plymouth Township	MI	AA	
Pontiac	MI	AA	
Port Huron	MI	AA	
	MI	AA	
Port Huron Township			
Putnam Township	MI	AA	
Raisinville Township	MI	AA	
Ray Township	MI	AA	
Redford Township	MI	AA	
River Rouge	MI	AA	
Riverview	MI	AA	
Rochester	MI	AA	
Rochester Hills	MI	AA	
Romeo	MI	AA	
Romulus	MI	AA	
Rose Township	MI	AA	
Roseville	MI	AA	
Royal Oak	MI	AA	
Royal Oak Township	MI	AA	
Saint Clair	MI	AA	
Saint Clair Shores	MI	AA	
Saint Clair Township	MI	AA	
Salem Township	MI	AA	
Scio Township	MI	AA	
Shelby Township	MI	AA	
South Lyon	MI	AA	
Southfield		AA AA	
	MI		
Southfield Township	MI	AA	
Southgate	MI	AA	
Springfield Township	MI	AA	
Sterling Heights	MI	AA	

Sumptor Township	MI	AA	
Sumpter Township		AA AA	
Superior Township	MI		
Sylvan Lake	MI	AA	
Taylor	MI	AA	
Trenton	MI	AA	
Troy	MI	AA	
Utica	MI	AA	
Van Buren Township	MI	AA	
Village Of Clarkston	MI	AA	
Walled Lake		AA	
	MI		
Warren	MI	AA	
Washington Township	MI	AA	
Washtenaw Unincorporated County	MI	AA	
Waterford Township	MI	AA	
Wayne	MI	AA	
Wayne Unincorporated County Webster Township	MI	AA	
Wehster Township	MI	AA	
West Bloomfield Township	MI	AA	
Westland	MI	AA	
Mais Laka Taurahia			
White Lake Township	MI	AA	
Wixom	MI	AA	
Wolverine Lake	MI	AA	
Woodhaven	MI	AA	
Wyandotte	MI	AA	
York Township	MI	AA	
Ypsilanti Ypsilanti Township	MI	AA	
Vasilanti Tawashia	MI	AA	

Name

Legal Name of Owner of Cable System:

Michigan Bell Telephone Company

System ID#

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.

BLOCK 1				BLOCK 2			
	NO. OF				NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS		RATE	CATEGORY OF SERVICE	SUBSCRIBERS		RATE
Residential:							
 Service to first set 	169,468	\$	19.00	HD Tech Fee	129,455	\$	10.00
 Service to additional set(s) 				Set-Top Box	170,251		\$0-\$15
 FM radio (if separate rate) 				Broadcast TV Surcharge	169,468	\$4.	99-\$5.99
Motel, hotel							
Commercial	783	\$	20.00				
Converter							
Residential							
Non-residential		,					
		†					

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 1					
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	\$7	
Additional set(s)		Other services:		DVR Upgrade Fee	\$50	
 FM radio (if separate rate) 		Reconnect	\$0-\$35	Vacation Hold	\$ 7.00	
 Converter 		Disconnect				
		 Outlet relocation 	\$0-\$55			
		 Move to new address 				

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM Name 62832 Michigan Bell Telephone Company PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if th∈ station was carried only on a substitute basis List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identifi each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-simulcast) Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL CARRIAGE SIGN OF (Yes or No) NUMBER **STATION** (If Distant) **CBET/CBETHD** 9/1009 I No Windsor, Ontario WADL/WADLHD 38/1038 No Mount Clemens, MI I See instructions for additional information WDIV/WDIVHD 4/1002 Ν No Detroit, MI on alphabetization. WJBK/WJBKHD 2/1000 I No Detroit, MI WKBD/WKBDHD 50/1050 ı No Detroit, MI WMYD/WMYDHD 20/1020 I No Detroit, MI WPXD/WPXDHD 31/1031 No Ann Arbor, MI ı WTVS/WTVSHD 56/1056 Ε No Detroit, MI Ν WWJ/WWJHD 62/1062 No Detroit, MI WXYZ/WXYZHD 7/1007 Ν No Detroit, MI

FORM SA3E. PAGE		YOTEN.				
	wner of Cable SY I I Telephone C				SYSTEM ID# 62832	Name
					02002	
carried by your cab FCC rules and regu 76.59(d)(2) and (4), substitute program Substitute Basi basis under specifc • Do not list the stat station was carri • List the station her basis. For furthe in the paper SA3 Column 1: List e each multicast streac cast stream as "WE WETA-simulcast). Column 2: Give its community of lice on which your cable Column 3: Indice ducational station, (for independent mu For the meaning of	te G, identify ever le system during to lations in effect on 76.61(e)(2) and lobasis, as explaines Stations: With FCC rules, regulation here in space ed only on a substre, and also in spar information conditions. The station's call am associated with TA-2". Simulcast the channel numberse. For example system carried to attend the case by entering the faulticast), "E" (for in these terms, see	by television sy the accounting of the account of the accounting o	g period except 981, permitting to 76.6 paragraph y distant station horizations: st it in space I (the ation was carried itute basis station to be reported in the assigned to hannel 4 in Wasi station is a network), "N-M" all educational), one general instructs 1981, permitted in the station is a network), "N-M" all educational), one general instructs 1981, permitted to 1981, and 1981	(1) stations carrie he carriage of cer 51(e)(2) and (4))]; s carried by your he Special Statemed both on a substans, see page (v) on program service ver-the-air designation of the television statington, D.C. This ork station, an indefor network multiper "E-M" (for noncertions located in second carried and second car	s and low power television stations) ad only on a part-time basis under tain network programs [sections and (2) certain stations carried on a cable system on a substitute program ment and Program Log)—if the ditute basis and also on some othe of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi sch stream separately; for example tion for broadcasting over-the-air in a may be different from the channe dependent station, or a noncommercia cast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form fes". If not, enter "No". For an ex	G Primary Transmitters: Television
cable system carried the distant surface For the retransm of a written agreem the cable system artion "E" (exempt). Fexplanation of these Column 6: Give	I have entered "Y d the distant stati- tation on a part-ti- ission of a distan- ent entered into on d a primary trans- or simulcasts, alse three categories the location of ea	Yes" in columny on during the me basis bect multicast strong or before Jemitter or an actor enter "E". If a, see page (vach station. For an actor of the station.	n'A, you must co accounting peri- cause of lack of a eam that is not a une 30, 2009, but association repre- f you carried the and the general or U.S. stations,	emplete column 5, iod. Indicate by er activated channel subject to a royalf etween a cable syesenting the prima channel on any constructions locat list the community.	stating the basis on which you ntering "LAC" if your cable syster capacity by payment because it is the subject stem or an association representing transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form by to which the station is licensed by the	
FCC. For Mexican on Note: If you are utile		nnel line-ups	, use a separate	space G for each	th which the station is identifec n channel line-up.	
	o BIOAGT		EL LINE-UP		a LOCATION OF STATION	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Michigan Bell Telephone Company 62832 PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

FURINI SAJE. PAGE 5.						ACCOUNTING	PERIOD: 2018/2
LEGAL NAME OF OWNER OF Michigan Bell Telepho					5	62832	Name
SUBSTITUTE CARRIAGI In General: In space I, ident substitute basis during the ar explanation of the programm	ify every non	nnetwork televiseriod, under spe	sion program broadcast by a ecific present and former FC	a distant stati CC rules, regu	lations, or authorizations.	For a further	I
form.							Substitute Carriage:
1. SPECIAL STATEMENT	_		-				Special
 During the accounting per broadcast by a distant star 	-	ır cable system	n carry, on a substitute bas	is, any nonn	etwork television prograi		Statement and
Note: If your answer is "No		rest of this pag	ge blank. If your answer is	"Yes," you m			Program Log
log in block 2.				. ,			
2. LOG OF SUBSTITUTE			ata lina. Usa abbraviations	whorever no	esible if their meaning i	•	
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love I Column 2: If the prograr Column 3: Give the call Column 4: Give the broathe case of Mexican or Car Column 5: Give the morfirst. Example: for May 7 gives to the nearest five minutes. stated as "6:00–6:30 p.m." Column 7: Enter the letted delete under FCC rules a gram was substituted for present information."	oce, please of every no distant stat gulations, oction. Do no ucucy" or "NE no was broad sign of the sadcast static atth and day we "5/7." es when the Example: a er "R" if the and regulation ogramming	attach addition nnetwork televicion and that your authorization of the use general of the BA Basketball: deast live, enter station broadca on's location (the use of the use of	al pages. rision program (substitute pour cable system substitute is. See page (vi) of the gercategories like "movies", o 76ers vs. Bulls." or "Yes." Otherwise enter "I asting the substitute programe community to which the community with which the stem carried the substitute or gram was carried by your lied by a system from 6:01:	orogram) that ed for the pro- neral instruct r "basketball" No." am. station is lic station is ide program. Us cable systen 15 p.m. to 6: amming that d; enter the le	t, during the accounting gramming of another stations located in the paper. List specific program ensed by the FCC or, in entified). e numerals, with the mon. List the times accurate 28:30 p.m. should be your system was require etter "P" if the listed pro	ation - nth	
effect on October 19, 1976.							
9	I IRSTITI IT	E PROGRAM	ı		EN SUBSTITUTE HAGE OCCURRED	7. REASON	
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	FOR DELETION	
					_		
						"	
						"	
						"	
					<u> </u>		
					<u> </u>		
						"	
							i

ACCOUNTING PERIOD: 2018/2 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Michigan Bell Telephone Company 62832 PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-J time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation 'app." Example: "12:30 a.m.– 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.– 12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN** HOURS HOURS DATE FROM TO DATE FROM TO

LEGA	L NAME OF OWNER OF CABLE SYSTEM: higan Bell Telephone Company	SYSTEM ID 6283	Nome
Inst all a (as i page	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amoun mounts (gross receipts) paid to your cable system by subscribers for the system's sect dentifed in space E) during the accounting period. For a further explanation of how to be (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	ondary transmission service	K Gross Receipts
Instru Con Con If yo fee t	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: aplete block 1, showing your minimum fee. applete block 2, showing whether your system carried any distant television stations. For any distant television stations, leave block 3 blank. Enter the arrow block 1 on line 1 of block 4, and calculate the total royalty fee. For any distant television stations, you must complete the applicable propanying this form and attach the schedule to your statement of account. It 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be the 3 below.	arts of the DSE Schedule	L Copyright Royalty Fee
3 be ▶ If pa 2 in	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low. rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoblock 4 below. MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more	ould be entered on line	
	least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here. This is your minimum fee.		
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 period Yes—Complete the DSE schedule.	mn 4, you must 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 Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE	\$ -	
	schedule. If none, enter zero Line 3. Add lines 1 and 2 and enter		
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente		Cable systems submitting additional
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	deposits under Section 111(d)(7) should contact the Licensing
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.	\$ 725.00	additional fees. Division for the appropriate
	Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 614,261.49 See page (i) of the	form for submitting the additional fees.

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

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYST	EM ID#
Name		62832
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	
	Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	
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 Diane Bellinger Telephone 210-351-4805	,
	Address 1010 N. St. Mary's Street, Room 13-59-B (Number, street, rural route, apartment, or suite number)	
	San Antonio, TX 78215 (City, town, state, zip)	
	Email dg7796@att.com Fax (optional) 210-246-8199	ı
•	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)	
O Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable 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/ Robert LaGrone	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the 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: Robert LaGrone	
	Title: Vice President – Finance (Title of official position held in corporation or partnership)	ı
	Date: February 22, 2019	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Mana			
Michigan Bell Telephone Company	62832	Name			
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.					
During the accounting period did the cable system exclude any amounts of gross receipts for secondary trans made by satellite carriers to satellite dish owners?	missions				
X NO					
YES. Enter the total here and list the satellite carrier(s) below					
Name Mailing Address Name Mailing Address					
INTEREST ASSESSMENTS					
You must complete this worksheet for those royalty payments submitted as a result of a late payment or unde For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	rpayment.	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	- days				
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)	_				
	est charge)				
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistar contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	nce 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 Offor please list below the owner, address, first community served, accounting period, and ID number as given in the 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 Office to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

SCHEDULE

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

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.

Distant Stations Corried

- 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.
- 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					
	Fairvale					
Rapid City	Bodega Bay					
Stations B, D, and E 35 mile zone						

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

Islandification of Outropillar Outrop

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

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

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)

DSE SCHEDULE. PAG	1											
4	LEGAL NAME OF OWNER OF CABL		SYSTEM ID# 62832									
ı	Michigan Bell Telephone Company											
	SUM OF DSEs OF CATEGOR		NC.									
	Add the DSEs of each station											
	Enter the sum here and in line		0.00									
•	Instructions:											
2	In the column headed "Call	Sign": list the ca	all signs of all distant station	ons identified by th	e letter "O" in column 5							
•	of space G (page 3).	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				ose as 1.0; for e	ach network of noncom-							
	mercial educational station, give the DSE as ".25." CATEGORY "O" STATIONS: DSEs											
Category "O"	CALL CION	DOE			CALL CION	DOE						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
Add rows as												
necessary.												
Remember to copy												
all formula into new												
rows.												

Nome	LEGAL NAME OF C	OWNER OF CABLE SYSTEM:						5	SYSTEM ID#
Name	Michigan Be	II Telephone Compa	ny						62832
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	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 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.								
Capacity		C	CATEGORY L	_AC STATIONS:	COMPUTAT	ION OF D	SEs	1	
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	JRS ED BY M	B. NUMBER OF HOURS STATION ON AIR	4. BASIS O CARRIAC VALUE		5. TYPE VALUE	6. DS	SE
			÷ ÷			X		<u>-</u>	
						X			
			÷		=	X		=	
			÷		=	Х		=	
			÷			Х	•••••		
			÷			x		<u>_</u>	
	Add the DSEs	s OF CATEGORY LAC S of each station. Im here and in line 2 of p		edule,			0.00		
Computation of DSEs for Substitute-Basis Stations	Column 1: Giv • Was carried tions in effe • Broadcast o space I). Column 2: at your option. Column 3: Column 4:	te the call sign of each stands of the call sign of each stands of the call of the call sign of the call sin	itution for a prog (as shown by the ork programs du number of live, spond with the ir is in the calendar in 2 by the figur (For more inforr	gram that your system e letter "P" in column ring that optional carr nonnetwork program nformation in space I year: 365, except in e in column 3, and gi mation on rounding, s	n was permitted 7 of space 1); an iage (as shown b as carried in subs a leap year. ve the result in c see page (viii) of	to delete und of the word "Ye stitution for proceedings of the general in the delete under the general in the g	ler FCC rules es" in column 2 rograms that v und to no less nstructions in	of were deleted than the third	rm).
	1		IBSTITUTE-E	BASIS STATION		ATION OF	DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBEI OF DAYS IN YEAR	8	1. CALL SIGN	2. NUN OF PRO	MBER DGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
				=			÷		
		÷ ÷	-	=			÷		
			-	=			-		=
		÷		=			÷		=
	Add the DSEs	s OF SUBSTITUTE-BAS of each station. um here and in line 3 of p	IS STATIONS:	edule,			0.00		-
5		ER OF DSEs: Give the am s applicable to your systen		oxes in parts 2, 3, and	4 of this schedul	le and add the	em to provide t	he total	
Total Number	1. Number o	f DSEs from part 2 ●				- _		0.00	
of DSEs	2. Number o	f DSEs from part 3 ●				<u> </u>		0.00	
	3. Number o	f DSEs from part 4 ●				>	г	0.00	
	TOTAL NUMBE	R OF DSEs					<u> </u>		0.00

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

	OWNER OF CABLES Telephone Co						S	YSTEM ID# 62832	Name
n block A:	ck A must be comp		art 6 and part 3	of the DSF sched	lule blank and	d complete part	: 8. (page 16) of the	e	6
schedule.		•	·	of the DOL scried	idie blank and	a complete part	o, (page 10) of the		•
If your answer if	"No," complete blo			ΓELEVISION ΜΑ	ARKFTS				Computation of
effect on June 24, Yes—Com	m located wholly or , 1981? nplete part 8 of the plete blocks B and	utside of all m	najor and smal	ler markets as defii	ned under se		CC rules and regul	ations in	3.75 Fee
			CK B: CARF	RIAGE OF PERM	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulatio e DSE Sched	ns prior to Jun Iule. (Note: Th	part 2, 3, and 4 of t e 25, 1981. For fur e letter M below re Act of 2010.)	ther explanat	tion of permitte	d stations, see the		
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerica D Grandfathered instructions fo E Carried pursua *F A station previous	les and reguled pursuant to on as defined al educationa I station (76.6 r DSE schedu ant to individu viously carried HF station wi	ations cited be the FCC man in 76.5(kk) (74 I station [76.59;5) (see paragule). all waiver of F6 d on a part-tim thin grade-B c	e or substitute bas ontour, [76.59(d)(5	e in effect on .57, 76.59(b))(1), 76.63(a) 3(a) referring stitution of gr	June 24, 1981, 76.61(b)(c), 7 referring to 76 to 76.61(d)] andfathered sta	6.63(a) referring to		
Column 3:	*(Note: For those this schedule to d	e stations ider determine the	ntified by the le	parts 2, 3, and 4 o	2, you must c	omplete the wo	. J		
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	
		Е	BLOCK C: CC	MPUTATION OF	3.75 FEE				
ine 1: Enter the	e total number of	DSEs from լ	part 5 of this	schedule			ur-	-	
ine 2: Enter the	e sum of permitted	d DSEs from	n block B abo	ve					
	line 2 from line 1 leave lines 4–7 bl			,		rate.		0.00	
ine 4: Enter gro	oss receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represen partially
ine 5: Multiply I	line 4 by 0.0375 a	and enter su	m here				x		permited/ partially nonpermitted
ine 6: Enter tot	al number of DSE	Es from line	3					<u>-</u>	carriage? If yes, see part 9 instructions.
ine 7: Multiply I	line 6 by line 5 an	d enter here	e and on line	2, block 3, space	L (page 7)			0.00	

	WNER OF CABLE Telephone Co						S	YSTEM ID# 62832	NI
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	IUED)			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
 									Computation of 3.75 Fee

ACCOUNTING PERIOD: 2018/2

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Michigan Bell Telephone Company 62832 Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B. part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Computating 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. the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B-Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN DSE **PERIOD** CARRIAGE DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. of the Syndicated **BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? X Yes—Complete blocks B and C . No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer or in part, over the cable system? to former FCC rule 76.159) Yes-List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. No—Enter zero and proceed to part 8. CALL SIGN CALL SIGN CALL SIGN DSE DSE DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Michigan Bell Telephone Company 62832	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE	
Section 1	Enter the amount of gross receipts from space K (page 7)	7
Section 2	A. Enter the total DSEs from block B of part 7	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	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	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defned 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 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 0.00377 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.	
Castion		
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.	
	SECTION 4: SECOND 50 TELEVISION MARKET	
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Tes—Complete part 9 of this schedule.	
	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 DSE 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)	
	B. Enter 0.00189 of gross receipts (the amount in section 1)	
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here	
	D. Multiply line B by line C and enter here	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge	

Name	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	ı	Michigan Bell Telephone Company	62832
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		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$	
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$	
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ \$	
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here	
		F. Multiply line D by line E and enter here	
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)	
		Syndicated Exclusivity Surcharge	<u></u>
	Instru	ctions:	
8		ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of p checked "Yes," use the total number of DSEs from part 5.	part
		ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation of	_	ır answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ır answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B be	elow
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 "lo e area," see page (v) of the general instructions.	cai
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		Yes—Complete part 9 of this schedule. X No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ _ \$ 57,663,204	.35_
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	0.00
	Section		
	3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts (the amount in section 1)	<u>-</u>
		B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ _ \$ 404,219.06	
		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 ▶ \$	<u>-</u>
		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	-
		- μ	<u></u> .

		3 PERIOD: 2018/2
	IAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name
Michi	gan Bell Telephone Company 62832	
Section	If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.	
4	A. Enter 0.01064 of gross receipts	8
	(the amount in section 1)	
	B. Enter 0.00701 of gross receipts (the amount in section 1) \$\bigseleft\{\bigseleft\} \bigseleft\{\bigseleft\} \bigsel	Computation of
	(the amount in section 1)	Base Rate Fee
	C. Multiply line B by 3.000 and enter here \$	
	D. Enter 0.00330 of gross receipts	
	(the amount in section 1) > _	
	E. Subtract 4.000 from total DSEs	
	(the figure in section 2) and enter here	
	F. Multiply line D by line E and enter here >	
	G. Add lines A, C, and F. This is your base rate fee	
	Enter here and in block 3, line 1, space L (page 7	
	Base Rate Fee S 0.00	
IMPOR		
	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals istead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-	
	Space G.	9
	neral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of	of
	clusion, you must: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	Base Rate Fee
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number	and Syndicated
of DSE group.	s and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each	Exclusivity
	r: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge
_	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you	for Partially
must a	Iso compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. Ver, if your cable system is wholly located outside all major television markets, complete block A only.	Distant Stations, and
How to	o Identify a Subscriber Group for Partially Distant Stations	for Partially Permitted
·	: For each community served, determine the local service area of each wholly distant and each partially distant station you	Stations
	to that community.	
outside	: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by ne token, the station is distant to the subscriber.)	
Step 3	: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each	
	iber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
_	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's iber groups.	
In each	n section:	
• Identi	ify the communities/areas represented by each subscriber group.	
	the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the ibers in the group.	
• If:		
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, of this schedule; or,	
, -	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, to of this schedule.	
• Add t	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	ulate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions e paper SA3 form.	
page. DSEs	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show ctual calculations on the form.	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62832 Michigan 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.

LEGAL NAME OF OWNER Michigan Bell Tele							YSTEM ID# 62832	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
	FIRST	SUBSCRIBER GROU	<u>P</u>		SECOND	SUBSCRIBER GROU	Р	9
COMMUNITY/ AREA 0				COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGIV	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGIV	DOL	Base Rate F
								and
		-						Syndicate
								Exclusivit
		=				_		Surcharge
		_						for
		-						Partially
								Distant Stations
		-						Otations
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	s 57,663	,204.35	Gross Receipts Secon	d Group	\$	0.00	
ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	Р		FOURTH	SUBSCRIBER GROU	Р	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		=						
						_		
		-						
		=				=		
		-				_		
		-						
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th	e base rat e	e fees for each subser	iber aroup s	as shown in the boxes at	ove.			
nter here and in block			group t	e chemi in ale boxes di		\$	0.00	

	H SUBSCRIBER GRO		COMMUNITY/ AREA	SIXTH	SUBSCRIBER GRO	UP 0	9
COMMUNITY/ AREA		0	COMMUNITY/ AREA		- COBCONIDENCE ON CONTROL		9
	CALL SIGN						
CALL SIGN DSE	CALL SIGN	DSE					Computation
			CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate F
							and
							Syndicate
							Exclusivit
							Surcharg
							for
							Partially
							Distant
							Stations
otal DSEs		0.00	Total DSEs	•		0.00	
	-					-	
ross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Sase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
naco rato roo riiot Group		0.00	2000 Mato 1 00 3333	ла отоар	Ψ	0.00	
SEVENT	H SUBSCRIBER GRO	DUP		EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	١		0	
and the state of t							
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					-		
	T						
					-		
	T						
	···						
	-H						
	···						
	_11	0.00	Total DSEs		L	0.00	
otal DSEs							
otal DSEs		0.00	Gross Receipts Four	th Group	\$	0.00	
otal DSEs Gross Receipts Third Group	\$	<u> </u>					
	\$	0.00					
	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	

LEGAL NAME OF OWNER Michigan Bell Tele				initioa 5.70 Gtat		S	YSTEM ID# 62832	Name
В				TE FEES FOR EACH				
FIRST SUBSCRIBER GROUP COMMUNITY/ AREA 0				SECOND SUBSCRIBER GROUP COMMUNITY/ AREA				9 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	s 57,663,		Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Group \$ 0.00				Base Rate Fee Second Group \$ 0.00				
	THIRD	SUBSCRIBER GROU						
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						 		
		H			······································	 		
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the			iber group a	as shown in the boxes a	oove.		0.00	
Enter here and in block	ತ, line 1, s	pace L (page 7)				\$	0.00	

LEGAL NAME OF OWNER Michigan Bell Tele				initiou 0.70 Otal		S	YSTEM ID# 62832	Name
В				TE FEES FOR EACH				
FIFTH SUBSCRIBER GROUP					SIXTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
		-						for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	nun	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
oross receipts i list on	oup	•	0.00	Gross Receipts decon	a Oroup	Ψ	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
SEVENTH SUBSCRIBER GROUP				EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes at	oove.	\$		

FORM SA3E, PAGE 20.

Nome	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#							
Name	Michigan Bell Telephone Company	62832							
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP							
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma 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 and Syndicated	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as								
Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were of Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not your actual calculations on this form.									
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP							
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	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	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	subject to the surcharge computation							
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	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	computation							
	Third Group	Fourth Group							
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page								

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	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID:									
Name	Michigan Bell Telephone Company 62832									
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP									
Computation of Base Rate Fee and Syndicated	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market									
Exclusivity Surcharge	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.									
for Partially Distant Stations	 Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. 									
	FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP									
	Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs									
	Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt 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									
	First 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation									
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group									
	SYNDICATED EXCLUSIVITY SURCHARGE: 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)									