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

### SA3E Long Form

### STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

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

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCC	OUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting Period	20	019/2				
B Owner	rate title Lis If t a single	tions:  //e the full legal name of the owner of the cable system. If the owner is e of the subsidiary, not that of the parent corporation t any other name or names under which the owner conducts the busine there were different owners during the accounting period, only the owner e statement of account and royalty fee payment covering the entire account check here if this is the system's first filing. If not, enter the system's ID L NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM cellSouth Telecommunications, LLC	ess of the cable system or on the last day of a counting perioa	em the accounting period should s		63029
					6302	920192
					63029	2019/2
		260 E Imperial Hwy Room 839 Segundo, CA 90245				
С		UCTIONS: In line 1, give any business or trade names used to i already appear in space B. In line 2, give the mailing address or				
System	1	ENTIFICATION OF CABLE SYSTEM:				
	МА	ILING ADDRESS OF CABLE SYSTEM:				
	2 (Nu	mber, street, rural route, apartment, or suite number)				
	(Cit	y, town, state, zip code)				
D	Instru	ctions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and re	list on page	e 1b
Area		communities.	T			
Served First		ry or town iami	STATE FL			
Community		w is a sample for reporting communities if you report multiple cha		pace G		
		ry or town (sample)	STATE	CH LINE UP	SUB	GRP#
Samula	Alda		MD	Α		1
Sample	Allianc	e	MD	В		2
	Gering		MD	В		3

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

Medley Miami Beach

Miami Lakes

Miami Gardens

ORM SA3E. PAGE 1b.				
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	
BellSouth Telecommunications, LLC			63029	
<b>Instructions:</b> List each separate community served by the cable system. A "community in FCC rules: "a separate and distinct community or municipal entity (including unincorporareas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The first of system identification hereafter known as the "first community." Please use it as the first	orated communitied to community that y	es within unincorp you list will serve a	orated	D Area Served
<b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile hom below the identified city or town.	e parks should be	e reported in pare	ntheses	
If all communities receive the same complement of television broadcast stations (i.e., on all communities with the channel line-up "A" in the appropriate column below or leave the on a partially distant or partially permitted basis in the DSE Schedule, associate each relational designated by a number (based on your reporting from Part 9).	e column blank. If levant community	you report any st with a subscriber	ations group,	
When reporting the carriage of television broadcast stations on a community-by-communichannel 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 grou			
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	
Miami	FL	AB	1	First
Aventura	FL	AE	6	Community
Bal Harbour	FL	AB	1	
Bay Harbor Islands	FL	AB	1	
Big Pine Key	FL	AC	4	
Biscayne Park	FL	AB	1	See instructions for
Broward Unincorporated County	FL	AA	1	additional information
Coconut Creek	FL 	AA	2	on alphabetization.
Cooper City	FL 	AA	1	
Coral Gables	FL 	AB	11	
Coral Springs	FL 	AA	2	
Cudjoe	FL 	AC	4	
Cutler Bay	FL 	AB	1	
Dania	FL =:	AA	2	
Davie	FL =:	AA	2	
Deerfield Beach	FL 	AA	3	
Doral	FL =:	AB	1	
El Portal	FL	AB	1	
Florida City	FL	AE AA	6	
Fort Lauderdale	FL	AA AB	2	
Golden Beach Hallandale Beach	FL	AB	2	
Hialeah	FL FL	AA AB	<u>2</u> 1	
Hialeah Gardens	FL	AB	1	
Hillsboro Beach	FL	AA	2	
Hollywood	FL	AA	2	
Homestead	FL	AB	2	
Islamorada*	FL	AC	4	
Key Biscayne	FL	AB	1	
Key Largo*	FL	AD	5	
Key West	FL	AC	4	
Lauderdale Lakes	FL	AA	2	
Lauderdale-By-The-Sea	FL	AA	2	
Lauderhill	FL	AA	2	
Lazy Lake	FL	AA	2	
Lighthouse Point	FL	AA	2	
Marathon*	FL	AC	4	
Margate	FL	AA	2	
Medley	FL	AB	1	

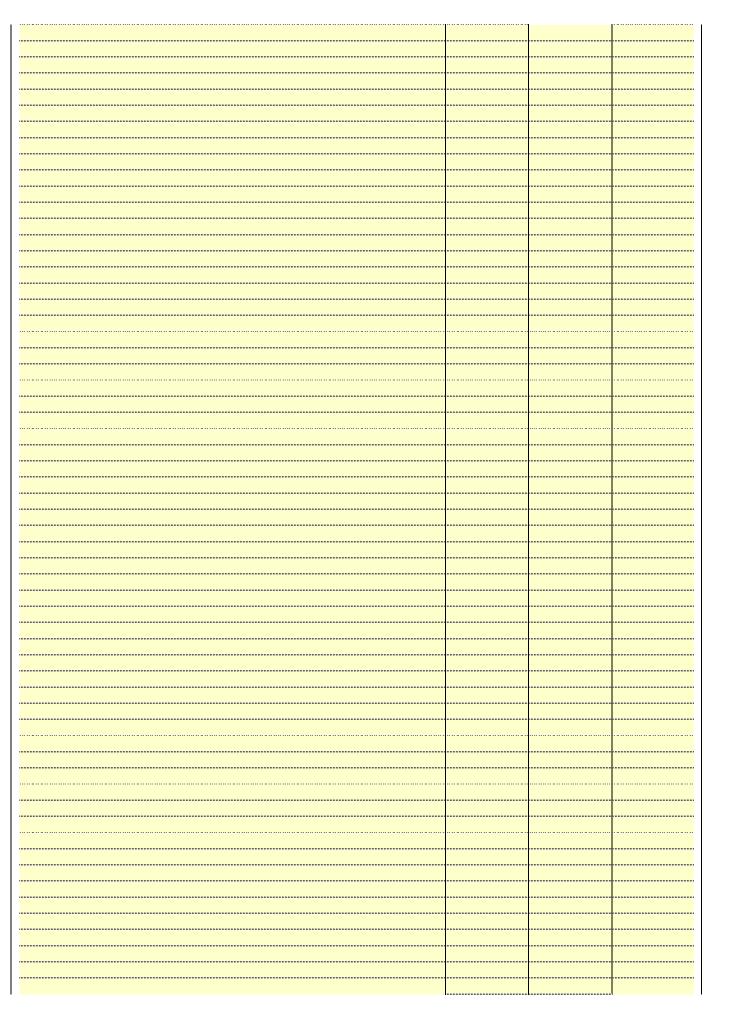
ΑB

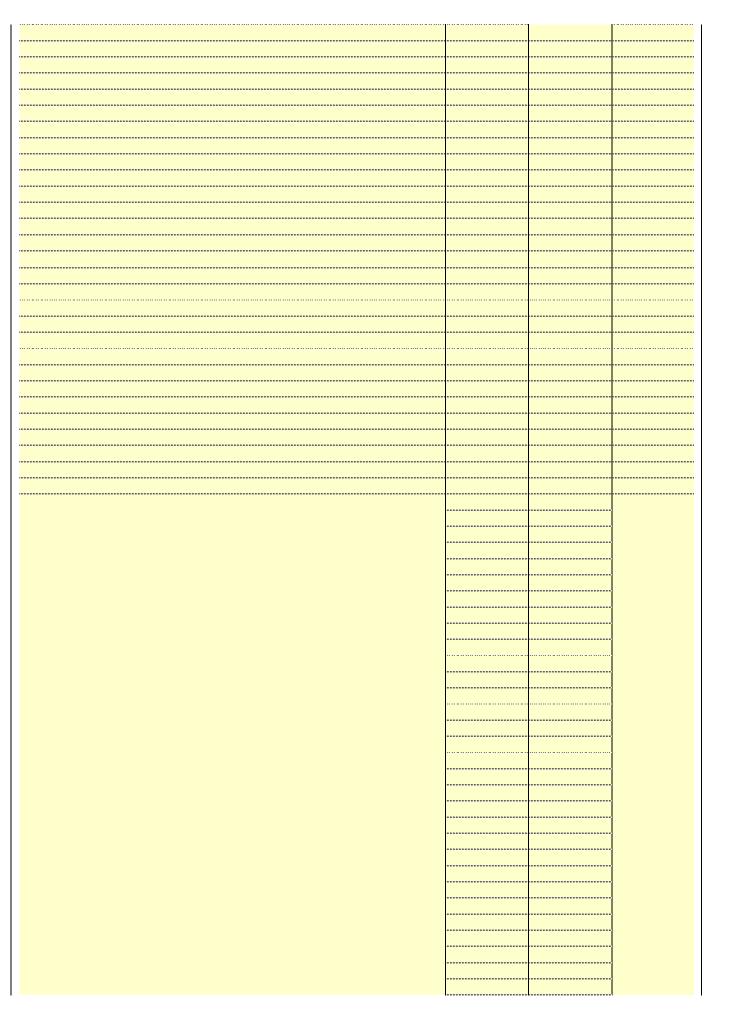
ΑB AΒ

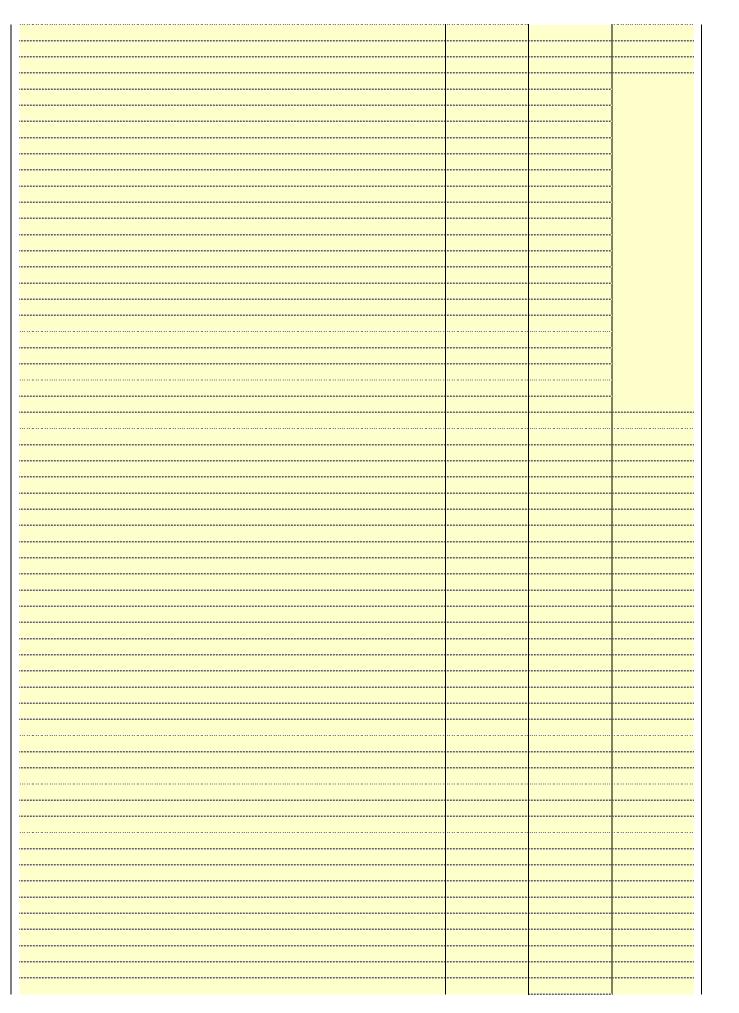
FL FL FL

W:! Ob		1 AD	
Miami Shores	FL 	AB	1
Miami Springs	FL	AB	1
Miami-Dade Unincorporated County	FL	AB	1
Miramar	FL	AA	1
Monroe Unincorporated County	FL	AC	4
North Bay Village	FL	AB	1
Notifi Day Village			
North Lauderdale	FL 	AA	2
North Miami	FL	AB	1
North Miami Beach	FL	AB	1
Oakland Park	FL	AA	2
Palmetto Bay	FL	AB	1
Parkland	FL	AA	3
Pembroke Park	FL	AA	1
Pembroke Pines	FL	AA	1
Pinecrest (Dade County)	FL	AB	1
Plantation	FL	AA	2
Pompano Beach	FL	AA	2
Sea Ranch Lakes	FL	AA	2
	FL FL		
South Miami		AB	1
Southwest Ranches	FL	AA	1
Stock Island	FL	AB	4
Sunny Isles Beach	FL	AE	6
Sunrise	FL	AA	2
Surfside	FL	AB	1
Sweetwater	FL	AB	1
Tamarac	FL	AA	2
		4.0	4
Tavernier *	FL	AC	4
Tavernier *			
Tavernier * Virginia Gardens	FL	AB	1
Tavernier * Virginia Gardens West Miami	FL FL	AB AB	1
Tavernier* Virginia Gardens West Miami West Park	FL FL FL	AB AB AA	1 1
Tavernier* Virginia Gardens West Miami West Park Weston	FL FL FL	AB AB AA AA	1 1
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Tavernier * Virginia Gardens West Miami West Park Weston Wilton Manors	FL FL FL	AB AB AA AA	1 1

Add rows as necessary.







	***************************************

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

BellSouth Telecommunications, LLC

SYSTEM ID#
63029

### Ε

### Secondary Transmission Service: Subscribers and Rates

### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1		BLOCK 2			
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	
Residential:						
<ul> <li>Service to first set</li> </ul>	166,912	\$ 19.0	HD Tech Fee	103,503	\$ 10.00	
<ul> <li>Service to additional set(s)</li> </ul>			Set-Top Box	168,056	\$0-\$15	
<ul> <li>FM radio (if separate rate)</li> </ul>			Broadcast TV Surcharge	166,912	\$6.99-\$9.99	
Motel, hotel						
Commercial	1,144	\$ 20.0				
Converter						
<ul> <li>Residential</li> </ul>						
Non-residential						
		•	····		<b>†</b>	

### F

### Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

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

FORM SA3E. PAGE 3.					OVOTEM ID#	ı l
BellSouth Telec					SYSTEM ID# 63029	Namo
					03029	
PRIMARY TRANSMITTE						
carried by your cable s FCC rules and regulation 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specific FC Do not list the station station was carried of basis. For further int in the paper SA3 for Column 1: List each each multicast stream as cast stream as "WETA- WETA-simulcast). Column 2: Give the	ystem during toons in effect on .61(e)(2) and (is, as explaine tations: With Crules, regulater in space only on a subsequent of the station of the station's call associated with example channel number. For example	he accounting In June 24, 19 (4), or 76.63 (1) and in the next prespect to any attions, or auth G—but do listitute basis. ace I, if the stateming substitution is sign. Do not in the a station action	g period, except 81, permitting the referring to 76.6 paragraph. y distant stations iorizations: t it in space I (the ation was carried tute basis station report origination cording to its ow the reported in ones assigned to	(1) stations carried carriage of cert (1(e)(2) and (4))]; is carried by your one Special Statemed both on a substitus, see page (v) on program service er-the-air designate column 1 (list each the television statement).	s and low power television stations) ed only on a part-time basis under ain network programs [sections and (2) certain stations carried on a cable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located es such as HBO, ESPN, etc. Identify tion. For example, report multi- h stream separately; for example ion for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television
for independent multic For the meaning of the Column 4: If the sta planation of local service	ast), "E" (for n se terms, see ation is outside ce area, see pa ave entered "Y	oncommercia page (v) of the the local servage (v) of the es" in column	I educational), of e general instru- vice area, (i.e. "o general instruct 4, you must cor	or "E-M" (for nonce ctions located in t distant"), enter "Ye ions located in the mplete column 5,	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your	
carried the distant stati For the retransmissi of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C	ion of a distant entered into o a primary trans simulcasts, also ree categories e location of ea canadian static	me basis beca t multicast stre n or before Ju mitter or an a o enter "E". If t, see page (vi ich station. Fo ons, if any, giv	ause of lack of a eam that is not s une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations, the the name of the	activated channel subject to a royalty etween a cable sy esenting the prima channel on any o instructions locate list the community with	capacity.  y payment because it is the subject stem or an association representing ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form.  y to which the station is licensed by the make the station is identifed.	
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FORM SA3E. PAGE 3					OVOTEMID	ш
LEGAL NAME OF OV					SYSTEM ID	Namo
BellSouth Tel					6302	9
PRIMARY TRANSMIT						
In General: In space carried by your cable FCC rules and regule FCC rules and regule FC. FCC rules and regule FCC rules and regule basis under specific FCC bonot list the station was carried to List the station was carried basis. For further in the paper SA3 Column 1: List each multicast stream as "WET Column 2: Give FCC rules on which your cable Column 3: Indicated actional station, In (for independent multiple for the meaning of the Column 4: If the planation of local set Column 5: If you cable system carried the distant stream in far written agreement the cable system and tion "E" (exempt). For the retransmit for the FCC rules FCCC rules FCCCC rules FCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCC	e G, identify ever a system during the ations in effect of 76.61(e)(2) and the ations. With FCC rules, regular on here in space of only on a subset, and also in spainformation conform.  The attain of a station of a station of a cash a sociated with a spatial of a system carried the in each case of a system carried the interest of a system of a distantal ation on a part-tission of a distantal the intered into of a primary transmit entered into of a primary transmit a simulcasts, als	y television so the accounting in June 24, 19 (4), or 76.63 (4), or 76.63 (4), or 76.63 (5) and the next respect to any attions, or authors, or authors, or authors, or authors, in the stations, or authors, in the station accounting substitute basis. In the station accounting the station, whether the station on commercial page (v) of the the local ser age (v) of the the local ser age (v) of the station on during the me basis bect multicast strain or before Justinian or enter "E". If	g period, except g period, except 181, permitting the referring to 76.6 paragraph. The second of the	in (1) stations carrine carriage of cer (1(e)(2) and (4))]; is carried by your me Special Statemed both on a substans, see page (v) on program service er-the-air designation of the television stanington, D.C. This pork station, an indefer network multipor "E-M" (for nonections located in the television stanington, proceeding the process of the television of the television stanington, proceeding the primary channel on any certain the primary channel on any certain the primary channel on any certain the column of the primary channel on any certain the primary certain the primary channel on any certain the primary channel on any certain the primary ce	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your ntering "LAC" if your cable system capacity. y payment because it is the subject ystem or an association representing ary transmitter, enter the designa- other basis, enter "O." For a further	Primary Transmitters: Television
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WSVN/WSVNHD	7/1007	I	No		Miami, FL	
WTVJ/HD	6/1006	N	No		Miami, FL	additional information on alphabetization.

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **BellSouth Telecommunications, LLC** 63029 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AB 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER **STATION** (If Distant) WAMI/WAMIHD 69/1069 ı No Hollywood, FL **WBEC** 63 Ε No Boca Raton, FL WBFS/WBFSHD 33/1033 No ı Miami, FL No Key West, FL WEYW-LP 19 WFOR/WFORHD 4/1004 Ν No Miami, FL WFUN-LD 48 ı No Miami, FL WGEN/WGENHD 8/1008 No Key West, FL ı WHFT 45 ı No Miami, FL **WJAN-CD** 41 ı No Miami, FL WLRN/WLRNHD 17/1017 Ε No Miami, FL WLTV/WLTVHD 23/1023 ı No Miami, FL WPBT/WPBTHD 2/1002 Ε No Miami, FL WPLG/WPLGHD 10/1010 Ν No Miami, FL WPXM/WPXMHD 35/1035 ı No Miami, FL WSBS/WSBSHD 50/1050 ı No Key West, FL WSCV/WSCVHD 51/1051 ı No Fort Lauderdale, FL

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

Miami, FL

Miami, FL

WSFL/WSFLHD

WSVN/WSVNHD

39/1039

7/1007

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LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	
BellSouth Tele					63029	Name
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eac each multicast stream cast stream as "WETA-Simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multifor independent multifor the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried the distant stat For the retransmiss	G, identify every system during the ions in effect on 5.61(e)(2) and (5.61(e)(2) and (5.61(e)(2) and (6.61(e)(2) and (6.61(e)(	y television standard y television standard y television standard y television standard y television y televi	g period, except 81, permitting the referring to 76.6 paragraph. It is a social to the fermion of the referring to 76.6 paragraph. It is a space I (the referring to 16 paragraph. It is a space I (the referring to 16 paragraph of the report origination of the reported in compared in the report origination of the reported in compared in the reported	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your context of the statement of the	s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
the cable system and a tion "E" (exempt). For explanation of these th <b>Column 6:</b> Give the	a primary trans simulcasts, also nree categories e location of ea	mitter or an a o enter "E". If , see page (v) ch station. Fo	ssociation repre- you carried the o of the general in Fullons, l	senting the primar channel on any ot nstructions locate list the community	ry transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
Note: If you are utilizir	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AB		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
WTVJ/WTVJHD	6/1006	N	No		Miami, FL	

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **BellSouth Telecommunications, LLC** 63029 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. **CHANNEL LINE-UP AC** 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF CARRIAGE (Yes or No) NUMBER **STATION** (If Distant) WAMI/WAMIHD 69/1069 I No Hollywood, FL **WBEC** 63 Ε Yes 0 Boca Raton, FL WBFS/WBFSHD 33/1033 ı No Miami, FL Key West, FL WEYW-LP 19 No WFOR/WFORHD 4/1004 Ν No Miami, FL WFUN-LD 48 ı No Miami, FL WGEN/WGENHD 8/1008 Key West, FL ı No WHFT 45 ı No Miami, FL **WJAN-CD** 41 ı Miami, FL No WLRN/WLRNHD 17/1017 Ε 0 Yes Miami, FL WLTV/WLTVHD 23/1023 ı No Miami, FL WPBT/WPBTHD 2/1002 Ε Yes 0 Miami, FL WPLG/WPLGHD 10/1010 Ν No Miami, FL WPXM/WPXMHD 35/1035 ı No Miami, FL WSBS/WSBSHD 50/1050 ı No Key West, FL WSCV/WSCVHD 51/1051 ı No Fort Lauderdale, FL

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

Miami, FL

Miami, FL

WSFL/WSFLHD

WSVN/WSVNHD

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LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#		
BellSouth Tele			;		63029	Name	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program							
station was carried • List the station here,	here in space only on a subs and also in spa formation cond	G—but do lis titute basis. ace I, if the sta	t it in space I (th ation was carried	d both on a substit	ent and Program Log)—if the ute basis and also on some other f the general instructions located		
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educational station, by (for independent multion For the meaning of the Column 4: If the sta	entering the lecast), "E" (for neese terms, see ation is outside	tter "N" (for noncommercia page (v) of th the local serv	etwork), "N-M" ( il educational), o e general instruc vice area, (i.e. "c	for network multica or "E-M" (for nonco ctions located in th distant"), enter "Ye	s". If not, enter "No". For an ex-		
cable system carried the carried the distant stat. For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	ave entered "Yene distant static ion on a part-tir ion of a distant entered into o a primary trans simulcasts, also tree categories e location of ea Canadian statio	es" in column on during the me basis becamulticast strandr or before Jumitter or an accenter "E". If , see page (veh station. Fons, if any, giv	4, you must cor accounting perion ause of lack of a eam that is not so une 30, 2009, be association repre you carried the of the general if or U.S. stations, we the name of the	mplete column 5, sod. Indicate by entactivated channel of subject to a royalty etween a cable system and the primary channel on any ot instructions locate list the community with	stating the basis on which your sering "LAC" if your cable system capacity.  It payment because it is the subject stem or an association representing ry transmitter, enter the designaher basis, enter "O." For a further d in the paper SA3 form.  It to which the station is licensed by the which the station is identifed.		
	1	CHANN	EL LINE-UP	AC			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
WTVJ/WTVJHD	6/1006	N	No		Miami, FL		

**ACCOUNTING PERIOD: 2019/2** FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **BellSouth Telecommunications, LLC** 63029 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AD 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF CARRIAGE (Yes or No) NUMBER **STATION** (If Distant) WAMI/WAMIHD 69/1069 I No Hollywood, FL **WBEC** 63 Ε Yes 0 Boca Raton, FL WBFS/WBFSHD 33/1033 ı No Miami, FL Key West, FL WEYW-LP 19 No WFOR/WFORHD 4/1004 Ν No Miami, FL WFUN-LD 48 ı No Miami, FL WGEN/WGENHD 8/1008 No Key West, FL ı WHFT 45 ı No Miami, FL **WJAN-CD** 41 ı No Miami, FL WLRN/WLRNHD 17/1017 Ε Yes 0 Miami, FL WLTV/WLTVHD 23/1023 ı No Miami, FL WPBT/WPBTHD 2/1002 Ε No Miami, FL WPLG/WPLGHD 10/1010 Ν No Miami, FL WPXM/WPXMHD 35/1035 ı No Miami, FL WSBS/WSBSHD 50/1050 ı No Key West, FL

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Fort Lauderdale, FL

Miami, FL

Miami, FL

WSCV/WSCVHD

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FORM SA3E. PAGE 3.					0.40======	
LEGAL NAME OF OWN					SYSTEM ID#	Name
BellSouth Tele	communica	tions, LLC			63029	
PRIMARY TRANSMITT	ERS: TELEVISION	ON				
In General: In space carried by your cable : FCC rules and regular 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis: basis under specific FC • Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA-simulcast). Column 2: Give th its community of licens on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you cable system carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify ever system during to ions in effect on 6.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a substand also in spanformation concurr.  ch station's call associated with a-2". Simulcast e channel numbers, For example system carried the in each case of entering the lecast), "E" (for nese terms, see ation is outside ice area, see prave entered "Y he distant staticion on a part-tilision of a distant tentered into o a primary trans simulcasts, also ree categories e location of each	y television st he accounting in June 24, 19 4), or 76.63 (in the next respect to any ations, or authors, or authors, or authors, or authors, in a station acceptable of the station acceptable of the station acceptable of the station. Whether the station whether the station acceptable (v) of the estation on during the me basis becard in column on during the me basis becard in or before Jumitter or an acceptable of the station. For example, in the local series in column on during the me basis becard in or before Jumitter or an acceptable of the station. For example, in the local series in column or during the me basis becard in or before Jumitter or an acceptable of the station. For example, in the local series in column or during the me basis becard in the station of the station. For example, in the station is the station of the station.	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations for izations: to tit in space I (the station was carried that basis station report origination cording to its own be reported in containing the station is a network etwork), "N-M" (I educational), one general instruction area, (i.e. "Congeneral instruction of the general instruction.	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the second of the se	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing	ng multiple chai	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AD		
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	
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U.S. Copyright Office Form SA3E Long Form (Rev. 05-17)

Fort Lauderdale, FL

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FORM SA3E. PAGE 3.					2/2====	T		
LEGAL NAME OF OWN					SYSTEM ID#	Name		
BellSouth Telecommunications, LLC 63029 PRIMARY TRANSMITTERS: TELEVISION								
PRIMARY TRANSMITT	ERS: TELEVISION	N						
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),76,616(e)(2) and (4),76,63(d),0,76,63 (referring to 76,61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  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 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 noncommercial educational multicast). "E" (for noncommercial educational), or "E-M" (for noncommercial educational). The proper is a station of these terms,								
FCC. For Mexican or ( Note: If you are utilizing		. ,		•	n which the station is identifed. channel line-up.			
Trotor ii you are umizii			EL LINE-UP		Sharmor line up.			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
WTVJ/WTVJHD	6/1006	N	No		Miami, FL			

LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#		
BellSouth Tele					63029	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program							
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 cha							
		CHANN	EL LINE-UP	AF			
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: 2019/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63029 **BellSouth Telecommunications, LLC** 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. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally 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 LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

						ACCOUNTING	PERIOD: 2019/2		
						SYSTEM ID# 63029	Name		
E: SPECIA	L STATEMEN	IT AND PROGRAM LOG							
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.  1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE  • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?  Yes XNo									
E PROGRA titute progra ace, please a of every nor distant stati- gulations, o ution. Do no Lucy" or "NE m was broad sign of the s adcast static addian static and and day we "5/7." es when the Example: a er "R" if the and regulation orgramming	IMS Im on a separa attach addition nnetwork telev ion and that you or authorization it use general of BA Basketball: dcast live, ente station broadca on's location (th ons, if any, the when your sys e substitute pro a program carri listed program ons in effect du	te line. Use abbreviations al pages. ision program (substitute pur cable system substitute s. See page (vi) of the geneategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the tem carried the substitute gram was carried by your ed by a system from 6:01:	wherever pos rogram) that, d for the prog eral instructio "basketball". to." m. station is lice station is iden program. Use cable system. 5 p.m. to 6:2 mming that ye g enter the let	sible, if the during the ramming cons located List specionsed by the hitfied). numerals list the till 8:30 p.m. our system ter "P" if the	eir meaning accounting of another st. in the pape fic program e FCC or, in with the mo	ation r onth ely	Program Log		
SUBSTITUT	E PROGRAM	l				7. REASON			
2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. FROM		DELETION			
	ify every norecounting pening that must recount to a counting pening that must recount to a counting pening that must recount to a countion?  The concernion of the countion of the countion of the counting of the counting of the counting that and day we "5/7" es when the example: a counting that are "R" if the end regulation of the counting that are "R" if the end regulation of the counting that are "R" if the end regulation of the counting that are "R" if the end regulation of the counting that are "R" if the end regulation of the counting that are "R" if the end regulation of the counting that are "R" if the end regulation of the counting that are "R" if the end regulation of the counting that are the counting that	ify every nonnetwork televistic counting period, under spening that must be included in a counting period, under spening that must be included in a counting period, did your cable systemation?  Tender of this page of this page of the counting of the counting of every nonnetwork televistant station and that your gulations, or authorization of every nontonetwork televistant station and that your gulations, or authorization of every nontonetwork televistant station and that your gulations, or authorization of every nontonetwork televistant station and that your gulations, or authorization of every nontonetwork televistant station and that your systematic of the station broadcast station's location (the station broadcast station's locatio	E: SPECIAL STATEMENT AND PROGRAM LOG  ify every nonnetwork television program broadcast by a ccounting period, under specific present and former FC ining that must be included in this log, see page (v) of the FCONCERNING SUBSTITUTE CARRIAGE riod, did your cable system carry, on a substitute basition?  ", leave the rest of this page blank. If your answer is the program on a separate line. Use abbreviations of every nonnetwork television program (substitute program station and that your cable system substitute regulations, or authorizations. See page (vi) of the genetion. Do not use general categories like "movies", or Lucy" or "NBA Basketball: 76ers vs. Bulls."  In was broadcast live, enter "Yes." Otherwise enter "N sign of the station broadcasting the substitute program addast station's location (the community to which the station and day when your system carried the substitute program and regulations, if any, the community with which the substitute program was carried by your or Example: a program carried by a system from 6:01:10 er "R" if the listed program was substituted for program and regulations in effect during the accounting period orgamming that your system was permitted to delete the substitute program was permitted to delete the substitute program was permitted to delete the substitute programming that your system was permitted to delete the substitute programming that your system was permitted to delete the substitute programming that your system was permitted to delete the substitute programming that your system was permitted to delete the substitute program was substituted for program and regulations in effect during the accounting period orgamming that your system was permitted to delete the substitute program was substituted for program and regulations in effect during the accounting period orgamming that your system was permitted to delete the substitute program was substituted for program and regulations.	E: SPECIAL STATEMENT AND PROGRAM LOG  ify every nonnetwork television program broadcast by a distant station cocounting period, under specific present and former FCC rules, regulating that must be included in this log, see page (v) of the general instrict CONCERNING SUBSTITUTE CARRIAGE riod, did your cable system carry, on a substitute basis, any nonnetion?  ", leave the rest of this page blank. If your answer is "Yes," you must program on a separate line. Use abbreviations wherever posice, please attach additional pages. of every nonnetwork television program (substitute program) that, distant station and that your cable system substituted for the progragulations, or authorizations. See page (vi) of the general instruction. Do not use general categories like "movies", or "basketball". Lucy" or "NBA Basketball: 76ers vs. Bulls."  In was broadcast live, enter "Yes." Otherwise enter "No." sign of the station broadcasting the substitute program. adcast station's location (the community to which the station is identification and day when your system carried the substitute program. Use we "5/7."  Example: a program carried by a system from 6:01:15 p.m. to 6:2 er "R" if the listed program was substituted for programming that yand regulations in effect during the accounting period; enter the let orgramming that your system was permitted to delete under FCC results.  SUBSTITUTE PROGRAM  2. LIVE? 3. STATION'S  5. MONTH	E: SPECIAL STATEMENT AND PROGRAM LOG  ify every nonnetwork television program broadcast by a distant station that your coounting period, under specific present and former FCC rules, regulations, or a ning that must be included in this log, see page (v) of the general instructions loc of CONCERNING SUBSTITUTE CARRIAGE riod, did your cable system carry, on a substitute basis, any nonnetwork televition?  ", leave the rest of this page blank. If your answer is "Yes," you must comple the program on a separate line. Use abbreviations wherever possible, if the idea in the program on a separate line. Use abbreviations wherever possible, if the idea in the program on a separate line in the program (substitute program) that, during the distant station and that your cable system substituted for the programming of gulations, or authorizations. See page (vi) of the general instructions located tion. Do not use general categories like "movies", or "basketball". List specilucy" or "NBA Basketball: 76ers vs. Bulls."  In was broadcast live, enter "Yes." Otherwise enter "No." sign of the station broadcasting the substitute program. adcast station's location (the community to which the station is licensed by the hadian stations, if any, the community with which the station is identified). The and day when your system carried the substitute program. Use numerals, we "5/7."  see when the substitute program was carried by your cable system. List the tin Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. ser "R" if the listed program was substituted for programming that your system and regulations in effect during the accounting period; enter the letter "P" if the orgamming that your system was permitted to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the orgamming that your system was permitted to delete under FCC rules and regulations.  SUBSTITUTE PROGRAM  2. LIVE? 3. STATION'S	E: SPECIAL STATEMENT AND PROGRAM LOG  ify every nonnetwork television program broadcast by a distant station that your cable system cocounting period, under specific present and former FCC rules, regulations, or authorizations ing that must be included in this log, see page (v) of the general instructions located in the page room of the general instructions located in the page room of the general instructions located in the page room of the general instructions located in the page room of the general instructions located in the page room of the general instructions located in the page room of the general carry, on a substitute basis, any nonnetwork television program relation?  EPROGRAMS  it the program on a separate line. Use abbreviations wherever possible, if their meaning in the general catch additional pages.  of every nonnetwork television program (substitute program) that, during the accounting distant station and that your cable system substituted for the programming of another stangulations, or authorizations. See page (vi) of the general instructions located in the page tion. Do not use general categories like "movies", or "basketball". List specific program user or "Nes." Otherwise enter "No." sign of the station broadcasting the substitute program.  addicast station's location (the community to which the station is licensed by the FCC or, in madian stations, if any, the community with which the station is identified). The substitute program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be resulted and regulations in effect during the accounting period; enter the letter "P" if the listed programming that your system was required regulations in effect during the accounting period; enter the letter "P" if the listed programming that your system was permitted to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed programming that your system was permitted to delete under FCC rules and regulations in the substitute program as su	E: SPECIAL STATEMENT AND PROGRAM LOG  ify every nonnetwork television program broadcast by a distant station that your cable system carried on a coounting period, under specific present and former FCC rules, regulations, or authorizations. For a further inight that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.  If CONCERNING SUBSTITUTE CARRIAGE  iod, did your cable system carry, on a substitute basis, any nonnetwork television program ton?  I leave the rest of this page blank. If your answer is "Yes," you must complete the program ton?  I leave the rest of this page blank. If your answer is "Yes," you must complete the program expenses attach additional pages.  of every nonnetwork television program (substitute program) that, during the accounting distant station and that your cable system substituted for the programming of another station gulations, or authorizations. See page (vi) of the general instructions located in the paper tion. Do not use general categories like "movies", or "basketball". List specific program u.ucy" or "NBA Basketball: 76ers vs. Bulls."  In was broadcast live, enter "Yes." Otherwise enter "No."  sign of the station broadcasting the substitute program. Use numerals, with the month we "5/7."  so when the substitute program was carried by your cable system. List the times accurately Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be  er "R" if the listed program was substituted for programming that your system was required and regulations in effect during the accounting period; enter the letter "P" if the listed pro ogramming that your system was permitted to delete under FCC rules and regulations in Effect during the accounting period; enter the letter "P" if the listed pro ogramming that your system was permitted to delete under FCC rules and regulations in		

ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 6.

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

BellSouth Telecommunications, LLC

63029

### J

### Part-Time Carriage Log

### **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-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 column 5 of space G.

Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period.

- Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10"
- State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.—3:15 a.m. app."
- You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.–12:00 p.m."

		DATE	S AND HOURS	OF PART-TIME CAR	RIAGE			
CALL SIGN	WHEN	I CARRIAGE OC		CALL SIGN	WHEN CARRIAGE OCCURRED			
O/ LEE GIGIT	DATE	FROM	URS TO	O/ALL GIGIN	DATE	HOUR FROM	S TO	
		_	_			_		
			_			_		
		-	_					
			_					
			_					
		-	_			_		
		-				_		
			_			_		
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		-	_					
		-	_					
			_					
			_					
		-	_			_		
		_	_			_		

LEGA	L NAME OF OWNER OF CABLE SYSTEM:  South Telecommunications, LLC			SYSTEM ID# 63029	Name				
Inst all a (as i page	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s) during the accounting period.  IMPORTANT: You must complete a statement in space P concerning gross receipts.  (Amount of gross receipts)								
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe:  Complete block 1, showing your minimum fee.  Complete block 2, showing whether your system carried any distant television stations.  If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee.  If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.									
bloc ▶ If pa 3 be	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be 3 below.  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 should be 10 block B, of the DSE schedule was completed.	entered	on line 2 in bl	lock					
Block	2 in block 4 below.  Block MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are required to pay at								
Block	This is your minimum fee.  DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the	\$ informa		77,761.61					
	space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colu "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting per Yes—Complete the DSE schedule.	mn 4, yo iod?	u must check						
Block 3	Line 1. <b>BASE RATE FEE:</b> 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		\$	13,820.04					
	Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	_		0.00					
	Line 3. Add lines 1 and 2 and enter here	\$		13,820.04					
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, enter zero.	_	\$ 6	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 the Licensing				
	Line 4. <b>FILING FEE</b>								
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.  Add Lines 1, 2 and 3 of block 4 and enter total here	\$		78,486.61	appropriate form for submitting the additional fees.				
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. general instructions located in the paper SA3 form for more information.)	(See pag	e (i) of the						

Nama	LEGAL NAME OF OWN	NER OF CABLE	SYSTEM:	SYSTEM ID#							
Name	BellSouth Tele	communic	ations, LLC	63029							
	CHANNELS										
М	Instructions: Yo	ou must give	(1) the number of channels on which the cable system carried television broadcast	st stations							
1	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.										
Channels											
1			channels on which the cable	35							
	system carried television broadcast stations										
	2. Enter the total	I number of a	activated channels								
			carried television broadcast stations	635							
	and nonbroado	cast services									
N	INDIVIDUAL TO	BE CONTA	CTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual								
	we can contact a	about this sta	atement of account.)								
Individual to Be Contacted											
for Further	Name <b>Mvr</b> i	iam Nass	if Telephone	310-964-1930							
Information			тесриоте								
	Address 2260	) F Imper	ial Hwy Room 839								
			route, apartment, or suite number)								
	EI S	egundo,	CA 90245								
		own, state, zip)									
	_ "	mn 1 1	Co-Mott com								
	Email	IIIIIII	2s@att.com Fax (optional)								
	CERTIFICATION	(This statem	ent of account must be certifed and signed in accordance with Copyright Office re	gulations.							
0											
Certifcation	• I, the undersigned	ed, hereby ce	rtify that (Check one, but only one, of the boxes.)								
	(Owner other	than carner	ation or partnership) I am the owner of the cable system as identifed in line 1 of space	oo Pr or							
	(Owner other	man corpor	ation of partnership) I am the owner of the cable system as identified in line 1 of space	эе b, oi							
			n corporation or partnership) I am the duly authorized agent of the owner of the cab I that the owner is not a corporation or partnership; or	ne system as identified							
	V (0#:			average of the cable average							
	(Officer or pa		an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as	bwher of the cable system							
			nt of account and hereby declare under penalty of law that all statements of fact contai t to the best of my knowledge, information, and belief, and are made in good faith.	ined herein							
	[18 U.S.C., Section										
		X	/s/ Michael Santogrossi								
		Entor	n 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 curso								
		"F2" bu	ton, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lote	us compatibility settings.							
	Typed or printed name: Michael Santogrossi										
			-								
,											
,			Vice President Fineres								
,		Title:	Vice President – Finance (Title of official position held in corporation or partnership)								
,			( 5. 55 position note in corporation of partitionally)								
,		Date:	February 26, 2020								
,		Date.	i coraci y 20, 2020								

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nama
BellSouth Telecommunications, LLC	63029	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copylowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the caservice of providing secondary transmissions of primary broadcast transmitters, the scribers and amounts collected from subscribers receiving secondary transmissions	right Act by adding the fol- able system for the basic system shall not include sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the gpaper SA3 form.  During the accounting period did the cable system exclude any amounts of gross receipts formade by satellite carriers to satellite dish owners?		Concerning Gross Receipts Exclusion
X NO		
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late For an explanation of interest assessment, see page (viii) of the general instructions in the page (viii)		Q
Line 1 Enter the amount of late payment or underpayment	x	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	xdays	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	\$ -	
	(interest charge)	
* To view the interest rate chart click on <a href="www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a> . For contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	For further assistance please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day I	ate.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to please list below the owner, address, first community served, accounting period, and ID nur filing.		
Owner Address		
First community served Accounting period ID number		

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

ACCOUNTING PERIOD: 2019/2

DSE SCHEDULE. PAGE 10.

# INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

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

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

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

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

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

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

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

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

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

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

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

#### **TOTAL OF DSEs**

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

### THE ROYALTY FEE

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

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

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

The Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable 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),(d), and 767.63 (a) [referring to 76.61 (b),(d)] in effect on June 24, 1981.
- 4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.
- 5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

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

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

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

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

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

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

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

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. 1.064% of gross receipts

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

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

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
<b>\</b> an	Bodega Bay ns B, D, d E le zone

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

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

			\$6,384.00				
	First Subscriber Group		Second Subscriber Group		Third Subscriber Group		
	(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)		
J	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	E 11. (CONTINUED)								
4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#								
I	BellSouth Telecommunications, LLC 63029								
	SUM OF DSEs OF CATEGORY "O" STATIONS:								
	• Add the DSEs of each station.								
	Enter the sum here and in line		is schedule.		0.75				
		<u> </u>				<u> </u>			
2	Instructions:	Signa": light the ga	all siams of all distant stations	a identified by	, the platter "O" in ealthour F				
4	In the column headed "Call sof space G (page 3).	sign": list the ca	an signs of all distant stations	s identified by	the letter O in column 5				
Computation	In the column headed "DSE"	: for each indep	endent station, give the DSI	E as "1.0"; fo	or each network or noncom-				
of DSEs for	mercial educational station, giv			•					
Category "O"			CATEGORY "O" STATION	NS: DSEs					
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	WBEC	0.250							
	WLRN/WLRNHD	0.250							
	WPBT/WPBTHD	0.250							
		· · · · · · · · · · · · · · · · · · ·							
Add rows as									
necessary.									
Remember to copy									
all formula into new									
rows.									
Į	L	L		L	n.l.n.l	I			

Name		OWNER OF CABLE SYSTEM: elecommunications,	LLC				S	YSTEM ID# 63029					
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 1: Lis Column 2 figure should of Column 3 Column 4 be carried out Column 5 give the type- Column 6	Instructions: CAPACITY Column 1: 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 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.  CATEGORY LAC STATIONS: COMPUTATION OF DSEs											
Capacity		C	ATEGORY L	AC STATIONS:	COMPUTAT	ION OF DSEs							
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	R 3 JRS ED BY	B. NUMBER OF HOURS STATION ON AIR	4. BASIS OI CARRIAC VALUE	5. TYPE		SE.					
			÷		=	x	=						
					=	X	<u> </u>						
			÷ ÷			x x	<u>-</u>						
			=		=	x	=						
			÷		=	x	=						
			÷ ÷		=	X X	<u>=</u>						
	Add the DSEs	OF CATEGORY LAC S of each station. m here and in line 2 of p		edule,	▶	0.00							
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efferations in efferations in efferations are space I).     Column 2: at your option.     Column 3: Column 4: light	e the call sign of each start by your system in substant or on October 19, 1976 (one or more live, nonnetwhere of each station give the This figure should correstenter the number of days Divide the figure in column of the station's DSE	itution for a prog as shown by the ork programs dur number of live, spond with the ir is in the calendar in 2 by the figure (For more inforn	gram that your system better "P" in column ring that optional carrinonnetwork program formation in space I. year: 365, except in e in column 3, and givention on rounding, s	was permitted 7 of space I); an age (as shown by s carried in substance a leap year. We the result in cee page (viii) of	to delete under FCC ruled to the word "Yes" in column stitution for programs that olumn 4. Round to no let the general instructions	2 of t were deleted ss than the third	rm).					
	1			ASIS STATION			T						
	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. m here and in line 3 of p	IS STATIONS:	edule,		0.00	· )	=					
<b>5</b> Total Number of DSEs	number of DSEs 1. Number of 2. Number of	R OF DSEs: Give the ames applicable to your system of DSEs from part 2 ● f DSEs from part 3 ● f DSEs from part 4 ●		oxes in parts 2, 3, and	4 of this schedul	e and add them to provide	0.75 0.00 0.00						
	TOTAL NUMBE	R OF DSEs					•	0.75					

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

LEGAL NAME OF C							S'	YSTEM ID# 63029	Name
Instructions: Bloc In block A: • If your answer if schedule.	"Yes," leave the re	emainder of p	·	7 of the DSE sche	edule blank ar	nd complete pa	art 8, (page 16) of	f the	6
If your answer if '	"No," complete blo			TELEVISION M	ΔRKETS				Computation of
l <u>=</u>	1981?	outside of all r	major and sma		fined under s			gulations in	3.75 Fee
		BLOC	K B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulations  and regulations	ons prior to Ju dule. (Note: Ti	part 2, 3, and 4 o ne 25, 1981. For fo he letter M below r Act of 2010.)	urther explana	ation of permitt	ed stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rd A Stations carria 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfathered instructions for E Carried pursus *F A station pre	ales and regued pursuant to on as defined al educations of station (76.6 or DSE sched ant to individuations of the station will be station will be station we will be station will be station.	lations cited b o the FCC ma d in 76.5(kk) (7 al station [76.5 65) (see paragule). ule). ual waiver of F d on a part-tir ithin grade-B	ne or substitute ba contour, [76.59(d)(	se in effect of 6.57, 76.59(b e)(1), 76.63(a 63(a) referring bstitution of g	n June 24, 198 ), 76.61(b)(c), n) referring to 7 g to 76.61(d) randfathered s	76.63(a) referring 76.61(e)(1 stations in the		
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on pag	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
WBEC	C	0.25	SIGN	BASIS		SIGN	BASIS		-
WPBT/WPE		0.25							
WLRN/WLF	С	0.25							
								0.75	
		В	LOCK C: CC	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 fror	n block B ab	ove					
Line 3: Subtract (If zero, le				r of DSEs subject 7 of this schedu		rate.	n <del></del>		
Line 4: Enter gro	ss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375	and enter su	ım here				x		permited/ partially nonpermitted carriage?
Line 6: Enter tota	al number of DS	Es from line	3						If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 ar	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00	

	Telecommunic	ABLE SYSTEM: cations, LLC					J	4STEM ID# 63029	Name
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	UED)			
1. CALL SIGN	2. PERMITT	TED 3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation o
									3.75 Fee

Name	BellSouth Tele								S	63029		
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Instructions: You must complete this worksheet for those stations identified 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.  Column 1: List the call sign for each distant station identified by the letter "F" in column 2 of part 6 of the DSE schedule  Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981  Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1)  Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters  (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.  A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, section: 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.											
		PERMITT	ED DSE FOR STA	TIONS CARRIE	ED	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS				
	1. CALL	2. PRIC		COUNTING		4. BASIS OF	5. PF	RESENT	6. Pl	ERMITTED		
	SIGN	DSE	P	ERIOD		CARRIAGE	[	DSE		DSE		
									************			
<b>7</b> Computation of the		"Yes," comple	ete blocks B and C		e pa	art 8 of the DSE sched	ule.					
Syndicated			BLOCI	K A: MAJOR	TE	LEVISION MARK	ET					
Exclusivity	a la any partian of the	aabla ayatam y	within a tan 100 mai	or tolovicion mar	rkot	t as defined by section 7	'6 E of ECC	rulos in offost	luno 24	10012		
Surcharge	l <u></u> ' '	•		or television mar	кеі	t as defined by section 7		rules in effect a	urie 24,	1901?		
	X Yes—Complete	DIOCKS D ATIO	10.			No—Proceed to	рап о					
	BLOCK B: Ca	arriage of VHI	F/Grade B Contour	Stations		BLOCK	C: Compu	tation of Exem	pt DSEs			
	Is any station listed in commercial VHF stati or in part, over the ca	ion that places			l	Was any station listed nity served by the cab to former FCC rule 76.	le system p	•	,			
	Yes—List each s  X No—Enter zero a		th its appropriate per part 8.	mitted DSE		Yes—List each sta			ate permi	ted DSE		
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	iN	DSE		
			-									
			-									
										2.22		
			TOTAL DSEs	0.00				TOTAL DS	Es	0.00		

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:  BellSouth Telecommunications, LLC	SYSTEM ID# 63029	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	63,699,399.62	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 defned by the FCC?  X Yes—Complete section 3 below.  No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?      X Yes—Complete part 9 of this schedule.      No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge.		
	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?  X Yes—Complete part 9 of this schedule.  No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.  A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		

.,	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	I	BellSouth Telecommunications, LLC	63029
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.  A. Enter 0.00300 of gross receipts (the amount in section 1).  B. Enter 0.00189 of gross receipts (the amount in section 1).  C. Multiply line B by 3.000 and enter here.  D. Enter 0.00089 of gross receipts (the amount in section 1).  E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.  F. Multiply line D by line E and enter here.  G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)  Syndicated Exclusivity Surcharge.  \$\\$\$\$	
8 Computation of Base Rate Fee	You mi 6 was In blo If you If you blank What i	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of perchecked "Yes," use the total number of DSEs from part 5.  Lock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.  Lock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.  Lock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.  Lock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  Lock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  Lock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  Lock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  Lock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  Lock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  Lock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  Lock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  Lock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  Lock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	ow
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did v	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
	_	X Yes—Complete part 9 of this schedule. No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section		
	1	Enter the amount of gross receipts from space K (page 7) ▶\$	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule.  (If block A of part 6 was checked "Yes,"  use the total number of DSEs from part 5.).	
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.  A. Enter 0.01064 of gross receipts (the amount in section 1).  \$  B. Enter 0.00701 of gross receipts (the amount in section 1).  C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here.  D. Multiply line B by line C and enter here.  \$  E. Add lines A, and D. This is your base rate fee. Enter here	_
		and in block 3, line 1, space L (page 7)	0.00
		Base Rate Fee	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
BellSouth Telecommunications, LLC	63029	Name
Section If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4		8
A. Enter 0.01064 of gross receipts  (the amount in section 1)  **State		
B. Enter 0.00701 of gross receipts		Computation
(the amount in section 1) \$		Computation 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 <b>\$</b>		
G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)		
Base Rate Fee ▶ \$	0.00	
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broad	adagat signala aball	
instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple cha	•	9
Space G.  In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate	e fee to exclude	
receipts from subscribers located within the station's local service area, from your system's total gross receipts. To tal	·	Computation of
this exclusion, you must:		Base Rate Fee
<b>First:</b> Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determ		and Syndicated
DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee	e for each group.	Exclusivity Surcharge
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		for
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exemp must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A		Partially Distant
However, if your cable system is wholly located outside all major television markets, complete block A only.		Stations, and for Partially
How to Identify a Subscriber Group for Partially Distant Stations  Step 1: For each community served, determine the local service area of each wholly distant and each partially distant	t station you	Permitted
carried to that community.	. Station you	Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers we outside the station's local service area. A subscriber located outside the local service area of a station is distant to that		
the same token, the station is distant to the subscriber.)	it station (and, by	
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are dist subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. No		
system will have only one subscriber group when the distant stations it carried have local service areas that coincide.	le triat a cable	
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your	system's	
subscriber groups. In each section:		
Identify the communities/areas represented by each subscriber group.		
<ul> <li>Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to subscribers in the group.</li> </ul>	to all of the	
• If:		
1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave	e it in parts 2, 3,	
and 4 of this schedule; or, 2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it	t in block B.	
part 6 of this schedule.	ŕ	
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 in the paper SA3 form.</li> </ul>	ral instructions	
• 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.	,	

# LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 63029 **BellSouth Telecommunications, LLC** 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 OWNE BellSouth Telecon						S	YSTEM ID# 63029	Name
BI	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Stations
T			0.00		<u> </u>		0.00	
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 35,991	,565.08	Gross Receipts Second	d Group	\$ 23,55	30,401.30	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				WPBT/WPBTHD	0.25			
				WBEC WLRN/WLRNHD	0.25 0.25			
				WEIGHA	0.23			
Total DSEs			0.00	Total DSEs			0.75	
	`ro!!~	4 600			Cro	. 45	-	
Gross Receipts Third G	поир	ə 1,083	,969.53	Gross Receipts Fourth	Group	φ 1,5	53,188.16	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	12,394.44	
			riber group	as shown in the boxes al	bove.			
Enter here and in block	3, line 1,	space L (page 7)	·			\$	13,820.04	

	YSTEM ID# 63029	J					nmunica	
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	_OCK A: C	Bl
-		SUBSCRIBER GROU	SIXTH			SUBSCRIBER GROU	FIFTH	
Comp	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Comp	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base							0.25	WBEC
а							0.25	WLRN/WLRNHD
Sync		  -						
Excl							_	
Surc								
Par		L						
Dis								
Sta								
							<u>.</u>	
"								
	0.00	l !	!	Total DSEs	0.50		<del>'</del>	otal DSEs
					969.06	\$ 267,		Proce Pacainte Firet (2)
	72,306.49	\$ 6	d Group	Gross Receipts Secon		<del>*</del> ,	roup	bross receipts rirst G
		\$ 6		Base Rate Fee Secon	425.60			
=	0.00	\$	d Group		425.60	ş 1,	roup	lase Rate Fee First G
- - -	0.00		d Group		425.60		roup	Base Rate Fee First G
	<b>72,306.49</b> 0.00	\$	d Group	Base Rate Fee Secon	<b>425.60</b>	ş 1,	roup	iase Rate Fee First G
	0.00 UP	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	<b>425.60</b> JP  0	\$ 1,	SEVENTH	sase Rate Fee First Green State Stat
	0.00 UP	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	<b>425.60</b> JP  0	\$ 1,	SEVENTH	ase Rate Fee First G
	0.00 UP	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	<b>425.60</b> JP  0	\$ 1,	SEVENTH	sase Rate Fee First Green State Stat
	0.00 UP	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	<b>425.60</b> JP  0	\$ 1,	SEVENTH	sase Rate Fee First Green State Stat
	0.00 UP	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	<b>425.60</b> JP  0	\$ 1,	SEVENTH	Sase Rate Fee First Green Scommunity/ AREA
	0.00 UP	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	<b>425.60</b> JP  0	\$ 1,	SEVENTH	Base Rate Fee First Grown Scommunity/ AREA
	0.00 UP	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	<b>425.60</b> JP  0	\$ 1,	SEVENTH	Sase Rate Fee First Green Scommunity/ AREA
	0.00 UP	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	<b>425.60</b> JP  0	\$ 1,	SEVENTH	sase Rate Fee First Green State Stat
	0.00 UP	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	<b>425.60</b> JP  0	\$ 1,	SEVENTH	Base Rate Fee First Grown Scommunity/ AREA
	0.00 UP	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	<b>425.60</b> JP  0	\$ 1,	SEVENTH	Base Rate Fee First Grown Scommunity/ AREA
	0.00 UP	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	<b>425.60</b> JP  0	\$ 1,	SEVENTH	Base Rate Fee First Grown Scommunity/ AREA
	0.00 UP	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	<b>425.60</b> JP  0	\$ 1,	SEVENTH	Base Rate Fee First Grown Scommunity/ AREA
	0.00 UP	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	<b>425.60</b> JP  0	\$ 1,	SEVENTH	Base Rate Fee First Grown Scommunity/ AREA
	0.00 UP	\$ SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	<b>425.60</b> JP  0	\$ 1,	SEVENTH	CALL SIGN
	0.00  JP  DSE	\$ SUBSCRIBER GROU	d Group  EIGHTH  DSE	CALL SIGN  CALL SIGN  Total DSEs	425.60  JP  O  DSE  0 0.00	\$ 1,	DSE	CALL SIGN  Contain DSEs
	0.00  JP  DSE  0.00	SUBSCRIBER GROU	d Group  EIGHTH  DSE	Base Rate Fee Secon  COMMUNITY/ AREA  CALL SIGN	425.60  JP  O  DSE	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs
	0.00  JP  DSE  0.00	SUBSCRIBER GROU	DSE Group	CALL SIGN  CALL SIGN  Total DSEs	425.60  JP  O  DSE  0 0.00	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA

Base Rate and   Syndicate   Exclusivi   Surcharg   Formation   Stations   S	BellSouth Telecon		LIUIIS, LLU					63029	Name
	Bl				TE FEES FOR EAC			- ID	
Computation   CALL SIGN   DSE   CALL SIGN   DS		FIRST	SUBSURIBER GROU		COMMUNITY/ADD		SUBSCRIBER GROU		9
SIGN   DSE	COMMUNITY AREA			<u> </u>	COMMUNITY AREA			U	_
And Syndicate Exclusive Surchard for Partial Distant Station	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Syndicate Exclusive Surcharge for Partially Distant Stations  SEES 0.000 Total DSES 0.000 Secret Four Subscriber Group Subscr									Base Rate
SES							 		
Surcharg for   Partially   Distant   Stations									_
SES									
Distant Stations  SES 0.00 SES 0.00 Seceipts First Group \$ 35,991,565.08 See Fee First Group \$ 0.00 Seceipts Fourth Subscriber Group \$ 0.00 Sign DSE CALL Sign DSE CALL Sign DSE CALL Sign DSE Seceipts Fourth Group \$ 0.00 Seceipts First Group \$ 0.00 Seceipts Fourth Group \$ 0.00 Seceipts Fourt									
Stations									Partially
SES									Distant
Sign   DSE   CALL SIGN   DSE									Stations
Sign   DSE   CALL SIGN   DSE									
Sign   DSE   CALL SIGN   DSE									
Sign   DSE   CALL SIGN   DSE									
Sign   DSE   CALL SIGN   DSE									
Sign   DSE   CALL SIGN   DSE									
THIRD SUBSCRIBER GROUP  THIRD SUBSCRIBER GROUP  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O  CALL SIGN  DSE  CALL S	otal DSEs			0.00	Total DSEs			0.00	
THIRD SUBSCRIBER GROUP  COMMUNITY/ AREA	Gross Receipts First G	roup	\$ 35,991,	565.08	Gross Receipts Seco	ond Group	\$ 23,5	30,401.30	
THIRD SUBSCRIBER GROUP  COMMUNITY/ AREA									
THIRD SUBSCRIBER GROUP  COMMUNITY/ AREA	Base Rate Fee First G	oup	s	0.00	Base Rate Fee Seco	and Group	s	0.00	
ONITY/ AREA O COMMUNITY/ AREA O SIGN DSE CALL SIGN DSE CAL					2001100100				
SIGN DSE CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE		THIRD	SUBSCRIBER GROU				SUBSCRIBER GROU	_	
SES	COMMUNITY/ AREA			0	COMMUNITY/ AREA	<b>A</b>		0	
SES 0.00 Total DSES 0.00 gross Receipts Fourth Group \$ 1,553,188.16	CALL SIGN	DSF	CALL SIGN	DSF	CALL SIGN	DSF	CALL SIGN	DSF	
\$ 1,683,969.53   Gross Receipts Fourth Group \$ 1,553,188.16									
\$ 1,683,969.53   Gross Receipts Fourth Group \$ 1,553,188.16									
\$ 1,683,969.53   Gross Receipts Fourth Group \$ 1,553,188.16							-		
\$ 1,683,969.53   Gross Receipts Fourth Group \$ 1,553,188.16									
\$ 1,683,969.53   Gross Receipts Fourth Group \$ 1,553,188.16									
\$ 1,683,969.53   Gross Receipts Fourth Group \$ 1,553,188.16									
\$ 1,683,969.53   Gross Receipts Fourth Group \$ 1,553,188.16									
teceipts Third Group \$ 1,683,969.53   Gross Receipts Fourth Group \$ 1,553,188.16									
teceipts Third Group \$ 1,683,969.53   Gross Receipts Fourth Group \$ 1,553,188.16									
\$ 1,683,969.53   Gross Receipts Fourth Group \$ 1,553,188.16									
\$ 1,683,969.53   Gross Receipts Fourth Group \$ 1,553,188.16									
teceipts Third Group \$ 1,683,969.53   Gross Receipts Fourth Group \$ 1,553,188.16									
teceipts Third Group \$ 1,683,969.53   Gross Receipts Fourth Group \$ 1,553,188.16									
	otal DSEs			0.00	Total DSEs			0.00	
	Gross Receints Third G	Group	s 1.683		Gross Receipts Four	th Group	s 1.5	_	
ate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00		<b>-</b>	,,,,,,	, , , , , , , , ,	3.000 1.000/pto 1.001	J. Jup	,0	,	
ate Fee Third Group  \$ 0.00     Base Rate Fee Fourth Group  \$ 0.00									
	Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				riber group	as shown in the boxes	s above.			
ate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	nter here and in block	3, line 1, s	space L (page 7)				\$	0.00	

LEGAL NAME OF OWNE BellSouth Telecon				_		S	YSTEM ID# 63029	Name
BL				TE FEES FOR EACH				
	FIFTH	SUBSCRIBER GROL			SIXTH	SUBSCRIBER GROL		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
		-						
	ļ	-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$ 267,	969.06	Gross Receipts Second	d Group	\$ 67	72,306.49	
<b>Base Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
S	SEVENTH	SUBSCRIBER GROU	JP		EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
<b>Base Rate Fee</b> Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
se Rate Fee: Add the			riber group	as shown in the boxes a	bove.	\$		

ACCOUNTING PERIOD: 2019/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **BellSouth Telecommunications, LLC** 63029 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market **Base Rate Fee** INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this **Distant** schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . . . THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

ACCOUNTING PERIOD: 2019/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **BellSouth Telecommunications, LLC** 63029 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market **Base Rate Fee** INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this **Distant** schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . . . SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown