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			
8-24-22	\$ ALLOCATION NUMBER			

Return completed workbook by email to

coplicsoa@copyright.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting Period	2022/1				
B	Instructions: Give the full legal name of the owner of the cable system. If the owner is a strate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines of the were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire accounting the the entire accounti	ss of the cable syste on the last day of th unting period.	m. e accounting period should sub		
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM				
	Frontier Southwest Incorporated				
				6255820221 62558 2022/1	
	401 Merritt 7 Norwalk, CT 06851				
С	INSTRUCTIONS: In line 1, give any business or trade names used to id				
	names already appear in space B. In line 2, give the mailing address of	the system, if diffe	erent from the address given	in space B.	
System	1 IDENTIFICATION OF CABLE SYSTEM: FiOS TV (Carrolton, TX) VHO1				
	MAILING ADDRESS OF CABLE SYSTEM: 2001 Westgate Dr (Number, street, rural route, apartment, or suite number) Carrolton, TX 75006				
	(City, town, state, zip code)				
D Area	Instructions: For complete space D instructions, see page 1b. Identify with all communities.	only the first comn	nunity served below and relis	t on page 1b	
Served	CITY OR TOWN	STATE			
First	Keller	TX			
Community	Below is a sample for reporting communities if you report multiple cha				
	CITY OR TOWN (SAMPLE) Alda	STATE MD	CH LINE UP A	SUB GRP#	
Sample	Alliance	MD	В	2	
	Gering	MD	В	3	

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

ORM SA3E. PAGE 1b.								
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#					
Frontier Southwest Incorporated			62558					
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.								
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.								
If all communities receive the same complement of television broadcast stations (i.e., one 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 reledesignated by a number (based on your reporting from Part 9).	column blank. If	you report any sta	tions					
When reporting the carriage of television broadcast stations on a community-by-commun channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a (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#					
Keller	TX			First				
Argyle	тх			Community				
Bartonville	TX			_				
Carrollton	TX							
Colleyville	TX							
Collin County	TX			See instructions for				
Coppell	TX			additional information				
Copper Canyon	TX			on alphabetization.				
Corinth	TX							
Dallas	TX							
Dallas County	тх							
Denton	TX			Add rows as necessary.				
Denton County	TX							
Dish County	TX							
Double Oak	TX							
Flower mound	TX							
Fort Worth	TX							
Frisco	TX							
Garland	TX							
Grand Prairie	TX							
Grapevine	TX							
Hebron	TX							
Highland Village	TX							
Irving	TX							
Justin	TX							
Lewisville	TX							
Lucas	TX							
Murphy	TX							
Northlake	TX							
Parker	TX							
Plano	TX							
Rockwell County	TX							
Rowlett	TX							
Sachse	TX							
Southlake	TX							
St Paul	TX							
Tarrant County	TX							
The Colony	TX							

Wataugua	TX		
Westlake	TX		
Wylie	TX		

Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#
Frontier Southwest Incorporated 62558

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			
	NO. OF					NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS		RATE		CATEGORY OF SERVICE	SUBSCRIBERS	RATE	
Residential:								
Service to first set	55,004	\$	24.99					
 Service to additional set(s) 		Ī						
• FM radio (if separate rate)								
Motel, hotel								
Commercial	6,708	\$	34.99					
Converter		Ī						
Residential								
Non-residential								
		T		1 I''			T	

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2			
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE RATE
Continuing Services:		Installation: Non-residential		See Attached
• Pay cable		Motel, hotel		
 Pay cable—add'l channel 		Commercial	\$ 34.99	
 Fire protection 		Pay cable		
 Burglar protection 		Pay cable-add'l channel		
Installation: Residential		Fire protection		
 First set 	\$ 24.99	Burglar protection		
 Additional set(s) 		Other services:		
 FM radio (if separate rate) 		Reconnect		
 Converter 		Disconnect		
		Outlet relocation		
	• Move to new address			

Category of Service	Residenti al Rate	Commercial Rate
Block 1		
Installation – Initial Installation	75	89.99
Installation - Additional Set(s)	34.99	34.99
Outlet Relocation	69.99	69.99
Block 2		
FiOS TV Prime HD	94	89.99
FiOS TV Custom (2 channel)	N/A	64.99
FiOS TV Extreme HD	99	94.99
FiOS TV Custom Essentials	83	104.99
FiOS TV Ultimate HD	110	
Global Sports Pass	6	11.99
Sports Pass	9.99	
Kids, Teen and Family	6	
Cinemax	5	15.99
EPIX	5	15.99
Showtime, Starz Entertainment Pack	29.99	up to 28.99
Starz/Encore	5	N/A
НВО	5	
Starz/Encore Pack - Ultimate HD		N/A
Starz/Encore Pack - Extreme HD		13.99
Showtime/The Movie Channel / Flix	5	N/A
Fully Loaded Ent. Pack		48.99
here!	N/A	8.99
Music Choice	N/A	34.99
Showtime	N/A	15.99
Playboy + Playboy en Espanol		N/A
Fully Loaded Ent. Pack - Ultimate HD		31.98
Extreme Fully Loaded Ent. Pack		41.97
Prime Fully Loaded Ent. Pak		N/A
Showtime Starz Ent. Pack		N/A
Showtime Starz Ent. Pack - Ultimate HD		9.99
Latino Package	15	14.99

STARZ	N/A		15.99
Too Much for TV!	N/A		14.99
International Premium Channels	Varies	Varies	
On Demand/Pay Per View	Varies		Varies
Cable Card	5.99		4.99
Digital Adapter	6.99		5.99
Set Top Box	11		11.99
FiOS Wireless Router	9.99		9.99 / 199.99
Quantum Whole-Home DVR	11		N/A
Quantum Enhanced ExperienceDVR Service	10		19.99
Quantum Premium Experience Quantum TV - Enhanced	20		N/A
Standard TV Whole-Home DVR Quantum TV - Premium	15		N/A
			N/A
			N/A
Additional Outlet.Set-Top Box Connection	34.99		34.99
			49.99
New Outlet Installation	54.99 69.99		69.99
Existing Outlet Connection	34.99		34.99
FiOS TV Activation Fee	N/A		99.99
Service Repair Visit (1st 1/2 hr)	91		120
Service Repair (add'l 1/2 hr)	46		53
Set Top Box Retrieval			99.99
Tech Visit Charge	99.99		99.99
STB Return = Drop off	Free		No Charge
Specialty DVR Upgrade			N/A
Set Top Box Add/Upgrade Drop Fee			19.99
TV Equipment Upgrade Fee			N/A
TV Equipment Tech Install			N/A
Seasonal Service Suspension	34.99		N/A
Service Suspend for nonpayment			29.99
Additional or Big Button Remote	14.99		
Replacement Remote	14.99		14.99

		199.99
		100
		175
Unreturned/Damaged STB SD	100.00.	240
Unreturned/Damaged STB Media Client	100	N/A
Unreturned/Damaged STB HD	100	350
Unreturned/Damaged STB SD DVR	200	N/A
Unreturned/Damaged STB HD DVR	200	550
Unreturned/Damaged STB Media Server	200	N/A

	LEGAL NAME OF OWN	ER OF CARLE SV	/STEM:			SYSTEM ID#	£
	Frontier South					62558	Name
PF	IMARY TRANSMITTE	RS: TELEVISIO	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), 76.61(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							
eaca W its or (for For pla	sis under specific FC to not list the station station was carried ist the station here, basis. For further in in the paper SA3 fo Column 1: List each multicast stream as "WETA ETA-simulcast). Column 2: Give the community of licens which your cable sy Column 3: Indicate ucational station, by independent multic in the meaning of the Column 4: If the stanation of local servi Column 5: If you have ble system carried the distant statis.	CC rules, regularies, regularies in space only on a substand also in spatformation concurrent. In station's call associated with a channel number. For example is the cast, "E" (for neach case we entering the least), "E" (for neach case we entered "Ye ne distant station on a part-tirion of a distant entered into on substant entered into on subst	ations, or autions, or autions, or autions, or autions—but do listitute basis. ace I, if the stateming substitute basis bearing substitute basis basis bearing substitute basis bearing basis	norizations: t it in space I (the ation was carried tute basis station report origination cording to its over the properties of the ation is a network), "N-M" (I educational), continuation is a network in its education in its education is a network in its education in its education is a network in its education is a network in i	de Special Statem de both on a substins, see page (v) on program service er-the-air designate column 1 (list each the television standard, p.C. This ork station, an indefor network multion "E-M" (for noncetions located in the distant"), enter "You in the column 5, bod. Indicate by enactivated channel subject to a royalt stween a cable sy	nent and Program Log)—if the itute basis and also on some other of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi- ch stream separately; for example tion for broadcasting over-the-air in a may be different from the channel ependent station, or a noncommercial cast), "I" (for independent), "I-M" commercial educational multicast). The paper SA3 form. es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your stering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing	Television
the tic ex	n "E" (exempt). For splanation of these the Column 6: Give the	simulcasts, also ree categories e location of ea Canadian statio	o enter "E". If , see page (v ch station. Fo ns, if any, giv	you carried the) of the general or U.S. stations, e the name of the	channel on any o instructions locate list the communit ne community with	ary transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. by to which the station is licensed by the h which the station is identified. In channel line-up.	
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th tice ex F(N)	n "E" (exempt). For splanation of these the Column 6: Give the CC. For Mexican or Cote: If you are utilizing the CC. For Mexican or Cote: If you are utilizing the CC. For Mexican or Cote: If you are utilizing the CC. For Mexican or Cote: If you are utilizing the CC. For Mexican or Cote: If you are utilizing the CC. For Mexican or CC.	2. B'CAST CHANNEL NUMBER 2 55 4 5 27 8 33 39 11 13 52	center "E". If , see page (v) ch station. Fo ns, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION E I N I N I N E I N E I I N E	you carried the of the general or U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	channel on any o instructions locate list the community e community with space G for each AA 5. BASIS OF CARRIAGE	ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the h which the station is identified. channel line-up. 6. LOCATION OF STATION Denton, TX Lake Dallas, TX Port Worth, TX Dallas, TX Dallas, TX Dallas, TX Dallas, TX Dallas, TX Dallas, TX Fort Worth, TX	additional information
th tice ex F(N) 1 D A D X D D X T E F D D X	n "E" (exempt). For splanation of these the Column 6: Give the CC. For Mexican or Cote: If you are utilizing the CC. For Mexican or Cote: If you are utilizing the CC. For Mexican or Cote: If you are utilizing the CC. For Mexican or Cote: If you are utilizing the CC. For Mexican or Cote: If you are utilizing the CC. For Mexican or CC.	simulcasts, also ree categories e location of ea canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 2 55 4 5 27 8 33 39 11 13 52 58	center "E". If , see page (v) ch station. Fo ns, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION E I N I N I N E I N E I I N E	you carried the of the general or U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	channel on any o instructions locate list the community e community with space G for each AA 5. BASIS OF CARRIAGE	ther basis, enter "O." For a further ed in the paper SA3 form. by to which the station is licensed by the had which the station is identified. channel line-up. 6. LOCATION OF STATION Denton, TX Lake Dallas, TX Dallas, TX Fort Worth, TX Dallas, TX Dallas, TX Dallas, TX Dallas, TX Fort Worth, TX Dallas, TX Dallas, TX Fort Worth, TX Dallas, TX	additional information
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th tice of FC No.	n "E" (exempt). For splanation of these the Column 6: Give the Column 6: Give the Co. For Mexican or Cote: If you are utilizing the column 6: Give the Co. For Mexican or Cote: If you are utilizing the column for the	simulcasts, also ree categories e location of ea canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 2 55 4 5 27 8 33 39 11 13 52 58 47 49	center "E". If , see page (v) ch station. Fo ns, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION E I N I N I N I I I I I I I I I I I I	you carried the of the general or U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	channel on any o instructions locate list the community e community with space G for each AA 5. BASIS OF CARRIAGE	ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the h which the station is identified. channel line-up. 6. LOCATION OF STATION Denton, TX Lake Dallas, TX Dallas, TX Fort Worth, TX Dallas, TX Dallas, TX Dallas, TX Fort Worth, TX Dallas, TX	additional information
th tice ex FC No.	n "E" (exempt). For splanation of these the Column 6: Give the Column 6: Give the Co. For Mexican or Cote: If you are utilizing the Column 6: Give the Co. For Mexican or Cote: If you are utilizing the Column 6: Give the Co	simulcasts, also ree categories e location of ea canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 2 55 4 5 27 8 33 39 11 13 52 58 47 49 21	center "E". If , see page (v) ch station. Fo ns, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION E I N I N I I N I I I I I I I I I I I	you carried the of the general or U.S. stations, e the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	channel on any o instructions locate list the community e community with space G for each AA 5. BASIS OF CARRIAGE	ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the h which the station is identified. channel line-up. 6. LOCATION OF STATION Denton, TX Lake Dallas, TX Port Worth, TX Dallas, TX Fort Worth, TX Fort Worth, TX	additional information

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Frontier Southwest Incorporated

SYSTEM ID#

Name

Name

PRIMARY TRANSMITTERS: TELEVISION

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

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under 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 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 identified. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP AB 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 1. CALL 6. LOCATION OF STATION SIGN **CHANNEL** OF (Yes or No) **CARRIAGE** NUMBER **STATION** (If Distant) **KAZD-Simulcasting** 55 ı No Lake Dallas, TX I Simulcasting 35 No Dallas, TX KXAS-Simulcasting 41 N No Fort Worth, TX D WDFI-Simulcasting 36 ı No Dallas, TX **KFAA-Simulcasting** 9 Ν No Dallas, TX D **KDAF-Simulcasting** 32 ı No Dallas, TX **KXTX-Simulcasting** 40 I No Dallas, TX 19 Ν KTVT-Simulcasting No Fort Worth, TX **KERA-Simulcasting** 14 Ε No Dallas, TX Simulcasting 51 I No Fort Worth, TX I KTXD-Simulcasting 47 No Greenville, TX I KSTR-Simulcasting 48 No Irving, TX KTXA-Simulcasting ı 21 No Fort Worth, TX U KUVN-Simulcasting 23 ı No Garland, TX 29 **KMPX-Simulcasting** No Μ ı Decatur, TX Cozi TV KSAS N-M Fort Worth, TX οz 5 No 33 I-M No Dallas, TX KDAF Antenna KTXA Me TV 21 I-M Fort Worth, TX No

G

Primary Transmitters: Television

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN					SYSTEM ID#	Name
Frontier South	west Incorp	orated			62558	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space Corarried by your cable Sec Crules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis Seasis under specife FC Denoral D	consideration of a distant entered into on a part-tirition of a distant entered into on a primary transis in electron of a distant entered into on a primary transis in electron of each also in a part-tirition of a distant entered into on a primary transis includes a canadian statio a canadian statio a canadian statio a primary transis includes a categories a canadian statio	r television stane accounting in June 24, 1944), or 76.63 (r d in the next prespect to any ations, or auth G—but do list titute basis. In the state of the station accounting substitute basis. In a station account of the station. In a station account of the station. In the station account of the station. In the station account of the local servage (v) of the local serva	period, except 81, permitting the ferring to 76.6 paragraph. A distant stations orizations: to the ferring to 76.6 paragraph. A distant stations orizations: to the ferring	(1) stations carried the carriage of certa 1(e)(2) and (4))]; as a carried by your come Special Statement of the Special	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your stering "LAC" if your cable system capacity. If payment because it is the subject estem or an association representing for transmitter, enter the designa- her basis, enter "O." For a further find in the paper SA3 form. If the which the station is licensed by the form which the station is identifed.	Primary Transmitters: Television
,			EL 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	
X KXTX Exitos	39	I-M	No	,	Dallas, TX	
U KUVN Bounce	23	I-M	No		Garland, TX	
D KDFI Movies	36	I-M	No		Dallas, TX	
D KDFI Get TV	48	I-M	No		Irving, TX	
T KTVT Decades	19	N-M	No		Fort Worth, TX	
S KSTR GRIT TV	48	I-M	No		Irving, TX	
U KUVN Escape	23	I-M	No		Dallas, TX	
D KDFI Buzzer	36	I-M	No	<u> </u>	Irving, TX	
					9,	

ACCOUNTING PERIOD: 2022/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62558 **Frontier Southwest Incorporated** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM LOCATION OF STATION

FORM SA3E. PAGE 5. ACCOUNTING PERIOD: 2022/1

TOTAL ONOE. I MOE 0.							7 ENIOD: 2022/1			
Frontier Southwest Inc					S	YSTEM ID# 62558	Name			
SUBSTITUTE CARRIAGI	E: SPECIAI	L STATEMEN	T 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 X No Note: If your answer is "Yes," you must complete the program										
log in block 2.	,		,	, , , , , , , , , , , , , , , , , , ,	р р					
2. LOG OF SUBSTITUTE			4- line -							
In General: List each subst clear. If you need more spa				wnerever po	ssible, if their meaning is	i				
Column 1: Give the title	of every nor	nnetwork televi	sion program (substitute p							
period, was broadcast by a under certain FCC rules, re						tion				
SA3 form for futher informa	ition. Do no	t use general c	categories like "movies", or							
titles, for example, "I Love I	ucy" or "NB	BA Basketball:	76ers vs. Bulls." r "Yes." Otherwise enter "N	o."						
			isting the substitute progra							
			e community to which the							
the case of Mexican or Car Column 5: Give the mor			tem carried the substitute p			th				
first. Example: for May 7 giv				-1.1	List the Conservation					
to the nearest five minutes.			gram was carried by your o ed bv a svstem from 6:01:1			у				
stated as "6:00-6:30 p.m."	·			•	•					
Column 7: Enter the letter to delete under FCC rules a			was substituted for progra			d				
gram was substituted for pr										
effect on October 19, 1976	•									
				WH	EN SUBSTITUTE					
S	UBSTITUT	E PROGRAM		CARR	IAGE OCCURRED	7. REASON FOR				
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	DELETION				
					_					
					_					
					_					
										
	-	_								
					<u> </u>					
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ACCOUNTING PERIOD: 2022/1 FORM SA3E. PAGE 6.

Name	Frontier Sou								S	*YSTEM ID# 62558	
	PART-TIME CA	PRIAGE I OG									
J 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 (Pates and hours of carriage): For each station, list the dates and hours when part-time carriage occ-										
			DATE	S AND HOURS	OF F	PART-TIME CAR	RRIAGE				
		WHEN	N CARRIAGE OCCI	IRRED			WHE	N CARRIAGE O	CCLIE	RED	
	CALL SIGN	VVIILI	HOU			CALL SIGN	WITE		HOURS		
		DATE	FROM	TO			DATE	FROM		ТО	
									-=		
									-=		
			_						-=		
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LEGA	SAL NAME OF OWNER OF CABLE SYSTEM: Ontier Southwest Incorporated	SYSTEM ID# 62558	Name				
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file 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. \$ 19,383,605.40							
IMP	PORTANT: You must complete a statement in space P concerning gross receipts. (Amount of gross receipts.	ceipts)					
 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. If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of 							
bloc	ck 3 below.						
3 be	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 in block elow.						
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be entered on line a block 4 below.						
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are required to pay at least the minimum fee, regardless of whether they carried any distant stations. This fee is 1.064 percent of the system's gross receipts for the accounting period.						
	Line 2. Multiply the amount in line 1 by 0.01064.	83,605.40					
	Enter the result here. This is your minimum fee. \$ 2	06,241.56					
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the information you gave in space G. If, in space G, you identified any stations as "distant" by stating "Yes" in column 4, you must check "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period? Yes—Complete the DSE schedule. No—Leave block 3 below blank and complete line 1, block 4.						
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero.						
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero.	0.00					
	Line 3. Add lines 1 and 2 and enter here.	-					
Block 4		06,241.56					
	whichever is larger. Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7		Cable systems submitting				
	(block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.	0.00	additional deposits under				
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	Section 111(d)(7) should contact the Licensing				
	Line 4. FILING FEE	725.00	additional fees. Division for the				
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	06,966.56	appropriate form for submitting the additional fees.				
	EFT Trace # or TRANSACTION ID #		auditional lees.				
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See page (i) of the general instructions located in the paper SA3 form and the Excel instructions tab for more information.)						

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#							
Name	Frontier Southwest Incorporated	62558							
	1 Totale Southwest incorporated	02000							
	CHANNELS								
M	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations								
	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.								
Channels									
	Enter the total number of channels on which the cable	34							
	system carried television broadcast stations								
	2. Enter the total number of activated channels								
	on which the cable system carried television broadcast stations and nonbroadcast services	663							
	and nonbroadcast services								
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual								
Individual to	we can contact about this statement of account.)								
Be Contacted									
for Further	Name Karol Whittaker Telephone 214	1-534-6827							
Information	Name Raioi Willtakei								
	Address 7979 N Beltline Road (Number, street, rural route, apartment, or suite number)								
	Irving, TX 75063 (City, town, state, zip)								
	Email karol.whittaker@ftr.com Fax (optional)								
	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulation	ns.)							
0		,							
Certification	• I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)								
	(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or								
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system	ı as identified							
	in line 1 of space B and that the owner is not a corporation or partnership; or								
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of	the cable system							
	in line 1 of space B.	,							
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained hereir	n							
	are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.	'							
	[18 U.S.C., Section 1001(1986)]								
	/s/ Jessica Matushek								
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the bo	ny and press the "F2"							
	button, then type /s/ and your name. Pressing the "F2" button will avoid enabling Excel's Lotus compatibility								
	- Lordo Maria II								
	Typed or printed name: Jessica Matushek								
	Title: Sr. Director Accounting								
	Title: Sr. Director Accounting (Title of official position held in corporation or partnership)								
	Data: August 22, 2022								
	Date: August 22, 2022								

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Frontier Southwest Incorporated	62558	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the service of providing secondary transmissions of primary broadcast transmitters, the system shall not inconscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section. For more information on when to exclude these amounts, see the note on page (viii) of the general instructions.	basic lude sub- 119."	Special Statement Concerning
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmade by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below		Gross Receipts Exclusion
Name Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underproperty. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	payment.	Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	- 00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L (page 7)	- st charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assistance contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	e please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office please list below the owner, address, first community served, accounting period, and ID number as given in the filing.		
Owner Address		
First community served Accounting period ID number		

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

ACCOUNTING PERIOD: 2022/1

DSE SCHEDULE. PAGE 10.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

SCHEDULE

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

- 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:

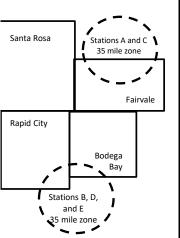
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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.



	Distant Stations Carried		Identification o	of Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
in	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)	
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)

Name		OWNER OF CABLE SYSTEM: othwest Incorporated						SYSTEM ID# 62558
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	st the call sign of all dista L: For each station, give the correspond with the infor L: For each station, give the L: Divide the figure in colupted L: At least to the third decine L: For each independent so L: For each independent so L: Wultiply the figure in colupoint. This is the station's	ne number of hot mation given in some total number of the figure of the	urs your cable syster pace J. Calculate or of hours that the statire in column 3, and of the "basis of carriagitype-value" as "1.0." ure in column 5, and information on round	m carried the stat ally one DSE for e ion broadcast over give the result in a e value" for the s For each networ give the result in ding, see page (v	ion during the account ach station. er the air during the account decimals in column 4. Tation. k or noncommercial ecount of the column 6. Round to notice in the general instruction.	counting period. This figure must flucational station, to less than the	
	1. CALL SIGN	2. NUMBE OF HOU CARRIE	R 3 JRS ED BY	AC STATIONS: NUMBER OF HOURS STATION	4. BASIS OI CARRIAC VALUE	5. TYF		SE
		SYSTE		ON AIR				
			÷		=	X	=	
			÷ ÷		=	x x		
			÷			x		
			÷		=	x	=	
			÷		=	x	=	
			÷		=	x	=	
			÷		=	x	=	
Computation of DSEs for Substitute-Basis Stations	Instructions: Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4:	the the call sign of each state of the call sign of	ation listed in spa itution for a progras as shown by the ork programs duri number of live, r spond with the int in the calendar y in 2 by the figure	ace I (page 5, the Logram that your system letter "P" in column 7 ing that optional carrinonnetwork programs formation in space I. year: 365, except in a in column 3, and give	g of Substitute Pr was permitted to 7 of space I); and age (as shown by s carried in subst a leap year.	o delete under FCC rul the word "Yes" in column itution for programs the	es and regular- n 2 of at were deleted ess than the third	m).
		SL	JBSTITUTE-E	BASIS STATION	IS: COMPUTA	ATION OF DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR		1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		-		=			÷	=
		-		=			÷	=
		-		=			÷	=
		=		=			÷	=
		-					÷	=
	Add the DSEs	OF SUBSTITUTE-BASI	S STATIONS:			0.0		=
5		ER OF DSEs: Give the am s applicable to your system		xes in parts 2, 3, and	4 of this schedule	and add them to provid	le the total	
Total Number	1. Number	of DSEs from part 2 ●				>	0.00	
of DSEs		of DSEs from part 3 ●				•	0.00	
J. D 023		of DSEs from part 4 •				: ———	0.00	
	J. Nullibel	o. Does nom part 4 ♥					0.00	
	TOTAL NUMBE	R OF DSEs					<u> </u>	0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2022/1

	WNER OF CABLE S						s	YSTEM ID# 62558	Name
In block A: • If your answer if schedule.	 If your answer if "Yes," leave the remainder of part 6 and part 7 of the DSE schedule blank and complete part 8, (page 16) of the schedule. If your answer if "No," complete blocks B and C below. 								6
			BLOCK A:	TELEVISION MA	ARKETS				Computation of 3.75 Fee
effect on June 24,	1981?	schedule—D	•	er markets as defin LETE THE REMAIN			C rules and regula	tions in	3.73 Tee
		BLO	CK B: CARF	RIAGE OF PERM	//ITTED DS	Es			
Column 1: CALL SIGN	FCC rules and re instructions for the	egulations pric ne DSE Sched	or to June 25, 1 dule. (Note: The	part 2, 3, and 4 of the 981. For further ex the letter M below ref act of 2010.)	planation of p	ermitted station	ns, see the	·	
Column 2: BASIS OF PERMITTED CARRIAGE	BASIS OF (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) PERMITTED A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to								
Column 3:		e stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
								0.00	
		Į.	BLOCK C: CC	OMPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of l	DSEs from p	oart 5 of this s	chedule					
Line 2: Enter the	sum of permitted	d DSEs from	block B abov	ve					
				of DSEs subject t of this schedule)		ite.		0.00	
Line 4: Enter gro	ess receipts from	space K (pa	ge 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ine 4 by 0.0375 a	ınd enter sur	n here				X		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	Es from line (3					<u>-</u>	carriage? If yes, see part 9 instructions.
I ine 7: Multiply li	ine 6 by line 5 and	d enter here	and on line 2	. block 3. space L	(page 7)			0.00	

ACCOUNTING PERIOD: 2022/1

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **Frontier Southwest Incorporated** 62558 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 Worksheet for 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 identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED 2. PRIOR SIGN DSE **PERIOD CARRIAGE** DSE Instructions: Block A must be completed. 7 Computation If your answer is "Yes," complete blocks B and C, below. of the If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. Syndicated **BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? X Yes—Complete blocks B and C . No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Was any station listed in block B of part 7 carried in any commu-Is any station listed in block B of part 6 the primary stream of a nity served by the cable system prior to March 31, 1972? (refer commercial VHF station that places a grade B contour, in whole or in part, over the cable system? to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

	EM ID# 62558	Name
BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1 Enter the amount of gross receipts from space K (page 7)	605.40	7
Section 2 A. Enter the total DSEs from block B of part 7	0.00	Computation of the
B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is any portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below.		
SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a • Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below. If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE		
is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below. A. Enter 0.00599 of gross receipts (the amount in section1)		
B. Enter 0.00377 of gross receipts (the amount in section 1)		
C. Subtract 1.000 from total permitted DSEs (the figure on		
line C in section 2) and enter here		
D. Multiply line B by line C and enter here		
E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
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		
Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a 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 DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)		
B. Enter 0.00189 of gross receipts (the amount in section 1)		
C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
D. Multiply line B by line C and enter here		
E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name		ME OF OWNER OF CABLE SYSTEM: Frontier Southwest Incorporated	SYSTEM ID# 62558						
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.							
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$							
of the Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ _\$							
Surcharge									
	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	You m 6 was • In blo	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of p checked "Yes," use the total number of DSEs from part 5. bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. It answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	art						
of	-	ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B bel	ow						
Base Rate Fee	blank What i	i. is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers							
		pocated within that station's local service area and others were located outside that area. For the definition of a station's "located"	al						
	service	e area," see page (v) of the general instructions.							
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS							
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?							
		Yes—Complete part 9 of this schedule. X No—Complete the following sections.							
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE							
	Section 1		10						
		Enter the amount of gross receipts from space K (page 7)	.40_						
	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,"							
			0.00						
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.							
		A. Enter 0.01064 of gross receipts (the amount in section 1) ▶ _ \$	<u>-</u>						
		B. Enter 0.00701 of gross receipts (the amount in section 1)							
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here							
		D. Multiply line B by line C and enter here	<u>-</u>						
		E. Add lines A and D. This is your base rate fee. Enter here							
		and in block 3, line 1, space L (page 7)	_						
		Base Rate Fee							

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2022/1

	AME OF OWNER OF CABLE SYSTEM: ier Southwest Incorporated	SYSTEM ID# 62558	Name
Section 4	If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.		
7	A. Enter 0.01064 of gross receipts (the amount in section 1) ▶\$		8
	B. Enter 0.00701 of gross receipts (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		
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee	0.00	
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channels.	U	9
receipt exclusi First: I station DSEs a	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fees from subscribers located within the station's local service area, from your system's total gross receipts. To take a con, you must: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for your system.	do the same	Computation of Base Rate Fee and Syndicated Exclusivity Surcharge
NOTE:	If any portion of your cable system is located within the top 100 television market and the station is not exempt in mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B becable system is wholly located outside all major television markets, complete block A only.		for Partially Distant Stations, and
Step 1	Identify a Subscriber Group for Partially Distant Stations For each community served, determine the local service area of each wholly distant and each partially distant state to that community.	tion you	for Partially Permitted Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were lot the station's local service area. A subscriber located outside the local service area of a station is distant to that state to the station is distant to the subscriber.)		
subscr	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Compi	iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system.	tem's subscriber	
In each Identi Give	section: fy the communities/areas represented by each subscriber group. the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to a bers in the group.	II of the	
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it is schedule; or,	in parts 2, 3, and	
2) any	portion of your system is located in a major or smaller television market, give each station's DSE as you gave it in 6 of this schedule.	block B,	
• Add t	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general paper SA3 form.	instructions	
page. DSEs f	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the or that group's complement of stations and total gross receipts from the subscribers in that group). You do not necesticulations on the form.	at is, the total	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	STEM II
	Frontier Southwest Incorporated	6255
	Guidance for Computing the Royalty Fee for Partially Permitted/Partially Nonpermitted Signals	
	Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and	
	partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these	
	subscriber groups may be partially distant.	
	Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted	distant
	signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by	
	.0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported	
	for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant	
	signals from step 1 that is subject to this surcharge.	
	Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams	
	Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from	
	a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate	
	and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream.	
	You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement	
	entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary	
	transmitter or an association representing the primary transmitter.	

LEGAL NAME OF OWNER Frontier Southwest						S	62558	Name
В				TE FEES FOR EAC				
FIRST SUBSCRIBER GROUP COMMUNITY/ AREA			JP 0	COMMUNITY/ AREA		ID SUBSCRIBER GROUP 0		9
CALL CICAL	DOE	CALL CICAL	I per	CALL CICAL	I DOE	II CALL CICN	DOE	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
						<u> </u>		and
								Syndicated
								Exclusivity
								Surcharge
								for
			 	-				Partially Distant
				1		 		Stations
			••••••••••					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	up	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Group \$ 0.00			Base Rate Fee Seco	ond 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	
				-		 		
				1		 		
						-		
				-				
						-		
			<u></u>			 		
Total DSEs 0.00			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$		0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third Group \$		0.00	Base Rate Fee Fourth Group		\$ 0.00			
				11				
Base Rate Fee: Add the Enter here and in block 3			riber group a	s shown in the boxes a	bove.	\$	0.00	

ACCOUNTING PERIOD: 2022/1

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Frontier Southwest Incorporated 62558 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 must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation Second 50 major television market First 50 major television market of INSTRUCTIONS: Base Rate Fee 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. Exclusivity 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 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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE 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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE **SURCHARGE** Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

C	Cable Worksheet	Total amount of remittance	Number of SAs rec'd		c'd I	Initials			
		Date of remittance	- □Check □EFT		□FILIN	☐FILING FEES			
Cable ID#					Amount	Initials			
Examined by	Reviewed by	Date examination completed	Allocatio	on number					
Space A									
Accounting Period	(enter four digit year and /1 (for Jan-Jun period) or /2 (for Jul-Dec period) No spaces) □Letter sent □Information received								
	Accepted		☐Phone call/Date						
Space B Owner									
	☐Letter sent	Letter sent							
	□Accepted	Accepted Phone call/Date/Contact							
Space D Area Served									
	☐Letter sent]	Information rec	ceived					
	□Accepted]	Phone call/Date	e/Contact					
Space E Secondary Transission									
Service Subscribers:	☐Letter sent	[☐ Information received						
and Rates	□Accepted	[☐ Phone call/Date/Contact						
Space G Primary Transmitters:									
Television	☐Letter sent	-	☐ Information received						
	□Accepted		☐ Phone call/Date/Contact						
Space H Primary Transmitters:									
Radio	□Accepted	ı	□Phone call/Dat	e/Contact					

Space I Substitute

		Carriage		
	☐ Information received			
Accepted	☐Phone call/Date/Contact			
□ Letter sent	☐ Information received	Space J Part-time Carriage Log (SA3 only)		
	☐Phone call/Date/Contact			
		Space K Gross Receipts		
☐Letter sent	☐ Information received			
□Accepted	☐ Phone call/Date/Contact			
		Space L Copyright Filing and Royalty Fees		
☐Royalty Fee should be	Refund request to fiscal			
Letter sent	☐ Information received			
□Accepted	☐Phoe call/Date/Contact			
		Space M Channels		
☐ Letter sent	☐ Information received			
□Accepted	☐ Phone call/Date/Contact			
		Space O Certification		
Letter sent	☐ Information received			
□Accepted	☐Phone call/Date/Contact			
		Space P Statement of Gross Receipts		
Letter sent	☐ Information received			
□Accepted	☐ Phone call/Date/Contact			
		Space Q Interest Assessment		
☐ Letter sent	☐Info/add'l fee received			
□Accepted	☐ Phone call/Date/Contact			