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				
08/25/2023	\$ 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

Accounting Period B	Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:							
Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and rayalty fee payment covering the entire accounting period. Check here if this is the system's first filling. If not, enter the system's ID number assigned by the Licensing Division. 63037 2023/1	Accounting		2023/1						
Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate till of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's 10 number assigned by the Licensing Division. EGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM DIRECTV, LLC 6303720231 2260 E Imperial Hwy Room 839 El Segundo, CA 90245 INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. IDENTIFICATION OF CABLE SYSTEM: 2 Number, street, rural podde, DIALING ADDRESS OF CABLE SYSTEM: 2 Number, street, rural podde, gustement, or suite number) City, bern, state, 2p odde) Instructions: For complete space D instructions, see page 1b. Identify only the first community served below and relist on page 1b with all communities. CITY OR TOWN SOUTH Bend Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) Adda Alliance MD A Alliance Sub GRPF Alliance Alliance Sub GRPF Alliance	Period								
C System INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. IDENTIFICATION OF CABLE SYSTEM: MAILING ADDRESS OF CABLE SYSTEM: MAILING ADDRESS OF CABLE SYSTEM: Instructions: For complete space D instructions, see page 1b. Identify only the first community served below and relist on page 1b with all communities. CITY OR TOWN STATE South Bend Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) Sample Adda MD A Add Alda MD A Add Alda Alda MD A Alda Alda Alda MD A Alda Alda Alda MD A Alda Alda Alda Alda Alda MD A Alda Alda Alda Alda Alda MD A Alda Alda Alda Alda MD A Alda Alda Alda MD A Alda Alda Alda Alda MD A Alda Alda Alda Alda Alda MD A Alda	_	Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM							
2260 E Imperial Hwy Room 839 El Segundo, CA 90245 INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. 1 IDENTIFICATION OF CABLE SYSTEM: 2 INumber, street, rural route, apartment, or suite number) (City, town, state, zip code) 1 Instructions: For complete space D instructions, see page 1b. Identify only the frst community served below and relist on page 1b with all communities. CITY OR TOWN STATE South Bend IN South Bend IN Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB GRP# Alda MD A 1 Alda MD A 1 Alda MD A 1 Alda MD A 1 Alda MD B 2									
2260 E Imperial Hwy Room 839 El Segundo, CA 90245 INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. IDENTIFICATION OF CABLE SYSTEM: 2 (Number, street, rural route, apartment, or suite number) (City, town, state, zip code) Instructions: For complete space D instructions, see page 1b. Identify only the first community served below and relist on page 1b with all communities. CITY OR TOWN STATE South Bend IN Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) Sample Alda Alliance MD A 1 Alliance ND B 2						6303	720231		
El Segundo, CA 90245 INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. IDENTIFICATION OF CABLE SYSTEM: MAILING ADDRESS OF CABLE SYSTEM: 2						63037	2023/1		
El Segundo, CA 90245 INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. IDENTIFICATION OF CABLE SYSTEM: MAILING ADDRESS OF CABLE SYSTEM: 2									
INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. IDENTIFICATION OF CABLE SYSTEM: MAILING ADDRESS OF CABLE SYSTEM: 2 (Number, street, rural route, apartment, or suite number) (City, town, state, zip code) Instructions: For complete space D instructions, see page 1b. Identify only the first community served below and relist on page 1b with all communities. CITY OR TOWN STATE South Bend IN Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB GRP# Alda MD A 1 Alda Alliance MD B 2			2260 E Imperial Hwy Room 839						
names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. 1			El Segundo, CA 90245						
MAILING ADDRESS OF CABLE SYSTEM: 2 (Number, street, rural route, apartment, or suite number)	С								
City town, state, zp code	System	1	IDENTIFICATION OF CABLE SYSTEM:	<u> </u>					
City, town, state, zip code		MAILING ADDRESS OF CABLE SYSTEM:							
Instructions: For complete space D instructions, see page 1b. Identify only the frst community served below and relist on page 1b with all communities. CITY OR TOWN STATE South Bend IN Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB GRP# Alda Alliance MD B 1		2 (Number, street, rural route, apartment, or suite number)							
Area Served CITY OR TOWN STATE First Community Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB GRP# Alda MD A 1 Alliance MD B 2			(City, town, state, zip code)						
Served CITY OR TOWN STATE	D	Ins	tructions: For complete space D instructions, see page 1b. Identify	only the frst com	munity served below and re	elist on pa	ge 1b		
South Bend IN		with	n all communities.	,					
Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB GRP# Alda Alliance MD A 1 2	Served								
Sample Sa									
Sample Alda MD A 1 Alliance MD B 2	Johnmanity	В				CLIE	CDD#		
Sample Alliance MD B 2		Ald				508			
Gering MD B 3	Sample								
		Ger	ing	MD	В		3		

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

ACCOUNTING PERIOD: 2023/1 FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 63037 DIRECTV, LLC Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN CH LINE UP SUB GRP# STATE IN South Bend First **Elkhart Unincorporated County** IN Community IN Granger IN Indian Village IN Mishawaka **OSCEOLA** IN See instructions for IN Roseland additional information on alphabetization. Saint Joseph Unincorporated County IN **Benton Harbor** MI **Benton Township** ΜI **Bertrand Township** MI Buchanan MI **Chikaming Township** MI **Grand Beach** MI **Lincoln Township** ΜI **New Buffalo** MI **New Buffalo Township** MI **Niles** MI MI Niles Township **Royalton Township** MI MI Saint Joseph Saint Joseph Township MI **Sodus Township** MI Stevensville MI MI **Three Oaks**

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

DIRECTV, LLC

SYSTEM ID#
63037

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 	3,317	\$ 26.00	HD Tech Fee	2,587	\$ 10.00	
 Service to additional set(s) 			Set-Top Box	3,345	\$0-\$15	
 FM radio (if separate rate) 			Broadcast TV Surcharge	3,317	11.99-\$12.99	
Motel, hotel						
Commercial	28	\$ 20.00				
Converter						
 Residential 						
 Non-residential 						
		†		1		

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		
Continuing Services:		Installation: Non-residential			
• Pay cable		Motel, hotel		Video on Demand	\$0-\$100
 Pay cable—add'l channel 	\$5-\$199	Commercial		Service Activation Fee	\$0-\$35
Fire protection		• Pay cable		Credit Management Fee	\$0-\$449
•Burglar protection		Pay cable-add'l channel		Dispatch on Demand	\$99
Installation: Residential		Fire protection		Wireless Receiver	\$0 - \$49
• First set	\$0-\$199	Burglar protection		HD Premium Tier	\$10
 Additional set(s) 		Other services:		DVR Upgrade Fee	\$105
 FM radio (if separate rate) 		Reconnect	\$0-\$35	Vacation Hold	\$7
Converter		Disconnect		Program Downgrade Fee	\$ 5.00
		Outlet relocation	\$0-\$55	Non-Return Eqpt Fee	\$0-\$150
		Move to new address			

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Namo
DIRECTV, LLC					63037	
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
•		•	, ,		s and low power television stations)	G
, ,	, ,	`		` '	ed only on a part-time basis under tain network programs [sections	
•				•	and (2) certain stations carried on a	Primary
substitute program bas					and the second s	Transmitters:
Substitute Basis S pasis under specifc FC			-	s carried by your	cable system on a substitute program	Television
•				ne Special Statem	nent and Program Log)—if the	
station was carried	,		- 4 ii-	al la adda a sa a a su bad	i4.4- bi- and also an assume attent	
	•				itute basis and also on some other of the general instructions located	
in the paper SA3 for	rm.	-			-	
					es such as HBO, ESPN, etc. Identify	
			•	•	ation. For example, report multi- ch stream separately; for example	
VETA-simulcast).			·	•	, ,	
			Ü		tion for broadcasting over-the-air in may be different from the channel	
on which your cable sy	•	•	idinioi 4 iii v vd3l	g.co.i, D.O. 11118	, may be amorem from the charmer	
					ependent station, or a noncommercial	
•	-		,	•	cast), "I" (for independent), "I-M" ommercial educational multicast).	
or the meaning of the	se terms, see	page (v) of th	e general instru	ctions located in	the paper SA3 form.	
				**	es". If not, enter "No". For an ex-	
lanation of local servi Column 5: If you ha					e paper SA3 form. stating the basis on which your	
			-	=	ntering "LAC" if your cable system	
carried the distant stati	on on a part-tii	me basis bec	ause of lack of a	activated channel	capacity.	
		14! 4 4	41 4 ! 4 .	and the safety of the same		
					y payment because it is the subject	
of a written agreement	entered into o	n or before Ju	une 30, 2009, be	etween a cable sy		
of a written agreement the cable system and a tion "E" (exempt). For s	entered into o a primary trans simulcasts, als	n or before Ju mitter or an a o enter "E". If	une 30, 2009, be association repre you carried the	etween a cable sy esenting the prima channel on any c	y payment because it is the subject ystem or an association representing ary transmitter, enter the designa- other basis, enter "O." For a further	
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th	entered into o a primary trans simulcasts, also ree categories	n or before Ju mitter or an a o enter "E". If , see page (v	une 30, 2009, be association repre you carried the of the general	etween a cable sy esenting the prima channel on any c instructions locat	ry payment because it is the subject stem or an association representing ary transmitter, enter the designation representing of the basis, enter "O." For a further ed in the paper SA3 form.	
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	entered into o a primary trans simulcasts, also ree categories e location of ea	n or before Ju mitter or an a o enter "E". If , see page (v ch station. Fo	une 30, 2009, be association repre- you carried the) of the general or U.S. stations,	etween a cable sy esenting the prima channel on any o instructions locat list the communi	y payment because it is the subject ystem or an association representing ary transmitter, enter the designa- other basis, enter "O." For a further	
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	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio	n or before Jumitter or an a o enter "E". If , see page (v ch station. Fo ns, if any, giv	une 30, 2009, bussociation repressive carried the control of the general or U.S. stations, we the name of the stations of the control of the	etween a cable sy esenting the prima channel on any c instructions locat list the community with	by payment because it is the subject stem or an association representing ary transmitter, enter the designation representing of the basis, enter "O." For a further ed in the paper SA3 form. By to which the station is licensed by the hybrid which the station is identifed.	
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio	n or before Jumitter or an a o enter "E". If , see page (v ch station. Fons, if any, givennel line-ups,	une 30, 2009, bussociation repressive carried the control of the general or U.S. stations, we the name of the stations of the control of the	etween a cable sy esenting the prima channel on any of instructions locat list the communithe community with space G for each	by payment because it is the subject stem or an association representing ary transmitter, enter the designation representing of the basis, enter "O." For a further ed in the paper SA3 form. By to which the station is licensed by the hybrid which the station is identifed.	
of a written agreement the cable system and a ion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C Note: If you are utilizin	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio	n or before Jumitter or an a o enter "E". If , see page (v ch station. Fons, if any, givennel line-ups,	une 30, 2009, but association repre- you carried the of the general or U.S. stations, we the name of the use a separate	etween a cable sy esenting the prima channel on any of instructions locat list the communithe community with space G for each	by payment because it is the subject stem or an association representing ary transmitter, enter the designation representing of the basis, enter "O." For a further ed in the paper SA3 form. By to which the station is licensed by the hybrid which the station is identifed.	
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C Note: If you are utilizin	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian static g multiple char 2. B'CAST CHANNEL	n or before Jumitter or an a conter "E". If , see page (vech station. For each station. Type of each station.	une 30, 2009, but association repre- you carried the or U.S. stations, we the name of to use a separate EL LINE-UP 4. DISTANT? (Yes or No)	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	by payment because it is the subject stem or an association representing ary transmitter, enter the designation between the paper SA3 form. By to which the station is licensed by the h which the station is identified. The channel line-up.	
of a written agreement the cable system and a ion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C Note: If you are utilizin	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian static g multiple chai	n or before Jumitter or an a conter "E". If , see page (vertical of station. For each of the station. For each of the station of the station. For each of the station of the station. For each of the station of the sta	une 30, 2009, but association repre- you carried the or U.S. stations, we the name of to use a separate EL LINE-UP 4. DISTANT? (Yes or No)	etween a cable system of the primary channel on any constructions located list the community with space G for each space G. BASIS OF	by payment because it is the subject stem or an association representing ary transmitter, enter the designation of the basis, enter "O." For a further ed in the paper SA3 form. By to which the station is licensed by the she which the station is identified. In channel line-up. 6. LOCATION OF STATION	
of a written agreement he cable system and a ion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or Colore: If you are utilizin 1. CALL	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian static g multiple char 2. B'CAST CHANNEL	n or before Jumitter or an a conter "E". If , see page (vech station. For each station. Type of each station.	une 30, 2009, but association repre- you carried the or U.S. stations, we the name of to use a separate EL LINE-UP 4. DISTANT? (Yes or No)	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	by payment because it is the subject stem or an association representing ary transmitter, enter the designation between the paper SA3 form. By to which the station is licensed by the h which the station is identified. The channel line-up.	
of a written agreement he cable system and a ion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or CNote: If you are utilizin 1. CALL SIGN	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian static g multiple chai 2. B'CAST CHANNEL NUMBER 57/1057	n or before Jumitter or an a center "E". If , see page (vech station. For ons, if any, givened line-ups, CHANN 3. TYPE OF STATION	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No)	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	by payment because it is the subject stem or an association representing ary transmitter, enter the designation of the basis, enter "O." For a further ed in the paper SA3 form. By to which the station is licensed by the she which the station is identified. In channel line-up. 6. LOCATION OF STATION	
of a written agreement the cable system and a ion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN WBND-LD/WBNDI	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian static g multiple chai 2. B'CAST CHANNEL NUMBER 57/1057	n or before Jumitter or an a center "E". If , see page (vech station. For ons, if any, givened line-ups, CHANN 3. TYPE OF STATION	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No)	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	y payment because it is the subject ystem or an association representing ary transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. By to which the station is licensed by the the which the station is identifed. In channel line-up. 6. LOCATION OF STATION South Bend, IN	additional information
of a written agreement he cable system and a ion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN WBND-LD/WBNDI WCWW-LD/WCWN WHME	entered into o a primary trans simulcasts, also ree categories a location of ea canadian static g multiple char 2. B'CAST CHANNEL NUMBER 57/1057 25/1025 46	n or before Jumitter or an a center "E". If , see page (vech station. For ons, if any, givened line-ups, CHANN 3. TYPE OF STATION N	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate LLINE-UP 4. DISTANT? (Yes or No) No No	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	y payment because it is the subject ystem or an association representing ary transmitter, enter the designation between the paper SA3 form. By to which the station is licensed by the shadown the station is identified. In channel line-up. 6. LOCATION OF STATION South Bend, IN South Bend, IN South Bend, IN	
of a written agreement the cable system and a ion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN WBND-LD/WBNDI WCWW-LD/WCWN WHME WMYS-LD/WMYSI	entered into o a primary trans simulcasts, also ree categories a location of ea canadian static g multiple char 2. B'CAST CHANNEL NUMBER 57/1057 25/1025 46 69/1069	n or before Jumitter or an a center "E". If , see page (vech station. For sins, if any, givennel line-ups, CHANN 3. TYPE OF STATION I I	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	y payment because it is the subject ystem or an association representing ary transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. By to which the station is licensed by the high which the station is identifed. In channel line-up. 6. LOCATION OF STATION South Bend, IN South Bend, IN South Bend, IN South Bend, IN	additional information
of a written agreement he cable system and a ion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or Colore: If you are utilizing 1. CALL SIGN WBND-LD/WBNDI WCWW-LD/WCWM WHME WMYS-LD/WMYSI WNDU/WNDUHD	entered into o a primary trans simulcasts, also ree categories a location of ea canadian static g multiple char 2. B'CAST CHANNEL NUMBER 57/1057 25/1025 46 69/1069 16/1016	n or before Jumitter or an a conter "E". If , see page (vech station. For ons, if any, givened line-ups, CHANN 3. TYPE OF STATION N I I N	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	y payment because it is the subject ystem or an association representing ary transmitter, enter the designation the payer SA3 form. By to which the station is licensed by the shadown of the company to the station of the payer SA3 form. It is to which the station is licensed by the shadown of the station is identified. In channel line-up. 6. LOCATION OF STATION South Bend, IN	additional information
of a written agreement the cable system and a cion "E" (exempt). For sexplanation of these the Column 6: Give the CCC. For Mexican or CNote: If you are utilizing 1. CALL SIGN WBND-LD/WBNDIWGWW-LD/WCWWWHME WMYS-LD/WMYSIWNDU/WNDUHD WNIT/WNITHD	entered into o a primary trans simulcasts, also ree categories a location of ea Canadian static g multiple char cHANNEL NUMBER 57/1057 25/1025 46 69/1069 16/1016 34/1034	n or before Jumitter or an a conter "E". If , see page (vech station. Foons, if any, givened line-ups, CHANN 3. TYPE OF STATION N I N E	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	y payment because it is the subject ystem or an association representing ary transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. By to which the station is licensed by the the which the station is identifed. Channel line-up. 6. LOCATION OF STATION South Bend, IN	additional information
of a written agreement he cable system and a ion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or CNote: If you are utilizing. 1. CALL SIGN WBND-LD/WBNDI WCWW-LD/WCWV WHME WMYS-LD/WMYSI WNDU/WNDUHD WNIT/WNITHD WSBT/WSBTHD	entered into o a primary trans simulcasts, also ree categories a location of ea canadian static g multiple characteristics. B'CAST CHANNEL NUMBER 57/1057 25/1025 46 69/1069 16/1016 34/1034 22/1022	n or before Jumitter or an a conter "E". If , see page (vech station. For ons, if any, givened line-ups, CHANN 3. TYPE OF STATION N I I N	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate of the separate	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	y payment because it is the subject ystem or an association representing ary transmitter, enter the designation the payer SA3 form. By to which the station is licensed by the shadown of the company of the station is licensed by the shadown of the station is licensed by the shadown of the station is licensed by the shadown of the station is identified. The channel line-up. 6. LOCATION OF STATION South Bend, IN	additional information
of a written agreement he cable system and a ion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or CNote: If you are utilizing. 1. CALL SIGN WBND-LD/WBNDI WCWW-LD/WCWV WHME WMYS-LD/WMYSI WNDU/WNDUHD WNIT/WNITHD WSBT/WSBTHD	entered into o a primary trans simulcasts, also ree categories a location of ea canadian static g multiple characteristics. B'CAST CHANNEL NUMBER 57/1057 25/1025 46 69/1069 16/1016 34/1034 22/1022	n or before Jumitter or an a conter "E". If , see page (vech station. Foons, if any, givened line-ups, CHANN 3. TYPE OF STATION N I N E	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	y payment because it is the subject ystem or an association representing ary transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. By to which the station is licensed by the the which the station is identifed. Channel line-up. 6. LOCATION OF STATION South Bend, IN	additional information
of a written agreement he cable system and a ion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or CNote: If you are utilizing. 1. CALL SIGN WBND-LD/WBNDI WCWW-LD/WCWV WHME WMYS-LD/WMYSI WNDU/WNDUHD WNIT/WNITHD WSBT/WSBTHD	entered into o a primary trans simulcasts, also ree categories a location of ea canadian static g multiple characteristics. B'CAST CHANNEL NUMBER 57/1057 25/1025 46 69/1069 16/1016 34/1034 22/1022	n or before Jumitter or an a conter "E". If , see page (vech station. Foons, if any, givened line-ups, CHANN 3. TYPE OF STATION N I N E	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate of the separate	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	y payment because it is the subject ystem or an association representing ary transmitter, enter the designation the payer SA3 form. By to which the station is licensed by the shadown of the company of the station is licensed by the shadown of the station is licensed by the shadown of the station is licensed by the shadown of the station is identified. The channel line-up. 6. LOCATION OF STATION South Bend, IN	additional information
of a written agreement he cable system and a ion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or CNote: If you are utilizing. 1. CALL SIGN WBND-LD/WBNDI WCWW-LD/WCWV WHME WMYS-LD/WMYSI WNDU/WNDUHD WNIT/WNITHD WSBT/WSBTHD	entered into o a primary trans simulcasts, also ree categories a location of ea canadian static g multiple characteristics. B'CAST CHANNEL NUMBER 57/1057 25/1025 46 69/1069 16/1016 34/1034 22/1022	n or before Jumitter or an a conter "E". If , see page (vech station. Foons, if any, givened line-ups, CHANN 3. TYPE OF STATION N I N E	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate of the separate	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	y payment because it is the subject ystem or an association representing ary transmitter, enter the designation the payer SA3 form. By to which the station is licensed by the shadown of the company of the station is licensed by the shadown of the station is licensed by the shadown of the station is licensed by the shadown of the station is identified. The channel line-up. 6. LOCATION OF STATION South Bend, IN	additional information
of a written agreement he cable system and a ion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or CNote: If you are utilizing. 1. CALL SIGN WBND-LD/WBNDI WCWW-LD/WCWV WHME WMYS-LD/WMYSI WNDU/WNDUHD WNIT/WNITHD WSBT/WSBTHD	entered into o a primary trans simulcasts, also ree categories a location of ea canadian static g multiple characteristics. B'CAST CHANNEL NUMBER 57/1057 25/1025 46 69/1069 16/1016 34/1034 22/1022	n or before Jumitter or an a conter "E". If , see page (vech station. Foons, if any, givened line-ups, CHANN 3. TYPE OF STATION N I N E	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate of the separate	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	y payment because it is the subject ystem or an association representing ary transmitter, enter the designation the payer SA3 form. By to which the station is licensed by the shadown of the company of the station is licensed by the shadown of the station is licensed by the shadown of the station is licensed by the shadown of the station is identified. The channel line-up. 6. LOCATION OF STATION South Bend, IN	additional information
of a written agreement he cable system and a ion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or CNote: If you are utilizing. 1. CALL SIGN WBND-LD/WBNDI WCWW-LD/WCWV WHME WMYS-LD/WMYSI WNDU/WNDUHD WNIT/WNITHD WSBT/WSBTHD	entered into o a primary trans simulcasts, also ree categories a location of ea canadian static g multiple characteristics. B'CAST CHANNEL NUMBER 57/1057 25/1025 46 69/1069 16/1016 34/1034 22/1022	n or before Jumitter or an a conter "E". If , see page (vech station. Foons, if any, givened line-ups, CHANN 3. TYPE OF STATION N I N E	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate of the separate	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	y payment because it is the subject ystem or an association representing ary transmitter, enter the designation the payer SA3 form. By to which the station is licensed by the shadown of the company of the station is licensed by the shadown of the station is licensed by the shadown of the station is licensed by the shadown of the station is identified. The channel line-up. 6. LOCATION OF STATION South Bend, IN	additional informatio
of a written agreement the cable system and a cion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or CNote: If you are utilizing. 1. CALL SIGN WBND-LD/WBNDI WCWW-LD/WCWV WHME WMYS-LD/WMYSI WNDU/WNDUHD WNIT/WNITHD WSBT/WSBTHD	entered into o a primary trans simulcasts, also ree categories a location of ea canadian static g multiple characteristics. B'CAST CHANNEL NUMBER 57/1057 25/1025 46 69/1069 16/1016 34/1034 22/1022	n or before Jumitter or an a conter "E". If , see page (vech station. Foons, if any, givened line-ups, CHANN 3. TYPE OF STATION N I N E	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate of the separate	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	y payment because it is the subject ystem or an association representing ary transmitter, enter the designation the payer SA3 form. By to which the station is licensed by the shadown of the company of the station is licensed by the shadown of the station is licensed by the shadown of the station is licensed by the shadown of the station is identified. The channel line-up. 6. LOCATION OF STATION South Bend, IN	additional information
of a written agreement the cable system and a cion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or CNote: If you are utilizing. 1. CALL SIGN WBND-LD/WBNDI WCWW-LD/WCWV WHME WMYS-LD/WMYSI WNDU/WNDUHD WNIT/WNITHD WSBT/WSBTHD	entered into o a primary trans simulcasts, also ree categories a location of ea canadian static g multiple characteristics. B'CAST CHANNEL NUMBER 57/1057 25/1025 46 69/1069 16/1016 34/1034 22/1022	n or before Jumitter or an a conter "E". If , see page (vech station. Foons, if any, givened line-ups, CHANN 3. TYPE OF STATION N I N E	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate of the separate	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	y payment because it is the subject ystem or an association representing ary transmitter, enter the designation the payer SA3 form. By to which the station is licensed by the shadown of the company of the station is licensed by the shadown of the station is licensed by the shadown of the station is licensed by the shadown of the station is identified. The channel line-up. 6. LOCATION OF STATION South Bend, IN	additional information
of a written agreement the cable system and a cion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or CNote: If you are utilizing. 1. CALL SIGN WBND-LD/WBNDI WCWW-LD/WCWV WHME WMYS-LD/WMYSI WNDU/WNDUHD WNIT/WNITHD WSBT/WSBTHD	entered into o a primary trans simulcasts, also ree categories a location of ea canadian static g multiple characteristics. B'CAST CHANNEL NUMBER 57/1057 25/1025 46 69/1069 16/1016 34/1034 22/1022	n or before Jumitter or an a conter "E". If , see page (vech station. Foons, if any, givened line-ups, CHANN 3. TYPE OF STATION N I N E	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate of the separate	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	y payment because it is the subject ystem or an association representing ary transmitter, enter the designation the payer SA3 form. By to which the station is licensed by the shadown of the company of the station is licensed by the shadown of the station is licensed by the shadown of the station is licensed by the shadown of the station is identified. The channel line-up. 6. LOCATION OF STATION South Bend, IN	additional information
of a written agreement the cable system and a tion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or CNote: If you are utilizin 1. CALL	entered into o a primary trans simulcasts, also ree categories a location of ea canadian static g multiple characteristics. B'CAST CHANNEL NUMBER 57/1057 25/1025 46 69/1069 16/1016 34/1034 22/1022	n or before Jumitter or an a conter "E". If , see page (vech station. Foons, if any, givened line-ups, CHANN 3. TYPE OF STATION N I N E	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate of the separate	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	y payment because it is the subject ystem or an association representing ary transmitter, enter the designation the payer SA3 form. By to which the station is licensed by the shadown of the company of the station is licensed by the shadown of the station is licensed by the shadown of the station is licensed by the shadown of the station is identified. The channel line-up. 6. LOCATION OF STATION South Bend, IN	additional information
of a written agreement he cable system and a ion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or CNote: If you are utilizing. 1. CALL SIGN WBND-LD/WBNDI WCWW-LD/WCWV WHME WMYS-LD/WMYSI WNDU/WNDUHD WNIT/WNITHD WSBT/WSBTHD	entered into o a primary trans simulcasts, also ree categories a location of ea canadian static g multiple characteristics. B'CAST CHANNEL NUMBER 57/1057 25/1025 46 69/1069 16/1016 34/1034 22/1022	n or before Jumitter or an a conter "E". If , see page (vech station. Foons, if any, givened line-ups, CHANN 3. TYPE OF STATION N I N E	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate of the separate	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	y payment because it is the subject ystem or an association representing ary transmitter, enter the designation the payer SA3 form. By to which the station is licensed by the shadown of the company of the station is licensed by the shadown of the station is licensed by the shadown of the station is licensed by the shadown of the station is identified. The channel line-up. 6. LOCATION OF STATION South Bend, IN	additional information
of a written agreement he cable system and a ion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or CNote: If you are utilizing. 1. CALL SIGN WBND-LD/WBNDI WCWW-LD/WCWV WHME WMYS-LD/WMYSI WNDU/WNDUHD WNIT/WNITHD WSBT/WSBTHD	entered into o a primary trans simulcasts, also ree categories a location of ea canadian static g multiple characteristics. B'CAST CHANNEL NUMBER 57/1057 25/1025 46 69/1069 16/1016 34/1034 22/1022	n or before Jumitter or an a conter "E". If , see page (vech station. Foons, if any, givened line-ups, CHANN 3. TYPE OF STATION N I N E	une 30, 2009, be association representation of the general or U.S. stations, we the name of the use a separate of the separate	etween a cable system of the primary channel on any constructions located list the community with space G for each space G fo	y payment because it is the subject ystem or an association representing ary transmitter, enter the designation the payer SA3 form. By to which the station is licensed by the shadown of the company of the station is licensed by the shadown of the station is licensed by the shadown of the station is licensed by the shadown of the station is identified. The channel line-up. 6. LOCATION OF STATION South Bend, IN	additional information

FORW SASE, FAGE 3.					CVCTEM ID#			
DIRECTV, LLC	ER OF CABLE SY	'STEM:			SYSTEM ID# 63037	Name		
PRIMARY TRANSMITTE	RS: TELEVISIO	ON						
carried by your cable s	system during to ions in effect or	he accounting n June 24, 19	g period, except 81, permitting th	: (1) stations carrie	and low power television stations) d only on a part-time basis under ain network programs [sections	G		
substitute program bas Substitute Basis S	sis, as explaine Stations: With	d in the next prespect to any	paragraph. / distant stations		and (2) certain stations carried on a able system on a substitute program	Primary Transmitters: 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 								
each multicast stream	h station's call associated wit	n a station ac	cording to its ov	er-the-air designa	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example			
	e. For example	e, WRC is Cha	•		ion for broadcasting over-the-air in may be different from the channel			
Column 3: Indicate educational station, by	in each case we entering the lecast), "E" (for n	whether the st etter "N" (for no oncommercia	etwork), "N-M" (I educational), c	(for network multic or "E-M" (for nonce	ependent station, or a noncommercial ast), "I" (for independent), "I-M" parmercial educational multicast).			
Column 4: If the staplanation of local servi	ation is outside ce area, see pa	the local servage (v) of the	/ice area, (i.e. "o general instruct	distant"), enter "Ye tions located in the	es". If not, enter "No". For an ex-			
carried the distant stat For the retransmiss of a written agreement the cable system and a	ion on a part-tii ion of a distant entered into o a primary trans	me basis beca multicast stre n or before Ju mitter or an a	ause of lack of a eam that is not s ine 30, 2009, be ssociation repre	activated channel of subject to a royalty etween a cable system esenting the prima	payment because it is the subject stem or an association representing ry transmitter, enter the designa-			
explanation of these the	ree categories e location of ea Canadian statio	, see page (v) ch station. Fo ns, if any, giv	of the general or U.S. stations, e the name of the	instructions locate list the community he community with	ther basis, enter "O." For a further din the paper SA3 form. To which the station is licensed by the which the station is identifed. 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			
				(ii 2 istairiy				
					Quantum 100 100 100 100 100 100 100 100 100 10			

ACCOUNTING PERIOD: 2023/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name DIRECTV, LLC 63037 PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

LEGAL NAME OF OWNER OF	CABLE SYST	EM:			;	SYSTEM ID#	
DIRECTV, LLC						63037	Name
SUBSTITUTE CARRIAGE In General: In space I, ident substitute basis during the ac explanation of the programm	ify every nor	nnetwork televiseriod, under spe	sion program broadcast by a ecific present and former FC	a distant statio CC rules, regu	lations, or authorizations	. For a further	l
form.	. OONOED	NINO OUDOT	TITLITE CARRIAGE				Substitute Carriage:
1. SPECIAL STATEMENTDuring the accounting per				is. anv nonn	etwork television progra	am	Special Statement and
broadcast by a distant stat		•	•		Yes	XNo	Program Log
Note: If your answer is "No log in block 2.	", leave the	rest of this pag	ge blank. If your answer is	"Yes," you m	ust complete the progr	am	
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the program Column 3: Give the call Column 4: Give the broat the case of Mexican or Can Column 5: Give the mon first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	nce, please a of every noi distant stat gulations, o tion. Do no Lucy" or "NE n was broad sign of the sadcast static addian static at and day we "5/7." es when the Example: a er "R" if the and regulatio ogramming	attach addition nnetwork telev ion and that your authorization it use general of the BA Basketball: deast live, entestation broadcaph's location (the bas, if any, the when your system a program carrillisted program cons in effect du	al pages. ision program (substitute pour cable system substitute s. See page (vi) of the gereategories 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: was substituted for programing the accounting period	orogram) that ed for the pro neral instructi r "basketball" No." am. station is lice station is ide program. Use cable system 15 p.m. to 6: amming that d; enter the le	during the accounting gramming of another stons located in the paper. List specific program ensed by the FCC or, in intified). The numerals, with the most accurate the syour system was requirefer "P" if the listed prosent another than the second of the syour system was requirefer "P" if the listed prosent another than the second of the syour system was requirefer "P" if the listed prosent another than the second of the syour system was requirefer "P" if the listed prosent another system was requirefer than the system was	ation er onth ely	
effect off October 19, 1970.				WHF	EN SUBSTITUTE		
S	1	E PROGRAM	1	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	

ACCOUNTING PERIOD: 2023/1 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **DIRECTV, LLC** 63037 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 parttime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.– 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.-12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS HOURS** DATE **FROM** DATE **FROM** TO TO

	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID# 63037	Name				
DIF	RECTV, LLC	63037					
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)							
IMF	during the accounting period. PORTANT: You must complete a statement in space P concerning gross receipts.	\$ 1,255,966.35 (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.							
-	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should book 3 below.	e entered on line 1 of					
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be slow.	entered on line 2 in block					
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	ould be entered on line					
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.	e is 1.064 percent of the					
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.	\$ 1,255,966.35					
	This is your minimum fee.	\$ 13,363.48					
Block 2 Block 3	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule. 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	nn 4, you must check					
	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					
	scriedule. Il none, enter zero						
	Line 3. Add lines 1 and 2 and enter here	\$ -					
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	\$ 13,363.48	Cable systems				
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente		submitting additional deposits under				
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)						
	Line 4. FILING FEE						
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 14,088.48	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 page (i) of the					

ACCOUNTING PERIOD: 2023/1 FORM SA3E, PAGE 8

Name	LEGAL NAME	OF OWNER OF CABLE	SYSTEM:				SYSTEM ID:			
							0303			
М	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations									
		_			-	uring the accounting period.				
Channels	1 Enter th	he total number of	channels on whic	ch the cable						
	system carried television broadcast stations									
	2 Enter th	ha tatal mumban af	a ativ ata da hama	.le						
		he total number of a h the cable system			ns		588			
	and non	broadcast services	.							
N Individual to		JAL TO BE CONTA			ION IS NEEDED: (Io	dentify an individual				
Be Contacted for Further Information	Name	Myriam Nass	if			Telepho	ne 310-964-1930			
	Address	2260 E Imper (Number, street, rura	rial Hwy Rooi I route, apartment, or	m 839 r suite number)						
		El Segundo, (City, town, state, zip	CA 90245		***************************************					
	Email	mn1′	12s@att.com			Fax (optional)				
	CERTIFICA	ATION (This staten	nent of account m	nust be certifed a	nd signed in accorda	ance with Copyright Office re	egulations.)			
0		•			· ·	1,7 0	,			
Certifcation	• I, the und	dersigned, hereby co	ertify that (Check o	one, but only one,	of the boxes.)					
	(Owner	r other than corpo	ration or partners	ship) I am the owr	ner of the cable syste	m as identifed in line 1 of spa	ce B; or			
	(Agent	of owner other tha	an corporation or	r partnership) ar	n the duly authorized	agent of the owner of the cal	ble system as identified			
		line 1 of space B and				g				
		er or partner) I am a line 1 of space B.	an officer (if a corp	poration) or a parti	ner (if a partnership)	of the legal entity identifed as	owner of the cable system			
				h l l			in add bounts			
	are true, c	complete, and correc	ct to the best of my			at all statements of fact conta nd are made in good faith.	linea nerein			
	[18 U.S.C.	., Section 1001(198	ö) <u>]</u>							
				<u> </u>						
		<u>X</u>	/s/ Nicholas	Sinovich						
		(e.g., /s	s/ John Smith). Be	fore entering the fi	rst forward slash of the	ature to certify this statement. e /s/ signature, place your curs avoid enabling Excel's Lotus o	or in the box and press the "F2" ompatibility settings.			
		Typed	or printed name	e: Nicholas S	Sinovich					
		Title:	VP, Financ	ial Ops osition held in corpor	ation or partnership)					
		Date:	August 24, 202	23						

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

U.S. Copyright Office

	EM ID# 63037	Name			
DIRECTV, LLC	63037				
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the					
paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below		Exclusion			
Name Mailing Address 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 underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.		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					
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 www.copyright.gov/licensing/interest-rate.pdf . For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.					
** 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 Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original 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 the form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2023/1

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 carriec by a cable system during an accounting period. Your system's total number of DSEs determines the royalty you owe. For the full definition, see page (v) of the General Instructions in the paper SA3 form.

FORMULAS FOR COMPUTING A STATION'S DSE

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

BASIC FORMULA: FOR ALL DISTANT STATIONS 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 the second of the se	

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

The total royalty fee is determined by calculating the minimum fee 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, ir whole or in part, over the cable system that would have been subject to the FCC's syndicated exclusivity rules in effect on June 24, 1981

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

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

- 1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
- 2) A station first carried after June 24, 1981, which could have 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 SCHEDULE

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

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

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

- Calculate a separate base rate fee for each subscriber group, using
 the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

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

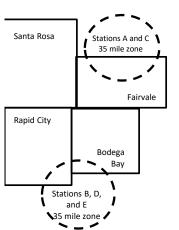
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

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



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

1	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			SY	STEM ID# 63037
	SUM OF DSEs OF CATEGOR	OV "O" STATIO	NC:		1	30301
	• Add the DSEs of each station		N5:			
	Enter the sum here and in line		s schedule.		0.00	
	Instructions:					
2	In the column headed "Call S	Sign": list the ca	II signs of all distant stations	s identified by	the letter "O" in column 5	
	of space G (page 3).					
Computation	In the column headed "DSE"			∃ as "1.0"; fo	r each network or noncom-	
of DSEs for	mercial educational station, given	ve the DSE as "				
Category "O"			CATEGORY "O" STATION		II	
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Add rows as						
necessary.						
Remember to copy						
all formula into new						
rows.						
				4		

Name	DIRECTV, L	DWNER OF CABLE SYSTEM:					S	63037
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 Column 4 be carried out Column 9 give the type- Column 6	capacity st the call sign of all dista 2: For each station, give to correspond with the information of the correspond with the information of the color of the co	the number of hour mation given in sp the total number of umn 2 by the figure mal point. This is t station, give the "t olumn 4 by the figu	rs your cable systemace J. Calculate on hours that the state in column 3, and the "basis of carriage pe-value" as "1.0." re in column 5, and the state of carriage pe-value as "1.0."	m carried the stanly one DSE for clion broadcast or give the result in ge value" for the 'For each network of give the result the clion of the the clion of the c	ation during the accounti each station. ver the air during the acc decimals in column 4. T station. ork or noncommercial ed in column 6. Round to no	counting period. This figure must ucational station,	
Capacity		C	CATEGORY LA	C STATIONS:	COMPUTAT	ION OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	JRS ED BY	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE			SE .
			÷			x	=	
			÷		=	x	<u>=</u>	
			÷		=	x	<u>=</u>	
			-					
					=	x		
			÷		=	x		
			÷	:	=	x	=	
	Add the DSEs	s OF CATEGORY LAC S of each station. um here and in line 2 of p		ule,	▶	0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efferations in efferations in efferations and the space I). Column 2: at your option. Column 3: Column 4:	re the call sign of each stands by your system in substant on October 19, 1976 one or more live, nonnetwork for each station give the This figure should correst the number of day. Divide the figure in colunt This is the station's DSE	titution for a progra (as shown by the liver programs during a number of live, not spond with the informal with the informal sin the calendar your 12 by the figure it	am that your systemetter "P" in column g that optional carronnetwork program ormation in space I ear: 365, except in n column 3, and gi	n was permitted 7 of space I); ar iage (as shown bus carried in substance). a leap year. ve the result in comments.	to delete under FCC rule d y the word "Yes" in column stitution for programs tha	a 2 of It were deleted	orm).
		SU	BSTITUTE-BA	SIS STATION:	S: COMPUTA	ATION OF DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		4		=		,	÷	=
		***************************************	÷				÷	
			-			• • • • • • • • • • • • • • • • • • •	- 	
		-	-	=			-	=
	Add the DSEs	s OF SUBSTITUTE-BAS of each station. um here and in line 3 of p		ule,		0.00		
5		ER OF DSEs: Give the am s applicable to your system		es in parts 2, 3, and	4 of this schedu	le and add them to provid	e the total	
Total Number	1. Number o	of DSEs from part 2 ●				>	0.00	
of DSEs		of DSEs from part 3 ●				-	0.00	
	3. Number o	of DSEs from part 4 ●				>	0.00	
	TOTAL NUMBE	ER OF DSEs						0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2023/1

DIRECTV, LLC		SYSTEM:					S'	YSTEM ID# 63037	Name
schedule.		emainder of p	•	7 of the DSE sche	edule blank ar	nd complete pa	rt 8, (page 16) of	the	6
			BLOCK A: 1	ELEVISION M.	ARKETS				Computation of
	1981?	schedule—[,	iller markets as de			•	gulations in	3.75 Fee
		BLOG	CK B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	of distant st and regulatione DSE Sche	ations listed in ons prior to Jui	part 2, 3, and 4 of ne 25, 1981. For fune letter M below r	f this schedule urther explana	e that your syst	ed stations, see th	ne	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rt. A Stations carri 76.61(b)(c)] B Specialty stati C Noncomeric D Grandfatherec instructions fc E Carried pursua *F A station pre	ules and regued pursuant on as defined al education of the station (76. or DSE schedant to individually carries).	ulations cited but to the FCC mand in 76.5(kk) (7 all station [76.565) (see paragulule). Use water of Fed on a part-ting grade-Botton in the following from the follo	ne or substitute ba contour, [76.59(d)(se in effect or 6.57, 76.59(b e)(1), 76.63(a 63(a) referring bstitution of g	n June 24, 198), 76.61(b)(c),) referring to 7 g to 76.61(d)] randfathered s	76.63(a) referring 6.61(e)(1) tations in the		
Column 3:		e stations ide	entified by the I	n parts 2, 3, and 4 etter "F" in column			orksheet on page	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	
					•	•			
					•	•			
						•			<u> </u>
								0.00	
		Е	LOCK C: CC	MPUTATION OF	F 3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule			<u>. </u>		
Line 2: Enter the	sum of permitte	d DSEs fro	m block B ab	ove			,	-	
Line 3: Subtract (If zero, I				r of DSEs subject 7 of this schedu		rate.		0.00	
Line 4: Enter gro	oss receipts from	space K (p	age 7)						Do any of the
9	,	. (1-	J ,				x 0.03	375	DSEs represent partially
Line 5: Multiply I	ine 4 by 0.0375	and enter s	um here						permited/ partially
Line 6: Enter tet	al number of DS	Es from line	. 3				Х		nonpermitted carriage? If yes, see part
Line 6: Enter tota	ai number of DS	⊏s Irom line	: 3				,		9 instructions.
Line 7: Multiply I	ine 6 by line 5 ar	nd enter her	e and on line	2 hlock 3 space	el (nage 7)			0.00	

DIRECTV, LL	OWNER OF CABLE							STEM ID# 63037	Name
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	UED)			
1. CALL SIGN	2. PERMITTED BASIS			2. PERMITTED BASIS	, i	1	2. PERMITTED BASIS	3. DSE	6
									Computation 3.75 Fee
						• • • • • • • • • • • • • • • • • • • •			
<mark></mark>									

ACCOUNTING PERIOD: 2023/1

Name	DIRECTV, LLC	NER OF CABLE	SYSTEM:						s	63037
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the c Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the Fi A—Part-time sp 76.59 B—Late-night pr 76.61 S—Substitute ca gener Column 5: Indicate Column 6: Companin block	or to June 25, 1 call sign for each the DSE for the the accounting the basis of call the basis of call the call the program of (a)(1),76.61(e) the call the	1981, under former ch distant station ic is station for a sing period and year in urriage on which the egulations cited be noning: Carriage, on (1), or 76.63 (refer arriage under FCC tertain FCC rules, in the paper SA3 f SE for the current res listed in column of part 6 for this stations.	FCC rules gover dentifed by the legle accounting properties and the carries station was callow pertain to the part-time barring to 76.61(e) corules, sections regulations, or a form. accounting perints 2 and 5 and 1 legion.	ern ett erri iag arri nos sisis (1) 76 uutl od list	entified by the letter "F" ining part-time and subser "F" in column 2 of part odd, occurring between ge and DSE occurred (ed by listing one of the se in effect on June 24 s, of specialty programs)). 5.59(d)(3), 76.61(e)(3), horizations. For further as computed in parts the smaller of the two enaccurate and is subject.	stitute carria art 6 of the January 1, e.g., 1981/ following li, 1981.) ming under or 76.63 (r explanatio 2, 3, and 4 figures her	age.) DSE schedule 1978 and Jun 1). etters: FCC rules, ser eferring to n, see page (vi of this schedul	e 30, 196 ctions) of the e. hould be	81. e entered
	statement of accou	nt on fle in the	Licensing Division							
	1. CALL SIGN	PERMITT 2. PRIC DSE	OR 3. ACC	TIONS CARRIE COUNTING ERIOD	ΕD	ON A PART-TIME AN 4. BASIS OF CARRIAGE	5. PF	TUTE BASIS RESENT DSE	6. P	ERMITTED DSE
7 Computation of the	-	"Yes," complet	te blocks B and C,		paı	rt 8 of the DSE schedu	le.			
Syndicated			BLOCK	K A: MAJOR	TE	ELEVISION MARK	ET			
Exclusivity Surcharge	Is any portion of the or	cable system wi	ithin a top 100 majo	r television mark	et	as defned by section 76	6.5 of FCC r	ules in effect Ju	ne 24, 19	981?
	Yes—Complete	e blocks B and	C .		-10	X No—Proceed to	part 8			
	BLOCK B: C	arriage of VHF	/Grade B Contour	Stations		BLOCK	C: Compu	tation of Exem	pt DSEs	
	Is any station listed in commercial VHF stat or in part, over the ca	ion that places				Was any station listed nity served by the cabl to former FCC rule 76.	e system p	•		
	Yes—List each s X No—Enter zero a		n its appropriate pern art 8.	nitted DSE		Yes—List each sta X No—Enter zero ar			te permitt	ed DSE
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	SN	DSE
		-								
		-								
			TOTAL DOS	0.00				TOTAL 53	`E.	0.00
			TOTAL DSEs	0.00				TOTAL DS	o⊏S	0.00

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: DIRECTV, LLC \$YSTEM ID# 63037	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE	
Section 1	Enter the amount of gross receipts from space K (page 7)	7
Section 2	A. Enter the total DSEs from block B of part 7	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	of the Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	Surcharge
• Is any	y 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? 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. X No—Complete the applicable section below.	
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 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		ction 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)	
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)	
8 Computation of Base Rate Fee	You me 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 part checked "Yes," use the total number of DSEs from part 5. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below it. 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 "local	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
	L		
	Section 1		
	Section 2		
	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). B. Enter 0.00701 of gross receipts (the amount in section 1). \$\\$	

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2023/1

		" Z023/1
	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID	Nama
DIRE	CTV, LLC 6303	/
Section 4	If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.	_
4	A. Enter 0.01064 of gross receipts	8
	(the amount in section 1) ▶ \$	
	B. Enter 0.00701 of gross receipts (the amount in section 1) \$ \\$	Computation of
		Base Rate Fee
	C. Multiply line B by 3.000 and enter here >	
	D. Enter 0.00330 of gross receipts	
	(the amount in section 1) ▶ \$	
	E. Subtract 4.000 from total DSEs	
	(the figure in section 2) and enter here	
	F. Multiply line D by line E and enter here > \$	
	G. Add lines A, C, and F. This is your base rate fee	
	Enter here and in block 3, line 1, space L (page 7) Base Rate Fee	
	Dase Nate 1 ee	1
	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals astead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-	
	Space G.	9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of	
this ex	clusion, you must:	Base Rate Fee
First: [Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	and
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number	
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group	Surcharge
	r: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	for
	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you lso compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below.	Partially Distant
	rer, if your cable system is wholly located outside all major television markets, complete block A only.	Stations, and
How to	o Identify a Subscriber Group for Partially Distant Stations	for Partially
	For each community served, determine the local service area of each wholly distant and each partially distant station you	Permitted Stations
carried	to that community.	
outside	: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located the the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, be token, the station is distant to the subscriber.)	у
subscr	: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each iber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
-	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's iber groups.	
	n section:	
• Identi	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 all of the ibers in the group.	
• If:		
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, of this schedule; or,	
, -	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, to of this schedule.	
• Add t	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	alate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions a paper SA3 form.	
• Comp page. DSEs t	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the tot for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show ctual calculations on the form.	al

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	TEM ID
Name	DIRECTV, LLC	6303
	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 DIRECTV, LLC	R OF CABL	E SYSTEM:				S	YSTEM ID# 63037	Name
BL	OCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GRO	UP	<u> </u>	SECOND	SUBSCRIBER GROU	JP	^
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
								Otationo
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	s 1,255	,966.35	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Sec		\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		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 Fou	rth Group	\$	0.00	
	17	T		2.555 (tooolpio) ou	Сточр	*		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the	hane ret	o foos for oach sub-	oribor arou-	as shown in the harry	s abovo			
Enter here and in block			ounei group	as shown in the boxe	<i>₃</i> สม∪ ∨ Ե.	\$	0.00	

Name								
				TE FEES FOR EACH				BL
9	0	SUBSCRIBER GROUP	SIXTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FIFTH	COMMUNITY/ AREA
Computa				GOWINGTOT T/ /TICE/C				SOMMONT 17 AREX
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and Syndicat								
Exclusiv								
Surchar							-	
for								
Partiall								
Distan Station						-		
Station								
						-	 	
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	dase Rate Fee First Gr
		SUBSCRIBER GROUP		Base Rate Fee Second		\$ SUBSCRIBER GROU		
				Base Rate Fee Second COMMUNITY/ AREA				S
	D				JP			S
	0	SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	S COMMUNITY/ AREA
	0	SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	SOMMUNITY/ AREA
	0	SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	S COMMUNITY/ AREA
	0	SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	S COMMUNITY/ AREA
	0	SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	S COMMUNITY/ AREA
	0	SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	S COMMUNITY/ AREA
	0	SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	S COMMUNITY/ AREA
	0	SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	S COMMUNITY/ AREA
	0	SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	S COMMUNITY/ AREA
	0	SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0	SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	S COMMUNITY/ AREA
	0	SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	SOMMUNITY/ AREA
	0	SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	CALL SIGN
	DSE	SUBSCRIBER GROUP	DSE	CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	S COMMUNITY/ AREA

Nonpermitted 3.75 Stations

LEGAL NAME OF OWN DIRECTV, LLC	IER OF CABL	E SYSTEM:				S	63037	Name	
I		COMPUTATION O SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP SUBSCRIBER GROU	UP	_	
COMMUNITY/ AREA 0			COMMUNITY/ AREA 0			9 Computat			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate F	
								and Syndicate	
								Exclusivi	
								Surcharg	
								for Partially	
		-						Distant	
								Stations	
		-							
		-							
otal DSEs		l l	0.00	Total DSEs	L	11	0.00		
Fross Receipts First	Group	s 1,255	5,966.35	Gross Receipts Sec	ond Group	\$	0.00		
ase Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
		SUBSCRIBER GRO		 		SUBSCRIBER GRO			
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-							
		-							
		-							
otal DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third Group \$ 0.00		Gross Receipts Foul	rth Group	\$	0.00				
Base Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth Group \$ 0.00		0.00					
				Ш					
ase Rate Fee: Add nter here and in blo			criber group	as shown in the boxe	s above.	\$	0.00		
	. ,	,							

Nonpermitted 3.75 Stations

				TE FEES FOR EACH		COMPUTATION OF		BL	
9		SIXTH SUBSCRIBER GROUP				FIFTH SUBSCRIBER GROUP			
Computa	U	COMMUNITY/ AREA 0			U	COMMUNITY/ AREA 0			
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate									
and									
Syndicat									
Exclusiv							-		
Surchar for									
Partiall						-			
Distan									
Station									
						-			
	0.00			Total DSEs	0.00			otal DSEs	
	0.00	\$	l Group	Gross Receipts Second	0.00	\$			
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	ase Rate Fee First Gr	
		\$ SUBSCRIBER GROUP		Base Rate Fee Second		\$ SUBSCRIBER GROU			
				Base Rate Fee Second COMMUNITY/ AREA				S	
	D				JP			S	
	0	SUBSCRIBER GROUF	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	SOMMUNITY/ AREA	
	0	SUBSCRIBER GROUF	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	S OMMUNITY/ AREA	
	0	SUBSCRIBER GROUF	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	SOMMUNITY/ AREA	
	0	SUBSCRIBER GROUF	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	S COMMUNITY/ AREA	
	0	SUBSCRIBER GROUF	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	S COMMUNITY/ AREA	
	0	SUBSCRIBER GROUF	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	S COMMUNITY/ AREA	
	0	SUBSCRIBER GROUF	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	SOMMUNITY/ AREA	
	0	SUBSCRIBER GROUF	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	SOMMUNITY/ AREA	
	0	SUBSCRIBER GROUF	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	S COMMUNITY/ AREA	
	0	SUBSCRIBER GROUF	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA	
	0	SUBSCRIBER GROUF	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	S COMMUNITY/ AREA	
	0	SUBSCRIBER GROUF	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	S COMMUNITY/ AREA	
	0	SUBSCRIBER GROUF	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	CALL SIGN	
	0.00	SUBSCRIBER GROUP	DSE	CALL SIGN CALL SIGN Total DSEs	DSE DSE	CALL SIGN	DSE	CALL SIGN CALL SIGN Fotal DSEs	
	DSE	SUBSCRIBER GROUF	DSE	CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	S COMMUNITY/ AREA	

FORM SA3E. PAGE 20.

N	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#					
Name	DIRECTV, LLC	63037					
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP						
9 Computation	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus 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:						
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	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, particle 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 classiff Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of the schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need.						
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP					
	Line 4. Enter the VIIIE DOE-						
		Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs					
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation					
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group\$					
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP					
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs					
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs					
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation					
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group					
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ear in the boxes above. Enter here and in block 4, line 2 of space L (page 7)						

FORM SA3E. PAGE 20.

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#					
Name	DIRECTV, LLC	63037					
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP					
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus 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 of	☐ First 50 major television market	Second 50 major television market					
Base Rate Fee	INSTRUCTIONS:						
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.						
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 for	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.						
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the						
	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 this subscriber group	total number of DSEs for this subscriber group					
	subject to the surcharge	subject to the surcharge					
	computation	computation					
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY					
	SURCHARGE First Group	SURCHARGE Second Group\$					
	SEVENTH SUBSCRIBER GROUP	EIGHTH SUBSCRIBER GROUP					
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs					
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs					
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1					
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for					
	this subscriber group	this subscriber group					
	subject to the surcharge computation	subject to the surcharge computation					
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY					
	SURCHARGE	SURCHARGE					
	Third Group	Fourth Group					
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for on the boxes above. Enter here and in block 4, line 2 of space L (page)						