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

STATEMENT OF ACCOUNT for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

SA3E Long Form

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY	THIS STATEMENT:			
Accounting Period	2017/2				
B Owner	Instructions: Give the full legal name of the owner of the caracteristic of the subsidiary, not that of the parent or List any other name or names under which the <i>lf there were different owners during the accomparing statement of account and royalty fee payle</i> Check here if this is the system's first filing	prporation the owner conducts the business of the cable pounting period, only the owner on the last da	system y of the accounting period should	·	062960
	LEGAL NAME OF OWNER/MAILING ADDRES	S OF CABLE SYSTEM			
	Southwestern Bell Telephone C	ompany			
				06296	020172
				062960	2017/2
	1010 N. St. Mary's Street, Room San Antonio, TX 78215-2109 INSTRUCTIONS: In line 1, give any business		siness and operation of the svs	stem unless	these
С	names already appear in space B. In line 2, g				
System	1 IDENTIFICATION OF CABLE SYSTEM:				
	MAILING ADDRESS OF CABLE SYSTEM:				
	2 (Number, street, rural route, apartment, or suite number)				
	(City, town, state, zip code)				
D	Instructions: For complete space D instruction	ons, see page 1b. Identify only the frst c	ommunity served below and re	elist on page	e 1b
Area	with all communities.				
Served	CITY OR TOWN	STATE			
First	Austin	ТХ			
Community	Below is a sample for reporting communitie	, , , ,			
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB	3 GRP#
Sample	Alda	MD	A		1
	Alliance	MD	В	_	2
	Gering	MD	B		3
Brivaov Act Notio	e Section 111 of title 17 of the United States Code authoriz	rea the Convright Office to collect the personally id	patifying information (DII) requested or	n th	
-	e: Section 111 of title 17 of the United States Code authoriz press your statement of account. PII is any personal information				
	ding PII, you are agreeing to the routine use of it to establish	•			

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

2/28/2018

completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#			
Southwestern Bell Telephone Company			062960			
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.						
Note: Entities and properties such as hotels, apartments, condominiums, or mobile hon below the identified city or town.	ne parks should b	e reported in pare	ntheses			
If all communities receive the same complement of television broadcast stations (i.e., or all communities with the channel line-up "A" in the appropriate column below or leave th on a partially distant or partially permitted basis in the DSE Schedule, associate each re designated by a number (based on your reporting from Part 9).	e column blank. I	f you report any st	ations			
When reporting the carriage of television broadcast stations on a community-by-commu channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns be	l a subscriber gro					
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	-		
Austin	ТХ			First		
Bastrop	ТХ			Community		
Bastrop Unincorporated	ТХ					
Bear Creek	ТХ					
Bee Cave	ТХ					
Briarcliff	TX			Constructions for		
Cedar Park	TX			See instructions for additional information		
				on alphabetization.		
Dripping Springs				on alphabetization		
GARFIELD	TX					
Georgetown	TX					
Hays Unincorporated County	ТХ			Add rows as necessary.		
Hutto	ТХ			Add Tows as necessary.		
Jollyville	TX					
Jonestown	ТХ					
Lago Vista	ТХ					
Lakeway	ТХ					
Leander	TX					
Manchaca	TX					
Manor	TX					
Pflugerville	TX					
Point Venture	TX					
Rollingwood	ТХ					
Round Rock	TX					
San Leanna	TX					
Sunset Valley	ТХ					
Taylor	ТХ					
Travis Unincorporated County	ТХ					
Village of the Hills	TX					
Volente	TX					
West Lake Hills	TX					
Williamson Unincorporated County	TX					

Name	LEGAL NAME OF OWNER OF CABL							S	YSTEM ID
Hamo	Southwestern Bell Tele	phone Com	pany						06296
E Secondary Transmission Service: Sub- scribers 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 or Block 2: If your cable system printed in block 1 (for example, t with the number of subscribers a sufficient.	n has rate car iers of services	tegorie s that in	es for seconda Iclude one or m	ary transmore secon	dary transmissio	ons), list th	nem, together	se
	BLO	DCK 1					BLO		
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SE	RVICE	NO. OF SUBSCRIBERS	RATE
	Residential: • Service to first set	8	0.654	\$ 19.00	HD Tech	Fee		71,507	\$ 10.0
	Service to additional set(s)		-,	•	Set-Top			81,535	\$0-\$1
	• FM radio (if separate rate)				Broadca	st TV Surcharg	je	80,654	\$4.99-\$5.9
	Motel, hotel								
	Commercial Converter		881	\$ 20.00	••••••				
	Residential				••••••				
	Non-residential								
F Services Other Than Secondary ransmissions: Rates	SERVICES OTHER THAN SEC In General: Space F calls for in not covered in space E, that is, t service for a single fee. There are furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard Block 2: List any services the listed in block 1 and for which a brief (two- or three-word) description	ate (not subs hose services the two exception or facilities furr it in which it is rate column. the charged hat your cable separate charg	criber) that are ns: you nished t usually by the syster je was) information v e not offered in u do not need to to nonsubscrib / billed. If any r cable system m furnished o made or establ	with respe combination o give rate ers. Rate in ates are ch for each r offered o	on with any seco information con nformation shou narged on a vari of the applicat during the acco	ondary tra cerning (1 ld include able per-p ole servic ounting p	nsmission) services both the orogram basis, es listed. eriod that were no	
		BLO						BLOCK 2	
	CATEGORY OF SERVICE	RATE	-	GORY OF SEF	-	RATE	CATEG	ORY OF SERVICE	RATE
	Continuing Services: Pay cable			otel, hotel	sidential		Video	n Demand	\$0-\$10
	Pay cable—add'l channel	\$5-\$199		ommercial				Activation Fee	\$0-\$3
	Fire protection		•Pa	y cable				lanagement Fee	\$0-\$44
	 Burglar protection 		•Pa	y cable-add'l c	hannel		Dispatc	h on Demand	\$14
	Installation: Residential First set 	\$0-\$199		e protection	,			s Receiver nium Tier	\$10-\$4 \$
	Additional set(s)	ψυ-ψ100		services:				grade Fee	ۍ \$50-\$10
	• FM radio (if separate rate)			connect		\$0-\$35			
	• Converter		• Dis	sconnect					
		[• Ou	Itlet relocation		\$0-\$55			
			• Mc	ove to new add	ress				
			1						

LEGAL NAME OF OWN	IER OF CABLE S	YSTEM:			SYSTEM ID#	Namo	
Southwestern E	Bell Telepho	one Compa	any		062960		
RIMARY TRANSMITTE	ERS: TELEVISIO	N					
•			· ·		s and low power television stations) ed only on a part-time basis under	G	
••		-			ain network programs [sections		
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a							
substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program							
asis under specifc FC							
station was carried			it it in space I (th	e Special Statem	ent and Program Log)—if the		
List the station here, a	and also in spa	ace I, if the sta			tute basis and also on some other		
in the paper SA3 for		erning substi	tute basis statio	ns, see page (v) c	of the general instructions located		
Column 1: List each	h station's call	-			s such as HBO, ESPN, etc. Identify		
			•	•	tion. For example, report multi- h stream separately; for example		
VETA-simulcast).				·			
			-		ion for broadcasting over-the-air in may be different from the channel		
n which your cable sy	stem carried th	ne station.		0			
					ependent station, or a noncommercial cast), "I" (for independent), "I-M"		
for independent multic	cast), "E ["] (for n	oncommercia	l educational), c	or "E-M" (for nonce	ommercial educational multicast).		
For the meaning of the Column 4: If the sta					he paper SA3 form. es". If not, enter "No". For an ex-		
lanation of local servio	ce area, see pa	age (v) of the	general instruct	ions located in the	e paper SA3 form.		
•			•	•	stating the basis on which your tering "LAC" if your cable system		
arried the distant stati	ion on a part-tii	me basis beca	ause of lack of a	ctivated channel	capacity.		
					y payment because it is the subject stem or an association representing		
-	childred into 0						
he cable system and a	a primary trans			•	ry transmitter, enter the designa-		
ion "E" (exempt). For s	simulcasts, als	mitter or an a o enter "E". If	ssociation repre you carried the	senting the prima channel on any o	ry transmitter, enter the designa- ther basis, enter "O." For a further		
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FORM SA3E. PAGI	OWNER OF CABLE SY	STEM				SYSTEM ID#	
	ern Bell Telepho		anv			062960	Name
	MITTERS: TELEVISIO	•					
n General: In sp	ace G, identify every	television sta			and low power television st		G
					d only on a part-time basis u in network programs [section		0
	•			•	nd (2) certain stations carrie		Primary
substitute program	n basis, as explained	d in the next p	paragraph.				Transmitters:
		. ,		s carried by your c	able system on a substitute	program	Television
Do not list the st	fc FCC rules, regulat ation here in space (rried only on a substi	G-but do list		e Special Stateme	nt and Program Log)—if the	e	
List the station h basis. For furth	nere, and also in space ner information conce	ce I, if the sta			ute basis and also on some the general instructions loc		
in the paper S/ Column 1: Lis		sian. Do not r	eport origination	n program service:	such as HBO, ESPN, etc.	Identify	
		-			ion. For example, report mu	-	
cast stream as "W VETA-simulcast)		treams must	be reported in o	column 1 (list each	stream separately; for exar	nple	
Column 2: Giv	ve the channel numb		•		on for broadcasting over-the may be different from the ch		
on which your cat	ole system carried the	e station.		0	pendent station, or a nonco		
					ast), "I" (for independent), "I-		
					mmercial educational multic	ast).	
	of these terms, see p he station is outside t				e paper SA3 form. s". If not, enter "No". For an	ex-	
	service area, see pa		, (<i>,</i> ,	,		
Column 5: If y	ou have entered "Ye	s" in column	4, you must cor	mplete column 5, s	tating the basis on which yo		
		•	0.		ering "LAC" if your cable sys	stem	
	t station on a part-tim				apacity. payment because it is the s	subject	
		inditiodot ou o		abjoor to a royally			
or a million ayiee	ment entered into on	or before Ju	ine 30, 2009, be	tween a cable sys	tem or an association repre		
the cable system	and a primary transn	nitter or an as	ssociation repre	senting the prima	tem or an association repre y transmitter, enter the desi	senting gna-	
the cable system tion "E" (exempt).	and a primary transn For simulcasts, also	nitter or an as enter "E". If <u>y</u>	ssociation repre	senting the prima channel on any ot	tem or an association repre y transmitter, enter the desi ner basis, enter "O." For a fu	senting gna-	
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Name	LEGAL NAME OF C								SYSTEM ID# 062960
H Primary Transmitters: Radio	Southwestern Bell Telephone Company 062960 PRIMARY TRANSMITTERS: RADIO 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 receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, 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 Column 4: G	this by placing Give the station	a check i's locatio	mark in the "S/D" column. on (the community to which the community with which the	ne	station is licens	ed by the FCC		
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	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	Ц	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
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Southwestern Beil Telephone Company O623960 Name SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space 1, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former PCC rules, regulations, or authorizations. For a further organization that usus be included in this log, see page (1) of the general instructions based in the paper SAS in the paper SAS in the program may any authorizations. For a further threadeness to y a distant station? I I SheEiCAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE I I SheEiCAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE I was in the instruction of the paper SAS in the paper SAS in the program instructions based in the paper SAS. Social in the paper SAS in the instruction program is substituted for the program is distributed basis. Any nonnetwork television program is used in the paper station of another station and under cartain FOC rules, regulations, or authorizations and paper is the invest on the program is a distributed basis. Social in the paper SAS from for thirther information. Do not use generate instructions located in the paper SAS from for their information. To on touse generation the construction is identified in the counting with which the station is identified. Count is the program was attributed to program. Use numerals, with the month first. Example: Carta or Canzian and stations. If any the community the which the station is identified or gara in the distruction of the community in which the station is identified program in the accounting provide and the accounting provide. The isolated program. So and the month first. Example: Carta for the carter first in the isolated program. So and the paper SAS from for thuter the isolation in effect for the carta for the
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form. Substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further broadcast by a distant station? Image: Special Statement and Instructions located in the paper SA3 form. 2. Doro of Substitute PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substitute program. Under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form further information. Do not use general categories like "movies", or "basketball". List specific program titles, for example. 'I Love Luey' or "NBA Basketball". Fore svs. Bulls.'' Column 2: Give the anonth and day when your system carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated are required to delete under FCC rules and regulations in effect during the accounting period; enter the listed program mas substitute for grogramming that your system was permitted to delete under FCC r
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form. Substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further broadcast by a distant station? Image: Special Statement and Image: Special Statement and S
substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form. Substitute basis, any nonnetwork television program broadcast by a distant station? Yes Yes Substitute basis, any nonnetwork television program broadcast by a distant station? Yes Yes Yes Substitute basis, any nonnetwork television program broadcast by a distant station? Yes Ye
explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form. Substitute 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE Substitute basis, any nonnetwork television program Special broadcast by a distant station? Yes XiNo Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. Yes XiNo 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Substitute program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the program was toradast live, entry "Yes." Otherwise entry "No." Solute or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program Statement and pay the set or authorization was the earchast live, entry "Yes." Otherwise entry "No." Column 3: Give the tilt of every nonadcast live, entry 'Yes." Otherwise entry "No." Column 4: Give the broadcast station is for earning the substitute program. Use numerals, with the month first. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as 6:00–6:30 p.m." Column 4: Give the therer P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules a
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE Carriage: • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? □ Yes XINo Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. □ Yes XINo 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball". Ters vs. Bulls." Column 3: Give the call sign of the station broadcasting the substitute program. Use numerals, with the month first. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00-6:30 p.m." Column 7: Give the tile leaver "R" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect during the accounting period, enter the letter "P" if the listed pro gram was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect during the accounting period, enter the letter "P" if the listed pro gram was substituted for
* Dump the accounting period, do your cable system carry, on a substitute basis, any nonnetwork television program to program to produce the program log in block 2. Statement and program Log Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. Statement and program Log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Statement and program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: T6ers vs. Bulls." Statement and program was broadcast ing the substitute program. Use numerals, with the month first. Example: for May 7 give '577." Column 4: Give the broadcast station's location (the community with which the station is identified). Statement and program was substitute program. Use numerals, with the month first. Example: for May 7 give '577." Column 6: State the times when the substitute program was carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00-6:30 p.m." Statement and program was substituted program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect ouring the accounting period; enter the letter "P" if the listed pro gram was
program Log Program Log Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. Program Log 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, 'I Love Lucy' or "NBA Basketball". 76ers vs. Bulls." Column 3: Give the call sign of the station broadcast line, enter "Yes." Otherwise enter "No." Column 4: Give the broadcast istations, if any, the community to which the station is identified). Column 6: State the times when the substitute program was carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57." Column 7: Enter the letter "R" if the listed program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00-6:30 p.m." 7. REASON FOR Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976. 7. REAS
Iog in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community with 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). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations
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clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 5: Give the broadcast 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 to which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect on October 19, 1976. UBESTITUTE PROGRAM WHEN SUBSTITUTE CARRIAGE OCCURRED FOR FOR FOR DELETION
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Yes of No CALL SIGN 4. STATION'S LOCATION AND DAY PROM — 10 Image: Antiperson of the state of the
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FORM SA3E. PAGE 5.

ACCOUNTING PERIOD: 2017/2

FORM SA3E. PAGE 6.

Name	LEGAL NAME OF (GAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM: SYSTEM ID#							
Name	Southweste	rn Bell Telep	ohone Compar	ıy					062960
J Part-Time Carriage Log	 PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m12:00 p.m." 								
			DATE	S AND HOURS (DF F	PART-TIME CAF	RIAGE		
		WHEN	I CARRIAGE OCC	URRED			WHEN	I CARRIAGE OC	CURRED
	CALL SIGN	DATE	HOL			CALL SIGN	DATE		DURS
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FORM	SA3E. PAGE 7.					
LEGA	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name			
Sou	ithwestern Bell Telephone Company	062960	Name			
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.						
Instru • Con • Con • If you fee • If you accord ▶ If pa	(RIGHT ROYALTY FEE ctions : Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the al from block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable p ompanying this form and attach the schedule to your statement of account. art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b	arts of the DSE Schedule	L Copyright Royalty Fee			
	k 3 below.	entered en line O in black				
	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low.	entered on line 2 in block				
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld 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 fe system's gross receipts for the accounting period.	e is 1.064 percent of the				
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064	\$ 24,912,010.76				
	Enter the result here.					
	This is your minimum fee.	\$ 265,063.79				
2 Block 3	 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. Ine 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero 	od?				
	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 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 	\$ 265,063.79 r 0.00	Cable systems submitting additional			
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	deposits under Section 111(d)(7) should contact			
	Line 4. FILING FEE	\$ 725.00	the Licensing additional fees. Division for the			
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 265,788.79	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 PERI	IOD: 2017/2	I SA3E. PAGE 8
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Southwestern Bell Telephone Company	SYSTEM ID# 062960
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations . 1. Enter the total number of channels on which the cable system carried television broadcast stations . 2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services .	
N Individual to Be Contacted for Further Information	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.) Name Diane Bellinger Telephone 210-351-4805	
	Address 1010 N. St. Mary's Street, Room 13-59-B (Number, street, rural route, apartment, or suite number) San Antonio, TX 78215 (City, town, state, zip)	
	Email dg7796@att.com Fax (optional) 210-246-8199	
O Certifcation	 CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations. I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or 	
	 (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	
	X /s/ Mike McGuire Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility setting Typed or printed name: Mike McGuire Title: Assistant Vice President – Billing Operations Title of official position held in corporation or partnership Date: February 23, 2018	

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

FORM	SA3E	PAGE9.
	SAJL.	FAGLS.

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
Southwestern Bell Telephone Company	062960	
 SPECIAL STATEMENT CONCERNING GROSS RECEIP The Satellite Home Viewer Act of 1988 amended Title 17, section 1111 lowing sentence: "In determining the total number of subscribers and the gross a service of providing secondary transmissions of primary broadd scribers and amounts collected from subscribers receiving second second and amounts and amounts and amounts are second and amounts are second and the second second second and the second second second and the second seco	(d)(1)(A), of the Copyright Act by adding the fol- amounts paid to the cable system for the basic cast transmitters, the system shall not include sub- ondary transmissions pursuant to section 119." e on page (vii) of the general instructions in the	P Special Statement Concerning Gross Receipts Exclusion
made by satellite carriers to satellite dish owners?		
XNO		
YES. Enter the total here and list the satellite carrier(s) below	\$	
Name		
Name Name Name Name Name Name Name Name	iling Address	
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitte	ed as a result of a late navment or undernavment	-
For an explanation of interest assessment, see page (viii) of the gener		Q
		Interest
Line 1 Enter the amount of late payment or underpayment		Assessment
	x	
Line 2 Multiply line 1 by the interest rate* and enter the sum here		
	x days	
Line 3 Multiply line 2 by the number of days late and enter the sum he	ere	
Ling 4. Multiply ling 2 by 0 00074** optor born and an ling 2. block 4.		
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/licensi	ng/interest-rate.pdf. For further assistance please	
contact the Licensing Division at (202) 707-8150 or licensing@lo	c.gov.	
** This is the decimal equivalent of 1/365, which is the interest ass	essment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account	already submitted to the Convright Office	
please list below the owner, address, first community served, accounti		
filing.		
Owner		
Address		
First community conved		
First community served Accounting period		
ID number		
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyrig	ht Offce to collect the personally identifying information (PII) requested or	n th

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

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

The Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable sys-

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

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

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

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

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

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

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

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

- Determine if any portion of the cable system is located within a top 100 major television market as defined by the FCC rules and regulations in effect on June 24, 1981. If no portion of the cable system is located 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.

DSE SCHEDULE. PAGE 11.

COMPUTING THE BASE RATE FEE-PART 8 OF THE DSE SCHEDULE

Determine whether any of the stations you carried were partially distantthat 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 DSF 1.064% of gross receipts

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

0.330% of gross receipts PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

If any of the stations were partially distant:

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

2. Identify the communities/areas represented by each subscriber group. 3. For each subscriber group, calculate the total number of DSEs of

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

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

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

TOTAL DSEs

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

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

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

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

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

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

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

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

CITY

Santa Rosa

Bodega Bay

Rapid City

Fairvale

DSE

1.0

1.0

0.083

0.139

0.25

2 4 7 2

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



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

Identification of Subscriber Groups

OUTSIDE LOCAL

Stations A and C

Stations A and C

Stations B, D, and E

TOTAL GROSS RECEIPTS

SERVICE AREA OF

Stations A, B, C, D , E

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

GROSS RECEIPTS

\$310,000.00

100,000.00

70,000.00

120,000.00

\$600.000.00

FROM SUBSCRIBERS

DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#												
I	Southwestern Bell Telep	ohone Comp	any			062960							
	SUM OF DSEs OF CATEGOR • Add the DSEs of each station Enter the sum here and in line	l.			0.00								
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5												
Computation of DSEs for	of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom- mercial educational station, give the DSE as ".25."												
Category "O"	CATEGORY "O" STATIONS: DSEs												
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE							
Add rows as													
necessary.													
Remember to copy													
all formula into new													
rows.													
	[

Name		OWNER OF CABLE SYSTEM: rn Bell Telephone Co	ompany					SYSTEM I 0629
	Southweste		ompany					0623
3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 be carried out Column 4 give the type- Column 6	CAPACITY ist the call sign of all dista ist the call sign of all dista ist the call sign of all dista ist or each station, give t orrespond with the infor is For each station, give t it at least to the third decin For each independent ivalue as ".25." Multiply the figure in component. This is the station's	the number of himation given in the total number umn 2 by the fig mal point. This i station, give the plumn 4 by the fig	ours your cable syste space J. Calculate or of hours that the stat ure in column 3, and s the "basis of carriag "type-value" as "1.0."	m carried the sta nly one DSE for of tion broadcast ov give the result in ge value" for the s " For each netwo d give the result i	ation during the acco each station. /er the air during the decimals in column station. /rk or noncommercia	accounting period. 4. This figure must Il educational station to no less than the	n,
Capacity		C	ATEGORY	LAC STATIONS:	COMPUTAT	ION OF DSEs		
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						x		
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LEGAL NAME OF C			21/				S	YSTEM ID# 062960	Name
		-	Iy					062960	
-			part 6 and part	7 of the DSE sche	edule blank ar	nd complete p	art 8, (page 16) o	f the	6
schedule. If your answer if 	"No," complete blo								
				ELEVISION M					Computation of 3.75 Fee
	1981?	schedule—[PLETE THE REMA					
		BLOC	CK B: CARR	IAGE OF PERM	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulations are shown as the regulations are	ons prior to Ju dule. (Note: Tl	part 2, 3, and 4 of ne 25, 1981. For fu ne letter M below n Act of 2010.)	irther explana	ation of permit	ted stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	 (Note the FCC r. A Stations carrie 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfathered instructions for E Carried pursua *F A station pre 	Iles and regu ed pursuant f on as defined al educationa d station (76. r DSE sched ant to individi viously carrie IHF station w	lations cited b to the FCC ma d in 76.5(kk) (7 al station [76.5 65) (see parag lule). ual waiver of F ed on a part-tin <i>v</i> ithin grade-B	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 sis prior to Ju	n June 24, 194), 76.61(b)(c), 1) referring to 13 to 76.61(d) randfathered 14 ine 25, 1981	76.63(a) referring 76.61(e)(1 stations in th∉	-	
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column 2. PERMITTED			worksheet on pag	1	
SIGN	BASIS		SIGN	BASIS		SIGN	BASIS		
								0.00	
		В	LOCK C: CO	MPUTATION OF	3.75 FEE				
Line 1: Enter the	e total number of	DSEs from	part 5 of this	schedule				-	
	e sum of permitte							-	
				r of DSEs subjec 7 of this schedu		rate.		0.00	
Line 4: Enter gro	oss receipts from	space K (p	age 7)				x 0.0	375	Do any of the DSEs represent partially
Line 5: Multiply I	ine 4 by 0.0375 a	and enter su	um here						permited/ partially nonpermitted
Line 6: Enter tota	al number of DSI	Es from line	3				х 	-	carriage? If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 ar	nd enter her	e and on line	2, block 3, space	e L (page 7)			0.00	

DSE SCHEDULE. PAGE 13.

ACCOUNTING PERIOD: 2017/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#									
Southwester	rn Bell Telepho	ne Compa	ny					062960	Name
		BLOCK	A: TELEV	SION MARKET	S (CONTIN	IUED)			
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation o
									3.75 Fee
							•		
		-			 				
		-			-				
							-		
		-			<u>+</u>				
		-			-				
		.							
		+			+				
		.			 				

								[OSE SCHEDULE. PAG	
N	LEGAL NAME OF OWN	NER OF CABLE SYST	EM:						SYSTEM	ID#
Name	Southwestern E	Bell Telephone	Company						062	960
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters Column 4: Indicate the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections									
	Statement of accourt		Sing Division	I.						
							ידספווס ח			
	1 0 4 1				יט כ	ON A PART-TIME AN				
	1. CALL	2. PRIOR				4. BASIS OF		RESENT	6. PERMITTE	-D
	SIGN	DSE	Pt	ERIOD		CARRIAGE	L	DSE	DSE	
7 Computation of the	-	"Yes," complete blo	cks B and C, 3 and C blanl	k and complete	•	t 8 of the DSE schedu				
Syndicated			BLOCK	(A: MAJOR	IEL		- 1			
Exclusivity			to a 100 moio			a defend by easting 70				
Surcharge		-	top 100 majo	or television mar	ket a	as defned by section 76	5.5 Of FCC	rules in effect J	une 24, 1981?	
	X Yes—Complete	blocks B and C .				No—Proceed to	part 8			
	BLOCK B: Ca	arriage of VHF/Grad	e B Contour	Stations		BLOCK	C: Compu	itation of Exem	pt DSEs	
	BLOCK B: Carriage of VHF/Grade B Contour Stations BLOCK C: Computation of Exempt DSI Is any station listed in block B of part 6 the primary stream of a commercial VHF station that places a grade B contour, in whole or in part, over the cable system? Was any station listed in block B of part 7 carried in an inity served by the cable system prior to March 31, 197 to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE No—Enter zero and proceed to part 8. No—Enter zero and proceed to part 8.								31, 1972? (refe	
		II								
	CALL SIGN	DSE C	ALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	IN DSE	
		······								
		<mark></mark>								
		<mark></mark>								
		<u> </u>								
		тс	DTAL DSEs	0.00				TOTAL DS	Es 0.	.00
	1				11					

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Southwestern Bell Telephone Company	SYSTEM ID# 062960	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	4,912,010.76	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Exclusivity Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below. If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS	E	
	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)	_	
	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	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS 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)	E	
	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		

	16
DSE SCHEDULE. PAGE	10

	LEGAL NA		JLE. PAGE 16. SYSTEM ID#
Name		Southwestern Bell Telephone Company	062960
7 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)	
		Syndicated Exclusivity Surcharge	<u></u> .
8 Computation of Base Rate Fee	You m 6 was • In blo • If you • If you blank What were b	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belo c. is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.	w
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
	[Yes—Complete part 9 of this schedule. Xo—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section		
	1	Enter the amount of gross receipts from space K (page 7)	6
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	00_
	Section 3	If the figure in section 2 is 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)	

LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name
South	western Bell Telephone Company 062960	Name
Section	If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.	
4		8
	A. Enter 0.01064 of gross receipts	0
	(the amount in section 1)	
	B. Enter 0.00701 of gross receipts	Computation
	(the amount in section 1) F	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 S 0.00	
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in	•
Space		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	Computation
	on, you must:	of 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
station	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of	Syndicated Exclusivity
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. : Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge
-	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must	for Partially
	mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However,	Distant
	cable system is wholly located outside all major television markets, complete block A only.	Stations, and for Partially
	Identify a Subscriber Group for Partially Distant Stations For each community served, determine the local service area of each wholly distant and each partially distant station you	Permitted
•	to that community.	Stations
•	For each wholly distant and each partially distant station you carried, determine which of your subscribers were located the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by	
	ne token, the station is distant to the subscriber.)	
-	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each	
	ber 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.	
Compu	Iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber	
groups		
	i section: fy the communities/areas represented by each subscriber group.	
	he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the	
	bers in the group.	
• lf:	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, 6 of this schedule.	
•	The DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions	
in the	paper SA3 form.	
	ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total	
DSEs f	or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your calculations on the form.	

Name Southwestern Bell Telephone Company Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in th subscriber groups may be partially distant. Step 2: Use a separate part 8, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted as partially distant. Step 2: Use a separate part 8, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted as partially distant. Step 2: Use a separate part 8, block A, to compute the 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts rep for each part and used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block A, of the toff so for Carriage of Distant and Partially Distant Multicast Stream. Step 1: Use part 9, block A, of the DSE Schedule to report each distant multicast stream. The 3.75 Perce and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a D. SUS value for the retarsmission of a multicast stream. You must report but not assign a D. SUS value for the retarsmission of a multicast stream. You must report but no tassign a D. SUS value for the retarsmission of a multicast stream. You must report but no tassign a DSE value for the retarsmission of a multicast	SYSTEN
 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 the 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 or signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs .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 rep 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 a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent 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 agree entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary 	062
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 Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted of signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs .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 rep 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 a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent 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 agree entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary 	ese
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entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a prim	mont
	aiy

LEGAL NAME OF OWN						S	YSTEM ID# 062960	Name
				TE FEES FOR EAC				
FIRST SUBSCRIBER GROUP						SUBSCRIBER GROU		9
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
	····							Exclusivity Surcharge
	••••			•				for
		-						Partially
								Distant
	····							Stations
			••••••			+		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$ 24,912	,010.76	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	-	\$	0.00	Base Rate Fee Seco		\$	0.00	
		SUBSCRIBER GROU				SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	۹ 		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<mark></mark>							
	····							
	••••			•				
		-						
		_						
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	••••						····	
			-				····	
	<mark></mark>		.				<mark></mark>	
	····		+		····			
Total DSEs			0.00	Total DSEs			0.00	
	0							
Gross Receipts Third	Group	<u>\$</u>	0.00	Gross Receipts Four	rtn Group	<u>\$</u>	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$	0.00	

FORM SA3E. F	PAGE	19.
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LEGAL NAME OF OWN Southwestern Be						S	YSTEM ID# 062960	Name
В				TE FEES FOR EACH				
FIFTH SUBSCRIBER GROUP						SUBSCRIBER GROU		9
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
			··		···			Exclusivity Surcharge
		-						for
								Partially
								Distant
								Stations
								
							0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO	UP		EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			•					
			•••••••••••••••••••••••••••••••••••••••			+		
			<mark></mark>		<mark></mark>			
								
			<mark></mark>		<mark></mark>		<mark></mark>	
			<mark></mark>		<mark></mark>			
			<mark></mark>		<mark></mark>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fourt	h Group	\$	0.00		
Base Bate Fee: Add t	he haso ro t	te fees for each subs	criber group	as shown in the boxes	above			
Enter here and in bloc			silosi group	as shown in the DOXES	above.	\$		

Nonpermitted 3.75 Stations

CALL SIGN DSE CALL SI	LEGAL NAME OF OWNE Southwestern Bel						S	3YSTEM ID# 062960	Name
CALL SIGN DSE	BI				ATE FEES FOR EAC			UP	•
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE of Base Rate Fee Automatical Stress Automatical Stress Automatical Stress Syndicated Syndicated Total DSEs 0.00 Total DSEs 0.00 Sase Rate Fee Second Group \$0.00 Stations Total DSEs 0.00 Total DSEs 0.00 Sase Rate Fee Second Group \$0.00 Total DSEs 0.00 Sase Rate Fee Second Group \$0.00 Sase Rate Fee Second Group \$0.00 Total DSEs 0.00 Total DSEs 0.00 Coll. SIGN DSE CALL SIGN Total DSEs 0.00 Sase Rate Fee Second Group \$0.00 Sase Rate Fee Second Group \$0.00 Total DSEs 0.00 Coll. SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs 0.00 Sase Rate Fee Fourth Group Subscripter Group 0.00 Sase Rate Fee Fourth Group \$0.00 Base Rate Fee Third Group \$0.000 Sase Rate Fee Fourth Group <th colspan="3">COMMUNITY/ AREA 0</th> <th>COMMUNITY/ ARE/</th> <th>Α</th> <th></th> <th>0</th> <th>-</th>	COMMUNITY/ AREA 0			COMMUNITY/ ARE/	Α		0	-	
and syndicated Syndicated Syndicat	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
Syndicated Syndicated Surcharge Total DSEs 0.00 Gross Receipts First Group \$ 24,912,010.76 Gross Receipts First Group \$ 0.00 Total DSEs 0.00 Total DSEs 0.00 Gross Receipts First Group \$ 24,912,010.76 Gross Receipts First Group \$ 0.00 Total DSEs 0.00 Gross Receipts First Group \$ 0.00 Total DSEs 0.00 Gross Receipts First Group \$ 0.00 Total DSEs 0.00 Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Gross Receipts Fund Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Gross Receipts Fund Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Gross Raceipts Fourth Group \$ 0.00 Base R									
Surcharge or Partially Distant Total DSEs 0.00 Total DSEs 0.00 Stations 0.00 Total DSEs 0.00 CALL SIGN DE CALL SIGN DE <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>									
Image:									-
Diama Image:					•				
Stations Total DSEs 0.00 Gross Receipts First Group \$ 24,912,010.76 Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE Gross Receipts Fourth Group 0.00 Total DSEs 0.00 Gross Receipts Fourth Group 0.00 Base Rate Fee Third Group 0.00 Base Rate Fee Third Group 0.00									
Gross Receipts First Group \$ 24,912,010.76 Gross Receipts Second Group \$ 0.00 Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs 0.00 Total DSEs 0.00 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group 0.000 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Tourth Group 0.000									
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Gross Receipts First Group \$ 24,912,010.76 Gross Receipts Second Group \$ 0.00 Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 0 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs 0.00 Total DSEs 0.00 Gross Receipts Fourth Group 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group 0.00									
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Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs 0.00 Total DSEs 0.00 Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00		roup	\$ 24,912,			ond Group	\$		
THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE Gross Receipts Third Group 0.000 Base R						·			
COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Call SIGN DSE CALL SIGN DSE CALL SIGN DSE Call SIGN DSE CALL SIGN DSE CALL SIGN DSE Call SIGN DSE CALL SIGN DSE CALL SIGN DSE Call SIGN DSE Call SIGN DSE Call SIGN DSE Call SIGN DSE Call SIGN DSE Call SIGN DSE Total DSEs 0.00 S 0.00 S 0.00 Base Rate Fee Third Group S 0.00 S 0.00 Base Rate Fee:	Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Call SIGN DSE CALL SIGN DSE CALL SIGN DSE Call SIGN DSE CALL SIGN DSE CALL SIGN DSE Call SIGN DSE CALL SIGN DSE Call SIGN DSE Call SIGN DSE Call SIGN DSE Call SIGN DSE Call SIGN DSE Call SIGN DSE Call SIGN DSE Call SIGN DSE Call SIGN DSE Call SIGN DSE Call SIGN DSE O.00 Call SIGN Call SIGN DSE Call SIGN Call DSEs O.00 Gross Receipts Fourth Group S O.00 S O.00		THIRD	SUBSCRIBER GROU				SUBSCRIBER GRO		
Total DSEs 0.00 Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00				•		<u> </u>			
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$					-				
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$			-						
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$			-						
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$			-						
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$									
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$	Total DSEs			0.00	Total DSEs		··	0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)	Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7) \$ 0.00									
	Base Rate Fee: Add the Enter here and in block	te base rat < 3, line 1, s	t e fees for each subsc space L (page 7)	riber group	as shown in the boxe	s above.	\$	0.00	

LEGAL NAME OF OWN						S	642960 O62960	Name
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAG		RIBER GROUP		
	FIFTH	SUBSCRIBER GRO	UP		SIXTH	H SUBSCRIBER GRO)UP	•
COMMUNITY/ AREA 0			0	COMMUNITY/ ARE	A		0	9
								Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-				Base Rate Fo
			<mark></mark>					and Our all a start
				•	•••••			Syndicated
					•••••			Exclusivity Surcharge
			••••••••••••••••••••••••••••••••••••••			•••		for
				•	•••••			Partially
								Distant
		-						Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO)UP		FIGHT	H SUBSCRIBER GRO)UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-	<mark></mark>	•				
				•		•••		
		-						
		-						
					·····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	¢	0.00	Gross Receipts Fou	urth Group	\$	0.00	
	Siouh	\$	0.00		aan Oroup	<u>Ψ</u>	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

		FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Southwestern Bell Telephone Company	SYSTEM ID# 062960
	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 Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation		
of Base Rate Fee	First 50 major television market INSTRUCTIONS:	Second 50 major television market
and	Step 1: In line 1, give the total DSEs by subscriber group for commerce	ial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group fo	r 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 Step 3: In line 3, subtract line 2 from line 1. This is the total number of	
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the fo	
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group subject to the surcharge computation	this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	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	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 SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ea in the boxes above. Enter here and in block 4, line 2 of space L (page 7	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
	Southwestern Bell Telephone Company	
9	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSI If your cable system is located within a top 100 television market and the Syndicated Exclusivity Surcharge. Indicate which major television market	e station is not exempt in Part 7, you mustalso compute a
Computation of		Second 50 major television market
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	 INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercitive this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for Exempt DSEs in block C, part 7 of this schedule. If none enter Step 3: In line 3, subtract line 2 from line 1. This is the total number of I Step 4: Compute the surcharge for each subscriber group using the for schedule. In making this computation, use gross receipts figure your actual calculations on this form. 	r the VHF Grade B contour stations that were classified as zero. DSEs used to compute the surcharge. rmula outlined in block D, section 3 or 4 of part 7 of this
	FIFTH SUBSCRIBER GROUP	SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	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
	SEVENTH SUBSCRIBER GROUP	EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1	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	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 each in the boxes above. Enter here and in block 4, line 2 of space L (page 7)	