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

Area Served First Community Instructions: For complete space D instructions, see page 1b. Identify only the first communities. State City OR TOWN State City OR TOWN Area Served First Community Instructions: For complete space D instructions, see page 1b. Identify only the first communities. City OR TOWN State Area Served First Community City OR TOWN Sample Alda Allance MD				RED BY THIS STATEMENT	ACCOUNTING PERIOD COVERED E	Α
B Give the full legal name of the conver of the cable system. If the owner is a subsidiary of another corporation, give the full corpo ist any other name or names under which the owner conducts the business of the cable system ist any other name or names under which the owner conducts the business of the cable system ist any other name or names under which the owner conducts the business of the cable system					2017/2	-
BellSouth Telecommunications, LLC 63569 63569 63569 1010 N. St. Mary's Street, Room 13-59-B San Antonio, TX 78215-2109 63569 NSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless to names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space I 1 IDENTIFICATION OF CABLE SYSTEM: 2 MAILING ADDRESS OF CABLE SYSTEM: 2 Instructions: For complete space D instructions, see page 1b. Identify only the frst community served below and relist on page with all communities. Served Served CITY OR TOWN Elefow is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) Sample Alda Alda MD Alliance MD Being State Mainee MD Being State	6356	accounting period should submi	ness of the cable system ner on the last day of the counting perioa	e parent corporation er which the owner conducts the bus g the accounting period, only the ou ty fee payment covering the entire a	Give the full legal name of the owner of the rate title of the subsidiary, not that of the paren List any other name or names under which If there were different owners during the a a single statement of account and royalty fee p	
63569 1010 N. St. Mary's Street, Room 13-59-B San Antonio, TX 78215-2109 C INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless to names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space I 1 IDENTIFICATION OF CABLE SYSTEM: 2 MAILING ADDRESS OF CABLE SYSTEM: 2 Number, street, runal route, apattment, or suite number) (Chy town: state: 2p coole) STATE Community STATE First Community Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) Sample Aida Alliance Aida MD Alda MD Alda MD Alda MD Alda MD Alda MD Alliance MD Being MD				ADDRESS OF CABLE SYSTEM	LEGAL NAME OF OWNER/MAILING ADDR	
Area Served First Community Instructions: For complete space D instructions, see page 1b. Identify only the first communities. State City OR TOWN State City OR TOWN Area Served First Community Instructions: For complete space D instructions, see page 1b. Identify only the first communities. City OR TOWN State Area Served First Community City OR TOWN Sample Alda Allance MD				cations, LLC	BellSouth Telecommunication	
Intervention Intervention Interventinterventin Interventin	356920172	6356				
San Antonio, TX 78215-2109 System INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless to names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. System Image: already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. Number: street.rural route, apartment, or suite number) Mailung Address of CABLE SYSTEM: Mailung Address of CABLE SYSTEM: D Mailung Address of cable system. Mailung Address of cable system. Mailung Address of cable system. Z Instructions: For complete space D instructions, see page 1b. Identify only the frst community served below and relist on page with all communities. State: CITY OR TOWN First Community LAFAYETTE LA LA Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) State CH LINE UP SUB Sample Alda MD A A A A A Gering Unit of the space MD B D B D	569 2017/2	63569				
1 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 instructions, see page 1b. Identify only the frst community served below and relist on page Area with all communities. Served CITY OR TOWN First LAFAYETTE Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE Sample Alda Alda MD Alliance MD Gering MD				109 business or trade names used	San Antonio, TX 78215-2109 INSTRUCTIONS: In line 1, give any busin	C
2 (Number: street: rural route: apartment; or sulte number) (City, town, state, zip code) Area Served First CITY OR TOWN Sample Alda Alda Alda Alda Alda Alliance Gering				I:	1 IDENTIFICATION OF CABLE SYSTEM:	System
Instructions: For complete space D instructions, see page 1b. Identify only the frst community served below and relist on page with all communities. Area Served CITY OR TOWN STATE LAFAYETTE LA Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB Aida MD A						
D Instructions: For complete space D instructions, see page 1b. Identify only the frst community served below and relist on page with all communities. Area with all communities. Served CITY OR TOWN STATE LAFAYETTE LA Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB Alda MD A B						
Area with all communities. Served CITY OR TOWN STATE First LAFAYETTE LA Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB Alda MD A <td< td=""><td></td><th></th><th></th><td></td><td>(City, town, state, zip code)</td><td></td></td<>					(City, town, state, zip code)	
Served CITY OR TOWN STATE First LAFAYETTE LA Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) Sample Alda MD A Alliance MD B Gering MD B	page 1b	nity served below and relist on pag	fy only the frst commu) instructions, see page 1b. Iden	Instructions: For complete space D instru	D
First Community LAFAYETTE LA Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB Alda MD A A Alliance MD B A Gering MD B A			1			
Community Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB Alda MD A Alliance MD B Gering MD B						
Below is a sample for reporting communities if you report multiple channel line-ups in Space G. CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB Alda MD A Alliance MD B Gering MD B						
SampleMDAAldaMDAAllianceMDBGeringMDB			i	mmunities if you report multiple		connunty
Sample MD B Alliance MD B Gering MD B	SUB GRP#					
Gering MD B	2					Sample
	3					
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on th						-
form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in		· · ·	•			

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#						
BellSouth Telecommunications, LLC			63569						
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 levant community	f you report any si with a subscribe	tations r group,						
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 I	a subscriber gro								
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#						
	LA			First					
Abbeville				Community					
Broussard									
Carencro									
Iberia Unincorporated County	LA								
LAFAYETTE UNINCORPORATED COUNTY	LA			See instructions for					
Lawtell	LA			additional information					
Lydia	LA			on alphabetization.					
Maurice	LA								
Milton	LA								
New Iberia	LA								
Opelousas	LA								
Saint Landry Unincorporated County	LA								
Saint Martin Unincorporated County	LA								
Scott	LA								
Vermilion Unincorporated County	LA								
Youngsville	LA								
	1								
	1								
	1								
	1								
	1								
	1								
	1								
			ļ	1					

			Add rows as necessary.
	L		

 	l	

·	 	
·		
·		

	[
	[

 ,		
Į	Į	Į

L

Name	LEGAL NAME OF OWNER OF CABL	E SYSTEM:						S	YSTEM ID									
Name	BellSouth Telecommun	ications, LL	.C						6356									
Е	SECONDARY TRANSMISSION																	
E	In General: The information in s																	
Secondary	system, that is, the retransmission																	
Secondary Transmission	about other services (including p						nose exist	ing on the										
Service: Sub-	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																	
scribers and	down by categories of secondar	•																
Rates	each category by counting the n	umber of billing	gs in tha	at category (the	e number c	of persons or org	anizations											
	separately for the particular serv																	
	Rate: Give the standard rate of																	
	unit in which it is generally billed category, but do not include disc					ird rate variation	s within a p	barticular rate										
	Block 1: In the left-hand block					condary transmis	sion servio	e that cable										
	systems most commonly provide																	
	that applies to your system. Not																	
	categories, that person or entity																	
	subscriber who pays extra for ca					d in the count un	ider "Servio	ce to the										
		first set" and would be counted once again under "Service to additional set(s)."																
	Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together																	
	printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is																	
	sufficient.		Ũ			•												
	BLO	DCK 1					BLOC											
		NO. OF		DATE	0.4.7			NO. OF	DATE									
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CAT	EGORY OF SEI	RVICE	SUBSCRIBERS	RATE									
	Residential:					_		0.070										
	Service to first set		2,403	\$ 19.00	HD Tech			2,073	\$ 10.0									
	Service to additional set(s)				Set-Top			2,421	\$0-\$1									
	• FM radio (if separate rate)				Broadca	st TV Surcharg	je	2,403	\$4.99-\$5.9									
	Motel, hotel		40															
	Commercial		18	\$ 20.00														
	Converter																	
	Residential																	
	Non-residential																	
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS		s													
F	In General: Space F calls for ra	-			-	III your cable sys	stem's serv	ices that were										
F	not covered in space E, that is, t	hose services	that are	not offered in	combinatio	on with any seco	ondary tran	smission										
	service for a single fee. There an																	
Services Other Than	furnished at cost or (2) services																	
	amount of the charge and the ur		usually	billed. If any i	ales ale ci	larged on a van	able per-pi	ografii basis,										
Secondary	enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.																	
Secondary Transmissions:	Block 1: Give the standard rat	Block 2: List any services that your cable system furnished or offered during the accounting period that were not																
	Block 2: List any services that				red during			listed in block 1 and for which a separate charge was made or established. List these other services in the form of a										
ransmissions:	Block 2: List any services that listed in block 1 and for which a	separate charg	e was i	made or estab	red during			e form of a										
ransmissions:	Block 2: List any services that	separate charg	e was i	made or estab	red during			e form of a										
ransmissions:	Block 2: List any services that listed in block 1 and for which a	separate charg	le was i le the ra	made or estab	red during			e form of a BLOCK 2										
ransmissions:	Block 2: List any services that listed in block 1 and for which a	separate chargotion and includ	le was i le the ra CK 1	made or estab	red during lished. List		vices in the		RATE									
ransmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services:	separate charg ption and includ BLO	e was i de the ra CK 1 CATEC Install	made or estab ate for each. GORY OF SEF ation: Non-re	red during lished. List	these other ser	VICES IN THE	BLOCK 2 DRY OF SERVICE	RATE									
ransmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE	separate charg ption and includ BLO	e was i de the ra CK 1 CATEC Install	made or estab ate for each. GORY OF SEF	red during lished. List	these other ser	VICES IN THE	BLOCK 2										
ransmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel	separate charg ption and includ BLO	e was i de the ra CK 1 CATEC Install • Mc • Co	made or estab ate for each. GORY OF SEF ation: Non-re itel, hotel mmercial	red during lished. List	these other ser	Vices in the CATEGO Video or Service	BLOCK 2 DRY OF SERVICE Demand Activation Fee	\$0-\$10 \$0-\$3									
ransmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Fire protection	separate chargotion and includ BLOO RATE	e was i de the ra CK 1 CATEO Install • Mo • Co • Pa	made or estab ate for each. GORY OF SEF ation: Non-re itel, hotel mmercial y cable	red during lished. List RVICE sidential	these other ser	vices in the CATEGO Video or Service A Credit M	BLOCK 2 DRY OF SERVICE Demand Activation Fee anagement Fee	\$0-\$10 \$0-\$3									
ransmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel	separate chargotion and includ BLOO RATE	e was i de the ra CK 1 CATEO Install • Mo • Co • Pa	made or estab ate for each. GORY OF SEF ation: Non-re itel, hotel mmercial	red during lished. List RVICE sidential	these other ser	vices in the CATEGO Video or Service A Credit M	BLOCK 2 DRY OF SERVICE Demand Activation Fee	RATE \$0-\$10 \$0-\$3 \$0-\$44 \$14									
ransmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Fire protection	separate chargotion and includ BLOO RATE	e was i de the r CK 1 CATE(Install • Mo • Co • Pa • Pa	made or estab ate for each. GORY OF SEF ation: Non-re itel, hotel mmercial y cable	red during lished. List RVICE sidential	these other ser	Vices in the CATEGO Video or Service J Credit M Dispatch	BLOCK 2 DRY OF SERVICE Demand Activation Fee anagement Fee	\$0-\$10 \$0-\$3 \$0-\$44									
ransmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection	separate chargotion and includ BLOO RATE	e was i de the r CK 1 CATE(Install • Mo • Co • Pa • Pa • Fin	made or estab ate for each. GORY OF SEF ation: Non-re ttel, hotel mmercial y cable y cable-add'l c	red during lished. List RVICE sidential	these other ser	Vices in the CATEGO Video or Service J Credit M Dispatch Wireless	BLOCK 2 DRY OF SERVICE Demand Activation Fee anagement Fee on Demand	\$0-\$10 \$0-\$3 \$0-\$44 \$14 \$10-\$4									
ransmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	separate chargotion and include BLOO RATE \$5-\$199	e was i le the ra CK 1 CATE(Install • Mc • Co • Pa • Pa • Fin • Bu	made or estab ate for each. GORY OF SEF ation: Non-re ttel, hotel mmercial y cable y cable-add'l c e protection	red during lished. List RVICE sidential	these other ser	Vices in the CATEGO Video or Service Credit M Dispatch Wireless HD Prem	BLOCK 2 DRY OF SERVICE Demand Activation Fee anagement Fee on Demand Receiver	\$0-\$10 \$0-\$3 \$0-\$44 \$14									
ransmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set	separate chargotion and include BLOO RATE \$5-\$199	e was i le the ra CK 1 CATE(Install • Mc • Co • Pa • Pa • Fin • Bu Other	made or estab ate for each. GORY OF SEF ation: Non-re ttel, hotel mmercial y cable y cable-add'l c e protection rglar protection	red during lished. List RVICE sidential	these other ser	Vices in the CATEGO Video or Service Credit M Dispatch Wireless HD Prem	BLOCK 2 DRY OF SERVICE Demand Activation Fee anagement Fee on Demand Receiver ium Tier	\$0-\$10 \$0-\$3 \$0-\$44 \$14 \$10-\$4 \$10-\$4									
ransmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	separate chargotion and include BLOO RATE \$5-\$199	e was i de the ri- CK 1 CATE(Install • Mo • Co • Pa • Pa • Fin • Bu Other • Re	made or estab ate for each. GORY OF SEF ation: Non-re ttel, hotel mmercial y cable y cable-add'l c e protection rglar protection services:	red during lished. List RVICE sidential	RATE	Vices in the CATEGO Video or Service Credit M Dispatch Wireless HD Prem	BLOCK 2 DRY OF SERVICE Demand Activation Fee anagement Fee on Demand Receiver ium Tier	\$0-\$10 \$0-\$3 \$0-\$44 \$14 \$10-\$4 \$10-\$4									
ransmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	separate chargotion and include BLOO RATE \$5-\$199	e was i de the ri CK 1 CATEC Install • Mc • Co • Pa • Pa • Fin • Bu • Bu • Cother • Re • Dis	made or estab ate for each. GORY OF SEF ation: Non-re tel, hotel mmercial y cable y cable-add'l c e protection rglar protection services: connect	red during lished. List RVICE sidential	RATE	Vices in the CATEGO Video or Service Credit M Dispatch Wireless HD Prem	BLOCK 2 DRY OF SERVICE Demand Activation Fee anagement Fee on Demand Receiver ium Tier	\$0-\$10 \$0-\$3 \$0-\$44 \$14 \$10-\$4 \$10-\$4									

Name

G

Primary

Transmitters:

Television

SYSTEM ID#

63569

BellSouth	Telecommunications,	LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM:

PRIMARY TRANSMITTERS: TELEVISION

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

basis under specific FCC rules, regulations, or authorizations:

• Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.

 List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL OF CARRIAGE SIGN (Yes or No) NUMBER STATION (If Distant) **KADN/KADNHD** 15 Lafayette, LA L No **KADND3** 15 I No Lafayette, LA See instructions for 40 additional information **KAJN-CD** L No Lafayette, LA on alphabetization. KATC/KATCHD 3/1003 Ν No Lafayette, LA KATCD2/KATCH2 3/1003 Т No Lafayette, LA KLAF-LD/KLAFH 46/1046 Ν No Lafayette, LA **KLFY/KLFYHD** 10/1010 Ν Lafayette, LA No **KLPB/KLPBHD** 24/1024 Ε No Lafayette, LA **KLWB** 50 L New Iberia, LA No

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

Name

G

Primary

Transmitters:

Television

SYSTEM ID#

63569

BellSouth Telecommunications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM:

PRIMARY TRANSMITTERS: TELEVISION

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

basis under specific FCC rules, regulations, or authorizations:
 Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the

Do not list the station nere in space G—but do list it in space I (the station was carried only on a substitute basis.

 List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AB	
					6. LOCATION OF STATION
SIGN	CHANNEL		(Yes or No)	CARRIAGE	
	NUMBER	STATION		(If Distant)	
	••••••				

Name	LEGAL NAME OF C								SYSTEM ID# 63569			
H Primary Transmitters:	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,											
Radio	on the basis of For detailed info located in the p Column 1: lo Column 2: S Column 3: If signal, indicate Column 4: G	monitoring, to prmation about aper SA3 form dentify the call state whether t the radio stati this by placing Sive the station	be receivent the the the sign of e he station on's sign a check d's location	ved at the headend, with the s Copyright Office regulations of each station carried. In is AM or FM. hal was electronically process mark in the "S/D" column. on (the community to which the the community with which the	sy: on sec	stem's FM anter this point, see p d by the cable sy station is license	nna, during ce page (vi) of the ystem as a sep ed by the FCC	rtain sta e genera parate a	ted intervals. al instructions nd discrete			
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	Ц	CALL SIGN	AM or FM	S/D	LOCATION OF STATION			
					┥┟							
					1							
] [
					┥┝							
					┥┟							
					┥┝							
					┥┟							
					11							
					┥┝							
					1							
					┥┝							
					1							
					11							
					┥┝							
					1							
					┥╿							
					† ŀ							
					$\left\{ \right\}$							

LEGAL NAME OF OWNER OF						SYSTEM ID#	Nama
BellSouth Telecommu	nications	, LLC				63569	Name
SUBSTITUTE CARRIAGE	: SPECIA		T AND PROGRAM LOG				
							1
			sion program broadcast by a ecific present and former FC				-
			n this log, see page (v) of the				Substitute
. SPECIAL STATEMENT	-						Carriage: Special
		r cable system	carry, on a substitute basis	s, any nonne	-	-	Statement a
roadcast by a distant stat		rest of this nad	ge blank. If your answer is "			Yes XNo	Program Lo
og in block 2.	, leave the	rest of this pay	je blank. Il your answer is	res, you me	ist complete the	program	
LOG OF SUBSTITUTE			1. P				
n General: List each subst lear. If you need more spa			te line. Use abbreviations v al pages.	vherever pos	sible, if their mea	aning is	
Column 1: Give the title	of every no	nnetwork telev	ision program (substitute pi				
			our cable system substituted s. See page (vi) of the gene				
SA3 form for futher information	tion. Do no	t use general o	categories like "movies", or				
itles, for example, "I Love L Column 2: If the program			76ers vs. Bulls." r "Yes." Otherwise enter "N	0."			
Column 3: Give the call s	sign of the s	station broadca	sting the substitute program	n.			
			ne community to which the s community with which the s			, or, in	
Column 5: Give the mon	th and day		tem carried the substitute p			he month	
rst. Example: for May 7 giv Column 6: State the time		substitute pro	gram was carried by your c	able system.	List the times ac	ccurately	
the nearest five minutes.			ed by a system from 6:01:1				
tated as "6:00–6:30 p.m." Column 7: Enter the lette	er "R" if the	listed program	was substituted for program	mming that v	our system was i	required	
o delete under FCC rules a	and regulation	ons in effect du	iring the accounting period;	enter the let	ter "P" if the liste	d pro	
ffect on October 19, 1976.		that your syste	em was permitted to delete	under FCC r	ules and regulation	ons in	
					EN SUBSTITUTI	-	
S	UBSTITUT	E PROGRAM			IAGE OCCURR	7 REASON	
1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIMES	B DELETION	
	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM —	то	
					_		
					_		
					_		
					_		
					_		
					—		

FORM SA3E. PAGE 5.

ACCOUNTING PERIOD: 2017/2

Nome	LEGAL NAME OF (OWNER OF CABLE	E SYSTEM:					;	SYSTEM ID#
Name	BellSouth Te	elecommuni	ications, LLC						63569
J Part-Time Carriage Log	 PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m 12:00 p.m." 								[;] the
		1	DATE	S AND HOURS	OF F	PART-TIME CAF	RRIAGE		
		WHEN	I CARRIAGE OCC	URRED			WHEN	I CARRIAGE OCCU	JRRED
	CALL SIGN	DATE	HOL			CALL SIGN	DATE	HOUI	
		DATE	FROM	то			DATE	FROM	ТО
				•					
								_	
								_	
			_					_	
			_						
				•					
				•				<u> </u>	
				•					
				•	_				
				•					
				•					
				•					
								_	
								_	
			_					_	
								<u> </u>	

FORM	SA3E. PAGE 7.		
LEGA	L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
Bel	South Telecommunications, LLC	63569	name
Inst all a (as pag	DSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amoun mounts (gross receipts) paid to your cable system by subscribers for the system's sect dentifed in space E) during the accounting period. For a further explanation of how to c (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	ondary transmission service	K Gross Receipts
Instru • Con • Con • If yc fee • If yc acco ▶ If pa	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: plete block 1, showing your minimum fee. plete 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 ar rom 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. rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b k 3 below.	arts of the DSE Schedule	L Copyright Royalty Fee
3 be ▶ If pa	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho		
	block 4 below. 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 fer system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064		
	Enter the result here. This is your minimum fee.	\$ 8,424.07	
Block 2	 DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block. Did your cable system carry any distant television stations during the accounting period yes—Complete the DSE schedule. Xes—Complete the DSE schedule. 	nn 4, you must check iod?	
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$	
5	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00	
	Line 3. Add lines 1 and 2 and enter here	\$-	
Block 4	 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 7000 	\$ 8,424.07	Cable systems submitting additional
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	deposits under Section 111(d)(7) should contact the Licensing
	Line 4. FILING FEE	\$ 725.00	additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 9,149.07	appropriate form for submitting the additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See page (i) of the	

ACCOUNTING PERIOD:	2017/2
--------------------	--------

ACCOUNTING PERI	DD: 2017/2			FORM SA3E. PAGE 8.
Name	LEGAL NAME OF OWNER OF CABLE S			SYSTEM ID#
Hamo	BellSouth Telecommunica	ations, LLC		63569
	CHANNELS			
Μ	Instructions: You must give	(1) the number of channels on which	the cable system carried television broadca	ast stations
	to its subscribers and (2) the	cable system's total number of activ	ated channels, during the accounting period.	
Channels				
	1. Enter the total number of cl			15
	system carried television bro	oadcast stations		
	2. Enter the total number of a	ctivated channels		
		arried television broadcast stations		
	-			609
Ν			I IS NEEDED: (Identify an individual	
IN	we can contact about this stat			
Individual to				
Be Contacted				
for Further	Name Diane Bellinge	er	Telephon	e <u>210-351-4805</u>
Information				
	Address 1010 N. St. Ma	ry's Street, Room 13-59-B		
	(City, town, state, zip)	TX 78215		
	(City, town, state, zip)			
	Email dg779	6@att.com	Fax (optional) 210-246	6-8199
		ant of account must be cortifod and	signed in accordance with Convright Office r	agulationa
•	CERTIFICATION (This stateme	ent of account must be certiled and	signed in accordance with Copyright Office r	egulations.
O	. I the underside a beachurer	life that (Charle and but only and of		
Certifcation	• I, the undersigned, hereby cer	tify that (Check one, but only one, of	ne boxes.)	
	(Owner other than corpora	tion or partnership) I am the owner	of the cable system as identifed in line 1 of spa	ace B: or
		·····	· · · · · · · · · · · · · · · · · · ·	··· , ·
	(Agent of owner other than	corporation or partnership) I am th	e duly authorized agent of the owner of the ca	hle system as identified
		that the owner is not a corporation or		
	(Officer or partner) I am ar	officer (if a corporation) or a partner	(if a partnership) of the legal entity identifed as	owner of the cable system
	in line 1 of space B.		(in a partnership) of the legal childy identified as	owner of the cable system
	. I have eveninged the statement	t of each unit and have builded and under		sined housin
		-	r penalty of law that all statements of fact conta ion, and belief, and are made in good faith.	
	[18 U.S.C., Section 1001(1986)]		
	X	/s/ Mike McGuire		
	E de construction de la construc	ale de la strade de la composition de l		
			using an "/s/" signature to certify this statement. prward slash of the /s/ signature, place your curs	or in the box and press the
	"F2" butt	on, then type /s/ and your name. Pres	sing the "F" button will avoid enabling Excel's Lo	tus compatibility settings.
	Typed o	or printed name: Mike McGuire		
	.,pou c	,		
	Title:	Assistant Vice President -		
		(Title of official position held in corporation	or partnership)	
	Date:	February 23, 2018		
Privacy Act Notice	Section 111 of title 17 of the Unite	ed States Code authorizes the Copyrigi	t Offce to collect the personally identifying inform	nation (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 Office's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in 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 lav

LEGAL NAME OF OWNER OF CABLE SYSTEM: BellSouth Telecommunications, LLC	SYSTEM ID# 63569	Name
SPECIAL STATEMENT CONCERNING GROSS RI The Satellite Home Viewer Act of 1988 amended Title 17, sect lowing sentence: "In determining the total number of subscribers and the service of providing secondary transmissions of primary scribers and amounts collected from subscribers received	tion 111(d)(1)(A), of the Copyright Act by adding the fol- e gross amounts paid to the cable system for the basic y broadcast transmitters, the system shall not include sub-	P Special Statement Concerning
For more information on when to exclude these amounts, see paper SA3 form. During the accounting period did the cable system exclude any made by satellite carriers to satellite dish owners?		Gross Receipts Exclusion
X NO YES. Enter the total here and list the satellite carrier(s) be	elow	
Name Mailing Address	Name Mailing Address	
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments For an explanation of interest assessment, see page (viii) of th		Q
Line 1 Enter the amount of late payment or underpayment	x	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum h	here	
Line 3 Multiply line 2 by the number of days late and enter the		
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, b space L, (page 7)	······ <u>\$</u>	
* To view the interest rate chart click on <i>www.copyright.go</i> contact the Licensing Division at (202) 707-8150 or licens		
** This is the decimal equivalent of 1/365, which is the inter NOTE: If you are filing this worksheet covering a statement of	account already submitted to the Copyright Offce,	
please list below the owner, address, first community served, a filing.	accounting period, and ID number as given in the original	
Owner Address		
First community served Accounting period		
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the	ne Copyright Offce to collect the personally identifying information (PII) requested o	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 Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

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 broadcast over the air during the accounting period. The basis of carriage value is determined by 10 calculating the station during 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 F	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#									
1	BellSouth Telecommuni	ications, LLC	;			63569				
	SUM OF DSEs OF CATEGORY "O" STATIONS: • Add the DSEs of each station. Enter the sum here and in line 1 of part 5 of this schedule. 0.00									
	Instructions:									
Computation	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 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" STATIONS: DSEs									
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Otations	OALL OIGH	DOL	OALL OION	DOL	OALE OIGH	DOL				
Add rows as necessary.										
Remember to copy										
all formula into new										
rows.										
	I	L		ll		ll				

Name

3

Computation of DSEs for

Stations

Carried Part

Time Due to

Lack of

Activated

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
BellSouth Telecommunications, LLC	63569
Instructions: CAPACITY	
Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3).	
Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. Thi figure should correspond with the information given in space J. Calculate only one DSE for each station.	s
Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting perio	d.
Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure mu	st
be carried out at least to the third decimal point. This is the "basis of carriage value" for the station.	
Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational stati	ion,
give the type-value as ".25."	
Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the	9
third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the	paper
SA3 form.	
CATEGORY LAC STATIONS: COMPUTATION OF DSES	

	SA3 form.									
Capacity		i	CATEGORY L	AC STATIONS	: COMPUTATI	ON OF DSEs				
	1. CALL SIGN	2. NUMB OF HO CARRI SYSTE	OURS IED BY	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE		6. DS	E		
						x				
						<u>x</u>				
			÷		=	x x	=			
			÷		=	x	=			
						x				
						x x				
	Add the DSEs	s OF CATEGORY LAC s of each station. sum here and in line 2 of		dule,		0.00				
4 Computation of DSEs for Substitute- Basis Stations	Was carrie tions in eff Broadcast space I). Column 2: at your option. Column 3: Column 4:	fect on October 19, 1976 one or more live, nonnets For each station give th This figure should corre Enter the number of day Divide the figure in colu	stitution for a progr (as shown by the work programs during the number of live, n espond with the inf ys in the calendar y mn 2 by the figure	am that your syste letter "P" in column ng that optional car connetwork program formation in space year: 365, except in in column 3, and g	m was permitted t 17 of space I); and riage (as shown by ms carried in subs I. n a leap year. give the result in co	o delete under FCC rules	e of were deleted	m)		
	SUBSTITUTE-BASIS STATIONS: COMPUTATION OF DSES									
		-				TION OF DSES				
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	-		
		2. NUMBER OF	OF DAYS	4. DSE	1. CALL	2. NUMBER OF	OF DAYS	4. DS		
		2. NUMBER OF PROGRAMS	OF DAYS IN YEAR ÷	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS ÷	OF DAYS IN YEAR	4. DS = =		
		2. NUMBER OF PROGRAMS	OF DAYS IN YEAR + +	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS ÷	OF DAYS IN YEAR	4. DS		
	SIGN	2. NUMBER OF PROGRAMS	OF DAYS IN YEAR + + + +	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS ÷	OF DAYS IN YEAR	4. DS		
	SIGN	2. NUMBER OF PROGRAMS	OF DAYS IN YEAR + + + + + + + * * * * * * * * * * * * *	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS ÷ ÷	OF DAYS IN YEAR	4. DS		
5	SIGN SUM OF DSE Add the DSEs Enter the s	2. NUMBER OF PROGRAMS	OF DAYS IN YEAR + + + + + SIS STATIONS: part 5 of this scheet mounts from the bo	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS + + + + + + + + + + +	OF DAYS IN YEAR	4. DS		
5 Total Number	SIGN SUM OF DSE Add the DSEs Enter the s TOTAL NUMB number of DSE	2. NUMBER OF PROGRAMS	OF DAYS IN YEAR + + + + + SIS STATIONS: part 5 of this scheet mounts from the bo	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS + + + + + + + + + + 0.00	OF DAYS IN YEAR	4. DS		
_	SIGN SUM OF DSE Add the DSEs Enter the s TOTAL NUMB number of DSE 1. Number of	2. NUMBER OF PROGRAMS	OF DAYS IN YEAR + + + + SIS STATIONS: part 5 of this scheo mounts from the bo	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS + + + + + + + + + + 0.00	OF DAYS IN YEAR	4. DS		

TOTAL NUMBER OF DSEs

0.00

►

LEGAL NAME OF C	WNER OF CABLE	SYSTEM:					S	YSTEM ID#	
BellSouth Tele	ecommunicati	ons, LLC						63569	Name
Instructions: Bloc In block A: • If your answer if			part 6 and part	7 of the DSE sche	edule blank a	nd complete pa	art 8, (page 16) of	the	6
schedule.If your answer if	"No " complete blo	ocks B and C	below						
				ELEVISION M	ARKETS				Computation of
I =	1981? plete part 8 of the	schedule—D		ller markets as de				gulations in	3.75 Fee
X No-Comp	lete blocks B and	C below.							
		BLOC	K B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulation of the second sec	ons prior to Jui dule. (Note: Th	part 2, 3, and 4 of ne 25, 1981. For fu ne letter M below r Act of 2010.)	urther explana	ation of permit	ed stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	BASIS OF(Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.PERMITTEDA Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to								
Column 3:	*(Note: For those this schedule to e	e stations ide determine the	ntified by the l DSE.)	n parts 2, 3, and 4 etter "F" in column	2, you must	complete the v		1	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
								0.00	
		В	LOCK C: CO	MPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule				-	
Line 2: Enter the								-	
Line 3: Subtract (If zero, I				r of DSEs subjec 7 of this schedu		i rate.		0.00	
Line 4: Enter gro	oss receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ine 4 by 0.0375	and enter su	ım here						permited/ partially nonpermitted
Line 6: Enter tota	al number of DS	Es from line	3				X		carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 ar	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00	

DSE SCHEDULE. PAGE 13.

ACCOUNTING PERIOD: 2017/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#									
BellSouth T	elecommunicat	ions, LLC						63569	Name
		BLOCK	A: TELEVI	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
								••••••	
		+			+				
							-		
					.				
					.				
					-				
					.				
					-				
		1		1	1		1	1	1

	1							[DSE SCHEDULE. F	
Name	LEGAL NAME OF OWN								SYSTE	M ID#
Name	BellSouth Tele	communication	s, LLC						6	3569
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	 Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage. Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1), 76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. 									
	PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS									
	4.0411						1			TED
	1. CALL	2. PRIOR			4. BASI		-	RESENT	6. PERMIT	IED
	SIGN	DSE	PE	RIOD	CARRI	AGE	l	DSE	DSE	
				•••••••••••••••••••••••••••••••••••••••						
				•••••••••••••••••••••••••••••••••••••••						
7 Computation of the Syndicated	Instructions: Block A must be completed. In block A: If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. BLOCK A: MAJOR TELEVISION MARKET									
Exclusivity										
Surcharge	Is any portion of the	-	top 100 majo	r television mark		-		rules in effect J	une 24, 1981?	
	Yes—Complete	blocks B and C .			X No—	Proceed to	part 8			
					7					
	BLOCK B: C	arriage of VHF/Grac	e B Contour	Stations		BLOCK C: Computation of Exempt DSEs				
		ion that places a gra ble system? tation below with its ap	de B contour	, in whole	Was any station listed in block B of part 7 carried in any commu- nity served by the cable system prior to March 31, 1972? (refe to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE					
	X No—Enter zero a	and proceed to part 8.			X No—	Enter zero a	nd proceed t	o part 8.		
	CALL SIGN	DSE C	ALL SIGN	DSE		L SIGN	DSE	CALL SIG	N DS	E
	CALL SIGN		ALL JIGN	DOF	CAL	L JIGN	DOF	CALL SIG	DS	
							 			
							<u> </u>	-		
							 	-		
							<u> </u>	-		
							<u> </u>			
							<u> </u>			
		· · · · · · · · · · · · · · · · · · ·		0.00			I I	TOTAL DO	Fo	0.00
			DTAL DSEs	0.00				TOTAL DS	ES .	0.00

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: BellSouth Telecommunications, LLC	SYSTEM ID# 63569	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	791,736.10	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 Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Yes—Complete part 9 of this schedule. X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here	_	
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	Yes—Complete part 9 of this schedule. X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

ACCOUNTING PERIOD: 2017/2

1	DSE	SCHE	וווח	FI	PAGE	16
	DGE	SOLIE	DUL	.c. I	FAGE	10

	LEGAL NAM	DSE SCHEDULE. F ME OF OWNER OF CABLE SYSTEM: SYST	FAGE 16.					
Name		BellSouth Telecommunications, LLC	63569					
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.						
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)						
of the Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)						
Surcharge		C. Multiply line B by 3.000 and enter here						
		D. Enter 0.00089 of gross receipts (the amount in section 1)						
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.						
		F. Multiply line D by line E and enter here						
		G. Add lines A, C, and F. This is your surcharge.						
		Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge						
			<u></u> .					
8 Computation of Base Rate Fee	6 was • In blo • If you • If you blank What i were lo	 You must complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part 6 was checked "Yes," use the total number of DSEs from part 5. In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. If your answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below blank. What is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers were located within that station's local service area and others were located outside that area. For the definition of a station's "local service area," see page (v) of the general instructions. 						
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS						
	• Did y	your cable system retransmit the signals of any partially distant television stations during the accounting period?						
	Г	Yes—Complete part 9 of this schedule.						
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE						
	Section							
	1	Enter the amount of gross receipts from space K (page 7)						
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)						
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.						
		A. Enter 0.01064 of gross receipts (the amount in section 1)						
		B. Enter 0.00701 of gross receipts (the amount in section 1)▶ \$ 5,550.07						
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here						
		D. Multiply line B by line C and enter here						
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)						
		Base Rate Fee	<u></u> l.					

LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name
BellS	outh Telecommunications, LLC 63569	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	uting 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.	
	the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the	
	bers in the group.	
• lf: 1) your	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.	
•	he 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.	
	bute 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	for 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	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYS	STEM
Hume	BellSouth Telecommunications, LLC	63
	Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals	
	Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and	
	partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant.	
	Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant	
	signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by	
	.0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported	
	for each part 9 used in steps 1 and 2 must equal the amount reported in space K.	
	Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant	
	signals from step 1 that is subject to this surcharge.	
	Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams	
	Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from	
	a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate	
	and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream.	
	You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement	
	entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary	
	transmitter or an association representing the primary transmitter.	

LEGAL NAME OF OWNE BellSouth Telecon						SY	STEM ID# 63569	Name	
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	BER GROUP			
	FIRST	SUBSCRIBER GROU	Р		Р	0			
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
								Syndicated	
								Exclusivity	
								Surcharge	
								for	
						-		Partially	
								Distant	
					··•			Stations	
		-							
					··•				
					•••				
					•				
				•	•				
Total DSEs	<u> </u>		0.00	Total DSEs	ļ	<u> </u>	0.00		
Gross Receipts First Gr	oup	\$ 791,	736.10	Gross Receipts Secon	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secor	nd Group	\$	0.00		
	THIRD	SUBSCRIBER GROU	Р						
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	_				-				
		-				-			
					··•				
					•				
	<u> </u>				•••		.		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00		
		<u>·</u>				· · · · · · · · · · · · · · · · · · ·			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00		
	ase 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									

FORM SA3E. F	PAGE	19
--------------	------	----

LEGAL NAME OF OWNER						SI	STEM ID# 63569	Name
BL				TE FEES FOR EACH				
	FIFTH	SUBSCRIBER GROU	JP 0					9
COMMUNITY/ AREA			U	COMMUNITY/ AREA	COMMUNITY/ AREA 0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
						-		Partially
						_		Distant Stations
						-		Stations
						_		
	<u> </u>	<u> </u>	0.00		Į	<u> </u>	0.00	
Total DSEs			0.00	Total DSEs				
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Secon		\$	0.00	
	EVENTH	SUBSCRIBER GROU						
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							<mark></mark>	
		+						
							<mark></mark>	
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$								
Base Rate Fee: Add the	e base rat	te fees for each subsc	riber aroun	as shown in the boxes	above			
Enter here and in block			aloci group			\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#BellSouth Telecommunications, LLC63569						Name		
E		COMPUTATION O SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	۹		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
					····			Base Rate Fe
	···					•		and Syndicated
								Exclusivity
	<mark></mark>					•		Surcharge
					····			for Partially
								Distant
	<mark></mark>				····			Stations
	···					•		
	<mark>.</mark>							
	···					•		
Total DSEs	•		0.00	Total DSEs	•	**	0.00	
Gross Receipts First Group \$ 791,736.10		1,736.10	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	I SUBSCRIBER GRC	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	۹		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<mark></mark>					•		
	<mark></mark>					•		
	···				····	•		
							····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Four	rth Group	\$	0.00		
Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Date Ener Add	he hace re	to foos for each subs	criber group	as shown in the boxe	s abovo			
Enter here and in bloc						\$	0.00	

U.S. Copyright Office

LEGAL NAME OF OWNE BellSouth Telecor						S	63569	Name
B		COMPUTATION O SUBSCRIBER GRC		TE FEES FOR EAC		RIBER GROUP 1 SUBSCRIBER GRO	DUP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fe and
						••		Syndicated
								Exclusivity
					····			Surcharge for
								Partially
								Distant Stations
		-						Stations
					····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO				I SUBSCRIBER GRC	OUP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						•		
						•		
					····			
		-						
			<mark></mark>					
		-						
Total DSEs	i		0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add th Enter here and in bloch			criber group	as shown in the boxes	s above.	\$		

U.S. Copyright Office

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#					
Name	BellSouth Telecommunications, LLC 63569						
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP						
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:						
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 commercial VHF Grade B contour stations listed in block A, part 9 of						
Syndicated Exclusivity Surcharge	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.						
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.						
Partially Distant	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show						
Stations	your actual calculations on this form.						
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP					
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs					
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs					
	Line 3: Subtract line 2 from line 1 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	this subscriber group					
	subject to the surcharge	subject to the surcharge					
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY					
	SURCHARGE	SURCHARGE					
	First Group	Second Group					
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP					
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs					
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs					
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1					
	and enter here. This is the 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					
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY					
	SURCHARGE	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						
	1						

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#					
Name	BellSouth Telecommunications, LLC	63569					
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP						
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:						
Computation of	First 50 major television market	Second 50 major television market					
Base Rate Fee	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commerci	al VHE Grade B contour stations listed in block A part 9 of					
and Syndicated Exclusivity Surcharge for Partially Distant Stations	 Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. 						
	FIFTH SUBSCRIBER GROUP	SIXTH SUBSCRIBER GROUP					
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs					
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs					
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	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 1: Enter the VHF DSEs					
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation					
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group					
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for eac in the boxes above. Enter here and in block 4, line 2 of space L (page 7)						