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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY					
DATE RECEIVED AMOUNT					
03/01/2019	\$ ALLOCATION NUMBER				

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:								
Accounting		2018/2							
Period									
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. 63033								
	LE	GAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM							
		The Ohio Bell Telephone Company							
					6303	320182			
					63033	2018/2			
		1010 N. St. Mary's Street, Room 13-59-B							
		San Antonio, TX 78215-2109							
С	INS	TRUCTIONS: In line 1, give any business or trade names used to i	identify the busine	ss and operation of the sy	stem unles	s these			
C	nan	nes already appear in space B. In line 2, give the mailing address o	f the system, if dif	ferent from the address given	en in spac	æВ.			
System	1	IDENTIFICATION OF CABLE SYSTEM:							
		MAILING ADDRESS OF CABLE SYSTEM:							
	2	(Number, street, rural route, apartment, or suite number)							
		(City, town, state, zip code)							
D	Ins	tructions: For complete space D instructions, see page 1b. Identify	only the frst com	munity served below and r	elist on pa	ge 1b			
Area	with	all communities.							
Served		CITY OR TOWN	STATE						
First		Toledo	ОН						
Community	В	elow is a sample for reporting communities if you report multiple ch	annel line-ups in						
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB	3 GRP#			
Sample	Ald		MD	A		2			
	Ger	ance ing	MD MD	B B		3			
	Ger	my	IVID	D		,			

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

			ACCOUNT	ING PERIOD: 2018/2				
FORM SA3E. PAGE 1b. LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#					
			63033					
The Ohio Bell Telephone Company			03033					
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 home parks should be reported in parentheses below the identified city or town.								
If all communities receive the same complement of television broadcast stations (i.e., on all communities with the channel line-up "A" in the appropriate column below or leave the on a partially distant or partially permitted basis in the DSE Schedule, associate each redesignated by a number (based on your reporting from Part 9).	e column blank. I	f you report any s	tations					
When reporting the carriage of television broadcast stations on a community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-community-by-comm	a subscriber gro							
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#					
Toledo	ОН			First				
Allen Township	ОН			Community				
Ballville	ОН							
Biglick Township	ОН							
Clinton Township	OH							
Findlay	OH							
Fremont	OH			See instructions for				
Holland	OH			additional information on alphabetization.				
Lake Township	OH			on alphabetization.				
Liberty Township	OH							
Marion Township	OH							
Middleton Township	OH OH							
Middleton Township Monclova Township	ОН							
Northwood	ОН							
	OH							
Oregon Ottawa Hills	OH							
Perrysburg	OH							
Rossford	OH							
Sandusky Township	OH							
Spencer Township	OH							
Springfield Township	OH							
Sylvania Township	OH							
Tiffin	ОН							
Walbridge	ОН							
Washington Township	ОН							
Waterville	ОН							

Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:
SYSTEM ID#
The Ohio Bell Telephone Company
63033

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1	BLOCK 2					
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE
Residential:	0020011122110				5525011122116		
 Service to first set 	15,086	\$	19.00	HD Tech Fee	11,202	\$	10.00
Service to additional set(s)				Set-Top Box	15,171		\$0-\$15
 FM radio (if separate rate) 				Broadcast TV Surcharge	15,086	\$4.9	9-\$5.99
Motel, hotel							
Commercial	85	\$	20.00				
Converter							
 Residential 							
Non-residential		†					
		†					

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2				
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
• Pay cable		Motel, hotel		Video on Demand	\$0-\$100
 Pay cable—add'l channel 	\$5-\$199	Commercial		Service Activation Fee	\$0-\$35
 Fire protection 		• Pay cable		Credit Management Fee	\$0-\$449
 Burglar protection 		 Pay cable-add'l channel 		Dispatch on Demand	\$99
Installation: Residential		Fire protection		Wireless Receiver	\$0-\$49
 First set 	\$0-\$199	 Burglar protection 		HD Premium Tier	\$7
Additional set(s)		Other services:		DVR Upgrade Fee	\$50
 FM radio (if separate rate) 		Reconnect	\$0-\$35	Vacation Hold	\$ 7.00
 Converter 		Disconnect			
		 Outlet relocation 	\$0-\$55		
		 Move to new address 			

	LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#		
	The Ohio Bell T	Telephone C	Company			63033	Name	
PRIMARY TRANSMITTERS: TELEVISION								
ca	ns and low power television stations) ed only on a part-time basis unde rtain network programs [sections	G						
76	Primary Transmitters:							
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 progran								
basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis								
• L	ist the station here, basis. For further in	and also in spa	ace I, if the st			titute basis and also on some othe of the general instructions locateα		
	in the paper SA3 fo Column 1: List each		sign. Do not	report origination	on program servic	es such as HBO, ESPN, etc. Identify		
				•	•	ation. For example, report multi		
	st stream as _vvE+A ETA-simulcast).	ı-2 . Simulcası	streams mus	si be reported in	column i (list ea	ch stream separately; for example		
				-		ation for broadcasting over-the-air ir s may be different from the channe		
	which your cable sy	•		iaililei 4 III vvas	nington, D.C. This	s may be unierent nom the channe		
ьd						dependent station, or a noncommercia icast), "I" (for independent), "I-M		
(fo	r independent multic	cast), "E" (for n	oncommercia	al educational),	or "E-M" (for none	commercial educational multicast)		
						the paper SA3 form /es". If not, enter "No". For an ex		
	nation of local servi	ce area, see p	age (v) of the	general instruc	tions located in th	ne paper SA3 form		
cal	•			•	-	, stating the basis on which you ntering "LAC" if your cable syster		
	ried the distant stat	ion on a part-ti	me basis bed	ause of lack of	activated channe	I capacity		
of						ty payment because it is the subjec ystem or an association representin		
the	cable system and	a primary trans	smitter or an a	association repr	esenting the prim	ary transmitter, enter the designa		
						other basis, enter "O." For a furthe ted in the paper SA3 form		
						ity to which the station is licensed by the		
	te: If you are utilizin					th which the station is identifed he channel line-up.		
			CHANN	EL LINE-UP	AA	·	_	
1.	CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
	SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
		NUMBER	STATION		(If Distant)			
	GTE/WGTEHD	30/1030	E	No		Toledo, OH		
W	LMB/WLMBHD	40/1040	I	No		Toledo, OH	See instructions for	
W	MNT-CD	48	I	No	-	Toledo, OH	additional information on alphabetization.	
W	NWO/WNWOHE	24/1024	N	No		Toledo, OH		
W	TOL/WTOLHD	11/1011	N	No		Toledo, OH		
W	TVG/WTVGHD	13/1013	N	No		Toledo, OH		
W	UPW/WUPWHD	36/1036	I	No	•	Toledo, OH		
				1				
							"]	
					-		"	
					-		"	

	SYSTEM:			SYSTEM ID#	N
The Ohio Bell Telephone	Company			63033	Name
PRIMARY TRANSMITTERS: TELEVIS	SION				
carried by your cable system during FCC rules and regulations in effect 76.59(d)(2) and (4), 76.61(e)(2) and substitute program basis, as explain	the accountin on June 24, 19 (4), or 76.63 (ned in the next	g period except 981, permitting t (referring to 76.6 paragraph	(1) stations carrie the carriage of cer 61(e)(2) and (4))];	tain network programs [sections and (2) certain stations carried on a	G Primary Transmitters:
basis under specifc FCC rules, regu			is carried by your	cable system on a substitute progran	Television
 Do not list the station here in space station was carried only on a sul 	e G—but do lis		he Special Statem	nent and Program Log)—if the	
in the paper SA3 form.	ncerning subst	itute basis statio	ons, see page (v)	of the general instructions located	
each multicast stream associated w cast stream as "WETA-2". Simulcas WETA-simulcast).	rith a station ac	ccording to its o	ver-the-air designa	• • •	
Column 2: Give the channel nuits community of license. For exam	ole, WRC is Ch	-		tion for broadcasting over-the-air ir may be different from the channe	
on which your cable system carried Column 3: Indicate in each case educational station, by entering the (for independent multicast), "E" (for For the meaning of these terms, se	whether the s letter "N" (for r noncommercia	network), "N-M" al educational),	(for network multi or "E-M" (for nonc	ommercial educational multicast)	
Column 4: If the station is outsic planation of local service area, see Column 5: If you have entered " cable system carried the distant sta	page (v) of the Yes" in columr	general instruc n 4, you must co	ctions located in the complete column 5,	e paper SA3 form stating the basis on which you	
carried the distant station on a part- For the retransmission of a dista of a written agreement entered into	nt multicast str	eam that is not	subject to a royalt	y payment because it is the subjec	
the cable system and a primary trar tion "E" (exempt). For simulcasts, a	nsmitter or an a	accociation renr			
explanation of these three categorie Column 6: Give the location of e FCC. For Mexican or Canadian state	es, see page (veach station. Fo cions, if any, give	f you carried the	e channel on any of l instructions locat , list the communit the community wit	ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form by to which the station is licensed by the h which the station is identifec	
explanation of these three categorie	es, see page (veach station. Fo cions, if any, give annel line-ups	f you carried the y) of the general or U.S. stations, we the name of t , use a separate	e channel on any of linstructions locat , list the communit the community wit e space G for each	ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form by to which the station is licensed by the h which the station is identifec	
explanation of these three categorie Column 6: Give the location of 6 FCC. For Mexican or Canadian state	es, see page (veach station. For its page) annel line-ups. CHANN 3. TYPE OF	f you carried the r) of the general or U.S. stations, we the name of t , use a separate EL LINE-UP 4. DISTANT? (Yes or No)	e channel on any of linstructions locat , list the communit the community wit e space G for each	ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form by to which the station is licensed by the h which the station is identifec	
explanation of these three categorie Column 6: Give the location of 6: FCC. For Mexican or Canadian state Note: If you are utilizing multiple change in the column of 6: FCC. For Mexican or Canadian state Note: If you are utilizing multiple change in the column of 6: FCC. FOR MEXICAN INC. 1. CALL 2. B'CAST CHANNE	es, see page (veach station. For its page) annel line-ups. CHANN 3. TYPE OF	f you carried the r) of the general or U.S. stations, we the name of t , use a separate EL LINE-UP 4. DISTANT? (Yes or No)	c channel on any of instructions locat, list the communit the community wite space G for each AB 5. BASIS OF CARRIAGE	ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form by to which the station is licensed by the h which the station is identifec h channel line-up.	
explanation of these three categorie Column 6: Give the location of 6: FCC. For Mexican or Canadian stat Note: If you are utilizing multiple ch 1. CALL SIGN 2. B'CAST CHANNE	es, see page (veach station. For its page) annel line-ups. CHANN 3. TYPE OF	f you carried the r) of the general or U.S. stations, we the name of t , use a separate EL LINE-UP 4. DISTANT? (Yes or No)	c channel on any of instructions locat, list the communit the community wite space G for each AB 5. BASIS OF CARRIAGE	ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form by to which the station is licensed by the h which the station is identifec h channel line-up.	
explanation of these three categorie Column 6: Give the location of 6: FCC. For Mexican or Canadian stat Note: If you are utilizing multiple ch 1. CALL SIGN 2. B'CAST CHANNE	es, see page (veach station. For its page) annel line-ups. CHANN 3. TYPE OF	f you carried the r) of the general or U.S. stations, we the name of t , use a separate EL LINE-UP 4. DISTANT? (Yes or No)	c channel on any of instructions locat, list the communit the community wite space G for each AB 5. BASIS OF CARRIAGE	ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form by to which the station is licensed by the h which the station is identifec h channel line-up.	
explanation of these three categorie Column 6: Give the location of 6: FCC. For Mexican or Canadian stat Note: If you are utilizing multiple ch 1. CALL SIGN 2. B'CAST CHANNE	es, see page (veach station. For its page) annel line-ups. CHANN 3. TYPE OF	f you carried the r) of the general or U.S. stations, we the name of t , use a separate EL LINE-UP 4. DISTANT? (Yes or No)	c channel on any of instructions locat, list the communit the community wite space G for each AB 5. BASIS OF CARRIAGE	ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form by to which the station is licensed by the h which the station is identifec h channel line-up.	
explanation of these three categorie Column 6: Give the location of 6 FCC. For Mexican or Canadian stat Note: If you are utilizing multiple ch	es, see page (veach station. For its page) annel line-ups. CHANN 3. TYPE OF	f you carried the r) of the general or U.S. stations, we the name of t , use a separate EL LINE-UP 4. DISTANT? (Yes or No)	c channel on any of instructions locat, list the communit the community wite space G for each AB 5. BASIS OF CARRIAGE	ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form by to which the station is licensed by the h which the station is identifec h channel line-up.	
explanation of these three categorie Column 6: Give the location of 6 FCC. For Mexican or Canadian stat Note: If you are utilizing multiple ch	es, see page (veach station. For its page) annel line-ups. CHANN 3. TYPE OF	f you carried the r) of the general or U.S. stations, we the name of t , use a separate EL LINE-UP 4. DISTANT? (Yes or No)	c channel on any of instructions locat, list the communit the community wite space G for each AB 5. BASIS OF CARRIAGE	ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form by to which the station is licensed by the h which the station is identifec h channel line-up.	
explanation of these three categorie Column 6: Give the location of 6: FCC. For Mexican or Canadian stat Note: If you are utilizing multiple ch 1. CALL SIGN 2. B'CAST CHANNE	es, see page (veach station. For its page) annel line-ups. CHANN 3. TYPE OF	f you carried the r) of the general or U.S. stations, we the name of t , use a separate EL LINE-UP 4. DISTANT? (Yes or No)	c channel on any of instructions locat, list the communit the community wite space G for each AB 5. BASIS OF CARRIAGE	ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form by to which the station is licensed by the h which the station is identifec h channel line-up.	
explanation of these three categorie Column 6: Give the location of 6 FCC. For Mexican or Canadian stat Note: If you are utilizing multiple ch 1. CALL SIGN 2. B'CAST CHANNE	es, see page (veach station. For its page) annel line-ups. CHANN 3. TYPE OF	f you carried the r) of the general or U.S. stations, we the name of t , use a separate EL LINE-UP 4. DISTANT? (Yes or No)	c channel on any of instructions locat, list the communit the community wite space G for each AB 5. BASIS OF CARRIAGE	ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form by to which the station is licensed by the h which the station is identifec h channel line-up.	
explanation of these three categorie Column 6: Give the location of 6 FCC. For Mexican or Canadian stat Note: If you are utilizing multiple ch 1. CALL SIGN 2. B'CAST CHANNE	es, see page (veach station. For its page) annel line-ups. CHANN 3. TYPE OF	f you carried the r) of the general or U.S. stations, we the name of t , use a separate EL LINE-UP 4. DISTANT? (Yes or No)	c channel on any of instructions locat, list the communit the community wite space G for each AB 5. BASIS OF CARRIAGE	ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form by to which the station is licensed by the h which the station is identifec h channel line-up.	

ACCOUNTING PERIOD: 2018/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63033 The Ohio Bell Telephone Company PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

FURM SASE, PAGE 5.									
The Ohio Bell Telepho					S	63033	Name		
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEME	NT AND PROGRAM LOC	a					
In General: In space I, ident substitute basis during the ac explanation of the programm form.	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regu	lations, or authorizations.	For a further	 Substitute		
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE									
During the accounting period did your cable aveter carry on a substitute basic any perpetuarly television program									
broadcast by a distant stat				·-, -··· , ······		XNo	Statement and Program Log		
Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program									
log in block 2.	- DDOOD A	мс							
2. LOG OF SUBSTITUTE In General: List each subst			ate line. Use abbreviations	wherever po	ssible, if their meaning is	3			
clear. If you need more spa	ce, please	attach addition	al pages.						
Column 1: Give the title period, was broadcast by a			rision program (substitute p			ation			
under certain FCC rules, re									
SA3 form for futher informa				"basketball"	'. List specific program				
titles, for example, "I Love L			/bers vs. Bulls." r "Yes." Otherwise enter "I	lo."					
Column 3: Give the call	sign of the s	station broadca	asting the substitute progra	ım.					
Column 4: Give the broathe case of Mexican or Can		•	ne community to which the						
			stem carried the substitute		,	nth			
first. Example: for May 7 giv	/e "5/7."			-					
Column 6: State the time to the nearest five minutes.			ogram was carried by your			ely			
stated as "6:00-6:30 p.m."	·	. 0		·	•				
			was substituted for progra			ed			
to delete under FCC rules a gram was substituted for pr									
effect on October 19, 1976.		, ,	•		· ·				
				\\/\LIE	EN SUBSTITUTE				
S	UBSTITUT	E PROGRAM	I		IAGE OCCURRED	7. REASON FOR			
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	DELETION			
					_				
					_				
					<u> </u>				
					<u> </u>				
					_	'			
					_				
					_				
						'			
					<u> </u>				
					<u> </u>				
					<u> </u>				
					_				
					_				

ACCOUNTING PERIOD: 2018/2 FORM SA3E. PAGE 6.

Name		LEGAL NAME OF OWNER OF CABLE SYSTEM: The Ohio Bell Telephone Company 63033									
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."										
	CALL SIGN	WHEN	DATE CARRIAGE OCC			OF F	PART-TIME CAF		I CARRIAGE O	CCU	RRED
	CALL GIGIN	DATE	FROM	UR	S TO		O' LE OIGIN	DATE	H FROM	OUR	S TO
			-	=_							
				=-							
				=_							
			-	=_							
			_							_	
			-	=-							
		l		- -							
										_	
				=-							
				- -							
			-							_	
			-	=-						_=_	
				=-							
			-							_	
			_							_	

LEGA	AL NAME OF OWNER OF CABLE SYSTEM: e Ohio Bell Telephone Company	SYSTEM ID# 63033	Name				
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.							
• Com • Com • If yo fee f • If yo acco	COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account. If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of						
3 be ▶ If pa 2 in	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered celow. art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be en block 4 below. MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are required.	ntered on line					
1	least the minimum fee, regardless of whether they carried any distant stations. This fee is 1.06-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.	\$ 5,199,718.74 55,325.01					
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the informal space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column 4, you "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period? Yes—Complete the DSE schedule.	ı must check					
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$					
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00					
	Line 3. Add lines 1 and 2 and enter here \$	-					
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.	\$ 55,325.01 0.00	Cable systems submitting additional deposits under				
	Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)						
	Line 4. FILING FEE						
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here						
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See page general instructions located in the paper SA3 form for more information.)	e (i) of the					

ACCOUNTING PERIOD: 2018/2
FORM SA3E, PAGE 8.

r	FURMI SASE, F.	
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: The Ohio Bell Telephone Company 6	:м iD# 3033
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable	
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
for Further Information	Name Diane Bellinger Telephone 210-351-4805	
	Address 1010 N. St. Mary's Street, Room 13-59-B (Number, street, rural route, apartment, or suite number)	
	San Antonio, TX 78215 (City, town, state, zip)	
	Email dg7796@att.com Fax (optional) 210-246-8199	
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)	
O Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.	
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	
	X /s/ Robert LaGrone	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	
	Typed or printed name: Robert LaGrone	
	Title: Vice President – Finance (Title of official position held in corporation or partnership)	
	Date: February 22, 2019	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Mana
The Ohio Bell Telephone Company	63033	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system service of providing secondary transmissions of primary broadcast transmitters, the system shall scribers and amounts collected from subscribers receiving secondary transmissions pursuant to For more information on when to exclude these amounts, see the note on page (vii) of the general instrupation period did the cable system exclude any amounts of gross receipts for secondary made by satellite carriers to satellite dish owners?	for the basic I not include sub- section 119." uctions in the	Special Statement Concerning Gross Receipts Exclusion
X NO		
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment of For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 for		Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,		
space L, (page 7)	(interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further a contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.		
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyrig please list below the owner, address, first community served, accounting period, and ID number as give filing.		
Owner Address		
First community served		
Accounting period		
ID number		

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

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

- 1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
- 2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.
- 3) A station of the same type substituted for a carried network, non-commercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24, 1981.
- 4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.
- 5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

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

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

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

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

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

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

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

SCHEDULE

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

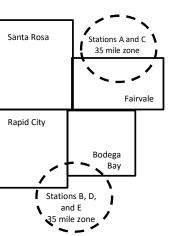
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

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



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

Minimum Fee Total Gross Receipts	\$600,000.00
	x .01064
	\$6,384,00

		\$6,384.00			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94

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

DSE SCHEDULE. PAG													
4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			SY	STEM ID#							
· I	The Ohio Bell Telephon	e Company				63033							
	SUM OF DSEs OF CATEGOR		NC:										
	• Add the DSEs of each station.												
	Enter the sum here and in line 1 of part 5 of this schedule.												
		. o. pa o o. a	5 55115 44151										
•	Instructions:												
2	In the column headed "Call S	Sign": list the ca	II signs of all distant station	ns identified by	the letter "O" in column 5								
Computation	of space G (page 3).	'r for each inden	andent station, give the DS	SE as "1 0": for	each network or noncom								
of DSEs for	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."												
Category "O"	mercial educational station, give	TO THE DOL GO	CATEGORY "O" STATIO	NS: DSEs									
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE							
Otations	CALL GIGIN	DOL	OALL GIGIT	DOL	OALL GIGIT	DOL							
Add rows as													
necessary.													
Remember to copy all formula into new													
rows.													
	I	I		 L	lud								

Name		OWNER OF CABLE SYSTEM: II Telephone Compa	ny				\$	63033
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	CAPACITY st the call sign of all dista :: For each station, give the correspond with the inform :: For each station, give the includent in the column of the	he number of houmation given in she total number out of the total number out out of the total number out of the figure all point. This is station, give the figure of the	ars your cable systemace J. Calculate or of hours that the state in column 3, and the "basis of carriage type-value" as "1.0."	m carried the sta nly one DSE for e ion broadcast ov give the result in e value" for the s For each netwo	tion during the accounting the accounting the station. It is a consistent of the air during the accordecimals in column 4. The station. The properties of the column 6. Round to no column 6. Round to no column 6. Round to no column 6.	ounting period. his figure must cational station,	
Capacity		C	ATEGORY L	AC STATIONS:	COMPUTATI	ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	JRS ED BY M	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	GE VALU	Ē	SE .
			÷ ÷		= = =	x	<u> </u>	
			÷		=	x x	=	
			÷		=	x	=	
			÷ ÷		= 	x x	=	
			÷	:	=	x	=	
			÷		-	x	=	
	Add the DSEs	OF CATEGORY LAC S of each station. Im here and in line 2 of pa		dule,		0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efferations in efferations in efferations. Broadcast of space I). Column 2: at your option. Column 3: Column 4:	e the call sign of each stall by your system in substict on October 19, 1976 (one or more live, nonnetwoment of the station give the This figure should corresenter the number of days Divide the figure in colum This is the station's DSE	itution for a progras shown by the ork programs durinumber of live, nespond with the infection to the calendar years 2 by the figure	am that your systen letter "P" in column ing that optional carr connetwork program formation in space I. year: 365, except in in column 3, and gi	was permitted to a permitted to a pace (); and a permitted to a pe	to delete under FCC rule d the word "Yes" in column titution for programs that	2 of were deleted s than the third	orm).
		SU	BSTITUTE-B/	ASIS STATION	S: COMPUTA	ATION OF DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷		=				=
		-		=				
		÷		=			•	=
		÷ ÷						
	Add the DSEs	of SUBSTITUTE-BASI of each station. Im here and in line 3 of pa		dule,		0.00		
5		ER OF DSEs: Give the ames applicable to your system		xes in parts 2, 3, and	4 of this schedule	e and add them to provide	the total	
Total Number	1. Number o	f DSEs from part 2 ●				•	0.00	
of DSEs		f DSEs from part 3 ●				•	0.00	
	3. Number o	f DSEs from part 4 ●				-	0.00	
	TOTAL NUMBE	R OF DSEs						0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2018/2

	OWNER OF CABLES Telephone Co						S'	YSTEM ID# 63033	Name
	•							22300	
block A:	ck A must be comp								G
lf your answer if chedule.	"Yes," leave the re	mainder of pa	art 6 and part 7	of the DSE sched	lule blank and	d complete part	: 8, (page 16) of the	Э	6
f your answer if	"No," complete blo			FEL EV ((0) 0 N N N	ADVETO				Computation o
the eable system	m located whelly o			FELEVISION MA		otion 76 5 of E	C rules and regul	otions in	Computation of 3.75 Fee
fect on June 24,			•				C rules and regul	ations in	
_	plete part 8 of the plete blocks B and		O NOT COMP	LETE THE REIMAI	INDER OF PA	ART 6 AND 1.			
X No—comp	Diete blocks b and	o below.							
		BLO	CK B: CARF	RIAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulatio e DSE Sched	ns prior to Jun Iule. (Note: Th	part 2, 3, and 4 of t e 25, 1981. For fur e letter M below re Act of 2010.)	ther explanat	tion of permitte	d stations, see the	-	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerica	les and reguled pursuant to on as defined al educational station (76.6	ations cited be the FCC man in 76.5(kk) (70 I station [76.50 5) (see paragi	sis on which you ca low pertain to thos ket quota rules [76 3.59(d)(1), 76.61(e) 9(c), 76.61(d), 76.63 aph regarding sub-	e in effect on i.57, 76.59(b))(1), 76.63(a) 3(a) referring	June 24, 1981 , 76.61(b)(c), 7 referring to 76 to 76.61(d)]	6.63(a) referring to	,	
Column 3:	G Commercial U M Retransmission	viously carried HF station with of a distant each distant sestations ider	d on a part-tim thin grade-B o multicast stre tation listed in ntified by the le	e or substitute bas ontour, [76.59(d)(5	f the schedule), 76.63(a) refe			
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	
		Е	BLOCK C: CC	MPUTATION OF	3.75 FEE				
ne 1: Enter the	e total number of	DSEs from բ	part 5 of this	schedule					
ne 2: Enter the	sum of permitted	d DSEs fron	n block B abo	ve					
	line 2 from line 1 leave lines 4–7 bl			,		rate.		0.00	
ne 4: Enter gro	oss receipts from	space K (pa	ige 7)				× 0.03	75	Do any of the
ne 5: Multiply I	ine 4 by 0.0375 a	and enter su	m here				X 0.03		partially permited/ partially
ne 6: Enter tot	al number of DSE	Es from line	3				х	-	nonpermitted carriage? If yes, see par
								$\overline{}$	9 instructions
ne 7 [.] Multiply I	ine 6 by line 5 an	d enter here	and on line	2, block 3, space	L (page 7)			0.00	

	WNER OF CABLE Telephone Co						S	YSTEM ID# 63033	Mana a
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	IUED)			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
 	27.010		01011	B, tota		01011	B, (e) e		Computation of 3.75 Fee

ACCOUNTING PERIOD: 2018/2

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name The Ohio Bell Telephone Company 63033 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 Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B-Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN DSE **PERIOD** CARRIAGE DSE Instructions: Block A must be completed. 7 In block A: Computation 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. of the Syndicated **BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? X Yes—Complete blocks B and C . No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer or in part, over the cable system? to former FCC rule 76.159) Yes-List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. No—Enter zero and proceed to part 8. CALL SIGN CALL SIGN CALL SIGN DSE DSE DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: The Ohio Bell Telephone Company	SYSTEM ID# 63033	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	5,199,718.74	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? \(\text{\bar{X}} \) 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 Distance is a section of the property of the prope	SE	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below. A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Tes—Complete part 9 of this schedule.		
	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 Dis 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		

Name	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name		The Ohio Bell Telephone Company	63033
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		B. Enter 0.00189 of gross receipts (the amount in section 1)	
Exclusivity 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>
	Instru	ctions:	
8		ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of p checked "Yes," use the total number of DSEs from part 5.	part
		ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation of	_	ır answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ır answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B bε	elow
Base Rate Fee	blank		
		is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "loc e area," see page (v) of the general instructions.	cai
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		Yes—Complete part 9 of this schedule. X No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ _ \$ 5,199,718	3.74
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	0.00
	Section		
	3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts (the amount in section 1)	<u>-</u>
		B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ _ \$ 36,450.03	
		C. Subtract 1.000 from total DSEs (the figure in earlier 2) and enter here.	
		(the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	<u>-</u>
		E. Add lines A, and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7) Base Rate Fee. ▶.\$	
			<u></u> .

DOL OCI	ACCOUNTING	3 PERIOD: 2018/2
LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name
The C	Ohio Bell Telephone Company 63033	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	A. Enter 0.01064 of gross receipts	8
	(the amount in section 1)	
	B. Enter 0.00701 of gross receipts	Computation
	(the amount in section 1) \$	Computation of
	C. Multiply line B by 3.000 and enter here ► \$	Base Rate Fee
	D. Enter 0.00330 of gross receipts	
	(the amount in section 1) \$	
	E. Subtract 4.000 from total DSEs	
	(the figure in section 2) and enter here ►	
	F. Multiply line D by line E and enter here >	
	G. Add lines A, C, and F. This is your base rate fee	
	Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$ 0.00	
	Dase Rate Fee	
IMPOF	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals	
shall ir	istead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line- Space G.	9
	neral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of clusion, you must:	of
First:	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	Base Rate Fee and
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number is and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each	Syndicated
group.		Exclusivity Surcharge
Finally	r: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	for
must a	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you lso compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. rer, if your cable system is wholly located outside all major television markets, complete block A only.	Partially Distant Stations, and
How to	o Identify a Subscriber Group for Partially Distant Stations	for Partially Permitted
	: For each community served, determine the local service area of each wholly distant and each partially distant station you to that community.	Stations
Step 2	: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located at the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by me token, the station is distant to the subscriber.)	
subscr	: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each iber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's iber groups.	
	n section:	
• Ident	ify the communities/areas represented by each subscriber group.	
	the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the ibers in the group.	
• If:		
, .	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, of this schedule; or,	
, -	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, t 6 of this schedule.	
•	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	ulate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions a paper SA3 form.	
page. DSEs	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show ctual calculations on the form.	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63033 The Ohio Bell Telephone Company Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in 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.

Gross Receipts First Group S S,199,718.74 Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE	O DSE	
CALL SIGN DSE DS		- ^
Total DSEs Total DSEs Gross Receipts First Group Total DSEs Gross Receipts First Group Third SUBSCRIBER GROUP THIRD SUBSCRIBER GROUP THIRD SUBSCRIBER GROUP TOMMUNITY/ AREA CALL SIGN DSE CALL SIGN	DSE	9
Total DSEs TOTAL	DSE	Computa
Gross Receipts First Group Source Second Group So		of
Gross Receipts First Group Sommunitry Area CALL SIGN DSE C		Base Rate
Siross Receipts First Group Sommunitry Area CALL SIGN DSE		and
Siross Receipts First Group Sommunitry Area CALL SIGN DSE		Syndical
Siross Receipts First Group Sommunitry Area CALL SIGN DSE		Exclusiv
Siross Receipts First Group Siross Receipts First Group Siross Receipts Second Group Siross Receipts Fourth Group		Surchar
Siross Receipts First Group Siross Receipts First Group Siross Receipts Second Group Siross Receipts Fourth Group		for
THIRD SUBSCRIBER GROUP OMMUNITY/ AREA CALL SIGN DSE CALL S		Partiall
THIRD SUBSCRIBER GROUP THIRD SUBSCRIBER GROUP OMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE		Distan
THIRD SUBSCRIBER GROUP OMMUNITY/ AREA CALL SIGN DSE CALL S		Station
ross Receipts First Group s		
Siross Receipts First Group Siross Receipts First Group Siross Receipts Second Group Siross Receipts Fourth Group		
Siross Receipts First Group Siross Receipts First Group Siross Receipts Second Group Siross Receipts Fourth Group		
Gross Receipts First Group Sommunitry Area CALL SIGN DSE C		
Gross Receipts First Group Sommunitry Area CALL SIGN DSE C		
Siross Receipts First Group Siross Receipts First Group Siross Receipts Second Group Siross Receipts Fourth Group		4
THIRD SUBSCRIBER GROUP THIRD SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DS	0.00	
THIRD SUBSCRIBER GROUP THIRD SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DS	0.00	
THIRD SUBSCRIBER GROUP OMMUNITY/ AREA OCALL SIGN DSE CALL	0.00	
THIRD SUBSCRIBER GROUP OMMUNITY/ AREA OCALL SIGN DSE CALL		
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN DSE CALL SIGN CALL SIGN DSE	0.00	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN DSE CALL SIGN COMMUNITY/ AREA CALL SIGN DSE CALL SIGN COMMUNITY/ AREA CALL SIGN DSE CALL SIGN COMMUNITY/ AREA CALL SIGN COMMUNITY/ AREA CALL SIGN DSE CALL SIGN TOTAL DSES Gross Receipts Third Group S O.00 Gross Receipts Fourth Group S O.00 S O.00 COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN TOTAL DSES Gross Receipts Fourth Group S O.00 S O.00 S O.00 COMMUNITY/ AREA		=
CALL SIGN DSE CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN CA		+
otal DSEs O.00 Total DSEs O.00 S O.00 S Oross Receipts Fourth Group S Oross Receipts Fourth Group S O.00 S Oross Receipts Fourth Group S	0	
\$ 0.00 Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$	DSE	
sross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$		
\$ 0.00 Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$		
\$ 0.00 Gross Receipts Third Group \$ 0.00		
sross Receipts Third Group		
\$ 0.00 Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$		
\$ 0.00 Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$		
\$ 0.00 Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$		
\$ 0.00 Gross Receipts Third Group \$ 0.00		.
\$ 0.00 Gross Receipts Third Group \$ 0.00		
\$ 0.00 Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$		
\$ 0.00 Gross Receipts Third Group \$ 0.00		
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$		
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$		
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$		
\$ 0.00 Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$		4
	0.00	
	0.00	
sase Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$	3.00	
Sase Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$		
	0.00	
	0.00	

BLOCK A: COMPUTATION (DE BASE DA	TE FEES FOR EACH	SUBSCEI	BER GROUD		
FIFTH SUBSCRIBER GRO		I		SUBSCRIBER GROU	JP	
MMUNITY/ AREA	0	COMMUNITY/ AREA	0.,,,,,,,	00200122.1.01.10	0	9
		- OSWINGINI 1774 CEX				Computation
ALL SIGN DSE CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						Base Rate F
						and
						Syndicate
						Exclusivi
T						Surcharg
						for
						Partially
T						Distant
						Stations
I DSEs	0.00	Total DSEs	•		0.00	
	0.00	Total DSES		-	0.00	
ss Receipts First Group \$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
					1	
	11					
n Pata Foo Firet Group	0.00	Raso Pato Foo Secon	nd Group	•	0.00	
e Rate Fee First Group \$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
s Rate Fee First Group \$		Base Rate Fee Secon		\$ SUBSCRIBER GROU	,	
SEVENTH SUBSCRIBER GRO	DUP				,	
		Base Rate Fee Secon COMMUNITY/ AREA			UP	
SEVENTH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP 0	
SEVENTH SUBSCRIBER GRO	DUP				UP	
SEVENTH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP 0	
SEVENTH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP 0	
SEVENTH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP 0	
SEVENTH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP 0	
SEVENTH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP 0	
SEVENTH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP 0	
SEVENTH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP 0	
SEVENTH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP 0	
SEVENTH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP 0	
SEVENTH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP 0	
SEVENTH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP 0	
SEVENTH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP 0	
SEVENTH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP 0	
SEVENTH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP 0	
SEVENTH SUBSCRIBER GROMMUNITY/ AREA LL SIGN DSE CALL SIGN	DUP 0 DSE	COMMUNITY/ AREA CALL SIGN	EIGHTH	SUBSCRIBER GROU	DSE	
SEVENTH SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	UP 0	
SEVENTH SUBSCRIBER GROMMUNITY/ AREA LL SIGN DSE CALL SIGN	DUP 0 DSE	COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	
SEVENTH SUBSCRIBER GROMMUNITY/ AREA ALL SIGN DSE CALL SIGN I DSEs	DUP DSE 0 0 0 0 0 0 0 0 0 0 0 0 0	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	DSE	
SEVENTH SUBSCRIBER GROMMUNITY/ AREA ALL SIGN DSE CALL SIGN I DSEs	DUP DSE 0 0 0 0 0 0 0 0 0 0 0 0 0	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE STOUP	SUBSCRIBER GROU	DSE	

LEGAL NAME OF OWN The Ohio Bell Te			•			S	63033	Name
	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GROU	IP		SECOND	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA 0			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
						-		
Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$ 5,199	,718.74	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
THIRD SUBSCRIBER GROUP			IP		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						_		
		-						
Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add			iber group	as shown in the boxes a	bove.	c	0.00	
inter tiere and in bloc	را الناف T, S	pace L (page /)				\$	0.00	

LEGAL NAME OF OWN The Ohio Bell Te			_			S	63033	Name
	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	BER GROUP		
	FIFTH	SUBSCRIBER GROU	JP		SIXTH	SUBSCRIBER GROU	JP	٥
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
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
						-		
								
Total DSEs	1		0.00	Total DSEs	•		0.00	
Gross Receipts First (Group	\$	0.00				0.00	
·	·			·				
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Secon	d Group	\$	0.00	
SEVENTH SUBSCRIBER GROUP					EIGHTH	SUBSCRIBER GROU		
COMMUNITY/ AREA 0			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	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third	Group	e	0.00	Base Rate Fee Fourth	Group	e.	0.00	
Dago Nato I 66 TIMU		\$	0.00	Dago Rato i ee i ouitii	Отоир	\$	3.00	
Base Rate Fee: Add t Enter here and in bloo			riber group	as shown in the boxes al	oove.	\$		

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM IC
Name	The Ohio Bell Telephone Company 6303
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
Gomputation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	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: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of 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.
	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 total number of DSEs for this subscriber group subject to the surcharge computation
	THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE Third Group \$ SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7).

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM
Name	The Ohio Bell Telephone Company 630
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
Gomputation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	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: First 50 major television market Second 50 major television market
	FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP
	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 SYNDICATED EXCLUSIVITY SURCHARGE First Group \$ 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 Second Group \$
	SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP
	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