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

**STATEMENT OF ACCOUNT** for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

### SA3E Long Form

Return completed workbook by email to:

### coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THI	S STATEMENT:								
Accounting Period	2019/1									
<b>B</b> Owner	Instructions:         Give the full legal name of the owner of the cable s         rate title of the subsidiary, not that of the parent corpora         List any other name or names under which the own         If there were different owners during the accounting         a single statement of account and royalty fee payment         Check here if this is the system's first filing. If no	tion ner conducts the business of the cable syst g period, only the owner on the last day of covering the entire accounting perioa	em the accounting period should							
	LEGAL NAME OF OWNER/MAILING ADDRESS OF Southwestern Bell Telephone Comp									
				06257820191						
				062578 2019/1						
	2270 Lakeside Blvd Richardson, TX 75082									
С	<b>INSTRUCTIONS:</b> In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.									
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 Area	<b>Instructions:</b> For complete space D instructions, with all communities.	see page 1b. Identify only the frst comr	nunity served below and re	elist on page 1b						
Served	CITY OR TOWN	STATE								
First	San Antonio	тх								
Community	Below is a sample for reporting communities if y	ou report multiple channel line-ups in S	pace G.							
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#						
	Alda	MD	Α	1						
Sample		MD	В	2						
Sample	Alliance	MP	В	2						

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.

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

8/29/2019

FORM SA3E. PAGE 1b.				1					
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#						
Southwestern Bell Telephone Company			062578						
<b>Instructions:</b> 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.									
<b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile hot below the identified city or town.	Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses								
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 t on a partially distant or partially permitted basis in the DSE Schedule, associate each r designated by a number (based on your reporting from Part 9).	he column blank. elevant communit	If you report any st y with a subscriber	ations group,						
When reporting the carriage of television broadcast stations on a community-by-comm channel line-up designated by an alpha-letter(s) (based on your Space G reporting) an (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns	d a subscriber gro								
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	_					
San Antonio	ТХ			First					
Alamo Heights	ТХ			Community					
Balcones Heights	ТХ								
Bexar Unincorporated County	ТХ	•							
Castle Hills	ТХ								
China Grove	ТХ			See instructions for					
Cibolo	ТХ			additional information					
Comal Unincorporated County	ТХ			on alphabetization.					
Converse	ТХ								
Elmendorf	ТХ								
Fair Oaks Ranch	ТХ								
Garden Ridge	ТХ								
Geronimo	ТХ			Add rows as necessary					
Guadalupe Unincorporated County	ТХ								
Helotes	ТХ								
Hill Country Village	ТХ								
Hollywood Park	ТХ								
Kendall Unincorporated County	ТХ								
Kirby	ТХ	•••							
Leon Valley	ТХ								
Live Oak	ТХ	•							
Medina Unincorporated County	ТХ	•							
New Braunfels	ТХ								
Olmos Park	ТХ								
Saint Hedwig	ТХ								
Schertz	ТХ								
Seguin	ТХ								
Selma	ТХ								
Shavano Park	ТХ								
Terrell Hills	ТХ								
Universal City	ТХ								
Windcrest	ТХ								
		L		I					

 	 •

Norma	LEGAL NAME OF OWNER OF CABL	E SYSTEM:						S	YSTEM ID		
Name	Southwestern Bell Tele	phone Com	pany						06257		
					ATE0						
E	SECONDARY TRANSMISSION In General: The information in s		-	-	-	v transmission s	service of t	he cable			
	system, that is, the retransmission	•		•							
Secondary	about other services (including p						those exist	ing on the			
Transmission	last day of the accounting period										
Service: Sub-	Number of Subscribers: Both										
scribers and Rates	down by categories of secondary each category by counting the n										
Nates	separately for the particular serv							charged			
	Rate: Give the standard rate c	harged for eac	h categ	ory of service.	Include bo	th the amount o	of the charg				
	unit in which it is generally billed				iny standa	rd rate variation	s within a p	particular rate			
	category, but do not include disc	ounts allowed	for adv	ance payment.	wine of one						
	Block 1: In the left-hand block systems most commonly provide										
	that applies to your system. Not										
	categories, that person or entity										
	subscriber who pays extra for ca										
	first set" and would be counted of										
	Block 2: If your cable system printed in block 1 (for example, t										
	with the number of subscribers a										
	sufficient.		- ngin-i	Iand Diock. A ti		e-word descript					
	BLO	DCK 1					BLOC	K 2			
		NO. OF						NO. OF			
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CAT	EGORY OF SEI	RVICE	SUBSCRIBERS	RATE		
	Residential:	_	- 004			_		40.050	<b>•</b> • • •		
	Service to first set	7	7,931	\$ 19.00	HD Tech			48,959	\$ 10.0		
	Service to additional set(s)				Set-Top			78,378	\$0-\$1		
	• FM radio (if separate rate)				Broadca	st TV Surcharg	je	77,931	\$4.99-\$7.9		
	Motel, hotel		447	<u> </u>							
	Commercial		447	\$ 20.00							
	Converter										
	Residential										
	Non-residential										
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	s						
F	In General: Space F calls for rat					ll your cable sys	stem's serv	ices that were			
Г	not covered in space E, that is, t										
<b>.</b> .	service for a single fee. There ar										
Services Other Than	furnished at cost or (2) services amount of the charge and the ur										
Secondary	enter only the letters "PP" in the		usually	billed. If any fo		larged on a van	able pei-pi	ografii basis,			
Fransmissions:			he cab	le system for ea	ach of the a	applicable servi	ces listed.				
Rates	<b>Block 1:</b> Give the standard rate charged by the cable system for each of the applicable services listed. <b>Block 2:</b> 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.										
	bher (two- or three-word) descrip	nion and includ	ie the r	ate for each.			Т				
		BLO				DATE	0.475.00	BLOCK 2	DATE		
	CATEGORY OF SERVICE Continuing Services:	RATE		GORY OF SER ation: Non-res		RATE	CATEGO	ORY OF SERVICE	RATE		
	• Pay cable			otel, hotel	nuentiai		Video or	Demand	\$0-\$10		
	• Pay cable—add'l channel	\$5-\$199		mmercial				Activation Fee	\$0-\$10 \$0-\$3		
	• Fire protection	φ <b>0-φ1</b> 99		y cable				anagement Fee	\$0-\$44		
	•Burglar protection			y cable-add'l cl	nannel	·····		on Demand	<del>۵۵-۵44</del> \$9		
	Installation: Residential			e protection		·····		Receiver	ə: \$0-\$4		
	• First set	\$0-\$199		rglar protection			HD Prem		φ0-φ- (		
	Additional set(s)	ΨU-Ψ100		services:		·····		grade Fee	\$5		
	• FM radio (if separate rate)			connect		\$0-\$35	Vacation		<del>پر</del> \$7.0		
	• Converter			sconnect		φυ-φυυ	Tacation		ψ 7.0		
	Converter			itlet relocation		\$0-\$55					
				ove to new add	ess						

LEGAL NAME OF OWN	NER OF CABLE S	YSTEM:			SYSTEM ID#	Namo		
Southwestern	Bell Teleph	one Compa	any		062578			
RIMARY TRANSMITT	ERS: TELEVISIO	N						
					s and low power television stations) ed only on a part-time basis under	G		
CC rules and regulat	tions in effect of	n June 24, 19	81, permitting th	ne carriage of cert	ain network programs [sections			
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.								
substitute 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 specifc F(				o Special Statem	ent and Program Log)—if the			
station was carried	•		t it in space i (in	ie opecial olaleiti				
	•				tute basis and also on some other of the general instructions located			
in the paper SA3 fo	orm.	U U			, and the second s			
		•			s such as HBO, ESPN, etc. Identify			
			•	•	tion. For example, report multi- h stream separately; for example			
VETA-simulcast).		har the ECC k	as assigned to	the television stat	ion for broadcasting over the air in			
					ion for broadcasting over-the-air in may be different from the channel			
on which your cable s	ystem carried tl	ne station.		<b>U</b>				
					ependent station, or a noncommercial cast), "I" (for independent), "I-M"			
for independent multi	cast), "E" (for n	oncommercia	l educational), c	or "E-M" (for nonce	ommercial educational multicast).			
or the meaning of the <b>Column 4:</b> If the st					he paper SA3 form. es". If not, enter "No". For an ex-			
lanation of local servi	ice area, see p	age (v) of the	general instruct	ions located in the	e paper SA3 form.			
					stating the basis on which your tering "LAC" if your cable system			
carried the distant stat		0	0.		<b>o i i</b>			
	lion on a part-li				capacity.			
	sion of a distant	multicast stre	eam that is not s	subject to a royalty	payment because it is the subject			
of a written agreemen	sion of a distant t entered into o	multicast stre	eam that is not s ine 30, 2009, be	subject to a royalty tween a cable sy	. ,			
of a written agreement he cable system and ion "E" (exempt). For	sion of a distant t entered into o a primary trans simulcasts, als	multicast stre n or before Ju mitter or an a o enter "E". If	eam that is not s ine 30, 2009, be ssociation repre you carried the	subject to a royalt etween a cable sy esenting the prima channel on any o	y payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further			
of a written agreement the cable system and tion "E" (exempt). For explanation of these th	sion of a distant t entered into o a primary trans simulcasts, als nree categories	multicast stre n or before Ju mitter or an a o enter "E". If , see page (v	eam that is not s ine 30, 2009, be ssociation repre you carried the ) of the general	subject to a royalt etween a cable sy esenting the prima channel on any o instructions locate	y payment because it is the subject stem or an association representing ry transmitter, enter the designa-			
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					and low power television stations)	G
• •					d only on a part-time basis under ain network programs [sections	Ŭ
	•		· · ·	U U	and (2) certain stations carried on a	Primary
	m basis, as explaine			operiod by your a	able system on a substitute program	Transmitters:
	ifc FCC rules, regula			s carried by your c	able system on a substitute program	Television
•				e Special Statem	ent and Program Log)—if the	
	arried only on a subs					
	· ·				ute basis and also on some other f the general instructions located	
in the paper S		orning oubout		no, 000 page (1) c		
		-			s such as HBO, ESPN, etc. Identify	
			•	•	tion. For example, report multi- n stream separately; for example	
VETA-simulcast						
			•		on for broadcasting over-the-air in	
	license. For example ble system carried the		annei 4 in Wash	ington, D.C. This	may be different from the channel	
•			tation is a netwo	ork station, an inde	pendent station, or a noncommercial	
		•			ast), "I" (for independent), "I-M"	
	multicast), "E" (for no of these terms, see				mmercial educational multicast).	
					es". If not, enter "No". For an ex-	
	service area, see pa					
-	•		•	•	stating the basis on which your ering "LAC" if your cable system	
	it station on a part-til	•	• •		<b>o i i</b>	
For the retrans	smission of a distant	multicast stre	eam that is not s	subject to a royalty	payment because it is the subject	
-				etween a cable sy	stem or an association representing	
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Name	LEGAL NAME OF (							SYSTEM ID# 062578
H Primary Transmitters: Radio	all-band basis v Special Instruct receivable if (1) 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	t every radio s whose signals ctions Concer it is carried by monitoring, to prmation abou aper SA3 form dentify the call state whether t the radio stati this by placing Sive the station	tation ca were "ge rning All / the syst be receive t the the n. sign of e he statio ion's sigr g a check y's location	rried on a separate and discre- nerally receivable" by your cal <b>Band FM Carriage:</b> Under C tem whenever it is received at ved at the headend, with the s Copyright Office regulations o each station carried. n is AM or FM. hal was electronically processes mark in the "S/D" column. on (the community to which the the community with which the	ble system during copyright Office re the system's hea ystem's FM ante n this point, see ed by the cable sy e station is licens	g the accountil egulations, an adend, and (2) nna, during ce page (vi) of th ystem as a se red by the FCC	ng perio FM sigr ) it can b ertain sta e genera parate a	d. nal is generally e expected, ted intervals. al instructions nd discrete
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
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LEGAL NAME OF OWNER OF	CABLE SYST	EM:					SYSTEM ID#	
Southwestern Bell Tel	ephone C	ompany					062578	Name
SUBSTITUTE CARRIAGE	: SPECIA		T AND PROGRAM LOG	1				
In Concrete in anosa Lidanti	fi aver por	notwork tolovic	ion program braddaat by a	distant statio	n that your	achla austam	corried on a	I
In General: In space I, identi substitute basis during the ad	counting pe	eriod, under spe	cific present and former FC	C rules, regula	ations, or a	uthorizations.	For a further	
explanation of the programm				e general instr	ructions loca	ated in the pa	per SA3 form.	Substitute Carriage:
<ol> <li>SPECIAL STATEMENT</li> <li>During the accounting per</li> </ol>				s, any nonne	twork telev	ision progran	n	Special
broadcast by a distant stat				o, any nonno		<b>Yes</b>	XNo	Statement and Program Log
Note: If your answer is "No"	, leave the	rest of this pag	ge blank. If your answer is '	ʻYes," you mu	ust complet	te the prograi	m	
log in block 2. 2. LOG OF SUBSTITUTE	PROGRA	MS						
In General: List each subst	itute progra	m on a separa		wherever pos	sible, if the	ir meaning is	;	
clear. If you need more spa Column 1: Give the title			al pages. ision program (substitute p	rogram) that,	during the	accounting		
period, was broadcast by a under certain FCC rules, re	distant stat	ion and that yo	ur cable system substitute	d for the prog	ramming o	f another sta	tion	
SA3 form for futher information	tion. Do no	t use general o	ategories like "movies", or					
titles, for example, "I Love L	ucy" or "NE	BA Basketball:	76ers vs. Bulls." r "Yes." Otherwise enter "N	lo "				
Column 3: Give the call	sign of the s	station broadca	sting the substitute progra	m.				
Column 4: Give the broa the case of Mexican or Can			ne community to which the community with which the			e FCC or, in		
Column 5: Give the mon	th and day		tem carried the substitute			with the mor	nth	
first. Example: for May 7 giv Column 6: State the time		substitute pro	gram was carried by your o	able system.	. List the tir	nes accurate	lv	
to the nearest five minutes.							.,	
stated as "6:00–6:30 p.m." Column 7: Enter the lette	er "R" if the	listed program	was substituted for progra	mming that y	our system	was require	d	
to delete under FCC rules a	ind regulation	ons in effect du	iring the accounting period	; enter the let	ter "P" if th	e listed pro		
gram was substituted for prefect on October 19, 1976.		that your syste	em was permitted to delete	under FCC r	ules and re	egulations in		
				\\//HF	EN SUBST			
S	UBSTITUT	E PROGRAM	l		IAGE OCC		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		TIMES — TO	DELETION	
	Tes of No	CALL SIGN	4. STATION S LOCATION	AND DAT	TROM	10		
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						-		
						_		
						_		
						_		

FORM SA3E. PAGE 5.

	PERIOD: 2019/1							FOI	SYSTEM ID#
Name	LEGAL NAME OF C			bany					062578
J Part-Time Carriage Log	time carriage du hours your syste Column 1 (C column 5 of spa Column 2 (D curred during th • Give the mont "4/10." • State the start television statio "app." Example	is space ties in ue to lack of act em carried that <b>call sign):</b> Give ace G. <b>Pates and hour</b> he accounting p h and day when ing and ending n's broadcast d : "12:30 a.m 3	with column 5 c ivated channel station. If you r the call sign of <b>s of carriage):</b> eriod. n the carriage of times of carriag ay, you may gir 3:15 a.m. app."	of space G. If you lis capacity, you are re- need more space, p every distant station For each station, li- poccurred. Use nume ge to the nearest qu ve an approximate of hours of carriage v	equir leas n wh st the rals, larte endir	ed to complete t e attach addition nose basis of car e dates and hour with the month t r hour. In any ca ng hour, followed	his log giving th al pages. riage you identi rs when part-tim first. Example: fi se where carria d by the abbrevi	e total dates and fied by "LAC" in he carriage oc- or April 10 give ge ran to the end ation	of the
			DA	TES AND HOURS	OF F	PART-TIME CAF	RRIAGE		
	CALL SIGN	WHEN	I CARRIAGE O	CCURRED		CALL SIGN		I CARRIAGE OC	
		DATE	H FROM	IOURS TO			DATE	HO FROM	URS TO
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-	SA3E. PAGE 7.								
	L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name						
Sou	thwestern Bell Telephone Company	062578							
Inst all a (as pag	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.								
<ul> <li>Instru</li> <li>Con</li> <li>Con</li> <li>If you fee</li> <li>If you account</li> </ul>	<b>RIGHT ROYALTY FEE</b> <b>ctions</b> : 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 a 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 mpanying this form and attach the schedule to your statement of account.	parts of the DSE Schedule	L Copyright Royalty Fee						
bloc	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should I k 3 below.								
If pa 3 be	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low.	entered on line 2 in block							
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	ould be entered on line							
Block 1	<b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or moleast the minimum fee, regardless of whether they carried any distant stations. This fe 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	\$ 30,539,218.99							
	Enter the result here. This is your minimum fee.	\$ 324,937.29							
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 colu "Yes" in this block.         • Did your cable system carry any distant television stations during the accounting per Yes—Complete the DSE schedule.         Image: Image	imn 4, you 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. <b>3.75 Fee:</b> 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	\$ 324,937.29	Cable systems						
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.		submitting additional deposits under						
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	Section 111(d)(7) should contact the Licensing						
	Line 4. FILING FEE \$ 725.00								
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 325,662.29	appropriate form for submitting the additional fees.						
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. general instructions located in the paper SA3 form for more information.)	(See page (i) of the							

ACCOUNTING PERI	IOD: 2019/1 FORM SA	3E. PAGE 8.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SY Southwestern Bell Telephone Company	STEM ID# 062578
<b>M</b> Channels	CHANNELS         Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.         1. Enter the total number of channels on which the cable system carried television broadcast stations       24         2. Enter the total number of activated channels on which the cable system carried television broadcast stations       608	
N Individual to Be Contacted for Further Information	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)         Name       Susan Redding         Telephone       972-269-1938	
	Address       2270 Lakeside Blvd (Number, street, rural route, apartment, or suite number)         Richardson, TX 75082 (City, town, state, zip)         Email       sr7272@att.com    Fax (optional)	
O Certifcation	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.  I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)  (Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or	
	<ul> <li>(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</li> <li>(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.</li> <li>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.</li> <li>[18 U.S.C., Section 1001(1986)]</li> </ul>	n
	X         /s/ Michael Santogrossi           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:         Michael Santogrossi	
	Title:       Vice President – Finance         (Title of official position held in corporation or partnership)         Date:       August 26, 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 th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephor numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in th completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law

LEGAL NAME OF OWNER OF CABLE SYSTEM: Southwestern Bell Telephone Company	SYSTEM ID# 062578	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS	002378	
The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by ad lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for service of providing secondary transmissions of primary broadcast transmitters, the system shall no scribers and amounts collected from subscribers receiving secondary transmissions pursuant to se	the basic ot include sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general instruct paper SA3 form.	ions in the	Concerning Gross Receipts Exclusion
During the accounting period did the cable system exclude any amounts of gross receipts for secondary tr made by satellite carriers to satellite dish owners?	ansmissions	Exclusion
ΧΝΟ		
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or u For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form		Q
		Interest
Line 1 Enter the amount of late payment or underpayment		Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	_	
x	days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	duyo	
	0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,		
space L, (page 7) \$ (inter	est charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assi contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.		
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright please list below the owner, address, first community served, accounting period, and ID number as given filing.		
Owner		
Address		
Address First community served		

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 LISTED IN SPACE G OF SA3E (LONG FORM)

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

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

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

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

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

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

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

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

### TOTAL OF DSEs

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

### THE ROYALTY FEE

The total royalty fee is determined by calculating the minimum fee 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 not subject to the 3.75 fee or the Syndicated Exclusivity Surcharge. Distant simulcast streams are not subject to any royalty payment

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

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

The Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable 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 distant that is, whether you retransmitted the signal of one or more stations to subscribers located within the station's local service area and, at the same time, to other subscribers located outside that area.

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

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.

**Distant Stations Carried** 

STATION

A (independent)

B (independent)

C (part-time)

D (part-time)

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:

DSE

1.0

1.0

0.083

0.139

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

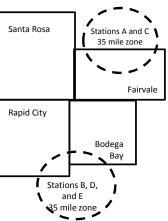
CITY

Santa Rosa

Rapid City

Bodega Bay

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.



E (network)	<u>0.25</u>	Fairvale Stations B, D	, and E		120,000.00	
TOTAL DSEs	2.472	TOTAL GRO	TOTAL GROSS RECEIPTS			
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

SERVICE AREA OF

Stations A. B. C. D .E

GROSS RECEIPTS

\$310.000.00

100,000.00

70,000.00

FROM SUBSCRIBERS

### DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			SI	STEM ID#					
1	Southwestern Bell Telephone Company 062578										
	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										
2	n <b>structions:</b> n <b>the column headed "Call Sign":</b> list the call signs of all distant stations identified by the letter "O" in column 5 ıf space G (page 3).										
Computation of DSEs for	In the column headed "DSE" mercial educational station, giv			E as "1.0"; for	each network or noncom-						
Category "O"	CATEGORY "O" STATIONS: DSEs										
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
Add rows as											
necessary.											
Remember to copy											
all formula into new											
rows.											
	L			L							

Name

3

Computation

of DSEs for

Stations

**Carried Part** 

Time Due to

Lack of

Activated

LEGAL NAME OF OWNER OF CABLE SYSTEM:

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Southwestern Bell Telephone Company	062578
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. This figure should correspond with the information given in space J. Calculate only one DSE for each station.

Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. 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 must 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 station, 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 third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper

Channel	SA3 form.									
Capacity	CATEGORY LAC STATIONS: COMPUTATION OF DSEs									
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEI	JRS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS O CARRIAG VALUE	-		)E		
			÷		=	x	=			
			÷		=	x	=			
			÷		=	x	=			
			÷		=	x	=			
			÷			x	=			
						<u>x</u>	=			
			÷			<u>x</u>				
			÷		=	x	=			
	Add the DSEs	S OF CATEGORY LAC S of each station. Im here and in line 2 of p		chedule,		0.00	]			
<b>4</b> Computation of DSEs for Substitute- Basis Stations	<ul> <li>Instructions:</li> <li>Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station: <ul> <li>Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulartions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and</li> <li>Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I).</li> <li>Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I.</li> <li>Column 3: Enter the number of days in the calendar year: 365, except in a leap year.</li> <li>Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the 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).</li> </ul> </li> </ul>									
		SU	BSTITUTE	-BASIS STATIO	NS: COMPUT	ATION OF DSEs				
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMB OF DA IN YEA	YS	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE		
		÷		=		÷		=		
		÷		=		÷		=		
		*		=		+		=		
			•	=		÷		=		
						÷ -		=		
	Add the DSEs	oF SUBSTITUTE-BAS of each station. Im here and in line 3 of p				0.00	]			
<b>5</b> Total Number	number of DSE	ER OF DSEs: Give the am s applicable to your syster f DSEs from part 2 ●		e boxes in parts 2, 3, a	nd 4 of this schedu	le and add them to provide	0.00			
of DSEs	2. Number o	f DSEs from part 3●				▶ <u> </u>	0.00			
	3. Number o	f DSEs from part 4 ●			·	▶	0.00			
	TOTAL NUMBE	R OF DSEs				•		0.00		

							S	YSTEM ID# 062578	Name
	Bell Telephor		ly					062578	
Instructions: Bloc In block A: • If your answer if schedule.			part 6 and part	7 of the DSE sche	edule blank ar	nd complete p	art 8, (page 16) o	f the	6
	"No," complete blo								Computation of
Is the cable system	m located wholly o			ELEVISION M		ection 76 5 of	FCC rules and re	aulations in	3.75 Fee
effect on June 24,	, 1981? plete part 8 of the	schedule—[		PLETE THE REMA					
	blete blocks B and	C below.							
		BLOO	CK B: CARR	IAGE OF PERM	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulations are shown as the regulations are	ons prior to Ju dule. (Note: Tl	part 2, 3, and 4 of ne 25, 1981. For fu ne letter M below r Act of 2010.)	irther explana	ation of permit	ted stations, see t	the	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rL A Stations carrie 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfathered instructions for E Carried pursua *F A station pre	Iles and regu ed pursuant f on as defined al educationa d station (76. r DSE sched ant to individi viously carrie IHF station w	lations cited b to the FCC ma d in 76.5(kk) (7 al station [76.5 65) (see parag lule). ual waiver of F ed on a part-tin vithin grade-B	ne or substitute ba contour, [76.59(d)(	se in effect or 6.57, 76.59(b e)(1), 76.63(a 63(a) referring bstitution of g sis prior to Ju	n June 24, 194 ), 76.61(b)(c), 1) referring to 5 g to 76.61(d) randfathered ine 25, 1981	76.63(a) referrinថ 76.61(e)(1 stations in th€	-	
Column 3:	*( <b>Note:</b> For those this schedule to o	e stations ide determine the	ntified by the I e DSE.)	n parts 2, 3, and 4 etter "F" in column	2, you must	complete the	1	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	
		R			3 75 FFF		•		
Line 1: Enter the	e total number of							-	
Line 2: Enter the	e sum of permitte	d DSEs froi	n block B ab	ove					
				r of DSEs subjec 7 of this schedu		rate.		0.00	
Line 4: Enter gro	oss receipts from	space K (p	age 7)				x 0.0	375	Do any of the DSEs represent partially
Line 5: Multiply I	ine 4 by 0.0375 a	and enter su	um here						permited/ partially nonpermitted
Line 6: Enter tota	al number of DSI	Es from line	3				х	-	carriage? If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 ar	nd enter her	e and on line	2, block 3, space	e L (page 7)			0.00	

DSE SCHEDULE. PAGE 13.

	OWNER OF CABLE						S	YSTEM ID#	Nama
Southwester	rn Bell Telepho	ne Compa	ny					062578	Name
		BLOCK	A: TELEV	ISION 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
									3.75 Fee
		<b>.</b>							
						•			
		1			<b>*</b>				
			.  <mark></mark>						
			.  <mark></mark>						
		<b>.</b>							
		<b>.</b>							
		<b>+</b>			<b>.</b>	+			
		<b>+</b>							
		<b>.</b>							
		<b>.</b>							
					<b>.</b>				
		+			+				
		<u>†</u>	11		1	11		<u> </u>	J

	1							I		DULE. PAGE 14.
Name	LEGAL NAME OF OWN								S	STEM ID#
Nume	Southwestern	Bell Teleph	one Company							062578
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	<ul> <li>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</li> <li>Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981</li> <li>Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1)</li> <li>Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters</li> <li>(Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.</li> <li>A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, section: 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)).</li> <li>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)).</li> <li>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.</li> <li>Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule</li> <li>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 enterer in block B, column 3 of part 6 for this station.</li> <li>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.</li> </ul>									
		DEDMITT								
	1. CALL	2. PERMIT II		COUNTING	<u>=D</u>	ON A PART-TIME AN 4. BASIS OF	1	RESENT	6 DE	
	SIGN	2. PRIC		RIOD		4. BASIS OF CARRIAGE		DSE	0. PE	RMITTED DSE
	31011	DSE				CARRIAGE	-	DSE		DSE
					•••••					
					•••••					
					•••••					
		••••••			•••••					
7 Computation of the Syndicated Exclusivity	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									
Surcharge	<ul> <li>Is any portion of the optimized in the optiz</li></ul>	cable system w	ithin a top 100 majo	or television mar	ket	t as defned by section	76.5 of FCC	rules in effect .	lune 24, 1	981?
•	X Yes—Complete	-				No—Proceed to				
			0.				parto			
		arriage of VHE	Grade B Contour	Stations	DLOCK C. Computation of Example DCEs					
	Is any station listed ir commercial VHF stati or in part, over the ca	block B of pa ion that places	rt 6 the primary str	eam of a	BLOCK C: Computation of Exempt DSEs 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)					
	• •		h its appropriate perr	mitted DSE		Yes—List each s		with its appropria	ate nermitt	ed DSE
	X No—Enter zero a			No—Enter zero a						
		and proceed to p	Jan o.				ind proceed	to part o.		
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	SN	DSE
								-		
								-		
							<b> </b>			
							<u> </u>			
		ı	TOTAL DSEs	0.00			<u> </u>	TOTAL DS	Es	0.00
			I UTAL DOES	0.00				TOTAL DS		0.00

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Southwestern Bell Telephone Company	SYSTEM ID# 062578	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	),539,218.99	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?  X Yes—Complete section 3 below. 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?     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 DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	Ē	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	Yes—Complete part 9 of this schedule. X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	E	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

DSE	SCHEE	DULE.	PAGE	16

Name		ME OF OWNER OF CABLE SYSTEM:	JLE. PAGE 16. SYSTEM ID# 062578
		Southwestern Bell Telephone Company	0023/8
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 of the		A. Enter 0.00300 of gross receipts (the amount in section 1)	
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> .
	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 par checked "Yes," use the total number of DSEs from part 5.	t
Commutation		bock 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 belo	w
Base Rate Fee	blank What i	is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
		bocated within that station's local service area and others were located outside that area. For the definition of a station's "local	
	service	e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		Yes—Complete part 9 of this schedule. X No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7)	9
	Section 2	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.)	00
	Section		
	3	If the figure in section 2 is <b>4.000 or less</b> , 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)	
		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>

### DSE SCHEDULE. PAGE 17.

LEGAL NAME OF OWNER OF CABLE SYSTEM: Southwestern Bell Telephone Company	SYSTEM ID# 062578	Nomo				
Section If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 4	3 Diank.	0				
A. Enter 0.01064 of gross receipts (the amount in section 1) ▶\$		8				
B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$		Computation of				
C. Multiply line B by 3.000 and enter here▶		Base Rate Fee				
D. Enter 0.00330 of gross receipts (the amount in section 1) ▶ \$						
E. Subtract 4.000 from total DSEs						
(the figure in section 2) and enter here						
F. Multiply line D by line E and enter here	▶ <u>\$</u>					
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					
	F \$ 0.00					
<b>IMPORTANT:</b> It is no longer necessary to report television signals on a system-wide basis. Car instead be reported on a community-by-community basis (subscriber groups) if the cable system		9				
Space G.		9				
In General: If any of the stations you carried were partially distant, the statute allows you, in con receipts from subscribers located within the station's local service area, from your system's tota this exclusion, you must:		Computation of Base Rate Fee				
<b>First:</b> Divide all of your subscribers into subscriber groups, each group consisting entirely of substation or the same group of stations. Next: Treat each subscriber group as if it were a separate DSEs and the portion of your system's gross receipts attributable to that group, and calculate a <b>Finally:</b> Add up the separate base rate fees for each subscriber group. That total is the base rate	e cable system. Determine the number of separate base rate fee for each group.	and Syndicated Exclusivity Surcharge				
NOTE: If any portion of your cable system is located within the top 100 television market and the must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, However, if your cable system is wholly located outside all major television markets, complete b	e station is not exempt in part 7, you complete both block A and B below.	for Partially Distant Stations, and				
How to Identify a Subscriber Group for Partially Distant Stations Step 1: For each community served, determine the local service area of each wholly distant and each partially distant station you carried to that community.						
<b>Step 2:</b> For each wholly distant and each partially distant station you carried, determine which coutside the station's local service area. A subscriber located outside the local service area of a state to the same token, the station is distant to the subscriber.)						
Step 3: Divide your subscribers into subscriber groups according to the complement of stations subscriber group must consist entirely of subscribers who are distant to exactly the same compl system will have only one subscriber group when the distant stations it carried have local servic	lement of stations. Note that a cable					
Computing the base rate fee for each subscriber group: Block A contains separate sections subscriber groups.	s, one for each of your system's					
In each section:						
<ul> <li>Identify the communities/areas represented by each subscriber group.</li> <li>Give the call sign for each of the stations in the subscriber group's complement—that is, each subscribers in the group.</li> </ul>	station that is distant to all of the					
<ul> <li>If:</li> <li>1) your system is located wholly outside all major and smaller television markets, give each state</li> </ul>	tion's DSE as you gave it in parts 2, 3,					
<ul> <li>and 4 of this schedule; or,</li> <li>any portion of your system is located in a major or smaller televison market, give each statior part 6 of this schedule.</li> </ul>	n's DSE as you gave it in block B,					
<ul> <li>Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group</li> </ul>	JD.					
<ul> <li>Calculate gross receipts for the subscriber group. For further explanation of gross receipts see in the paper SA3 form.</li> </ul>						
• Compute a base rate fee for each subscriber group using the formula outline in block B of part page. In making this computation, use the DSE and gross receipts figure applicable to the parti DSEs for that group's complement of stations and total gross receipts from the subscribers in th actual calculations on the form.	icular subscriber group (that is, the total					

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SY	STEM
ivallie	Southwestern Bell Telephone Company	0625
	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 OWN						S	YSTEM ID# 062578	Name
В				TE FEES FOR EACH				
FIRST SUBSCRIBER GROUP				SECOND SUBSCRIBER GROUP				9
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
				·				Exclusivity
				-		++		Surcharge
								for
								Partially
								Distant
						+	····	Stations
				-		+		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$ 30,539,	218.99	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	Р		FOURTH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	·····						····	
				·				
	<mark></mark>				<mark></mark>			
	<mark></mark>				<mark></mark>		<mark></mark>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$	0.00	

FORM SA3E. PAGE 19	FORM	SA3E.	PAGE	19.
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LEGAL NAME OF OWNE Southwestern Bel						S	YSTEM ID# 062578	Name
BL				TE FEES FOR EACH				
	FIFTH	SUBSCRIBER GROU			SIXTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								otationo
		_						
						•		
Total DSEs	• • •		0.00	Total DSEs	ł		0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Secon		\$	0.00	
	SEVENTH	SUBSCRIBER GROU			EIGHTH	SUBSCRIBER GROU	-	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		]						
						++	···-	
			[					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				11				
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes a	above.	\$		

## Nonpermitted 3.75 Stations

LEGAL NAME OF OWNE Southwestern Bel						S	YSTEM ID# 062578	Name
BL	OCK A: (	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA 0			0	COMMUNITY/ ARE	A		0	9
		1	1					Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
							····	and
							····	Syndicated
						++		Exclusivity Surcharge
								for
		-			•••••	•		Partially
						•		Distant
						•		Stations
		-						
		]		][				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	quor	\$ 30,539,	218.99	Gross Receipts Sec	ond Group	\$	0.00	
		,,				- <u>·</u>		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					·····			
		-				•		
					•••••			
						+	····	
						1		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	-				•			
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				11				
Base Rate Fee: Add th			riber group	as shown in the boxe	s above.			
Enter here and in block	3, line 1, s	space L (page 7)				\$	0.00	

# Nonpermitted 3.75 Stations

CALL SIGN       DSE       CALL SIGN       Cancel Computation	LEGAL NAME OF OWN Southwestern Be						S	YSTEM ID# 062578	Name
COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN <th>В</th> <th>LOCK A: (</th> <th></th> <th>BASE RA</th> <th>TE FEES FOR EAC</th> <th></th> <th></th> <th></th> <th></th>	В	LOCK A: (		BASE RA	TE FEES FOR EAC				
CALL SIGN       DSE		FIFTH	SUBSCRIBER GROU	JP		SIXTH	I SUBSCRIBER GRO	JP	•
CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       of         Base Rate Fee       Call SIGN       DSE       CALL SIGN       DSE       of         Call SIGN       DSE       CALL SIGN       DSE       Call SIGN       DSE         Call SIGN       Call SIGN       DSE       Call SIGN       DSE       and         Call SIGN       Call SIGN       Call SIGN       Call SIGN       DSE       and         Call SIGN       Call SIGN       Call SIGN       Call SIGN       Call SIGN       Statistic         Call DSEs       0.00       Total DSEs       0.00       Statistic       Statistic         Base Rate Fee First Group       1       0.00       Base Rate Fee Second Group       1       0.00         Seventh SUBSCRIBER GROUP       Communitry AREA       0       Communitry AREA       0       0.00         Call SIGN       DSE       Call SIGN       DSE       Call SIGN       DSE       Call SIGN       DSE         Call SIGN       DSE       Call SIGN       DSE       Call SIGN       DSE       Call SIGN       DSE         Call SIGN       DSE       Call SIGN       DSE       Call SIGN       DSE       Call SIGN       DSE <td colspan="3">COMMUNITY/ AREA 0</td> <td>0</td> <td>COMMUNITY/ AREA</td> <td>۹</td> <td></td> <td>0</td> <td>-</td>	COMMUNITY/ AREA 0			0	COMMUNITY/ AREA	۹		0	-
CALL SIGN       DSE									
and       syndicated         syndicated       screen         and       syndicated         screen       screen         and       syndicated         screen       screen         and	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Syndicated         Syndicated         Surcharge         Image: State Fee First Group         Seventh SUBSCRIBER GROUP         Seventh SUBSCRIBER GROUP         Seventh SUBSCRIBER GROUP         Column Try AREA		··						····	
Image: Second Group       Image: Second Group<						····	+		
Surcharge       or		··	-				++		
Image: Second Score       Image: Second Score<		•••				•••••	++		
Partially       Partially         Total DSEs       0.00         Gross Receipts First Group       \$0.00         Base Rate Fee First Group       \$0.00         SEVENTH SUBSCRIBER GROUP       COLLI SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE         Total DSEs       0.00       Gross Receipts Fourth Group       0         Gail DSEs       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Total DSEs       0.00       Gross Receipts Fourth Group       0.00       Gross Receipts Fourth Group       0.00         Base Rate Fee Third Group       0.000       Base Rate Fee Fourth Group       0.00       0.00		•	-				++		
Distant         Total DSEs       0.00         Gross Receipts First Group       \$0.00         SEVENTH SUBSCRIBER GROUP       \$0.00         SEVENTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Gross Receipts Third Group       5       0.00       Gross Receipts Third Group       5       0.00         Seventh SUBSCRIBER GROUP       COMMUNITY/ AREA       0       0       0       0         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Gross Receipts Third Group       5       0.00       Gross Receipts Fourth Group       5       0.00         Gross Receipts Third Group       5       0.00       Gross Receipts Fourth Group       5       0.00         Gross Receipts Fourth Group       5       0.00       Gross			-						
Total DSEs       0.00         Gross Raceipts First Group       \$         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         COMMUNITY/ ARA       0         CALL SIGN       DSE         Gross Receipts Fourth Group       S         Sonoo       Gross Receipts Fourth Group<			-						
Gross Receipts First Group       \$       0.00         Base Rate Fee First Group       \$       0.00         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Total DSEs       0.00       Total DSEs       0.00       Gross Receipts Fourth Group       \$       0.00         Base Rate Fee Third Group       \$       0.00       Base Rate Fee Fourth Group       \$       0.00         Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.       \$       0.00       \$									Stations
Gross Receipts First Group       \$       0.00       Gross Receipts Second Group       \$       0.00         Base Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       0.00         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       0       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Total DSEs       0.00       Total DSEs       0.00       Gross Receipts Fourth Group       \$       0.00         Base Rate Fee Third Group       \$       0.00       Base Rate Fee Fourth Group       \$       0.00         Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.       \$       0.00       \$       0.00									
Gross Receipts First Group       \$       0.00         Base Rate Fee First Group       \$       0.00         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Total DSEs       0.00       Total DSEs       0.00       Sorse Receipts Fourth Group       0.00         Base Rate Fee Third Group       \$       0.00       Base Rate Fee Fourth Group       0.00       0.00		<mark></mark>							
Gross Receipts First Group       \$       0.00       Gross Receipts Second Group       \$       0.00         Base Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       0.00         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       0       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Total DSEs       0.00       Total DSEs       0.00       Gross Receipts Fourth Group       \$       0.00         Base Rate Fee Third Group       \$       0.00       Base Rate Fee Fourth Group       \$       0.00         Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.       \$       0.00       \$       0.00		<mark></mark>							
Gross Receipts First Group       \$       0.00       Gross Receipts Second Group       \$       0.00         Base Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       0.00         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       0       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Total DSEs       0.00       Total DSEs       0.00       Gross Receipts Fourth Group       \$       0.00         Base Rate Fee Third Group       \$       0.00       Base Rate Fee Fourth Group       \$       0.00         Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.       \$       0.00       \$       0.00		<mark></mark>							
Gross Receipts First Group       \$       0.00       Gross Receipts Second Group       \$       0.00         Base Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       0.00         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       0       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Total DSEs       0.00       Total DSEs       0.00       Gross Receipts Fourth Group       \$       0.00         Base Rate Fee Third Group       \$       0.00       Base Rate Fee Fourth Group       \$       0.00         Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.       \$       0.00       \$       0.00									
Gross Receipts First Group       \$       0.00       Gross Receipts Second Group       \$       0.00         Base Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       0.00         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       0       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Total DSEs       0.00       Total DSEs       0.00       Gross Receipts Fourth Group       \$       0.00         Base Rate Fee Third Group       \$       0.00       Base Rate Fee Fourth Group       \$       0.00         Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.       \$       0.00       \$       0.00									
Base Rate Fee First Group       §       0.00       Base Rate Fee Second Group       §       0.00         SEVENTH SUBSCRIBER GROUP         COMMUNITY/ AREA       0         COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Colspan="4">Colspan="4">Colspan= 4         Colspan=4       Colspan=4       Colspan=4         Colspan=4       Colspan=4       Colspan=4       Colspan=4         Colspan=4       Col	Total DSEs			0.00	Total DSEs			0.00	
Base Rate Fee First Group       §       0.00       Base Rate Fee Second Group       §       0.00         SEVENTH SUBSCRIBER GROUP         COMMUNITY/ AREA       0         COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Colspan="4">Colspan="4">Colspan= 4         Colspan=4       Colspan=4       Colspan=4         Colspan=4       Colspan=4       Colspan=4       Colspan=4         Colspan=4       Col	Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         COMMUNITY/ AREA       0         CALL SIGN       DSE         CALL SIGN <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>									
COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       Call SIGN       Call SIGN         Call SIGN       Call SIGN       Call SIGN       Call SIGN       Call SIGN       Call SIGN         Call SIGN       Call SIGN       Call SIGN       Call SIGN       Call SIGN       Call SIGN         Total DSEs       0.00       Gross Receipts Fourth Group       \$       0.00         Base Rate Fee Third Group       \$       0.00       Shown in the boxes abo	Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         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		SEVENTH	SUBSCRIBER GROU	JP		EIGHTH	SUBSCRIBER GRO	JP	
Total DSEs       0.00         Gross Receipts Third Group       \$         \$       0.00         Base Rate Fee Third Group       \$         \$       0.00	COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
Gross Receipts Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.       \$	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Gross Receipts Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.       \$									
Gross Receipts Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.       \$									
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 the base rate fees for each subscriber group as shown in the boxes above.       \$       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 the base rate fees for each subscriber group as shown in the boxes above.       \$       0.00		<mark></mark>							
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 the base rate fees for each subscriber group as shown in the boxes above.       \$       0.00		<mark></mark>				····	++		
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 the base rate fees for each subscriber group as shown in the boxes above.       \$       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 the base rate fees for each subscriber group as shown in the boxes above.       \$       0.00		··				••••	+	····	
Gross Receipts Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.       \$									
Gross Receipts Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.       \$			-						
Gross Receipts Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.       \$									
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 the base rate fees for each subscriber group as shown in the boxes above.       \$       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 the base rate fees for each subscriber group as shown in the boxes above.       \$       0.00									
Gross Receipts Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.       \$		<mark></mark>							
Gross Receipts Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.       \$									
Base Rate Fee Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.       \$	Total DSEs			0.00	Total DSEs			0.00	
Base Rate Fee Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.       \$	Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.						r			
	Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
					11				
	Base Rate Fee: Add th	ne base rat	te fees for each subso	riber group	as shown in the boxes	s above.			
				<b>U</b> 1			\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Southwestern Bell Telephone Company	FORM SA3E. PAGE 20. SYSTEM ID# 062578
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSI	
9	If your cable system is located within a top 100 television market and the Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981:	e station is not exempt in Part 7, you mustalso compute a
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	<ul> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group for commercitive this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group for Exempt DSEs in block C, part 7 of this schedule. If none enter</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of I</li> <li>Step 4: Compute the surcharge for each subscriber group using the for schedule. In making this computation, use gross receipts figure your actual calculations on this form.</li> </ul>	the VHF Grade B contour stations that were classified as zero. DSEs used to compute the surcharge. mula outlined in block D, section 3 or 4 of part 7 of this
	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	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
	First Group	
	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	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each in the boxes above. Enter here and in block 4, line 2 of space L (page 7)	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Southwestern Bell Telephone Company	FORM SA3E. PAGE 20. SYSTEM ID# 062578
	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		Second 50 major television market
Base Rate Fee and Syndicated	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial this schedule.	VHF Grade B contour stations listed in block A, part 9 of
Exclusivity Surcharge for	<ul> <li>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.</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> </ul>	
Partially Distant Stations	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 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 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 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 Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each in the boxes above. Enter here and in block 4, line 2 of space L (page 7).	